General Grade Appeal Process (AMSC Catalog)

If a student believes that he or she has been assigned a grade in error, the student has the right to appeal the grade. The appeal’s process must be initiated within one semester (fall, spring, summer) immediately following the semester in which the grade was assigned. Students must take the following steps:

**Step 1.** Within the first semester immediately following the assignment of a final grade, the student who wishes to appeal the grade must meet with the instructor. At this meeting, the student and instructor must make every effort to resolve the disagreement and arrive at a mutual consensus. **Note:** If the instructor is not on campus, the appropriate Division Dean will contact the instructor.

**Step 2.** If, after Step 1, a student wishes to further pursue a change of grade, the student must make a written appeal to the appropriate Division Dean within twenty working days of the meeting with the instructor. Supporting documentation should be attached.

**Step 3.** The Dean may meet with the student and instructor individually or jointly to review the student's appeal and to review any materials needed to form an objective decision and discuss options for resolution.

**Step 4.** The Dean will make a decision and submit that decision in writing to the faculty member and student within ten (10) working days.

**Step 5.** If the student wishes to further appeal the decision of the Division Dean, he or she may seek redress from the Vice President for Academic Affairs (VPAA). The VPAA will review the student’s original written appeal, supporting documentation and the decision by the Division Dean before rendering a decision.

**Step 6.** The Vice President for Academic Affairs will provide a written decision to the student within ten (10) days.

**Step 7.** If, after Step 6, the student still wishes to appeal his or her grade, the student has ten (10) working days in which to make a written appeal to the President. The judgment of the President will be considered the final and binding decision on the matter.

Please complete the form on the next page and return to the Division Office that you are filing the complaint.
Concern/Complaint Form
Atlanta Metropolitan State College

Date of Report: ________________________

(Month) (Day) (Year) Time of Report

Name: __________________________________________

First Middle Last

Address: _______________________________________

City State Zip Code

Telephone Number: (____)________________________ AMSC Email Address: ___________________________

Your Classification: (Please Check)

Student: _____ Faculty: _____ Non-Teaching Staff: _____ Administrator: _____ Visitor: ______

AMSC ID Number: 932________________________ Your Signature: ________________________________

1. [a] Name of person: ________________________________
   [b] Classification of Person (Circle one) Student / Faculty / Non-Teaching Staff / Administrator / Visitor
   [c] Name of Course: ________________________________
   [d] Location of Incident: ______________________________
   [e] Explain the nature of your concern or complaint. Provide as much detail as possible (including date and time of incident, and place where incident occurred). Attach additional information or any supporting documentation (such as exams, assignments, course syllabus, etc.)

2. What resolution or remedy are you seeking?

This section is reserved for Division Dean’s and Department Head routing information and comments.
To investigate and recommend resolution, this matter has been assigned to: Department Head: __________________________

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