Student Informal Grade Appeal Form

Student Name: _____

Panther ID #: _____

Email Address: _____

Phone Number: _____

Grade to be appealed.

Academic Year: _____

Instructor: _____

Course Prefix: _____

Course #: _____

Semester: _____

Course Title: _____

Grade Received: _____

Grade Requested: _____

Required information to be completed by the student.

I initially discussed this grade with my instructor on: _____

Materials to be submitted in support of this grade appeal include.

☐Course syllabus

☐Attendance policy (if not included in syllabus and relevant to course grade)

☐Grading policy (if not included in syllabus)

☐Graded course materials (optional)

☐Other (Please explain) _____

Student's statement of action requested and reason(s) for requested change of grade. (Attach your statement to this form. Statement MUST demonstrate the reason the grade is arbitrary, prejudiced, or inappropriate in view of the standards and procedures outlined in the class syllabus.)

Student's Signature: _____

Date: _____

Note: Once you have completed this form, please make a copy of your records. Next, submit the original to the relevant Faculty Member to begin the informal grade appeal process.

Faculty Member Informal Grade Appeal Response Form

Name of Faculty Member: _____

Student Name: _____

Panther ID #: _____

Academic Year: _____

Semester: _____

Course Prefix: _____

Course #: _____

Course Title: _____

Date Received Appeal: _____

Date met with student on appeal: _____

Decision and Rationale of the Faculty Member:

Faculty Member's Signature: _____

Date: _____

Note: Upon completion, make a copy for the department, then provide this form to the student to determine if continuation of the formal appeal process will occur.

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Phone Number: _____

Grade to be appealed.

Academic Year: _____

Instructor: _____

Course Prefix: _____

Course #: _____

Semester: _____

Course Title: _____

Grade Received: _____

Grade Requested: _____

Required information to be completed by the student.

I initially discussed this grade with my instructor on: _____

Materials to be submitted in support of this grade appeal include.

☐Course syllabus

☐Attendance policy (if not included in syllabus and relevant to course grade)

☐Grading policy (if not included in syllabus)

☐Graded course materials (optional)

☐Other (Please explain) _____

Student's statement of action requested and reason(s) for requested change of grade. (Attach your statement to this form. Statement MUST demonstrate the reason the grade is arbitrary, prejudiced, or inappropriate in view of the standards and procedures outlined in the class syllabus.)

Student's Signature: _____

Date: _____

Note: After completing this form, remember to retain a copy for your records before submitting it to the Department Head to initiate the formal grade appeal process. The term 'Department Head' encompasses various leadership roles within the department, such as department chair, director, or coordinator, who serve as the faculty member's immediate supervisor.

Department Head Formal Grade Appeal Response Form

Student Name: _____

Panther ID #: _____

Name of faculty member who assigned the grade: _____

Grade assigned to student: _____

The student's requested grade: _____

Academic Year: _____

Course Prefix: _____

Course #: _____

Semester: _____

Course Title: _____

Date Department Head received appeal: _____

Date Department Head met with student on appeal: _____

Date Department Head met with instructor on appeal: _____

Decision and Rationale of the Department Head:

Department Head's Signature: _____

Date: _____

Student and Faculty Member's Response to Department Head's Decision

Student Name: _____

Panther ID #: _____

Student's Response to Department Head's Decision

☐ I accept the department head's decision.

☐ I do not accept the department head's decision.

Student's Signature: _____

Date: _____

Faculty Member's Response to Department Head's Decision

☐ I accept the department head's decision.

☐ I do not accept the department head's decision.

Faculty Member's Signature: _____

Date: _____

If the student and faculty member both agree to the decision made by the Department Head, all related documents and forms will be sent to the College for filing.

If the student or faculty member rejects the Department Head's decision, these materials will be sent to the Dean's Office to proceed with the appeal process.

School/College Grade Appeal Committee's Report

Student Name: _____

Panther ID #: _____

School/College: _____

Date on which the school/college met to hear the grade appeal: _____

Names of Committee Members

Faculty Member (Chair): _____

Signature: _____

Faculty Member: _____

Signature: _____

Faculty Member: _____

Signature: _____

Student Member: _____

Signature: _____

Student Member: _____

Signature: _____

Decision and Rationale of School/College Grade Appeal Committee:

Dean Formal Grade Appeal Response Form

Student Name: _____

Panther ID #: _____

Name of faculty member who assigned the grade: _____

Grade assigned to student: _____

The student's requested grade:_____

Academic Year: _____

Course Prefix: _____

Course #: _____

Semester: _____

Course Title: _____

Date Dean received appeal: _____

Date Dean met with student on appeal: _____

Date Dean met with instructor on appeal: _____

Decision and Rationale of the Dean:

Dean's Signature: _____

Date: _____

Student and Faculty Member's Response to Dean's Decision

Student Name: _____

Panther ID #: _____

Student's Response to Dean's Decision

☐ I accept the dean's decision.

☐ I do not accept the dean's decision.

Student's Signature: _____

Date: _____

Faculty Member's Response to Dean's Decision

☐ I accept the dean's decision.

☐ I do not accept the dean's decision.

Faculty Member's Signature: _____

Date: _____

If the student and faculty member both agree to the decision made by the Dean, all related documents and forms will be sent to the College for filing.

If the student or faculty member rejects the Dean's decision, these materials will be sent to the Academic Affair to proceed with the final formal appeal process.

University Grade Appeal Committee's Report

Student Name: _____

Panther ID #: _____

School/College: _____

Date on which the University Grade Appeal Committee met to hear the grade appeal: _____

Names of Committee Members

Faculty Member (Chair): _____

Signature: _____

Faculty Member: _____

Signature: _____

Faculty Member: _____

Signature: _____

Student Member: _____

Signature: _____

Student Member: _____

Signature: _____

Decision and Rationale of University Grade Appeal Committee: