

**LACKAWANNA COLLEGE FORMAL GRADE APPEAL FORM**

**PART I.**

To: \_\_\_\_\_  
Name of Instructor                      Division                      Campus

From: \_\_\_\_\_  
Student Name                              Student ID #

\_\_\_\_\_  
Course Name/Prefix/No.                      Year/Term

Reason for above request

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STUDENTS MUST ATTACH ALL RELEVANT DOCUMENTATION, AND  
RETAIN THEIR OWN PHOTOCOPIES OF ALL DOCUMENTATION  
SUBMITTED.**

*I have read the "Formal Grade Appeal Policy" contained in the Lackawanna College Student Handbook and explained on the procedures sheet. I understand my rights and responsibilities.*

\_\_\_\_\_ Student Signature    Date \_\_\_\_\_

*I further understand that it is my responsibility to initiate this Grade Appeal process and have done so by completing **Part I** of this form and attached all relevant documentation.*

**Submit the completed form to the appropriate Division Chair or Program Director.**

