EACPHS Grade & Dismissal Appeal Form

Student Name		Access ID
Program	Course_	
Instructor	Date of Grade Entry	
Grade Received	Type of Appeal: Grade	Dismissal Combined
OF THE CRITERIA LISTED BEL	-	w. PLEASE SELECT ONE OR MORE od on one of the three criteria will e merits.
evaluation of student course requirements	work by criteria not directly ref	lective of performance relative to
university's non-discrimination	gion, age, sexual orientation, fa	g process, as listed in the ace, color, sex (including gender milial status, marital status, height,
sexual harassment or	discrimination	
following: 1. Explanation of how your a	nd circumstances pertaining to .	he three criteria identified above;
circumstances pertaining to	this appeal. I understand that if d to the dismissal of this appeal	omplete statement of the facts and fany of the information that I have and further sanctions according to

Date

Student Signature

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Grade Appeal/Dismissal		
Date Received:		
Department Chair:	☐ Decline, criteria not met ☐ Submit to committee for review ☐ Accept appeal ☐ Letter to student submitted Date of letter:	
Associate Dean:	☐ Decline ☐ Accept ☐ Letter to student submitted Date of letter:	