

**Indiana University School of Medicine - OSCE Appeal Process
Level 3 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 the Executive Associate Dean of Educational Affairs (EAD) within 1 week of Academic Stands Committee decision.

STUDENT SUBMIT COMPLETED LEVEL 3 FORM TO THE EAD

OFFICE USE ONLY

_____ *date received*

Appeal received by EAD with detailed premise of third and final appeal within 1 week of receiving ASC decision. (The SADMSE will forward the Level 1 & 2 Appeal Forms with the Summary of Decision(s) and EAD should email the Registrar for a copy of the grade sheet).

_____ *date sent*

EAD submitted completed Level 3 form to SADMSE, who then notifies all the other parties (student, the Registrar and, if appropriate, the Center Director) of the new grade or declination within 2 weeks of receiving the third appeal.

Check One: Approved Decline
 If Approved, a new grade is submitted.
 If Decline, the decision of the EAD is final.

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

_____ *EAD Name (Printed)*

_____ *EAD Signature*