

University of Detroit Mercy
Undergraduate **Extension** **PLEASE PRINT**

8 QGHUJUDGXDW H †, · JUDGHV DUH FKDJHG WR †) · JUDGHV LI WKH ZRUN LV
ZKLFK WKH †, · JUDG a change of grade form should be received from the instructor who assigned the grade.

2 FFDVLRQDOO \ WKHUH LV MXVWLILFDWLRO IRU DQ H[WHQVLRQ R\wishes to grant an extension
should complete WKLW IRUP DQG VXEPLW L eight weeks after the end of the term. If the student
petitions must outline the work still to be completed, the deadline for submitting this work and the date by which the change of grade form will be
received.

7 KH GHGOLQH IRU FRPSOHWLQJ DQ †, · JUDGH PD\ EH H[WHQGHG DW WKH College
ZKLFK WKH FRXUVH ZDV WDXJ

Name: _____
Last First Middle Initial

CRN # Subject Course Number Section Fall Winter Summer 20_____

Work still to be completed:

All coursework must be submitted by: ____/____/____

Change of grade will be submitted by: ____/____/____

Student Signature: _____ Date: ____/____/____

Instructor Signature: _____ Date: ____/____/____