

MICHIGAN STATE UNIVERSITY ADMINISTRATION ACTION FORM

Administration actions should be processed online. The PDF form may be used in circumstances where a college or department does not have online access to the student record due to the student's primary program affiliation or in the event that the student has left the University and is no longer available in the online system.

For definitions related to the University's Grading Systems and Correction of Grades, see the Academic Programs catalog.

Name – Last	First	Middle Initial	PID	Class	Student's College/Major			
<input type="checkbox"/> EXTENSION OF INCOMPLETE	Subject	Course No.	Section No.	Credits	Term	Year	Extend Through	
							Term	Year
<input type="checkbox"/> GRADE CHANGE	Subject	Course No.	Section No.	Credits	Term	Year	From	To
	For conditional grades only, date student completed work (mm/dd/yy): _____ For 0.0 or N grades only, did the student complete course (yes or no)? _____ If no, enter date of last academic activity (mm/dd/yy or 'NA' if never attended)): _____							
<input type="checkbox"/> OTHER (Be Specific)								
REASON FOR ABOVE REQUEST:								
Approved By			Date		NOTE: DEPARTMENT – MAKE A COPY PRIOR TO FORWARDING TO COLLEGE COLLEGE – MAKE A COPY PRIOR TO FORWARDING TO THE REGISTRAR RECORDED BY: _____ DATE: _____			
Instructor								
Department Chairperson								
Associate Dean College Offering Course								
Associate Dean Student's College								

**RETURN THIS FORM TO THE OFFICE OF THE REGISTRAR
426 AUDITORIUM ROAD, ROOM 150, EAST LANSING, MI 48824
OR FAX TO (517) 353-1935**