

Office of the Registrar

 F 780.492.7172
 W uab.ca/ask

Reappraisals are coordinated by the Team Lead of the programming unit in consultation with members of the staff. An application to apply for a reappraisal must be made in writing to the programming unit of the course. The student must apply within ten (10) days of the date* the grade is posted. *Refer to Student Service Centre for dates.

For more information, refer to the Online and Continuing Education Extension Grade Appeal and Reappraisal Procedures.

Instructions: Submit completed form along with the written request to the Team Lead
 (documentation received, Date: _____)

FOR OFFICE USE ONLY

| | |
|----|---------|
| ID | Program |
|----|---------|

Personal Information

| | | |
|------------------------|---|-----------------|
| Legal First Name | Legal Middle Name | Legal Last Name |
| Date of Birth MM/DD/YY | Phone <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home | Email Address |
| Mailing Address | City/Town | Province |
| | | Postal Code |

Course Information

Enter class information below:

| Class Number (optional) | Subject Code | Course Number | Section | Course Title | Instructor |
|-------------------------|--------------|---------------|---------|--------------|------------|
| | | | | | |

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|---|------------------------------|-----------------------------|
| I have met with the instructor to Team Lead regarding the final examination, or equivalent, and am unable to resolve the issue(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I have attached a letter indicating my reasons for requesting a reappraisal. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I am aware that the mark given on the reappraisal of the examination will replace the original mark. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I understand that the reappraisal process applies only to final exams (or equivalent). | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I understand that the result of this reappraisal is final and cannot be appealed. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Payment Information

The Reappraisal fee will be paid by:

 MONEY ORDER CHEQUE

Make cheques or money orders payable to the University of Alberta.

 INVOICE • If employer is to be invoiced, please include a Letter of Authorization (LOA) on company letterhead, or an authorized Purchase Order (PO) signed by signing authority (not student).

 U of A Staff: INDENT

A Request for Reappraisal of Final Exam (or Equivalent) can be submitted by mail, electronically through the form submission page at uab.ca/ask or dropped off in person at the Student Service Centre. The Student Service Centre is open from 8:15 a.m. to 4:15 p.m. Monday to Friday, and 10 a.m. to 4:15 p.m. on Wednesday. We will contact you to coordinate payment.

Please note: Your request for reappraisal will not be finalized until payment has been received.

| | |
|-----------------|-----------|
| OFFICE USE ONLY | RECEIPT # |
|-----------------|-----------|

| | |
|---------------------|--------------------|
| STUDENT'S SIGNATURE | Date MM DD YYYY |
|---------------------|--------------------|

Protection of Privacy – The personal information requested on this form is collected under the authority of section 33(c) of the *Alberta Freedom of Information and Protection of Privacy Act* for the purpose of processing student requests by the University of Alberta. For information about the collection and use of this information contact the Office of the Registrar at uab.ca/ask. Certain personal information may be made available to federal and provincial government departments and agencies under appropriate legislative authority.

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| Student Name (Legal First and Last Name) | FOR OFFICE USE ONLY | |
|--|--|--------|
| | ID | Course |
| The result of the reappraisal is: | <input type="checkbox"/> No change in final grade <input type="checkbox"/> Change of final grade: _____ | |
| The Student was notified on: | Date: | |
| SSC was notified on: | Date: | |

Signature: _____ Date Completed: _____

Additional Notes:
