

**SOM Registrar Services Office**

Email: [SOMRegistrarServices@utrgv.edu](mailto:SOMRegistrarServices@utrgv.edu) | Phone: 956-296-1494



# SOM CHANGE OF GRADE

The instructor of record is the only person who can initiate a change of grade and submit this form to the SOM Registrar Services Office in person at EMEBL 1.117 or via Email to: [SOMRegistrarServices@utrgv.edu](mailto:SOMRegistrarServices@utrgv.edu).

**Do not give to student to handle**

## Student Information

Name: \_\_\_\_\_ SID#: \_\_\_\_\_ Date: \_\_\_\_\_ Term: \_\_\_\_\_

Course Name: \_\_\_\_\_ Number: \_\_\_\_\_ Session: \_\_\_\_\_ CRN (required): \_\_\_\_\_

Example: *Careers in Medicine* *MEDI-9131* *01* *83050*

Class: MS1 MS2 MS3 MS4 Academic Year: \_\_\_\_\_ Change Grade From: \_\_\_\_\_ To: \_\_\_\_\_

### Reason for Change:

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## Approvals

### Instructor of Record (module/course director):

\_\_\_\_\_  
Printed Name Signature Date

### Assistant Dean (pre-clerkship/clerkship):

\_\_\_\_\_  
Printed Name Signature Date

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### REGISTRAR'S OFFICE USE ONLY

Processed

### Registrar's Office Designee:

\_\_\_\_\_  
Printed Name Signature Date