UNIVERSITY OF CALIFORNIA, SANTA BARBARA EXTENSION

OPEN UNIVERSITY COURSE REQUEST FOR CHANGE OF GRADING OPTION

Completed original form must be submitted to the UCSB Extension Student Services Office by the Change of Grading Option Deadline as published in the Open University Calendar, Fees, and Major Deadlines at www.extension.ucsb.edu. Requests for change of grading option are not accepted after the deadline.

Name (firs	st, m.i, lo	ast)					
UCSB Extension Student #				Email			TA
Quarter				Year			
Course I.D.				Course Tit	le		
Enrollment Code/Session				Instructor			
PLEASE	CHAN	GE THE GRAD	DING OPTION IN TH	IE CLASS			
F	FROM:	(check one)	☐ Letter Grade	□ Pass/No Pass			
	TO:	(check one)	☐ Letter Grade	🗖 Pass/No Pass			
Student's Signature					Date		
PAYMEN	IT OPT	IONS (\$25 P	ROCESSING FEE PA	AID BY):			
	Ву М	Mail			At Extension Office		
	☐ Check* ☐ Money Order				🖵 Cash		
					☐ Check*		
					☐ Credit C	Card	
*Check ma	de payab	ole to the UC Reger	nts				
	OFFI	CE USE ONLY:	Date Entered				
			Course dates verified b	ру	Approved	Not Approved	

