



California Institute of Integral Studies

GRADE OPTION CHANGE FORM

Use this form to change the grading option of a course or courses for which you are already registered. Submit it as an attachment to an email sent from your CIIS student email account to registrar@ciis.edu. Requests submitted after the semester's Add Deadline will not be processed. If you would like assistance, call 415-575-6126.

Name and Address: *(please print legibly)*

_____ CIIS ID Number: _____
 _____ E-mail Address: _____
 _____ Phone: _____

Registration Semester: Fall Spring Summer Year: _____

COURSE CODE	TITLE	GRADE OPTION
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass
		Letter Grade Pass/No Pass

Student Signature: _____ Date: _____

REGISTRAR'S OFFICE USE:

DATE FORM RECEIVED: _____ DATE REQUEST PROCESSED: _____ BY: _____