

Southern Connecticut State University

Grade Appeal Form

LEVEL 1—Part A: Initiating an Appeal

To be completed by the Student and submitted to the Instructor and the Instructor’s Department Chairperson / Program Director after the Student has communicated with the Instructor.

Name: (Last) _____ (First) _____ (M.I.) _____

Student ID: _____

Course Department Code: _____ Course Number: _____ Section: _____

Indicate semester course taken: FALL _____ SPRING _____ WINTER _____ SUMMER _____

Year course taken: _____ Instructor: _____

Explain below, in detail, why you think a palpable injustice has occurred. Refer to the definition of palpable injustice in item I (page 1) of the Grade Appeal Procedure Document. Please also attach any relevant documentation. Use additional sheets if necessary:

STUDENT SIGNATURE* _____

Date: _____

CHAIRPERSON SIGNATURE* _____

Date: _____

*Signatures from both parties signify that the Student and Chairperson / Program Director have met and discussed the grade appeal, and that the Chairperson / Program Director has initiated mediation efforts with the Instructor or rendered a decision in the case of an Absent Instructor. Note: except in the case of an absent instructor, the Chairperson has no adjudicatory role in the appeals process. In cases, where the Chairperson / Program Director is the Instructor of the course, and the Student is moving directly to a Level 2 appeal, no signature from the Chairperson/Program Director is required.