



Appeal Form

(The form is to be completed and submitted either hard copy or electronically to the School Department
within fifteen (15) days of the day the exam results are announced)

To be completed by the student:	
First Name:	Last Name:
Student ID Number:	
Course Title:	Course Code:
Programme of Studies:	
Choose accordingly: Exams period: February June September	Academic year:
Choose accordingly: Appeal for exam grade Appeal for midterm/assignment grade	

FOR OFFICIAL USE ONLY

School Department check for incorrect entry: Yes / No

To be completed by instructor:

Change of grade: Yes / No Change the grade from _____ to _____

Change of grade: Yes / No Change the grade from _____ to _____

Justification: _____

Instructor's Full Name _____

Instructor's Signature _____ Date: _____