

University of Ghana, Legon Accra Office of the Pro Vice-Chancellor, Academic and Student Affairs P.O. Box LG 25 Tel: +233 302 501797

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Change of Grade Form

Student & Course information Student ID	Last Name	First Name	Middle Name
reducite 15	Last Name	Tilst Name	Whate Name
Course Code	Course Title		
Semester & Year of Original Grade	Program		
Change Grade from	n (number) (le	etter) — to— (numb	oer) —— (letter) ——
Reason for Change	:		
Ū			
osturor's Cignoturo		Data	
Lecturer's Signature		Date	
Head of Department's Signature		Date	
Dean's Signature		Date	
	DROCEDIIRI	FOR CHANGE OF GRADE	
	Change of Grade form from the Dean's Office or the Office of the Registrar es form, signs, and sends to the Head of Department.		
3. Head of Departi	ent signs after satisfying himself/herself of the reasons for grade change and forwards form to		
the Dean's Offic		a reasons for grade shares starts	ad rotains a convert the force and
		e reasons for grade change signs and f Department for processing.	nu retains a copy of the form and
5. Head of Departr	ent works with the lecturer and the College Academic Officer to effect the change.		
6. Dean's office co	nfirms grade change on the	e MIS, signs Form and keeps for reco	rds.
	For	Dean's Use Only	
	Gra	de Change checked and confirmed in MI	S (Y) (No)