

PACIFICTECH

GRADE APPEAL POLICY

Students who believe a course grade has been unfairly or mistakenly assigned must follow Pacific College of Technology's (PCT) grade appeal process as outlined below.

1. Filing Deadline:

Students have two calendar weeks (10 business days) from the date the final grade is posted to file an appeal.

2. Submission of Grade Appeal Form:

Students must complete a Grade Appeal Form (available on the PCT website or from the Office of Academic Affairs). The form should clearly state the reason(s) the student believes the grade was unfairly or incorrectly assigned. Supporting documentation relevant to the appeal must be attached to the form.

3. Submission Location:

The completed form and supporting documents must be submitted to the Program Director within the prescribed deadline noted above.

4. Initial Review by Program Director:

The Program Director will contact the faculty member involved to obtain their explanation and perspective. After reviewing the appeal and the instructor's input, the Program Director will determine whether the appeal can be resolved directly or if further proceedings are warranted.

- If the Program Director concludes that the appeal can be resolved without a committee, they may render a final decision on the matter.
- If further review is needed, an ad hoc investigative committee will be convened. This committee will consist of impartial faculty members, the Program Director, and other individuals deemed appropriate by Program Director.
- The committee will review all evidence presented by both the student and the instructor and render a decision within one week of convening.
- The committee will inform the Program Director and the instructor of its decision and may recommend appropriate grade adjustments (e.g., revising a grade, retaking an exam, or completing additional coursework).

5. Invalid Appeals:

If, at any stage, the Program Director or committee determines that the appeal lacks merit, the process will end, and the original grade will stand. Such decisions are final and not subject to further appeal.

6. Final Decision:

The Program Director has final authority over any grade adjustment, whether determined directly or upon receiving recommendations from the committee. By initiating a grade appeal, the student agrees to abide by the Program Director's final decision and complete any additional work, exams, or assignments deemed necessary to resolve the appeal.

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GRADE APPEAL FORM

INSTRUCTIONS:

Complete Sections 1-5 of this form if you believe a course grade has been unfairly or mistakenly assigned. Submit the completed form and any supporting documentation to the Program Director within two calendar weeks (10 business days) of the final grade posting date. Incomplete forms or late submissions will not be reviewed.

SECTION 1: STUDENT INFORMATION

Student Name: _____ **Student ID#:** _____
Email Address: _____ **Phone:** _____
Program of Study: _____

SECTION 2: COURSE INFORMATION

Course Title: _____ **Course Code:** _____
Term/Semester: _____ **Grade Assigned:** _____
Instructor's Name: _____

SECTION 3: REASON FOR APPEAL

Briefly explain why you believe the grade was unfairly or mistakenly assigned. Attach additional pages if necessary.

Explanation:**SECTION 4: SUPPORTING DOCUMENTATION**

List and attach all relevant documentation (e.g., graded assignments, emails, syllabus, or other materials supporting your appeal).

Attached Documents:

Graded assignments/tests

Email correspondence

Other (specify):

SECTION 5: STUDENT DECLARATION

By signing below, I affirm that the information provided is accurate to the best of my knowledge. I understand that by initiating this appeal, I agree to abide by the final decision of the Program Director.

Student Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

SECTION 6: PROGRAM DIRECTOR REVIEW

Date Received: _____ **Program Director Name:** _____

Appeal dismissed (no merit)

Appeal resolved directly by Program Director

Appeal forwarded to committee

Summary of Action Taken (Attach additional pages if necessary):

Program Director Signature: _____ **Date:** _____

SECTION 7: COMMITTEE REVIEW (IF APPLICABLE)

Date Committee Convened: _____

Committee Members:

1. _____ 3. _____
2. _____ 4. _____

Summary of Findings (Attach additional pages if necessary):

Committee Recommendation:

Appeal denied

Grade adjustment recommended

Committee Chair Signature: _____ **Date:** _____

SECTION 8: FINAL DECISION

Final Decision by Program Director:

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Final Grade: _____

Program Director Signature: _____ **Date:** _____