

## **Final Course Grade Appeal Form**

This Final Course Grade Appeal Form is to be used by students to request appeal of a final course grade for an alleged improper evaluation. Please refer to the <u>Final Course Grade Appeal Policy</u> and your respective School procedures for grade appeal. This form must be completed by the student and submit via email to the instructor of record and copied to the program director (or department chair for non-degree students) within 10 business days of receipt of the final course grade.

**Section 1: To be completed by the student.** Complete this section and email this form to the respective course instructor and copy your program director within 10 business days of the time the grade is posted.

Student Name:	Student ID:
Degree/Certificate:	Semester/Year
Course Name & Number:	Instructor:

Please describe in detail the grounds for the appeal:

Student signature:

Date:

**Section 2: To be completed by the course instructor.** Complete this section and email this form to the student, the student's program director, and the school dean within 5 business days of receipt of grade appeal form.

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Please address the q	uestions raised b	y the student and indicate	your decision on the s	student's appeal.

Instructor signature:	Date:
	of the school. Complete this section and email the completed form to
the student and the instructor of record.	

	Recommend grade stands	OR	Recommend grade change*	
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Please address the	e reasons for your recommendatio	n.		
Dean signature:			Date:	

\*The dean's office is responsible for notifying the Registrar for any grade changes.