

WHITESIDE AREA CAREER CENTER

1608 Fifth Avenue; Sterling, IL 61081

Phone (815) 626-5810

Fax (815) 626-1001

WACC GRADE CHANGE

Name _____ High School _____

Class _____ Block _____ Jr. _____ Sr. _____

Original Grade:

Qtr. 1 _____ Qtr. 2 _____ Sem. 1 _____

Qtr. 3 _____ Qtr. 4 _____ Sem. 2 _____

Change Grade to Be:

Qtr. 1 _____ Qtr. 2 _____ Sem. 1 _____

Qtr. 3 _____ Qtr. 4 _____ Sem. 2 _____

Reason for change or incomplete _____

What provisions were made by the student to change or complete grade? _____

Instructor _____ Date _____

Director _____ Date _____

1. Students receiving incomplete grades should be assigned letter grades within two weeks after the grading period unless prior approval is obtained from the Director.
2. Once the office has received this grade change form, a copy of this form will be returned to the instructor. It is the teacher's responsibility to then enter this change in Skyward *immediately*.
3. The office will send a copy of this grade change form to the home school for notification.