NEW YORK CITY COLLEGE OF TECHNOLOGY

Office of the Registrar
300 Jay Street, Brooklyn, NY 11201
Telephone (718) 260-5800

GRADE APPEAL FORM

Please upload the completed form via the Registrar Portal

College policy states that students who believe they are entitled to have a final grade changed must initiate their appeal within one year from the date the course began. Students initiate an appeal by completing this form and submitting it to the Office of the Registrar. Students must continue to attempt to resolve the matter with the instructor, if available, or the department chair.

Date: _____ Term: _____ Academic Plan: Please Choose One From Drop Down List

Last Name: _____ First Name: _____

Address: _____

Telephone No.: _____ Email: _____

I wish to appeal the grade received in the following:

Course: _____ Class Number: _____

Term: _____ Grade Received: _____

For the following reasons (Please attach all supporting documentation):

_____

_____

_____

_____
EMPLID

_____ _____
PRINT NAME SIGNATURE

In the absence of a written signature: providing your campus email when uploading the completed form to Registrar Portal will suffice.

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GRADE APPEAL INSTRUCTIONS

A student who wished to appeal a final grade must initiate the request by submitting this form to the Office of the Registrar within six months from the first day of the semester following the one in which the grade was recorded. **Appeals may not be initiated after this time period.** For the spring semester and the summer session(s), the six-month period begins on the first day of the fall semester. The student must make an **initial** effort to resolve the matter with the course instructor, **BEFORE** filing this appeal form. If the issue cannot be resolved with the instructor, the student should file this official grade appeal.

The student shall then make an appointment with the chairperson/program coordinator within maximum of (3) weeks of speaking with the instructor. The chairperson/program coordinator will consult with the instructor to discuss the grade within (1) week. The chairperson/coordinator does not have the authority to change the grade.

If the issue is not resolved with the chairperson/coordinator, then the student has the **right** within three weeks of meeting with the chairperson/coordinator, to appeal to the departmental committee elected to resolve the matter. Both the student and instructor must provide all supporting documentation and may be asked to appear before the committee. Once the committee is convened, a decision must be made within a maximum of three weeks. If the committee unanimously recommends that a grade change is in order, then that decision n is binding. If not unanimous, then the original final grade remains unchanged.

Submitting the completed form to the Office of the Registrar is only the FIRST STEP. It is the responsibility of the student to see the department chairperson/program coordinator within the time limits for appealing grades.

FOR OFFICE USE ONLY:

A. Departmental Outcome:

_____

_____

_____ _____

Department Authorization — Date

PLEASE PRINT or STAMP NAME WITH SIGNATURE

B. Committee Decision: ☐ UNANIMOUS GRADE CHANGE ☐ UNANIMOUS GRADE STANDS **FROM:** ☐ **TO:** ☐

_____ _____

Committee Representative — Date

PLEASE PRINT or STAMP NAME WITH SIGNATURE

C. Office of Registrar

_____ _____

Registrar Signature & Stamp — Date