

Course Grade Appeal Form Office of Academic Affairs

College of Osteopathic Medicine

PLEASE COMPLETE ONLINE OR PRINT BELOW IN BLUE OR BLACK INK. Students are expected to maintain a copy of this document for their records.

Student instructions for Sections 1 and 2: Submit Course Grade Appeal form to the appropriate Course Director and the Office of Academic Affairs within ten (10) business days of online grade posting.

Section 1: STUDENT INFORMATION

Student's Name:	SONIS Student ID#:	SONIS Student ID#:	
Course #andTitle:	Course Director's Name:		
Year and Term Course was taken:			
Section 2: STUDENT'S STATEMENT			
Following the provisions of the Student Final Course above.	Grade Appeal Process, I appeal the grade of	_received in the course cited	
The basis for this appeal is:			
I have attached	an additional page		
	an additional page		
StudentSignature	Date		

Section 3: COURSE DIRECTOR STATEMENT

Course Director instructions: Return a copy of this completed form to the Office of Academic Affairs and to the student within five (5) business days. Submit the grade change form (if necessary) to the Office of the Registrar. A Grade Change form must be attached to the original document when a grade change has been granted.

Date received:			
I have reviewed the co	urse grade appeal and my decision is to:		
	Grant the appeal and submit a grade change	form	
	Decline the appeal and maintain original grade		
The basis for my decisi	on is:		
>			
Course Director Signati	ure .	 Date	

STUDENT:

For further or unresolved appeals, complete Section 4 within 2 business days.

Rev: 4-19-23

Section 4: APPEALS TO THE ASSOCIATE DEAN OF ACADEMIC AFFAIRS

Section 8 instructions for the student: Sign and submit to the Office of Academic Affairs if you wish to further pursue the appeal process. This form must be submitted to the Office of Academic Affairs within two (2) business days of receiving the decision of the Course Director.

I have followed the informal process outlined in the Student Grade Appeal process and have been unable to reach a satisfactory resolution of my appeal through the Course Director. I wish to appeal my course grade to the Associate Dean of **Academic Affairs.** StudentSignature Date **Section 5: OFFICE OF THE ASSOCIATE DEAN OF ACADEMIC AFFAIRS** Date received: ___ The appeal has been reviewed according to the formal appeal procedure. A final decision has been made to: Grant the appeal and submit a grade change form Decline the appeal and maintain the original grade All decisions made by the Associate Dean are to be considered final and may not be appealed further. The basis for my decision is: Signature of the Associate Dean Date The Associate Dean makes the final decision as to whether the appeal will be granted or not and will notify the student, Course Director and the Office of Academic Affairs in writing within two (2) business days of receipt of the formal appeal. The Associate Dean will submit the final Course Grade Appeal Form to the Office of Academic Affairs and Registrar.

A Grade Change Form must be attached when a grade change has been granted.