

성적 정정 신청서 GRADE CHANGE FORM

This form must be filed with the chief academic officer within two weeks after the grade was received. 성적 정정 신청은 반

드시 교무학장에게 성		2주 안에 접수해야 합	니다.	_		
Student ID (학생ID)			Name(신청자 이름):	:		
Phone No.(전화번호):			Email(이메일):			
Course for which you	ı believe an imprope	er grade was assigned	d. 잘못된 성적이 주어?	졌다고 생각	되는 과목	<u> </u>
Course Code	Course Title		Grade Received Grad		Desired	Instructor
과목코드	과목명		받은 성적 기대		성적	교수
		1				
Semester	Fall ()	Spring ()	Summer ()	Winter	()	Year
학기	. ,		, ,			연도
Please explain why you believe you have received an improper grade: 왜 잘못된 성적이 주어졌다고 생각되는 이유를 설명하십시오.						
Before filing a grade dispute, you must discuss your complaint with the course instructor to verify grading practices and assignments and to attempt to clear up any misunderstandings or disagreements. Sign your name to certify you have done this. 성적 정정을 신청하기 전 먼저 이 성적을 준 교수와 만나 성적평가 규정 또는 과제물 등에 대해 상의하고 오해 또는 실수가 있었는지를 확인하여야 합니다. 교수와 상의하였으면 서명하여 제출하시기 바랍니다.						
Student Signature(서명)			Date(날짜)			
Office / Instructor Use Only						
Grade Changed From to						
Reason for Change:						
Grade book calculations were incorrect. Corrections resulted in the grade change listed above.						
Coursework submitted electronically was not received. Re-submission resulted in the grade change listed above.						
Other(explain):						
Approved						
Not Approved	Instructor's Na	ame and Signature			Date	
Approved	Instructor 3 No	anic and Signature			Date	

Academic Dean's Name and Signature

Date

Not Approved