

EASTERN WYOMING COLLEGE  
Records Office  
Incomplete Grade or Grade Change Request:

Name of Student: \_\_\_\_\_

Dept. \_\_\_\_\_ Course No. \_\_\_\_\_ Sec. \_\_\_\_\_ (ie. Art 2210, 01, etc.):

Semester and year during which grade was delayed:  Fall \_\_\_\_\_  
 Spring \_\_\_\_\_  
 Summer \_\_\_\_\_

Change \_\_\_\_\_ grade, or incomplete (X) grade to: \_\_\_\_\_  
(A, B, C, D, F, W)

Date \_\_\_\_\_ Signature of  
Instructor \_\_\_\_\_

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