

MTSU Grade Appeal Student Form

To the Student: Appeals must be initiated within 40 work days of the graduation date for the semester. Information provided on this form may be made available to the instructor and/or department chairman named in the appeal; likewise, the student may request a copy of the Instructor/Chair form prior to the University Grade Appeal meeting by contacting the Vice Provost for Academic Affairs, Cope Administration Building, Room 111. Information provided on this form will be considered by the University Grade Appeals Committee in those cases not resolved at instructor or chair levels. By MTSU POLICY NO.:III:00:09, "Appeals should be considered only in cases in which unethical or unprofessional actions and/or inequities are alleged."

Student Information

Today's Date: _____

Student Name: _____

Student Identification Number: M _____

Local Address: _____

Phone number, daytime: _____ E-mail address: _____

Classification: _____ Graduation date: _____

Course in question

Instructor: _____

Department and Course Title: _____

Course Number and Section Number: _____

Semester: _____ Grade Received: _____ Specific Grade Action Requested _____

I discussed this complaint with the instructor involved on _____
Date

I also discussed this complaint with the Chair of the department involved on _____
Date

I have read MTSU POLICY NO.: III:00:09 yes _____ no _____

Please provide a written statement outlining the basis of the grade appeal including the following:

- a) Reasons you believe a grade appeal is justified (be specific);
- b) Special circumstances or considerations, if any;
- c) Course requirements completed by you (provide documentation, if possible);
- d) Names of other person(s) who may be called on, if necessary, to provide information pertinent to this case;
- e) Complete course syllabus
- f) Other information or documentation you believe is pertinent to this case.

You may use the back side of this form or attach additional pages.