LAKEVIEW COLLEGE OF NURSING

FORMAL GRADE APPEAL FORM

The Grade Appeal Policy can be found in the Student Handbook. The Student Handbook is online at www.lakeviewcol.edu under the Student Tab then under the Catalog/Handbook link.

Consistent with the College’s mission, course instructors have both the right and responsibility to render constructive and critical judgment regarding the quality of the academic work performed by students according to the grading criteria stated in the respective course syllabus. The College will not review the judgment of a faculty member in assessing the quality of students’ work.

Student Section: Within three (3) calendar days from the informal conference, the student may submit the formal grade appeal to the instructor. (complete pages 1 and 2)  Note: If the student does not meet any of the steps by the set time frames the grade appeal is void.

<table>
<thead>
<tr>
<th>Name:</th>
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<tbody>
<tr>
<td>Student E-mail Address:</td>
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<tr>
<td>Date:</td>
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<tr>
<td>Course Name and Number:</td>
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<tr>
<td>Instructor:</td>
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<tr>
<td>Instructor Assigned Grade:</td>
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<tr>
<td>Grade as Determined by Student:</td>
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<tr>
<td>Date of Student-Instructor Informal Conference:</td>
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Grounds for Grade appeal: (Check all that apply.)

- An error in the calculation of the grade or clerical error in the recording of the grade that remains uncorrected.
- The assignment of a grade to a particular student by applying more requirements than were applied to other students in the course;
- The assignment of a grade to a particular student on some basis other than performance in the course or clinical;

Student Signature __________________________ Date ________________

Students will not be subject to adverse action as a result of a Grade Appeal. Retaliation against any student due to any involvement in the filing or investigation of a Grade Appeal is expressly prohibited.
Written verification to support the grounds for your appeal is critical to promote a thorough review. Explain in detail the grounds for your appeal. Submit any relevant supporting materials.

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Submit the entire form and supporting materials to the Instructor.
Instructor’s Section: Within five (5) calendar days from the date of receiving student’s grade appeal, the instructor will make their final decision and forward to the student.

Explain in detail the grading procedure and how the grade in question was determined. Address any other issues raised in the student’s statement.

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Instructor’s Signature ______________________________ Date ________________

Once the instructor has made a final decision about the grade appeal, the student has the right to appeal to the Review Committee – Faculty Organization. If the student plans to appeal the instructor’s final decision, the student must sign below and send all materials to the Faculty Organization Chair within three (3) calendar days of the instructor’s final decision.

By signing below, I am appealing to the instructor’s final decision of my Formal Grade Appeal.

__________________________________________________________________________________________
Student Signature ______________________________ Date ________________
Review Committee Section:

☐ The student and the instructor met for an informal conference on_______________________.

☐ The grounds are supported and the grade posted will be changed from ______ to ________.

☐ The grounds for the grade appeal are not supported, and the grade will remain as posted.

Written summary of the meeting.
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Within three (3) calendar days, the Committee Chair will notify the student and the instructor in writing of the Committee’s decision

Faculty Organization Chair’s Signature  Date

Student: The student may appeal the committee’s decision to the Dean of Nursing within three (3) calendar days.

By signing below, I am appealing to the Review Committee’s decision of my Formal Grade Appeal.

Student Signature  Date

Final Level of Review - Dean of Nursing Section:

☐ The decision of the Review Committee is supported and the grade posted will be changed from ________ to ________. 

☐ The decision of the Review Committee is not supported, and the grade will remain as posted.

Notes from the Dean of Nursing.
________________________________________________________________________________________
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Dean of Nursing’s Signature  Date