Boise State University

Grade Appeal Form

(See <u>University Policy 3130</u> for reference)

Student Name	Student ID
Student Email	Student Phone
Course Number Course Name	Section Semester
Instructor Name	Instructor Email
GRADE APPEAL CONSIDERATION	
Please indicate which of the following criteria	are being used as the basis for the appeal (check all that apply):
The course grade assigned was based completion of course requirements.	on factors other than the student's academic performance in the course and/or
The course grade assigned was based same course section.	on standards different from those that were applied to other students in the
	on a substantial, unreasonable, and unannounced departure from the instructor's (Supporting documentation should include a copy of the course syllabus.)
There was a clerical or administrative	error in the calculation and/or assignment of the course grade.
designed to help all parties understand the desacademic standards of the university for both Step 1: Contact the instructor. The student posting of final grades. The communication Appeal Consideration section above serve as The student's email to the instructor should	must contact the instructor via email within ten (10) business days of the to the instructor must clearly identify which of the four reasons in the Grade the basis for the grade appeal (it is possible that more than one may apply). explain the situation, indicate the student's concerns, and describe what is not resolved to the student's satisfaction or the instructor does not respond by proceed to step two.
days after the attempts at resolution with the The student's grade appeal to the department with the instructor of record, including the days the grade appeal, the remedy sought, and ar respond to the student within ten (10) busing the student chooses to proceed to Step 3, from the department chair/head is required (10) business days after contacting the department.	The student must contact the department chair/head within ten (10) business in instructor of record have failed, or the instructor of record did not respond. In the chair must be in writing and include the efforts taken to resolve the matter attended and manner of attempt to communicate with the instructor, the basis for my additional relevant evidence or documentation. The department chair will the ess days of receiving the grade appeal from the student. The must have the department chair sign their Grade Appeal Form. A signature to proceed to Step 3 unless a student does not receive a response within ten the theorem the student does not receive a response from the the student may proceed without the department chair/head signature to the department chair/head. YES
i mave attempted to resolve the situation wit	in the department chair/flead. YESNO
DEPARTMENT CHAIR/HEAD SIGNATURE (<i>Required</i>)	DATE

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Step 3: Contact the associate dean. The student must contact the associate dean of the college in which the course is taught within ten (10) business days of the department chair/head's decision or after the attempts at resolution with the department chair have failed. A grade appeal will be reviewed by the associate dean only after the student has attempted to reach a resolution with both the instructor and department chair/head. The associate dean may designate an alternative person to handle the process at the college level. The student's grade appeal to the associate dean must be in writing and include the efforts taken to resolve the matter with the department chair including the date and manner of attempt to communicate with the department chair, the basis for the grade appeal, the remedy sought, and any additional relevant information or documentation. The associate dean will review the concern and seek a resolution within ten (10) business days. If the student is not satisfied with the results of the meeting with the associate dean, the student may submit their grade appeal to the Provost's Office. A signature from the associate dean is required to submit a grade appeal to the Provost's Office. I have attempted to resolve the situation with the **associate dean.** YES NO ASSOCIATE DEAN SIGNATURE (Required) DATE STUDENT ACKNOWLEDGEMENT Please indicate your acknowledgement of the following: I have reviewed University Policy 3130-Grade Appeal I have attached a written narrative including a statement of concerns regarding the original course grade, details supporting my position, and a statement of requested solution I have attached all supporting documentation including communications from the instructor, department chair/head, and associated dean of the college in which the course is offered

GRADE APPEAL SUBMITTAL INFORMATON

STUDENT SIGNATURE (Required)

The grade appeal must be received by the Provost's Office within ten (10) working days of the last attempt at resolution through the associate dean.

STUDENT ID

DATE

Submit completed grade appeal form and all supporting documentation to the Provost's Office via email to provost@boisestate.edu.