

## COURSE GRADE APPEAL FORM

This form should be completed by the student and submitted to the concerned department chairperson for action if the issue could not be resolved with the instructor. Please refer to the *Appeal of Course Grade* regulations stipulated in the Undergraduate Catalog.

ID Number							
Department							
Year							
Course Instructor							
Numeral: Letter:							
Basis for grade change (please be specific)							
Error in calculating the grade:							
Excluding grade of a submitted work:							
Unfair assessment:							
□ Other reasons:							
Date							

Grade Appeal Committee Decision				
□ No basis for the Appeal				
□ Appeal is legitimate. The course Instructor shall complete a <i>Change of Grade</i> Form and submit it to the Registrar's Office for implementation				
Signature D	oate			

College Dean						
□ Approve	Do Not Approve					
Basis for the decision:						
Signature		Date				
Comments and final action of the Registrar's Office						

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Cience trans		Data			
Signature		Date			

cc: Student's record Registrar's Office