

NOT FOR DUPLICATION  
SAMPLE

# *Effective Teaching Program*

*New York State United Teachers Education and Learning Trust*

## CHANGE OF GRADE FORM

PLEASE PRINT

Student Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Instructor Name \_\_\_\_\_

Course \_\_\_\_\_ REF# \_\_\_\_\_ Semester \_\_\_\_\_

Change Of Incomplete To A Grade Of \_\_\_\_\_

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

White copy to college / Yellow copy to ETP / Pink copy for your files

