

Grade Grievance Form

If not an IAFF course, please contact the relevant department.

Ι,	, dispute the gra	iding of		by
(name of student)		(student's wo	rk product/s)	
	that occurred during t	he	_ semester of	
(name of instructor)		(fall, spring, summer)		
in(CRN)	, IAFF (course number)	(course title)	·	
request that the grade of _	be changed to (current grade)	·		
Step One: Instructor Review	N			
	the instructor for review. If agr	· •	•	
of the <i>Resolution of Grade</i> (is reached, please proceed)	Grievance Form and submit to E to step two.	ESIA Academic Prograi	ms, esiaapss@gwu	J.edu. If no resolution
Step Two: Program Directo	r Review			
reached, please complete the	d required documentation to the he appropriate portions of the ass@gwu.edu. If no resolution i	Resolution of Grade G	irievance Form and	d submit to ESIA
Required Documentation				
Course Syllabus				
Assignments or wor	rk products involved in the disp	oute (if applicable)		
Statement of Stude	nt Grade Grievance			
Instructor Response	es to state of student grade grie	evance		
Any other relevant	documentation (if applicable)			
Step Three: Dean's Office R	Review			
Please submit this form and grade grievance.	d required documentation to th	e Dean's Office to req	Juest a committee	review to resolve the
Student Name				
Student Signature		Date		



Name of Student filing Grade Grievance:	
Course Instructor:	-
Semester/year:	
Course Information:, IAFF(CRN) (cour	se number) (course title)
Date Grade Grievance was received:	
After due consideration of the Grade Griev	ance, it is decided that we:
Accept the agreement reached of this grade grievance.	d between the Student and the Instructor as final resolution
Accept the Student's grade gri Program Director.	evance in the absence of the Instructor's concurrence, by approval of th
Accept the Student's grade gri	evance in the absence of the Instructor's and/or Program Director's ne Dean.
Reject the Student's grade grie	evance on the following basis:
	——————————————————————————————————————
Grade Grievance Review Committee Signat	tures (if applicable):
	Faculty Member(s)
	Dean
Additional Comments:	
Chadad Circular	
Student Signature	Date
Instructor/Program Director Signature	Date
Dean Signature	 Date