

COURSE GRADE APPEAL COVER SHEET

Student Name:

Date:

Student Phone:

Student I.D. #

Term:

Course Number:

Instructor:

Step 1:

Date Instructor was notified:

Date Chair was notified:

Date Instructor met with Student :

Instructor's Response:

Grade Change:

Instructor submits Correction of Grade Change Form

No Grade Change:

Instructor responds in writing to student and chair

Instructor's Signature/Date:

Step 2:

Date Chair met with Student:

Chair's Response:

Grade Change:

Instructor submits Correction of Grade Change Form

No Grade Change:

Chair /designee replies in writing to Student

Chair's Signature/Date:

Step 3:

Date appeal submitted:

Step 5: