COLLEGE OF ARCHITECTURE, PLANNING and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" STUDENT responsibility

steps 1 & 2 - discussion with Instructor & verification

I hereby certify that I have met with the Instructor and discussed my reasons for questioning my grade on ______________ (insert date). We were unable to agree on an acceptable grade & I have informed him/her of my intention to proceed with the grade Appeal process.

Student Signature: __________________________________________

Faculty Signature: ____________________________________________

Associate Dean signature: ____________________________________

step 3 - written appeal

Name: __________________________________________ SID: __________

Degree Program: ___________

Local Address:

________________________________________________________________
________________________________________________________________
________________________________________________________________

Phone # __________ Email ____________@email.arizona.edu

Course being contested: ___________ Instructor: _________________

Semester course was taken: ______ # of Units: ______

Grade Awarded: _______ Grade I think I deserved: _______

Having met with the instructor, and being dissatisfied with results of that meeting, I wish to file a formal grade appeal.

I have attached a written statement of the reasons for my request and a course syllabus

Student Signature__________________________ Date__________

Original: to Instructor
Copy: to Associate Dean
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" INSTRUCTOR responsibility

STUDENT: _______________________________ date appeal letter received: __________

Course being contested: ___________________ Instructor: __________________________
Semester course was taken: ______ # of Units: __________

step 4 - INSTRUCTOR'S RESPONSE

Instructor Signature_______________________ Date________

Original: to Student
Copy: to Associate Dean
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" Director’s responsibility

STUDENT: __________________________ date documents received ___________

Course being contested: ___________ Instructor: ________________
Semester course was taken: _______ # of Units: ________________

step 6a - DIRECTOR’S RESPONSE & RECOMMENDATION

Director Signature __________________________ Date __________

Original: to Student
Copies: Associate Dean; Instructor
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" Instructor’s responsibility

<table>
<thead>
<tr>
<th>STUDENT: __________________________</th>
<th>date recommendation received ______</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course being contested: ___________</td>
<td>Instructor: ________________</td>
</tr>
<tr>
<td>Semester course was taken: ______</td>
<td># of Units: ________________</td>
</tr>
</tbody>
</table>

step 6b - INSTRUCTOR'S RESPONSE TO DIRECTOR'S RECOMMENDATION

Instructor Signature ___________________________ Date _________

Original: to Student
Copies: to ASSOCIATE DEAN; to Director
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" STUDENT responsibility

step 7 - APPEAL TO DEAN
I hereby certify that I have completed steps 1 through 6 of the U of A Grade Appeal Process

Student Signature ________________________________

Name: ___________________________ SID: ____________
Degree Program: ____________
Local Address: __________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
Phone #_____________ Email __________________________
Course being contested: ___________ Instructor: ____________
Semester course was taken: _______ # of Units: _______
Grade Awarded: _______ Grade I think I deserved: _______

Having negotiated with the instructor and the Director, and being dissatisfied with results of that process, I request that you assemble a committee to review my grade appeal and my work.

At the committee's request I will furnish all portions of the project under review and the names of 5 students who undertook the same project in the same semester.

Student Signature __________________________ Date __________

Original: ______________ to Associate Dean
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" DEAN’s responsibility

STUDENT:_________________________________________ date packet received_________

Course being contested:_________________ Instructor:____________
Semester course was taken:_______ # of Units:_______

steps 8- FORMATION OF COMMITTEE

from Architecture: _______________________________________________

from related dept/College:

_______________________________________    ______________________
Name                  affiliation

_______________________________________    ______________________
Name                  affiliation

AIAS member:____________________________________________________
AIAS member: __________________________________________________

Original: to student
Copies: Associate Dean
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal" COMMITTEE’s responsibility

STUDENT: ____________________________ date packet received__________

Course being contested: _______________ Instructor: _______________
Semester course was taken: _______ # of Units: ________

steps 9- COMMITTEE'S RESPONSE

_______________________ ________________________ Date________
_______________________ ________________________ Date________
_______________________ ________________________ Date________
_______________________ ________________________ Date________
_______________________ ________________________ Date________

COMMITTEE MEMBERS
NAME (printed) signature Date
_________________________ ___________________________ _________
_________________________ ___________________________ _________
_________________________ ___________________________ _________
_________________________ ___________________________ _________
_________________________ ___________________________ _________

Original: to student
Copies: Dean; Associate Dean; Instructor
COLLEGE OF ARCHITECTURE and LANDSCAPE ARCHITECTURE

Request for Hearing re "Grade Appeal  DEAN’s  responsibility

<table>
<thead>
<tr>
<th>STUDENT: ___________________________</th>
<th>date committee decision rec’d ______</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course being contested: __________</td>
<td>Instructor: _________________</td>
</tr>
<tr>
<td>Semester course was taken: _______</td>
<td># of Units: _________________</td>
</tr>
</tbody>
</table>

step 10 - DEAN'S RESPONSE TO COMMITTEE RECOMMENDATION

DEAN'S Signature ___________________ Date ________

Original:  to Student
Copies:  to Associate Dean; Director; Instructor
            CHANGE OF GRADE to be sent to Registrar by Dean's office if necessary