This form is used to allow parents/guardians students over age 18 or staff to request a grade change within five days of the release of report cards. After the form has been completed by the parent/guardian, the appeal form and supporting evidence will be submitted to the teacher, who will respond to the request (page 1). Following the teacher response, the principal will provide a decision (page 2). If utilized, the SIT Committee will provide a decision to the parent and teacher (page 3). All completed forms must be filed in the student cumulative folder at the conclusion of the grade appeal.

**Parent, Guardian, or Student over the age of 18 section**

Student Name______________________       Student Number ________________________

Course______________________________  Teacher Name___________________________

Submitter Name ______________________  Date of Submission ______________________

Initial grade ___________

Reason for Grade Change Request:

- Completion of make-up work. A copy of the completed make-up work must be scanned and attached to the electronic grade change authorization form;
- Error in grade entry or calculation in the teacher gradebook;
- Lawful absences as defined in COMAR and AP 5113 Student Attendance, Absence, and Truancy, including student illness; or
- Failure to provide allowable accommodations, supplemental aid or services in accordance with a student’s IEP or 504 plan.

1. Explanation of concern (Please provide details that would be used to determine the validity of the concern):

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

2. Explanation of evidence (Please attach evidence):

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

The information presented is, to the best of my knowledge, accurate:

Student Signature _________________________________

Parent/Guardian Name _______________________________

Parent/Guardian Signature ____________________________

Parent/Guardian Contact Information _________________________
Grade Appeal Form continued
School Officials section

Teacher Response
1. Teacher Response to appeal (Please attach teacher evidence):

_________________________________________________________________________________
_________________________________________________________________________________

___ I am in agreement and will initiate a PS-140 to reflect the changing of grade
from a _________ to ___________.

___ I am not in agreement and will be initiating a Grade Appeal Response form that will be
submitted with this form.

_______________________          ______________________                        ____________
Teacher Name           Teacher Signature        Date

Principal Decision

___ There is sufficient evidence to warrant a grade change and move this concern to the Student
Intervention Team (SIT) Grade Appeal Committee to reflect the changing of grade
from _________ to ___________.

___ There is insufficient evidence provided to warrant a grade change and/or move this concern to
the Student Intervention Team (SIT) Grade Appeal Committee.

_______________________          ______________________                        ____________
Principal Name           Principal Signature        Date

If a grade change is authorized to occur, the teacher, if in agreement, or principal must initiate the
PS-140 attaching this completed form and all evidence involved in the determination. The teacher
has the authority to check that they are not in support of the grade change. This does not, however,
overrule the findings of the committee.
Grade Appeal Form continued
SIT Committee section

If the SIT Grade Appeal Committee is utilized for this appeal, they must record feedback to the Parent and Teacher regarding the decision of the SIT Committee. If the decision warrants a grade change, this form along with the evidence and PS-140 form must be filed in the student's cumulative folder.

Decision of Committee

2. Grade Appeal outcome: _____ Approved _____ Denied

Rationale and findings of SIT Grade Appeal Committee:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Grade input change (If deemed appropriate by SIT Committee): From _____ to _________

Committee Member Signatures:

________________________________ Position ________________________ Date __________

________________________________ Position ________________________ Date __________

________________________________ Position ________________________ Date __________

________________________________ Position ________________________ Date __________

SIT Committee Chairperson Name  SIT Committee Chairperson Signature             Date

Principal Name                     Principal Signature               Date

If a grade change is authorized to occur, the SIT Chairperson must initiate the PS-140 attaching this completed form and all evidence involved in the determination. The teacher has the authority to check that they are not in support of the grade change. This does not, however, overrule the findings of the committee.