



Request for Grade Change

Lame Deer Public Schools

Student Name: _____

Student Grade Level _____ DOB _____

Name of Course _____

Number of Course _____ Section # _____

School Year _____ Term (circle one) Q1, Q2, S1, Q3, Q4, S2

This form must be filled out and signed by the building Principal then given to the System Administrator, Ann Taylor, before a final grade can be changed on a report card or a transcript.

Recorded Grade _____

Requested Grade Change _____ (_____ %)

Reason for grade change: _____

Teacher Signature _____

Date of Request _____

Principal Signature _____

Date _____

System Administrator Signature _____

For Office Use Only

Date of Grade Change _____

Date of Transcript Change _____