

FINAL GRADE APPEAL FORM

Normally, grade appeals should be resolved between the student and the course instructor. In the event that the appeal is unresolved, the student must submit a completed **FINAL GRADE APPEAL FORM** along with proof of payment of the **\$100.00** final grade appeal fee (subject to change) to the Head of the Academic Unit responsible for the course, **within one regular semester of the posting of the final grade**.

Name of Student:	ID #:
Please Print	
Status (check one): [] Freshman [] Sophom	ore [] Junior [] Senior
UB E-mail Address:	
Home Phone: Cell Phone:	
Course Title:	
Course Abbreviation/Number:	Course Section:
Number of Credits: Semester/Session Course T	aken: Year Taken:
Course Fulfills (check one): [] Major Area [] I	Minor Area [] General Education [] Elective
Senate or course syllabus distributed at the beginning [] Standards/criteria used to determine final grade incor [] Final grade based on factors other than academic perf	sistent with those applied to other students in the course.
FOR OFFICIA	AL USE ONLY
Receipt of Grade Appeal Fee: [] Yes / [] No Date App	peal Received:
[] Original Grade To Be Upheld [] Original Grade To Be	: Changed From: To:
Reason:	
Name/Signature, Course Instructor	Date
Name/Signature, Academic Unit Head	Date
Name/Signature, Academic Dean	