



San Diego Community College District
GRADE CHALLENGE PETITION

(Please Type or PRINT)

Important Note to Student: Turn in this completed form to the appropriate Instructional (School) Dean

Name _____ Student ID # _____

Previous Name(s) _____

Address _____
Number Street City State Zip

Phone (Day) _____ (Evening) _____ E-mail _____

California Education Code Section 76224 states that grades assigned by faculty are final unless there has been a mistake, fraud, bad faith or incompetence. Students may only challenge a grade if one of these four grounds exists. The burden of proof is on the student.

Please provide a detailed explanation of your request, attach additional sheets if necessary. Include supporting documentation. Grade Challenge Procedure 3001.2 is attached for your information.

SUBJECT/COURSE # _____ CRN# _____ GRADE _____

- (Check one)
- | | | |
|---|--|----------|
| <input type="checkbox"/> City College | <input type="checkbox"/> Fall Semester | Yr _____ |
| <input type="checkbox"/> Mesa College | <input type="checkbox"/> Spring Semester | Yr _____ |
| <input type="checkbox"/> Miramar College | <input type="checkbox"/> Summer Session | Yr _____ |
| <input type="checkbox"/> ECC | | |
| <input type="checkbox"/> Continuing Education | | |

I certify that the foregoing statements and the attached documentation is true, accurate, and is a complete statement of the facts.

Student Signature _____ Date _____

OFFICIAL USE ONLY

Received by Dean's Office Date _____

Referred to Department Chair Date _____

Referred to Vice President, Instruction Date _____

Received by: _____