**WUSPBA Appeals Application for Solo Re-grading**

Please fill out sections A and B. Once the application is complete, please email the application to the WUSPBA Executive Secretary egunn.ec@gmail.com

**A. Basic Information**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WUSPBA #\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor’s email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Narrative. Please include a detailed narrative explaining why you are appealing the re-grade decision.**

**OFFICE USE ONLY:**

**C. Tracking**

**Date received from soloist:**

**Date sent to MB chairman:**

**Date received recommendation from MB chairman: Recommendation:**

**Notes:**

**Date sent MB recommendation to EC: Vote taken: Vote outcome:**