



## GRADE REVIEW REQUEST

Please enter all relevant information. When ready, send this form as an attachment to [admin@anthroctr.org](mailto:admin@anthroctr.org).

Student Name: \_\_\_\_\_ Student Email: \_\_\_\_\_

Field School: \_\_\_\_\_ Year: \_\_\_\_\_

Grade Received: \_\_\_\_\_ Grade Desired: \_\_\_\_\_

Are you aware and have you read the grading matrix as described in the syllabus? ☐ Yes ☐ No

Please explain why you think your grade should be changed. Add additional pages and/or documents as you need.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date submitted)