



GRADUATE ADMISSIONS AND RECORDS  
 UNIVERSITY CENTRE  
 UNIVERSITY OF VICTORIA  
 PO BOX 3025, STN CSC  
 VICTORIA BC V8W 3P2 CANADA

**GRADUATE GRADE CHANGE**

TO: Graduate Admissions & Records

RE: Graduate Grade Change

DATE: \_\_\_\_\_

SESSION:  Jan - Apr 20 \_\_\_\_

FROM: \_\_\_\_\_

May- Aug 20 \_\_\_\_

Sep- Dec 20 \_\_\_\_

Student's First Name: \_\_\_\_\_

Student #: V00 \_\_\_\_\_

Student's Last Name: \_\_\_\_\_

CRN: \_\_\_\_\_

Course: \_\_\_\_\_

Section #: \_\_\_\_\_

Unit Value: \_\_\_\_\_

Revised Grade: \_\_\_\_\_

Grade Assigned: \_\_\_\_\_

Reason for Grade Change:

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Approved By:

Instructor:

\_\_\_\_\_  
 PRINT NAME SIGNATURE

Chair of the  
 Department:

\_\_\_\_\_  
 PRINT NAME SIGNATURE

FACULTY OF GRADUATE STUDIES

**Departments:** Please keep a copy of this form for your records. Original will be kept by Graduate Admissions & Records.