



# GRADE APPEAL FORM

DIN: RUW-OR/FE-T-008  
RN: 00  
ED: 20/05/2012

Student's name: \_\_\_\_\_ I.D. No.: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Academic year: \_\_\_\_\_ / \_\_\_\_\_ Semester:  1ST  2ND  SUMMER

State the course whose grade you are appealing:

	Course code	Section	Course title	Instructor's Name
E.g.	B U S 4 0 5	0 1	Commercial Bank Management	Prof. J. Smith

Argumentation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Enclosed (if any)
1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_

Student: \_\_\_\_\_ / \_\_\_\_ / 20  
Name (print) Signature Date (DD/MM/YYYY)

<b>Finance Officer:</b>	Receipt No. _____	_____	_____/____/20
	Name (print)	Signature	Date (DD/MM/YYYY)
<b>Decision:</b>	<input type="checkbox"/> GRADE <u>CHANGED</u>	<input type="checkbox"/> <u>NO</u> GRADE CHANGE	
<b>Dean/Director:</b>	_____	_____	_____/____/20
	Name (print)	Signature	Date (DD/MM/YYYY)
<b>Registrar:</b>	_____	_____	_____/____/20
	Name (print)	Signature	Date (DD/MM/YYYY)

CC: Student's Record  
Grade Appeal File