


Nashville State
Community College
Student Grade Appeal Form

Name _____	Student ID: _____
Address: _____ City/State: _____ Zip Code: _____	
Telephone Numbers: (Home) _____ (Work) _____ (Cell) _____	
Email Address: _____	
Course Title, Number, Section, and CRN: _____ Semester and Year: _____	

Reason for Appeal: (Check all that apply)

- Instructor has not used criteria stated in the course syllabus (course syllabus must be attached).**
- Instructor has applied criteria inequitably (include specific example(s) of how instructor treated students differently or was unfair in grading).**
- Instructor has made errors in the calculation or recording of grade.**

Explanation for Grade Appeal

Explain your reason for appealing your grade and be as specific as possible. Attach any supporting documentation. The following are examples of supporting documentation: copy of course syllabus, emails to and from the instructor, and graded assignments. **(Attach additional pages if more space is needed.)**

Check one of the following:

- I have communicated with my instructor about this grade but have not been able to resolve this issue.**
- I have not communicated with my instructor because _____**

Student Signature: _____ Date: ____/____/____

**Grade Appeal Comments
And Signatures**

Student Name _____
Student ID _____ Semester _____
Course _____

Instructor Response

- The original grade is fair and accurate.
- An error may have occurred, and I recommend a change from _____ to _____.
I will submit a Change of Grade Form to the Records Office.

Comments: (Attach additional pages as needed) _____

Instructor Signature: _____ Date of Response: ____/____/____

Division Dean/ Director Response I have reviewed this appeal and have made the following determination:

- I concur with the findings of the instructor.
- I disagree with the findings of the instructor and recommend a grade change from _____ to _____.
I will submit a Change of Grade Form to the Records Office.

Comments: (Attach additional pages as needed) _____

Division Dean/Director Signature: _____ Date of Response: ____/____/____

Vice President for Academic Affairs I have reviewed this appeal and have made the following determination:

- Decision Sustained. (Grade issued is correct)
- Decision Overturned.
- This issue is not appealable.
- Convene Grade Appeal Committee

For Office Use Only
Date Submitted To VPAA:
____/____/____

Comment: _____

Vice President for Academic Affairs Signature: _____ Date of Response: ____/____/____