



SAN JOSÉ STATE UNIVERSITY

◆ Office of the Registrar ◆ One Washington Square ◆ San José, CA 95192-0009 ◆

Grade Verification Request

Instructions:

1. Please print clearly.
2. Complete all sections of the form.
3. Use the notes section for any additional information needed.
4. Sign the form.
5. Submit form to window "R" in the Student Services Center.

SJSU ID #: _____

Name: _____
Last First Middle

Address: _____
Street # City State Zip Code

Phone: _____ E-mail: _____

Semester/Year: _____ Course: _____

Notes: _____

Student's Signature

Date

Date received _____

Date processed: _____