



Southwest College of Naturopathic Medicine and Health Sciences

# Grade Change Request

Fall  Winter  Spring  Summer 20\_\_  Seminar Intensive OR  Weekly

\_\_\_\_\_  
(Student's Name – Please Print)

\_\_\_\_\_  
(Class Instructor)

\_\_\_\_\_  
(Course Number)

\_\_\_\_\_  
(Course Title)

**REMEDICATION:** ORIGINAL GRADE OF: **NO PASS**

**Please Check One:**

1. HAS BEEN CHANGED TO:  **MINIMAL PASS** %grade \_\_\_\_\_

2. HAS NOT BEEN CHANGED.  STUDENT WILL NEED TO RETAKE COURSE  
%grade \_\_\_\_\_ Instructor Initial \_\_\_\_\_

**INCOMPLETE:** Grade: \_\_\_\_\_ %grade \_\_\_\_\_ Instructor Initial \_\_\_\_\_

**DIRECTED STUDY:** Grade: \_\_\_\_\_ %grade \_\_\_\_\_ Instructor Initial \_\_\_\_\_

**CHALLENGE EXAM/COMPETENCY ASSESSMENT:**

Satisfied  Unsatisfied %grade \_\_\_\_\_ Instructor Initial \_\_\_\_\_

**OTHER:** (original Grade) \_\_\_\_\_

Grade change to: \_\_\_\_\_ %grade \_\_\_\_\_ Instructor Initial \_\_\_\_\_

Reason for Grade Change:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Instructor's signature

\_\_\_\_\_  
Date

**(For Office Use Only)**

Check for fees paid \_\_\_\_\_ Posted in Grade Book \_\_\_\_\_  
Posted in computer system \_\_\_\_\_ Issued notice of changed grade \_\_\_\_\_