## GRADE GRIEVANCE APPLICATION

## This form should be used only when ALL of the following criteria apply:

- The student believes that the instructor in question *made an error in computing the final* course grade or misapplied course evaluation standards as outlined in the course syllabus
- The student contacted the instructor within the first two weeks of the semester following the assignment of the final course grade, and
- The student did not hear from the instructor within 5 business days after attempted contact with the instructor or did hear from the instructor but is not satisfied that a resolution has been reached.

A grade grievance may not be based <u>solely</u> on a claim of faulty course design, a complaint against the instructor, or grading policies (e.g., a student may not complain that class standards are too high, reading is too heavy, the grade curve is too low, and so forth). Please refer to Procedure 5-09 (0)7,8 for complete details.

## Directions to the student:

**Step 1:** It is the responsibility of any student wishing to pursue a grade grievance to first discuss the matter privately with the course instructor. Most misunderstandings related to final course grades can be resolved at this level. This discussion must take place no later than the <u>end of the second week of the semester following the assignment of the grade.</u> The instructor will notify you of his or her decision in writing within 5 business days. If your instructor is unavailable or not teaching at CSCC, discuss the disputed grade with the lead instructor or program coordinator of the disputed course. Maintain a record of all correspondence with the instructor/course lead instructor/program coordinator.

**Step 2:** If a satisfactory resolution is not reached with your instructor, or your instructor does not respond within 5 business days of your attempted contact, complete ALL sections of the form on the reverse side of this page in blue or black ink and submit it to the department chairperson. This must be done within 7 calendar days of notification of the decision, or non response, by the instructor. Attach a written statement that clearly explains the error made in the computation of your final course grade or how the evaluation standards as outlined in the course syllabus were misapplied. Attach all exams, research papers, graded assignments, and communications with the instructor to be considered in support of your claim.

**Step 3:** The department chairperson shall meet privately with the faculty member to discuss the situation and attempt to resolve the conflict. The department chairperson will notify you and your instructor of the decision in writing of the decision within 4 business days of receipt of the form and documentation and discussion with the instructor. At that time, the department chairperson will inform you of your option to appeal the decision to the college Grade Grievance Committee.

**Step 4:** If you choose to appeal, the department chairperson will forward the Grade Grievance form and supporting documents to the college Grade Grievance Committee for a possible hearing.

**Step 5**: The co-chairpersons of the college Grade Grievance Committee will review the documentation and determine whether or not the grievance warrants a formal hearing panel and communicate their decision to you, the instructor, and the department chairperson.

To be filled out by the student: (please print)	Date:
Student:	Cougar ID Number:
Address:	
Street	City Zip Code
Phone Numbers: (h)	(c)
CSCC Email Address:	
Course and Section Number and Title:(Example: MATH 1000 002 Calculations and Dosages)	
Instructor:	_
Discussion with the above course instructor on this issue occurred on this date:	
*Request a change of grade from to	
When submitting this form, you <u>must</u> attach a written statement that clearly explains why you believe your grade should be changed.	
Submit this form along with the following materials:  (1) A written statement that clearly explains why the grade should be changed  (2) All exams, research papers, and/or graded assignments to be considered at the grievance hearing  (3) All documented communication with the instructor (e-mails, letters, etc. which clearly show the student's attempt to contact the instructor and the instructor's response/non-response)	
Application will be returned to you if complete documentation is not provided. This <u>will not</u> extend the timeline.	
BY SIGNING THIS APPLICATION FORM below I acknowledge that I have already discussed the disputed grade with my instructor. I further understand that the decision of the hearing panel is final and may not be appealed.	
Signature: Date:	
OFFICIAL USE ONLY:	
To be filled out by the department chairperson:	
The student has conferred with me about the above grade: Yes No	
Date: Signature:	