



Plymouth State University  
of the University System of New Hampshire  
Office of the Registrar MSC 7

# \*\*\*\*\*GRADUATG GRADE CHANGE FORM

Student's Name

Student ID

Today's Date

CRN

Course ID (ie. EN-1200.01)

Title

Term & Year

Reason for Change

Previous Grade

To

New Grade

Instructor Name

## GRADE CHANGE INSTRUCTIONS:

Please download and save a copy of the Grade Change Form to your computer. **FILL IN ALL FIELDS ON THE FORM.** Save the form. Then attach it to an email (Plymouth email account only), enter "Grade Change" in the subject line and email to Dr. Gail F Mears ([gmears@plymouth.edu](mailto:gmears@plymouth.edu))