![Adler University logo]

Office of the Registrar – CHICAGO CAMPUS
Email: registrar@adler.edu
GRADE CHANGE FORM

Instructions:

1. **IMPORTANT: IF YOU ARE USING A MAC, SAVE THE DOCUMENT TO YOUR COMPUTER FIRST. THE FORM MAY BE BLANK WHEN EMAILED IF YOU DO NOT FOLLOW THIS STEP.**
2. Instructor complete the "Student Information", "Course Information" and "Grade Change Information" sections.
3. Instructor **TYPES** their name in the Instructor Approval field and dates the form.
4. Instructor emails the form with their approval from their Adler email account to the student's Program Director or Department Chair's Adler email account. One of their signatures is required.
5. Program Director or Department Chair **TYPES** their name in the Program Director or Department Chair Approval field, dates the form, and emails the form from their Adler email account to the Office of the Registrar at registrar@adler.edu.
6. *Form accepted via e-mail only. Forms dropped off or faxed will not be processed*. Due to FERPA regulations, in order to protect the privacy of student academic records, please do not leave form in the mailbox in the mailroom.

Student Information:

Student Last Name:_____

Student First Name:_____

Student ID or Last Four of SSN:_____

Please indicate date student completed all course requirements:
REQUIRED

Course Information:

Term and Year: Spring_____   Summer_____
                        YEAR   YEAR

Fall_____
              YEAR

Course Prefix, No., & Section_____
(example: PSY-661-A)

Title:_____

_____

Grade Change Information: NOTE: Chicago Campus Grading Scale : A, A-, B+, B, B-, C, D, F, CR, NC, AU

Final Grade:_____ (Enter a grade on the line to the left)

Reason for Grade Change:_____

APPROVAL SIGNATURES:

PLEASE TYPE YOUR NAME IN THE BOX

Instructor Approval: Date:

PLEASE TYPE YOUR NAME IN THE BOX

Program Director OR:

Department Chair Approval: Date:

NOTES:
* Program Director or Department Chair signature is required. For adjunct faculty, the Program Director or Department Chair signature should be the Program Director or Department Chair of the student's program.
** Program Director or Department Chair signature IS NOT required when changing incomplete or in progress grades.

Registrar's Office Use Only:

Rep Initials & Date Received:

Rep Initials & Date Processed: