
The original grade is fair and accurate.

Appeal is granted. Recommended grade change is from _____ to _____.

Instructor Signature: _____

Date of Response: _____

Concur with the findings of the instructor.

Appeal is granted. Recommended grade change is from _____ to _____.

Division Chair/Program Director Signature: _____

Date of Response: _____

Decision sustained (Instructor's grade is correct)

Appeal is granted. Recommended grade change is from _____ to _____.

Dean Signature: _____

Date of Response: _____