

## **GRADE APPEAL INITIATION**

For all required grade appeal forms, please see: <u>https://registrar.arizona.edu/grade-appeal</u>

| Student's Name & SID:   |                               |                   |                 |
|---|-------------------------------|-------------------|-----------------|
| Expected Graduation Date:   |                               |                   |                 |
|   |                               |                   |                 |
| Course:   |                               |                   | Grade Awarded:  |
| Instructor:   |                               |                   | Grade Expected: |
| Term/Year:  |                               |                   |                 |
|   |                               |                   |                 |
| Please choose from all applicable options below attesting that you have discussed your concerns about your grade with your instructor or the parties listed below.  |                               |                   |                 |
| Action  |                               | Method of Contact | Date(s)         |
| I discussed this ma   | tter with my instructor / TA: |                   |                 |
| Since my instructor was a GAT (teaching assistant/associate), I discussed this matter with the course supervisor:   |                               |                   |                 |
| I discussed this ma<br>□ the Departmen<br>□ the Departmen   |                               |                   |                 |
| INSTRUCTIONS / CHECKLIST FOR THE STUDENT:<br>Email the following documents to the instructor/TA and copy the department head and<br>gradeappeal@arizona.edu   |                               |                   |                 |
| Student's statement outlining the appeal clearly and thoroughly. Please refer to the Grade Appeal Policy to be sure you have valid grounds for an appeal.   |                               |                   |                 |
| Supporting documentation.   |                               |                   |                 |
| Please document your case by including the course syllabus and any relevant graded reports and papers,<br>examinations, emails, notes taken during faculty conferences, etc. All documentation must be submitted with the<br>initial appeal unless requested by the instructor, department head, or dean. |                               |                   |                 |
| NOTE: Students should regularly check their university email for notifications of updates to their appeal.  |                               |                   |                 |

Student's Signature:

Date:

## THIS FORM MUST BE COMPLETED WITHIN THE FIRST FIVE WEEKS OF THE REGULAR (FALL/SPRING) TERM.



## **STUDENT STATEMENT**