Grade Appeal Form

This form should be used after a student has informally attempted to resolve a grading issue with the instructor. Students should follow the Academic Grade Appeal Policy and Procedure. The Academic Grade Appeal Policy and Procedure can be found at: http://anokatech.edu/en/AboutATC/PoliciesProcedures.aspx.

For assistance: Counselor (Student Success Center, Suite 190) 763-576-4036 or Enrollment Services (Room 117) 763-576-7710

Name: ____________________________ Student ID: ____________________________

Email Address: ____________________________ Phone #: ____________________________

Address: __________________________________________ Course/Section: ____________________________

City: __________________________________________ Term and Year: ____________________________

State____________________ Zip Code ____________ Grade Received: ____________________________ Grade Requested: ____________________________

Instructor Name: ____________________________

Appeals are only considered when they meet one or more of the following reasons. Please check which of the following reasons are being used as the basis of your appeal:

☐ Instructor made an error in calculating or recording a grade.

☐ Instructor’s grading procedure was inconsistent with course outline, syllabus or Anoka Technical College policies.

☐ Instructor demonstrated bias in grading.

☐ Other _______________________________________________________________________________________

State the reasons that justify the requested change of grade. Attach separate page if necessary.

Attach any supporting documentation, for example:

- Explanation of what happened and how reasons above apply to the situation
- Any related communication from the instructor
- Course syllabus and/or course outline
- Timeline of events related to the appeal
- Assignments or exams related to the appeal (if applicable)
- Any other documentation supporting the appeal

I declare that the information on this form and all supporting documentation is true, correct, and complete to the best of my knowledge and belief. I also understand that purposeful misrepresentation of my situation constitutes academic dishonesty and may make me subject to disciplinary action.

Student Signature: ____________________________ Date: ____________________________

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Submit this form to Academic Affairs that will forward it to Office of Records and Registration 763-576-7740