Change of Grade/Incomplete Removal Form

1. Fill this form out completely. Instructor should submit form in person, through campus mail or via fax. Forms hand-carried by the student will not be accepted.

2. After processing, one copy will be mailed to the student, one copy will be returned to you, and the original will remain in the student's folder in the Records & Internal Data Management Office.

3. This form cannot be used to change grades to or from a "W."

******************************************************************

To the Registrar:

Please change the permanent record of the student named below as noted.

Student's name (print Last, First, M.) ____________________________ Username or BANNER ID# ____________________________

Course: ____________________________ Semester taken: ____________________________

<table>
<thead>
<tr>
<th>CRN</th>
<th>Alpha</th>
<th>Course No.</th>
<th>credit hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

Change Grade:

From: _________ To: _________

Reason for change:

___________________________________________________________________________
___________________________________________________________________________

Instructor's name (print Last, First, M.I.) ____________________________

Instructor's Signature ____________________________ Date ________________

OFFICE USE Processed on: ____________________________ by: ____________________________

Date ____________ Initials: ____________________________

COPIES: □ Student □ Instructor

Date/initials sent ____________

(FRM_Change_of_Grade; 06/12/2013) 200 W Kawaii St
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