



OWENS
COMMUNITY COLLEGE

**Owens Community College
Academic Grade Appeal Form**

Student Name _____ OCID _____

Address _____

Telephone Number _____ Date _____

Please Print Clearly or Type

I am requesting a review of my grade for the following (check) ____ course ____ assignment:

Complete one form for each course/assignment for which you are requesting a review:

Course and section number _____ Instructor: _____

Credit Hours: _____ Term/Date Taken: Fall _____ Spring _____ Summer _____

Grade for course: _____ OR Grade for assignment being reviewed: _____

In compliance with the academic appeal procedure I have met with each of the following individuals involved in the grade review process.

Informal Process:

Step 1: Meet with faculty member _____
(Instructor name) (date)

Step 2: Meet with Department Chair _____
(Department Chair's name) (date)

Step 3: Meet with the School Dean _____
(School Dean's name) (date)

Formal Process – Informal process must be complete before the formal process with the Vice Provost can occur. Students should complete this form and submit it to the Office of the Vice Provost for review.

Step 4: Meet with the Vice Provost _____

I am requesting a review of my grade because (check one or all that apply):

_____ There was a computational error of my grade that the instructor refuses to correct.

_____ I was graded differently than was published in the syllabus/assignment.

_____ I was graded differently from my peers in the class.

Signature: _____ Date: _____

Attach a letter providing a full explanation as to why you are requesting a review of your grades. Attach all supporting documentation that you wish to be reviewed in support of your request.