

# Petition for Formal Grade Appeal Updated January 15, 2020

Today's Date:
Name:
Address:
NSUID#:
City:
State:
Zip code:
Cell Phone:
NSU Email:
Course Prefix Number and CRN:
Faculty of Record:
Semester/Year that the course was taken:



#### Student

After discussing your disputed issues with both the faculty member, the department chair named below, and the associate dean, record the dates on which you discussed our dispute or concerns with them. Your appeal request is not complete if this step has not been fulfilled. Please document the dates and approximate times of your discussions with the following people as part of the informal grade resolution process.

Date of Discussion with faculty member:

Date of discussion with department chair:

Date of discussion with associate dean:

### Faculty/Department Chair

The student named above is interested in appealing an academic decision that he/she received in the class listed. As part of the process, the student is required to have met with the instructor and department chair to discuss this issue. The intent and goal of the NSU Grade Appeal Process is that there be significant effort made to resolve disputes at the departmental level. Please complete the boxes below and provide a signed copy to the student to submit as part of the appeal process.

Date of discussion and delivery of faculty academic appeal response form

Faculty Member (please print name)

Signature



Date of discussion and delivery of faculty member's department chair appeal response form
Faculty Member's Department Chair (please print name)
Signature
Date of discussion and delivery of faculty academic appeal response form
Assistant/Associate Dean (please print name)
Signature

## Basis for the Formal Grade Appeal (check all that apply):

- $\hfill\Box$  The faculty member's policy in assigning final grades was not applied consistently to all students within a class and section.
- ☐ The faculty member's method of assigning grades differed from the method described in the course syllabus or in other material made available to students.
- ☐ The faculty member's policy on assignment of grades was not made known to students.



# Rationale for the Formal Grade Appeal (attach additional pages as necessary)

Student's Signature

Date



### Consent for Review of Records

I, the above-named student, am filing a *Formal Grade Appeal* for consideration by the College Grade Appeal Committee. To that end, I hereby consent to the review of my student records by this committee.

Student's S	Signature
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Date

**Approved** 

### OFFICE USE ONLY DECISION OF COLLEGE GRADE APPEAL COMMITTEE

The College Grade Appeal Committee recommends that the grade appeal be

Denied
Signed
Dean and Chair of the College Grade Appeal Committee
Date

Original: student file; Copies: student, faculty member Revised by adhoc committee members: Drs. Collier, Keller, and Hathorn; 01/14/20 Approved by Dean's Council; 01/15/20