



## Formal Student Grade Appeal

Before a student files a formal appeal for a grade they received, he or she should attempt to resolve the issue informally with the instructor at the lowest level. If a resolution is reached, the faculty member will need to submit a [Grade Change Form](#) to the Admissions/Registrar's Office as soon as possible. All other Academic Appeals that include Academic Dishonesty shall proceed to the Academic Misconduct Appeal's Process.

### STUDENT INFORMATION

CBC Location (Please Check One): \_\_\_\_\_ Alice \_\_\_\_\_ Beeville \_\_\_\_\_ Kingsville \_\_\_\_\_ Pleasanton

Student Name: \_\_\_\_\_ CBC ID# \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

### COURSE INFORMATION

Course Number: \_\_\_\_\_ Semester Taken \_\_\_\_\_  
(ENGL 1301, PSYC 2301, ETC.)

Course Title: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

I am appealing this grade/decision because I believe that it is: (Please select all that apply.)

Erroneous. (Based on clerical error.)

Based on capricious or prejudicial evaluation of my work. (Sudden unpredictable changes in attitude or behavior.) (Detrimental or Damaging)

Based on inconsistent or inequitably applied standards for evaluation. (Unjust, Unfair)

**For all appeals, please attach the following:**

1. A copy of the grade report (for academic appeals) or notification of the decision being appealed.
2. A written statement clearly presenting the basis of the appeal.
3. Attach supporting documentation (graded exams, course syllabus, assignments) that are relevant to this appeal.

**Reminder: Keep a copy of this form and all supporting documents for your record.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**DEPARTMENT CHAIR SECTION:**

Date of Chair Conference with Student: \_\_\_\_\_

Date of Chair Conference with Instructor: \_\_\_\_\_

Instructor's Response to Grievance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Attach additional sheet if more space is needed.)

**ACTION BY DEPARTMENT CHAIR**

Grievance (Check one): \_\_\_\_\_ Resolved \_\_\_\_\_ Unresolved

Department Chair Signature \_\_\_\_\_ Date: \_\_\_\_\_

**STUDENT: I ACCEPT/REJECT (circle) the decision of the chairperson.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTOR: I ACCEPT/REJECT (circle) the decision of the chairperson.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**ACTION BY THE DEAN:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Decision: \_\_\_\_\_

**Grade Appeal Procedure**

1. Students who believe that they have been treated unfairly by their instructor should schedule an informal meeting with them in an attempt to resolve the matter at the lowest level.
2. After a meeting has been held with the instructor and the student believes that the matter is unresolved, the student should file a "**Formal Student Grade Appeal**" with the Department Chair within fifteen (15) business days of when the grievance was based. The student and the instructor will retain copies of the filed form.
3. The Department Chair will hear the grievance from the student within ten (10) business days after receipt of the written complaint.
4. If the student did not receive the relief requested or if the time for a response has expired, the student may request a conference with the appropriate Dean of the Division to appeal the decision. This would be the Dean of Workforce or Dean of Academics.
5. The appeal notice must be filed in writing, on a form provided by the District, within ten (10) business days of the date of written response or, if no response was received, within ten (10) business days of the deadline to the appropriate Dean. The Department Chair will forward a complete record of the grievance for the appeal.
6. The Dean shall hold a conference within ten (10) business days after the appeal notice is filed.
7. The Dean shall provide the student a written response within ten (10) business days following the conference. The written response shall set forth the basis of the decision.

*Refer to FLD (LOCAL).*