



## Grade Appeal Form

_____ Name of Student	_____ Student A Number
Submitted to _____ (Department/Program Chairperson)	_____ Date Submitted

### Section A (To be completed by the Student)

- I. Course information
  - a. Name of course \_\_\_\_\_
  - b. Course number \_\_\_\_\_
  - c. Course section number \_\_\_\_\_
  - d. Semester course was taken \_\_\_\_\_
  - e. Days of week course met \_\_\_\_\_
  - f. Time of day course met \_\_\_\_\_
  - g. Course location \_\_\_\_\_
- II. Name of Instructor \_\_\_\_\_
- III. Date on which the specific item in question was received by the student  
\_\_\_\_\_
- IV. Date on which the student presented his/her appeal to the instructor for the respective course  
\_\_\_\_\_
- V. Concise, clear description of the specific nature of the complaint with particular regard to a description of how the grade at issue was either unfair, inaccurate, or both  
\_\_\_\_\_  
\_\_\_\_\_

### Section A1 (To be completed by the Instructor)

- VI. Description of the results of the student's discussion with his/her instructor  
\_\_\_\_\_
- VII. Date on which the results of student/instructor discussion were finalized  
\_\_\_\_\_
- VIII. Attachments (from the student)  
\_\_\_\_\_

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Instructors Signature

**Section A and A1 must be presented to the appropriate Department/Program Chairperson for appeal. If the appeal is with the Chairperson, the packet should be submitted to the respective dean (academics, applied technologies, or health).**



## Grade Appeal Form

### Section B (To be completed by the Department/Program Chairperson)

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Name of Student

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Student Number

I. Date on which the appeal was filed with the Department/Program Chairperson

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II. Actions/findings of the Chairperson

III. Attachment(s) (from the Instructor and/or Chairperson)

IV. Decision of the Chairperson

V. Date of decision and notification (copies of Section A and B) given to the student and instructor

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Department/Program Chair Signature

**All Sections must be presented to the respective dean for further appeal along with a Notice of Appeal.**



## Grade Appeal Form

### Notice of Appeal

I, \_\_\_\_\_, wish to appeal the decision of the Department/Program Chairperson, as presented on Sections A, AI, and B to the respective dean (academics, applied technologies, health)

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Student Number

\_\_\_\_\_  
Date

Attachments: Grade Appeal Form and any submitted documentation



## Grade Appeal Form

### Section C (To be completed by the Dean)

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Name of Student

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Student Number

I. Date on which the appeal was filed with the Dean's Office

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II. Actions/findings of the Dean

III. Attachments (from the instructor and/or Dean)

IV. Decision of the Dean

V. Date of decision and notification given to the student, instructor, and Department/Program Chairperson

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Dean's Signature

If the appeal goes to the Department/Program Chairperson for decision and then the Dean (step two), the decision will be final. If the appeal is for the Department/Program Chair, the Division Dean will make a decision, and the student may opt to proceed to the Dean of Students as a second and final step.