Indiana University School of Medicine - Grade Appeal Process
Level 2 Appeal Form

_____	_____	_____
Student Name	*Academic Year*	*Course/Clerkship Title*
_____	_____	_____
Dates of Course/Clerkship	*Course/Clerkship # (if known)*	*Submission Date*

Student Summary of concerns and rationale for grade appeal (attach additional documentation if needed):

Note: Completed appeal form MUST be received by Chair of the Academic Standards Committee within 1 week of Course/Clerkship Director decision.
STUDENT SUBMITS COMPLETED LEVEL 2 FORM TO THE CHAIR OF THE ACADEMIC STANDARDS COMMITTEE

OFFICE USE ONLY

_____ *date received* — Appeal received by Academic Standards Committee Chair with detailed premise of second appeal within 1 week of receiving Course/Clerkship Director's decision. (The SADMSE will forward the Level 1 Appeal Form with the Summary of Decision(s) and ASC should email the Registrar for a copy of the grade sheet).

_____ *date sent* — Chair of ASC submitted completed Level 2 form to the SADMSE, who then notifies the student, the Registrar, Course/Clerkship Director and, if appropriate, the Center Director, of the new grade or declination within 2 weeks of receiving the student appeal.

Check One: Approved ☐ Declined ☐

If Approved, a new grade is submitted.
If Declined, the student may advance the grade appeal process to the next level (Level 3) if desired.

ASC Summary of Decision (attach additional documentation if needed):

_____	_____
ASC Chair Name (Printed)	ASC Chair Signature