

Course Grade Appeal Form



STUDENT INFORMATION

Name: _____
First Middle Initial Last

Student ID#: _____ Email: _____

Program of Study: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Date of Birth: _____

COURSE INFORMATION

Semester and Year of Appeal: _____ Course Prefix and Number: _____

Course Instructor: _____

Prior to submitting this form, a student should initiate a good faith discussion with the instructor of the course. If the good faith discussion resolves the matter with a grade change, the instructor must submit a Change of Grade Form to the Office of Student Records.

I have read and understand the Course Grade Appeal Process of Mercy College of Ohio as stated in the College Catalog.

Student Signature _____ Date _____

Complete course grade appeal procedures are outlined in the College Catalog.

A course grade appeal request must include the following:

- A Course [Grade Appeal Form](#);
- A written statement indicating the following:
 - Date of good faith discussion with instructor,
 - Reason for further appeal, and
 - Desired outcome;
- Any documentation supporting claims in the written statement .

Once complete, this form and all required documents should be submitted to the appropriate Program Director, Division Dean, or Vice President of Academic Affairs/Dean of Faculty for review.

Office: Student Records
Copy to: Vice President of Academic Affairs
Last Updated: 08/14/2019

Processed by: _____ Date: _____
Initials