

**CENTRAL CONNECTICUT STATE UNIVERSITY**  
**APPEAL FOR GRADE CHANGE — DEAN'S FORM**  
(PLEASE PRINT)

Please check the appropriate box and take the corresponding action.

**CHANGE OF GRADE IS NOT RECOMMENDED**

You should attach a letter explaining your recommendation. If the student wishes to pursue the appeal, then he/she must inform you of this fact within one week of receiving your written recommendation. If the student wishes to pursue the appeal, then five copies of the Appeal for Grade Change Packet, the Department Chair's form and letter, this form and your letter should be forwarded to the Chair of the Grade Appeals Committee within three business days.

**CHANGE OF GRADE IS RECOMMENDED**

You should attach a letter explaining your recommendation. If the instructor and the Department Chair agree (in writing) to change the grade, then the student's grade should be changed. If the instructor and Department Chair do not both agree to change the grade, then the student's appeal, then five copies of the Appeal for Grade Change Packet, the Department Chair's form and letter, this form and your letter should be forwarded to the Chair of the Grade Appeals Committee within three business days.

Dean's Name (PRINT): \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ DATE: \_\_\_\_\_