

Virginia Polytechnic Institute and State University  
Assignment of Authorization for Grade Change Entry and Approval  
Return this form to Office of the University Registrar, 250 Student Services Bldg., Mail Code 0134

**Department Name/Postal Code:** \_\_\_\_\_  
**Department Number:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

<b>Approval Role: Academic or Graduate Dean</b>	
Name of User _____	Oracle ID _____
Employee ID Number _____	Signature _____

<b>Approval Role: Course Offering Department Head</b>	
Name of User _____	Oracle ID _____
Employee ID Number _____	Signature _____

<b>Data Entry Role: Course Offering Department</b>	
Name of User _____	Oracle ID _____
Employee ID Number _____	Signature _____

Note: This authorization will remain in effect until employee termination or until written notification is sent to the University Registrar from the Department Head or Academic Dean.

**Approval Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Dean, Director or Department Head