



Grade Review Decision

Course Code: _____ Course Title: _____

Section: _____ Course Credit Hrs: _____ Term : _____

Name of the Instructor/Course teacher: _____

Assigned/Given Grade: _____

Reviewed Grade: _____

Comment of the Review Committee:

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Signature of committee members with Date

Sl.	Name and Designation	Signature with date
1.		
2.		
3.		

Approval of the Dean:

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Signature with Date