

GRADE CHANGE REQUEST

IMPORTANT: Please read all directions and fill out the form carefully. Review all your information to make sure that it is correct before submitting to the Admissions and Records office. **Requests are accepted within two (2) years after grade was earned.**

LAST NAME:	FIRST NAME	:	MI:	STUDENT ID#:
MAIL:PHONE:				
rade Received: Grade Requested (i.e. A, B, C, D, F):				
CLASS NO. (i.e. 70783):	Course (Name i.e. COU	JNS 1):	INSTRUCTOR'	S NAME:
SEMESTER YEAR:	FALL WINTER	SPRING SUMMER	R	
	the absence of: mistake nation and supporting doc	, fraud, bad faith or inco umentation must be attache	ompetence (L d to this requ	76224: Grades assigned by the BCC Administrative Procedure est.
NS (No Show) or NA (Not Activ Division 6, Section 55025 C and I am allegin I declare under penalty of perju	D Education Code Section ng gross misconduct by the	76323). faculty member and reques	•	
STUDENT SIGNATURE:				DATE:
INSTRUCTOR RESPONSE	REQUIRED			
NS (No Show) may not be re 55025 C and D & Education (-	onduct by the faculty membe	er, is alleged. (Title 5, Division 6, Section
The final grade is:		DENIED		
REASON:				
SIGNATURES:				
INSTRUCTOR		T HEAD	DEAN OF SC	CHOOL
To Committee (if faculty membe	r is no longer employed by LBC	C):		
COMMITTEE MEMBER	COMMITTEE MEMBER	COMMITTEE MEMBER	DI	EAN ADMISSIONS & RECORDS
OFFICE USE ONLY				
To Department:				
Student Notified via:	∃E-mail □Mail	DATE:	STAFF	INITIALS: