

**Request for Change of Grade**  
**During Remote Operation and Instruction**

**Instructor fills out the form, signs and dates it. The instructor then forwards the form on to the Associate Dean who oversees the curriculum of that course for their signature (cc'ing the department and Graduate School as appropriate). The Associate Dean should then forward the completed form to [regofc@buffalostate.edu](mailto:regofc@buffalostate.edu) for processing.**

Student Name:

Banner ID:

CRN No. (4 digits):

Catalog #:

Semester in which the course was taken:

Undergraduate or Graduate:

Credit hours:

Original Grade:

Change Grade to:

Date all work completed:

Full Justification for Change:

Instructors Name:

\_\_\_\_\_  
Signature of Instructor

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Signature/ Name of Dean of College in which Course is offered

\_\_\_\_\_  
DATE

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Registrar's Office Use

Completed