

STUDENT GRADE APPEAL FORM

Students who wish to appeal their final grade from a specific course must first contact their professor immediately following the course session end. If the grade issue remains unresolved after reviewing the grade with the professor, students may appeal the grade by completing this form and submitting it to the appropriate academic administrator within 45 days of the course end date. One form per grade appeal request is required.

NOTE: The entire body of work for this course will be reviewed. Therefore, the final grade has the potential to increase, decrease, or remain the same. A Grade Change form must be completed by the professor or program administrator to change a grade as a result of an approved appeal.

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Professor Name:				
(Grades in the land)				
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I understand that this is an appeal for a grade change and has the potential to increase, decrease or remain the same.				
I will be notified	within (5) business days of the	e decision of the	e grade appeal. Grade App	oeal decisions are final.
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Student Signatu				ate:
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□Approved	Grade granted on appeal:			
□Denied	Reason for denial:			
Name (Print):				
Appropriate Academic Administrator Signature:			Date:	

SUBMIT ALL COMPLETED FORMS ONCE DECISION IS MADE TO COLLEGE REGISTRAR AND ALONG WITH GRADE CHANGE FORM (IF APPLICIABLE)