**GRADE APPEAL REQUEST FORM**

The Department of Philosophy falls under Faculty of Arts rules for reappraisal of papers, examinations and term marks. The following are grounds for appeal:

1. Errors in calculation

2. Procedural errors

3. Failure to consider all relevant factors

4. Bias or discrimination

The following are *not* grounds for appeal:

5. Disliking the instructor’s marking scheme

6. Coming close to the instructor’s cut-off point for a higher grade

7. Disagreeing with the instructor’s judgement about the quality of submitted work

According to current Department policy, if an appeal of the mark on a particular disputed assignment is made on one of the allowed grounds, the following will be done: The work will be reread by another staff member with knowledge of the area who does not know the original mark, and a new mark will be assigned. If there is a large discrepancy between the marks, the Chair will assign the revised mark. Please note that your mark after the reread may be less than the original mark and in that case be changed to the lower mark in the official record.

Problems not resolved at the Department level should be referred to the Associate Dean (Academic programs and Undergraduate Students).

**To be filled in by Student:**

Course Number and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester: \_\_\_\_\_\_\_\_\_\_

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

Mark you are appealing \_\_\_\_\_\_\_(F-A) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(paper, exam, assignment)

On which grounds 1-4 above are you appealing this mark? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain the circumstances (use the back of this page or attached another sheet). Submit this form along with an ungraded copy of the assignment to the Chair of the department. You may make an appointment to see the Chair about your case after submission of this form.

I have read this sheet and understand these procedures.

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

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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To be filled in by the Department (OVER)

Paper sent to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Results \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Notified on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_