

FINAL GRADE APPEAL FORM

The purpose of this form is for students to submit a formal appeal of their final grade(s).

Students have the right to appeal the final grade assigned for a course or program. The student must verify the grade with the course instructor to ensure that no error has been made. All reasonable steps possible should be taken by the student to resolve a grade dispute with the instructor before pursuing the formal appeal process.

After attempting to resolve the dispute with the instructor, and within **10 business days** of the final exam date, the student wishing to appeal a final grade must fill out this form. Late appeals will not be accepted.

- ✓ **This form MUST be submitted at the applicable campus where the course was taken (ex: Course was in Burnaby, submit the form to Burnaby Campus). Forms submitted to the wrong campus will not be processed.**
- ✓ Appeals based solely on personal reasons (need to pass the class, tuition, etc.) will not be accepted.
- ✓ The student submits the Final Grade Appeal form(s), together with a receipt for the fee of \$50.00 (paid at the Bookstore) to the Reception Desk. The Appeal form is then processed and another Instructor is asked to remark the assignment in question (a copy, with all previous markings removed).
- ✓ The higher grade (be it the remarked or original grade) is the grade that stands for the assignment, and is therefore used in recalculating the student's overall grade for the class. Note that this may result in no change to the final grade for the student's course.

| | |
|--------------|------------|
| Student Name | Student ID |
| Address | City |
| Phone Number | Email |

- ✓ **Attach receipt of \$50.00 fee (payable at the Bookstore).**
- ✓ **Attach supporting evidence, if applicable. Submit this form, receipt, and supporting evidence to the Reception Desk.**
- ✓ **We evaluate your appeal on the basis of the argument and evidence provided here ONLY. No further information will be accepted after a decision has been made.**

| Course Name and Section | Final Grade % | Final Letter Grade | Course Instructor |
|--------------------------|----------------------|--------------------|-------------------|
| | | | |
| Grade of Assignment/Exam | Assignment Name/Exam | | |
| | | | |

Why do you wish to appeal the grade of your assignment/exam?

Note: General requests for re-marking will not be considered. If you believe an error was made in marking, you must identify the error on the assignment/exam here (providing page # and question #).

I understand that a final decision will be made based on the information and supporting evidence that I provide with this form. I understand that I cannot come back later with more information or a different reason for appeal.

Student Signature

Date



OFFICE USE ONLY *(Please do not write in this area)*

Student Attendance and/or Academic Record

Comment from Instructor

Comment from Director

Committee Decision

ACTION

Updated in Database *(yes/no)*

Updated in Course Archives *(yes/no)*

Student Notified *(yes/no)*

Name *(please print)*

Signature

Date Signed