Hennepin Technical College℠

# GRADE APPEAL FORM

This form is to be completed and submitted to the division dean only if there is no resolution after meeting and discussing the concerns with the faculty member.

Student Tech ID: _____ Date: _____

Student Name: _____
*Last Name* *First Name* *Middle Name*

Day Phone: _____ Evening Phone: _____ Email: _____

Program Major: _____ Course/Section: _____ Term: _____

Instructor Name: _____ Grade Issued: _____

***STATEMENT OF CONCERN:*** _____

_____

_____

Description of attempts to resolve the matter directly with the faculty member: _____

_____

_____

Relevant information and documentation in support of the appeal and the remedy sought. List and attach documentation (syllabus, course materials, emails, etc.): _____

_____

_____

Proposed resolution as discussed with the faculty member: _____

_____

_____

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

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***DEAN'S ACTION:*** ☐ Approved ☐ Denied ☐ Returned to Faculty
Supporting comments and/or conditions of decision:

Dean's Signature: _____ Date: _____ Faculty Signature: _____ Date: _____

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☐ I wish to appeal to the Vice President of Academic and Student Affairs.

Student Signature: _____ Date: _____

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***VICE PRESIDENT OF ACADEMIC AND STUDENT AFFAIRS ACTION:*** ☐ Approved ☐ Denied
Supporting comments and/or conditions of decision:

Vice President of Academic and Student Affairs' Signature: _____ Date: _____

Dean's Signature: _____ Date: _____ Faculty Signature: _____ Date: _____

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