

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#: _____

Course # and Title: _____ Course Director's Name: _____

Year and Term Course was taken: _____

Section 2: STUDENT'S STATEMENT

Following the provisions of the Student Final Course Grade Appeal Process, I appeal the grade of _____ received in the course cited above.

The basis for this appeal is:

I have attached an additional page

▶ _____
Student Signature

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 course 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 decision is:

 _____
Course Director Signature

Date

STUDENT:
For further or unresolved appeals, complete Section 4 or 6 (whichever is appropriate) within 2 business days.

Section 4: APPEALS TO CURRICULUM DIRECTOR

Student Instructions for section 4: sign and submit to the appropriate Curriculum Director for that year (CDY1, CDY2, or CDY3). If you wish to pursue the appeal process. If the Course Director is the Curriculum Director, skip to Section 6. This form must be received by the Curriculum Director within two business days of receiving the decision of the course director.

I have followed the informal process outlined in the Student Final Course 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 Curriculum Director.

▶ _____
Student Signature Date

Section 5: CURRICULUM DIRECTOR STATEMENT

Curriculum 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 a 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 course grade appeal and my decision is to:

- Grant the appeal and submit a grade change form
- Decline the appeal and maintain the original grade

The basis for my decision is:

▶ _____
Signature of Curriculum Director Date

STUDENT:
For further or unresolved appeals, complete Section 6 within 2 business days.

