



# EARLY GRADE LETTER REQUEST

**INSTRUCTIONS:** Fill out the information below, print, and sign. If the instructor has already submitted the grades and you are able to view them via the Part-of-Term grades option in SCORE then you may submit this form for processing. Otherwise, please take the form to the instructor to assign a grade. This form can be dropped off in person, faxed to (706)295-6341, or mailed. Please mail to: Registrar’s Office, Georgia Highlands College, 3175 Cedartown Hwy SE, Rome, GA 30161.

**NOTE:** A student may not pick up Early Grade Letter. Letter must be mailed to a school or business. You must complete all of the information below.

NAME: \_\_\_\_\_ ID # \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Course name and number: \_\_\_\_\_

**Only one class can be entered on this form, if you have additional classes you must submit a separate form for each class.**

COMPLETE ADDRESS/FAX # OF RECIPIENT (Do Not Leave This Information Blank):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing below, I give the Office of the Registrar authorization to send an early grade letter. I understand that I must request an official transcript to be sent to the receiver of this letter after the end of the full part-of-term once all final grades are posted and all end-of-term processing is complete.

STUDENT’S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

***Note to Instructor: It is the instructor’s choice as to whether or not to assign an early grade. The student must request an official transcript to be sent to the receiver of this letter after the end of the full part-of-term final grades deadline and all end-of-term processing is completed.***

<b>Final Grade:</b>	<b>Instructor Print Full Name:</b> _____ <b>Instructor’s Signature:</b> _____ <b>Date</b> _____
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