



OFFICIAL GRADE APPEAL

Note: The official TMCC Grade Appeal Policy and Procedures are available on the Vice President of Academic Affairs website. Please read through the requirements prior to completing this form.

STUDENT INFORMATION

Name		Student ID	
Address	City	State	Zip Code
Home Telephone	Cell Phone	Email	

COURSE INFORMATION

Faculty Member Name		
Course Title	Course Number	Section
Semester Taken	Grade You Received	Grade You Request

EFFORTS TO RESOLVE THIS COMPLAINT OR DEFINE/COMMUNICATE PERSONAL HARDSHIP

Prior to completing this form, you must attempt to resolve this matter with the instructor of the course and, if not satisfied, then with the department chair/program coordinator.

Have you already attempted to resolve this matter with the faculty member/chair/coordinator?	
<input type="checkbox"/> Yes	Date of discussion with faculty member:
Results of discussion	
<input type="checkbox"/> No	
Explain Why	

Reason for Grade Appeal

At least one condition must apply to your complaint:

- A. Arbitrariness:** The grade awarded represents such a substantial departure from accepted academic norms as to demonstrate that the instructor did not actually exercise professional judgment.
- B. Prejudice:** The grade awarded was motivated by ill will, and is not indicative of the student's academic performance.
- C. Error:** The instructor made a mistake in fact or the instructor refused to correct a clerical or administrative error made in the process of transmitting a grade to the Office of Admissions and Records.
- D. Personal Hardship:** Verifiable incapacity, illness, or injury which prevents the student from returning to school for the remainder of the semester (attach a copy of your medical documentation from your health care provider) or death of student, spouse, child, parent or legal guardian (attach a copy of the death certificate) or induction into the U.S. Armed Forces (attach a copy of your military orders).

Attach a description of the facts and circumstances that led to the filing of this grade appeal. This statement must be clear, complete, accurate and truthful, and may not exceed two pages. Students appealing a grade based on conditions A, B or C, above, must provide copies of all tests, papers and other evidence they may have to support their appeal. Only copies of your work will be accepted; do not submit originals.

I hereby certify that this appeal contains a complete, accurate and truthful statement of the facts in this matter.

Student's Signature

Date

Responses to Appeal

INSTRUCTOR

Written Response to Appeal		
Approval <input type="checkbox"/> Approve <input type="checkbox"/> Deny	Signature	Date

CHAIR/COORDINATOR

Written Response to Appeal		
Approval <input type="checkbox"/> Approve <input type="checkbox"/> Deny	Signature	Date

DEAN

Written Response to Appeal		
Approval <input type="checkbox"/> Approve <input type="checkbox"/> Deny	Signature	Date
Date student notified of final decision		