



Oyster Bay High School

GRADE CHANGE FORM



Student Name: _____ Date of Request: _____

Teacher Name: _____ Counselor: _____

Course Name: _____ Course Year: _____

INPUT GRADES FOR CURRENT AND REQUESTED CHANGE

CURRENT RECORD

MP 1	MP 2	Mid-Term	MP 3	MP 4	Final Exam	FINAL GRADE

CORRECTED RECORD

MP 1	MP 2	Mid-Term	MP 3	MP 4	Final Exam	FINAL GRADE

REASON FOR GRADE CHANGE (Please Check)

- | | |
|--|---|
| <p>_____ Data entry error</p> <p>_____ A modification based on work submitted or considered after the lockout date</p> <p>_____ Computational error</p> <p>_____ Other acceptable justifications (please explain below):</p> | <p>_____ Credit recovery coursework</p> <p>_____ Changing an incomplete grade to a regular grade because a student completed course requirements</p> <p>_____ Administrative Change</p> |
|--|---|

Teacher's Signature: _____	Date: _____
Supervisor's Signature: _____	Date: _____
Principal's Signature: _____	Date: _____
Official's Signature Making Change: _____	Date: _____