INSTRUCTOR'S REQUEST FOR GRADE

/CERTIFICATE/STATUS CHANGE

This document is to be used by administrators and teachers to request changes to student records.

To: Sector Administrator				
Requestor: <u>Robert Schuchman</u>				
Re: Change of Grade Change o	of Certificate Request Certificate/Certificates			
Change of Status Check One:	Add D	rop Name	Change	Transfer (Administrators Use Only)
GENERAL INFORMATION:	Adult	Hig	h School	
Student Name: More than one student see attachment (List				nt ID:
Class: Intro to 3D Video Game Design	Course	#634	Session: 03	B Date:5/24/12
Semester: Fall Spring Summer	Year:			
CERTIFICATE REQUEST: Change Certi	ficate: From	1		То
Print Certificate of Completion				
Print Certificate of Competency				
	Intro to 3DV	ideo Game De	sian	
Print Certificates of Competency _	Intro to 3D Video Game Design Course			All Students See attached list
	634 0.			
	Course Number Ses			101
CHANGE OF GRADE:				
Start Date:	_ End Date: _			
Original Grade/Citizenship:	Corrected Grade/Citizenship:			
Days Present:	Days Absent:			
CHANGE OF STATUS: Add student	Drop Studer	nt		
Name change	From:			То:
(Administrators Use Only) Transfer Student	From:	To:		_Effective Date:
JUSTIFICATION (Explain circumstances):				
Requestor Signature				Date
Sector Administrator Signature		D	ate	
This form is to be submitted to Terri Cole , Re	egistrar for pro	cessing.		Revised 07/13/10