



INFORMAL STUDENT GRADE APPEAL – EXHIBIT E
Program Lead, Program Director, Division Administrator or Designee Response

Student Name: _____ Course/Section: _____

Instructor Name: _____ Semester/Year: _____ Grade Received: _____

1. Date(s) of and Participants for previous Informal Resolution meeting(s), if any:

2. Parties in Attendance at departmental level meetings: DATE

3. Summary of Outcome and Decision:

4. Rationale:

5. Comments:

Signature (Program Lead, Program Director, Division Administrator, or Designee) Date

Copy:
Student File
Instructor
Director of Student Wellness