

THE UNIVERSITY OF WASHINGTON
DEPARTMENT OF MEDICINE
Student Program – Grade Dispute Form

Complete the section that corresponds to the grade component that you wish to have reviewed.

Grade components are:

Med3s: clinical evaluation, final exam performance

Submit the completed form to the Student Program Office, C-511 Health Sciences Building, Box 356420 University of Washington, Seattle, WA 98195 kaengle@u.washington.edu. The Medicine Grade Committee will review your request. A written resolution will be given to the Student Program Administrator and she will inform you of the outcome.

Name/pager: _____ Date: _____

Sites: _____ Month and Year: _____

Clinical Performance:

Circle the evaluation (s) that is/are in dispute:

Attending Resident Intern Evaluator's name _____

Have you discussed your concerns with the clerkship coordinator at your site? _____

Please explain in very specific detail your dispute with this evaluation. If your concern is that you did not get Honors, provide details why you think you performed better than 80% of your classmates. If your concern is that you did not get High Pass, provide details why you think you performed better than 50% of your classmates. Working hard or putting in long hours is not sufficient to receive Honors or High Pass – it is the quality of your work.

What do you suggest we do about this?

Please return to Medicine Student Program, Box 356420, kaengle@u.washington.edu

Exam Performance:

Please circle the test that is in dispute Multiple choice Patient management

Please explain in very specific detail your dispute with your score.