GRADE APPEAL FORM

(RO–07/24)

Registrar's Office 200 High Street, Glenville, WV 26351 304-462-4117 Fax: 304-462-8619 registrar@glenville.edu

Step 1: Complete and sign top section of form.

Student's Name _____ GSU ID# _____

Permanent Address _____ Phone _____

_____ ☐ Cell ☐ Permanent

I am appealing a grade in: CRN-SUBJ-CRSE _____ Term/Year _____

☐ Final Grade ☐ Assignment ☐ Quiz/Test ☐ Project/Paper ☐ Other: _____

Grade Assigned: _____ Grade I believe I earned: _____

Comments (attach additional sheets as needed): _____

_____

Student Signature: _____ **Date:** _____

Step 2: Submit form to the instructor of the class. Instructor will complete and sign next section.

☐ I spoke to the student via _____ on _____ and we were able to resolve the issue.
(email/phone/in person) date(s)

☐ I spoke to the student via _____ on _____ and we were not able to resolve this issue.
(email/phone/in person) date(s)

Instructor's Signature: _____ **Date:** _____

Comments (attach additional sheets as needed): _____

_____

If there is no resolution and the student requests to continue with the appeal, this form must be submitted to the Registrar's Office within 5 workdays. The Appeal will then be reviewed by the Academic Appeals Committee. If there was a resolution and a grade change is warranted, the instructor must submit a Grade Change Request form along with this form to the Registrar's Office.

Academic Appeals Committee Recommendation: (if applicable) _____

_____

☐ Agree ☐ Disagree

Provost: _____ **Date:** _____

Comments: _____

_____