

ATTENTION STUDENTS

Please make sure you put your last name then first name in the subject line of the e-mail being submitted.

****If you have difficulty sending this form via the submit e-mail button please save the document and send as an attachment to: calloway@brooklyn**

Do not enter any other text in the e-mail.

You will receive a response within five business days.

Please do not call the office to inquire.

Center for Academic Advisement and Student Success
3207 Boylan Hall
2900 Bedford Avenue
Brooklyn, NY 11210

Grade change status inquiry

Date:

Last Name:
First Name:
last four SS#

Course & Semester:
Original Grade:

Course & Semester:
Original grade:

E-mail:

Phone #:

Date department sent grade change to CAASS: