

Memorandum

Faculty / School / Section	
Subject:	Amendment to Unit Grade Date
To:	Student Administration
From:	
Telephone:	
Email:	
Date:	

Student Details

Student Name	<input type="text"/>	Student Number	<input type="text"/>
Course Name	<input type="text"/>	Course Code	<input type="text"/>

1. Complete details for each unit where a grade date amendment is required

Unit Code	Current grade	Current grade date	New grade Date

2. Details and rationale for amendment to dates

Memorandum

3. Education Manager / Associate Director / Director

Signature _____ Date _____

Name (please print) _____ School _____

4. Academic Services Approval to amend grade

Approved for Amendment Yes No Approved By _____

Date Amended in APTUS _____ Amended By _____