Course Grade Appeal Form College of Osteopathic Medicine Office of Academic Affairs

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 Semester Course was taken:	
Section 2: STUDENT STATEMENT	
Following the provisions of the COM Final Course Grade Appeal Policited above. The basis for this appeal is:	cy, I appeal the grade of received in the course
I have attached an additional page.	
>	
Student Signature	Date

Section 3: COURSE DIRECTOR STATEMENT AND DECISION

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 decisio	on is to:	
Grant the appeal and submit a g	grade change form.	
Decline the appeal and maintain	n original grade	
The basis for my decision is:		
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Course Director Signature	 Date	
Course Director Signature	Date	

STUDENT:

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

Section 4: APPEAL TO THE ASSOCIATE DEAN OF ACADEMIC AFFAIRS

Student Instructions: 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 COM Final Course Grade Appeal Policy 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.

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Student Signature Student Signature	Date	
Section 5: OFFICE OF THE ASSOCIATE DEAN OF ACADEM	IIC AFFAIRS	
Date received:		
The appeal has been reviewed according to the formal appe	eal procedure. A final decision has been made to:	
Grant the appeal and submit a grad	le change form.	
Decline the appeal and maintain th	e original grade .	
All decisions made by the Associate Dean of Academic A	ffairs are to be considered final and may not be appealed further	•
The basis for my decision is:		
•		
Associate Dean of Academic Affairs Signature	 Date	

- The Associate Dean of Academic Affairs 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 five (5) business days of receipt of the formal appeal.
- The Associate Dean of Academic Affairs will submit the final Course Grade Appeal Form to the Office of Academic Affairs and the Office of the Registrar.
- A Grade Change Form must be attached when a grade change has been granted.