



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** \_\_\_\_\_