



Leading University

Grade Amendment Form

Student ID :		Student Name:			
Name of the Program:		Name of the Department:			
Semester	Course Code	e	(Course Title	Section
Old Grade	New Grade		aso	on(s) for change:	
Name of the Course Teacher			Signature with Date		
Signature of Head of the Dept. with Date			Signature of Dean with Date		
'					
For use of the Office of the Controller of Examinations					
Update new grade					
Signature of the Controller of Examinations with Date:			:	Posted by: Date:	