

Roanoke-Chowan Community College

Grade Change Report

Student _____ Curriculum _____ Date _____

Student ID No _____ Advisor _____

| Semester & Year | Course Number | Section Number | Descriptive Title | Original Grade | New Grade | Grade Change Justification (required) |
|-----------------|---------------|----------------|-------------------|----------------|-----------|---------------------------------------|
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"I" grades must be removed by the last day of the next semester, not including summer session.

Instructor Signature _____

Signature, Dean of Academic Affairs _____

*Original Copy to: Records and Registration
R-CCC 218 July '18 Previous editions obsolete*

Photocopy: Instructor Academic Dean

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