



MARYWOOD UNIVERSITY

Student Information

Student's Name _____

Class Standing _____ Major _____

Course Title and Section _____

Grade Received _____ Instructor _____

To be completed by the student: In the space below, detail your reasons for appealing the grade. Attach pertinent information. Be certain your case for appeal is complete and thorough, and that you support your claim that the faculty member acted in an arbitrary or unjust manner. Specify the remedy you seek. If the space below is inadequate, you may attach additional sheets.

Student's Signature _____ Date _____

Instructor's Signature _____ Date _____
(Critical Party)



MARYWOOD UNIVERSITY

Conference with Course Instructor

Student's Name _____

Class Standing _____ **Major** _____

Course Title and Section _____

Grade Received _____ **Instructor** _____

To be completed by the faculty member: In the space below, describe the content and results of your conference with the student over the grade appeal. If necessary, attach additional sheets. Please include information about the student's response.

Date of Conference _____ **Location** _____

Faculty Member's Signature _____ **Date** _____

Student's Signature _____ **Date** _____
(Critical Party)



MARYWOOD UNIVERSITY

Conference with Department Chair

Student's Name _____

Class Standing _____ **Major** _____

Course Title and Section _____

Grade Received _____ **Instructor** _____

The Chair will summarize the results of his or her attempt to settle the appeal.

Department Chair's Signature _____ **Date** _____

Instructor's Signature _____ **Date** _____

Student's Signature _____ **Date** _____
(Critical Party)



MARYWOOD UNIVERSITY

Findings of the Grade Appeals Committee

Student's Name _____

Class Standing _____ **Major** _____

Course Title and Section _____

Grade Received _____ **Instructor** _____

Summary of Committee findings. Attach all relevant documents.

Signatures of Committee Members:

Committee Chair _____ **Date** _____

Faculty Member _____ **Date** _____

Faculty Member _____ **Date** _____

Student Member _____ **Date** _____

Student Member _____ **Date** _____



MARYWOOD UNIVERSITY

Findings of the College Dean

Student's Name _____

Class Standing _____ **Major** _____

Course Title and Section _____

Grade Received _____ **Instructor** _____

The Academic Dean, upon considering the recommendation of the Grade Appeal Committee, will issue his or her finding on the matter of the grade appeal.

Academic Dean's Signature _____ **Date** _____

College _____