



**College of Liberal Arts  
Associate Dean Grade Appeal Response Form**

Student Name: \_\_\_\_\_ Banner ID: A# \_\_\_\_\_

Faculty member who assigned the grade: \_\_\_\_\_

Academic Year: \_\_\_\_\_ Semester: \_\_\_\_\_

Course Dept: \_\_\_\_\_ Course#: \_\_\_\_\_

Course Title: \_\_\_\_\_

Decision of Associate Dean: \_\_\_\_\_ Approved \_\_\_\_\_ Denied

Rationale of Associate Dean:

Associate Dean: \_\_\_\_\_ Date: \_\_\_\_\_

**Note: Upon completion, provide the student with a copy and keep original along with the previous forms on file in the college**