

UWSOM Grade Petition Request

Submit completed form to the Department Clerkship/Course Director - all fields MUST be completed

Before initiating a grade petition, please ensure you have met with the department for a guided review of your grade and/or evaluative material.

Name: _____

Date: _____

Email: _____

Course Information

☐

Foundations

Site: _____ Quarter and Year: _____

☐

Clinical

Course/Clerkship: _____

For which of the following are you requesting an appeal

☐

Block or other Foundations course

☐

Thread

☐

Clerkship

☐

Other graduation requirement **Please specify:** _____

Please explain your dispute in specific detail ([Attach additional page if needed](#))

What is your desired outcome for this petition?