REQUEST TO RECOVER GRADE

ATTENTION ADVISOR AND STUDENT: This form is to be completed by the student's Advisor. The Advisor should consult with the Registration office to assure that the original grade earned was at least a grade of D. The student will need to sign the form and provide documentation (to the Advisor) to support the reason for the request to recover the grade. The Advisor will submit the completed and signed form to the Registration office, DS120.

STUDENT NAME:		ID#:		
_	Last	First		
MAJOR:				
COURSE FOR WHIC	H RECOVERY OF ORIGINAL LI	ETTER GRADE IS REQUEST	ED:	
Course #	Course Title		Credit Hours	
TERM IN WHICH CO	OURSE WAS TAKEN: □ FALL	□ INTER-SEMESTER	□ SPRING □ SUMMER	
☐ The course is require☐ The letter grade is re	of the following is the reason for the ed in the student's major equired for graduation d by a graduate or professional scho			
ADVISOR'S NAME:				
ADVISOR'S SIGNATURE:			DATE:	
STUDENT'S SIGNATURE:			DATE:	