

**INSTRUCTIONS**

1. Provide a copy of the Chair Review Meeting Summary to the student and to the faculty member. The student and faculty member should sign Part A of this Form 2 (below) to acknowledge receipt of the Chair Review Meeting Summary. (The student and faculty member need not sign at the same time.)
2. After the student signs Part A of this form, provide a copy of the signed form to the student.

**Eastern Illinois University  
Grade Appeal Policy**

**FORM 2**

**Receipt of the Summary of the Chair Review Meeting and  
Student's Request for Review by the University Grade Appeal Committee**

**Part A. Receipt of Chair Review Meeting Summary**

I hereby acknowledge receipt of the Chair Review Meeting Summary.

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

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date of Signature

**TO THE STUDENT:** You may request review by the University Grade Appeal Committee only by completing and signing Part B. Request for Review by the University Grade Appeal Committee (below) and submitting it to the dean of the appropriate college or school. Appeals for undergraduate students are submitted to the dean of the college in which the course was offered. Appeals for graduate students are submitted to the Dean of the Graduate School. Appeals for courses offered through the IDS (B.A in Interdisciplinary Studies) program in General Studies program are submitted to the Dean of the School of Continuing Education. You must submit the signed copy of Part B. to the proper dean ***within five (5) working days of the date that you signed Part A.***

If you do not sign and return Part B. within five working days, the grade appeal process automatically terminates.

**Part B. Student's Request for Review by the University Grade Appeal Committee**

\_\_\_\_\_ I hereby request that the University Grade Appeal Committee review my Grade Appeal.

The Chair Review Meeting has not satisfactorily resolved my Grade Appeal Request. I understand that my signature below authorizes the dean to refer my Grade Appeal Request, support materials, and the Chair Review Meeting Summary to the University Grade Appeal Committee.

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

\_\_\_\_\_  
Date of Student's Signature

**Received by the Office of the Dean of** \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Receiving Request for Review

\_\_\_\_\_  
Date of Receipt