

APPLICATION FOR APPEAL OF GRADE GIVEN FOR TERM WORK

Student is responsible for beginning the appeal process within 10 working days of having received the Term Work grade.

Payment of **\$50.00** is required for each term work appeal. Payment can be made at: **Fort Garry Campus** - Cashier's Office, 138 UMSU University Centre; **Bannatyne Campus** - secure drop box outside office P001).

**1. STUDENTS: COMPLETE THIS SECTION OF THE FORM AND SUBMIT THE FORM/PAYMENT TO THE CASHIER'S OFFICE.
ONCE PAID, SUBMIT THE FORM TO THE ACADEMIC UNIT OFFERING THE COURSE.**

COURSE TERM: Fall Term 20___ Winter Term 20___ Summer Term 20___				CHECK BOX IF COURSE WAS TAKEN BY DISTANCE EDUCATION: <input type="checkbox"/>	
NAME		FACULTY		STUDENT #	
ADDRESS				PHONE #	
				UofM EMAIL	
CITY			PROVINCE		POSTAL CODE
SUBJ (e.g. PSYC)	COURSE # (e.g. 1200)	SECTION (e.g. A01)	CRN (e.g. 10035)	COURSE NAME (e.g. Intro to Psychology)	
					INSTRUCTOR NAME
My results for this assignment were made available on the following date: <i>Note: Deadline to appeal is normally within 10 days of receiving your results.</i>					GRADE
MY REASON FOR MAKING THIS APPEAL IS: <i>(Attach additional pages if needed. Be specific.)</i>					
<input type="checkbox"/> I certify that I have discussed my concerns with the above instructor on: _____ Date _____ <input type="checkbox"/> I certify that I have not altered the attached term work material (exam script, lab report, etc.). <input type="checkbox"/> I agree that I have read and understood the instructions provide on <u>both sides</u> of this form. Signature: _____ Date: _____					PAYMENT CONFIRMATION <i>Completed by Cashier's Office</i>

2. DEPARTMENTAL RECEIPT:

This appeal <u>with/without</u> accompanying term work was received on _____, by _____ <div style="display: flex; justify-content: space-between;"> Date Signature </div> <div style="display: flex; justify-content: center; gap: 20px;"> <input type="checkbox"/> TERM WORK RECEIVED <input type="checkbox"/> TERM WORK <u>NOT</u> RECEIVED </div>

3. THIS SECTION TO BE COMPLETED BY THE ACADEMIC UNIT OFFERING THE COURSE:

ASSIGNED GRADE: _____ <input type="checkbox"/> GRADE HAS NOT CHANGED OR <input type="checkbox"/> GRADE HAS CHANGED TO: _____ REFUND APPROVED: _____
SIGNATURES: Course Instructor: _____ Date: _____ Consultant: _____ Date: _____ Department Head/Dean/Director: _____ Date: _____
COMMENTS: <i>Please note that comments made here are visible to students.</i> _____

4. DEPARTMENTAL FOLLOW-UP:

A copy of this decision was sent to student and course instructor on _____, by _____ <div style="display: flex; justify-content: space-between;"> Date Signature </div>
Original Term Work was returned to student on _____, by _____ <div style="display: flex; justify-content: space-between;"> Date Signature </div>

If Term Work is picked up by student, include student signature: _____ Date: _____

ANY APPEAL OF THE ABOVE DECISION MUST BE SUBMITTED TO THE DEAN/DIRECTOR OF THE ACADEMIC UNIT OFFERING THE COURSE.

**APPLICATION FOR APPEALING A GRADE GIVEN FOR TERM WORK
INFORMATION for STUDENTS**

It is expected that matters relating to the grading of term work will be first discussed with the instructor, as an attempt to resolve the issue without the need to submit a formal appeal.

Students who wish to formally appeal the grade assigned to term work shall have **10 working days after the grade for the term work has been made available** to them to appeal.

1. Process

- a) Complete the form 'APPLICATION FOR APPEAL OF GRADE GIVEN FOR TERM WORK'.
- b) Pay the applicable fee at the Cashier's Office (Fort Garry Campus, 138 University Centre, or Bannatyne Campus, use the secure drop box outside office P001). *This payment is refundable if the appeal is successful.*
- c) Once paid for, submit the appeal form to the department that offered the course along with the original term work (if applicable). The department will sign and issue a photocopy of the appeal form to acknowledge having received the appeal and the term work (if applicable).

2. Timing

Once all necessary documents have been received in full by the department, this appeal will be processed within 15 working days.

A copy of the appeal form, indicating any decisions made, will be issued to the student once the appeal has been processed and decided on by the department.

Please note: Appeal decisions are sent to students via regular mail, and so it may take more than these 15 working days for the student to receive their copy of the decision.

3. Refund

If a student's term work appeal is successful, department staff will send a refund authorization form to the Revenue, Capital and General Accounting Office. Once processed, a refund cheque will be issued and mailed to the student's address as it is found in Aurora.

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of initiating a review of your Term Work. Your personal information will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.