

GRADE APPEAL FORM

Today's Date					
Student's Name		Student ID _			
Telephone	Email				
Academic Level (select one):	Undergraduate	Graduate			
1. Have you read the Grade Appeal F	Policy in the Catalog?		YES	N0	
(If you answered NO to the question above, ple and Regulations > Policy on Grade Appeal: http://dallascatalog.unt.edu/content.php?cato		-	alog > Acad	emic Information	
2. Have you attempted to resolve the	e final grade dispute wi	th the instructor?	YES	N0	
(If you answered NO to the question above, please contact your instructor and try to resolve the dispute. The program coordinator cannot proceed until this attempt has been reasonably made.)					
3. Course Prefix, Course Number, and (e.g. BIOL 1132 - 001)	d Section Number			<u> </u>	
4. Semester and year the course was t (e.g. Fall 2018)	aken				
5. Instructor of the Course (first and last name)					
6. Date and method of last contact with	th the instructor of the	course.			
7. What was the outcome of the meet	ing with your instructo	r?			
8. State specifically the grade that you that you would like to see taken.	received, the expecte	d grade you feel yo	ou earned	d, and the action	

9. Below are the three general reasons that students can fi Please provide your rationale for any of the reasons below. that is acceptable; answer in all of the relevant sections for documentation that you believe supports your appeal.	You may have more than one reason and
a. If your appeal is based upon a clerical or administrative grade, please explain here:	error in the calculation or assignment of a
b. If your appeal is based upon a claim that the grade was grading criteria stated in the syllabus, please explain here: c. If your appeal is based upon a claim that the grade was	based on an unlawful or arbitrary reason,
including discrimination, harassment, retaliation, or obser here:	vance of religious holy days, please explain
Student's Signature	Date
For Office Use Only:	
Appeal Granted Appeal Denied	
Reviewer	Date
Form update 09/11/2018	