



EAST TEXAS BAPTIST UNIVERSITY

# East Texas Baptist University Grade Appeal Form

This Grade Appeal Form is completed by the student and given to the Department Chair or Program Director to start the formal appeal process. It is the student's decision whether to continue an appeal. If the appeal is continued, it is the student's responsibility to provide a copy of this form and all documentation to the next level of appeal.

_____	_____	_____
Printed Name of Student Filing Grade Appeal	Course Prefix & No.	Today's Date
_____	_____	
Signature of Student Filing Grade Appeal	Student Phone Number	
_____	_____	
Student Mailing Address	Student E-mail Address	

**ATTEMPTS MADE TO RESOLVE THE GRADE ISSUE:**

- Level 1-Appeal to Department Chair or Program Director: Date student met with faculty member who assigned the grade: \_\_\_\_\_
- Level 2-Appeal to Academic School Dean: Provide date student met with the appropriate department chair or program director: \_\_\_\_\_
- Level 3-Appeal to Vice President of Academic Affairs: Provide date student met with the Dean of the school which offers the course: \_\_\_\_\_

**EXPLANATION OF WHY THE STUDENT FEELS THE ASSIGNED GRADE SHOULD BE CHANGED:**

Please provide this explanation in an attachment.

**DOCUMENTATION INCLUDED WITH THIS APPEAL FORM (PAPERS, GRADES, ETC.):**

In an attachment, please provide a list/description of the documentation included with this appeal form.

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**FOR ADMINISTRATIVE USE ONLY**

**LEVEL 1 APPEAL:** Date recorded in school log: \_\_\_\_\_ Recorded by: \_\_\_\_\_

Report of Action Taken by Dept. Chair/Program Director: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Dept. Chair/Program Director  
\_\_\_\_\_  
Date Copy of Form Sent to Student  
\_\_\_\_\_  
Date Appropriate Fac/Staff Notified

*A copy of this form should be returned to the student and the original sent to the Academic School Dean's office. Documentation may be returned to the student if the appeal process is continuing.*

**LEVEL 2 APPEAL:** Date recorded in school log: \_\_\_\_\_ Recorded by: \_\_\_\_\_

Report of Action Taken by Academic School Dean: \_\_\_\_\_

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\_\_\_\_\_  
Signature of Academic School Dean

\_\_\_\_\_  
Date Copy of Form Sent to Student

\_\_\_\_\_  
Date Appropriate Fac/Staff Notified

***A copy of this form should be returned to the student with the original maintained in the Academic School Dean's office. Documentation may be returned to the student if the appeal process is continuing.***

**LEVEL 3 APPEAL:** Date recorded in VPAA log: \_\_\_\_\_ Recorded by: \_\_\_\_\_

Report of Action Taken by VPAA: \_\_\_\_\_

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\_\_\_\_\_  
Signature of VPAA

\_\_\_\_\_  
Date Copy of Form Sent to Student

\_\_\_\_\_  
Date Appropriate Fac/Staff Notified

***A copy of this form should be returned to the student with the original maintained in the VPAA's office along with the supporting documentation.***