　Grade Inquiry Sheet

Date: (Month) (Day) (Year)

**■For student (Only inquiries from the student him/herself will be accepted)**

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| --- | --- | --- | --- | --- |
| Affiliation/ Year | School  Graduate School | Year | Name (Signature) |  |
| Student ID |  | | Contact  (Mail etc.) |  |

Details of Inquiry

|  |  |  |  |
| --- | --- | --- | --- |
| Class Timetable Code | ※No entry required if there is no class timetable code for graduate courses | Offered at | □School ( )  □Graduate School ( ) |
| Course Name |  | Day/Period |  |
| Grade |  | Instructor name |  |
| Details of Inquiry (Please write concrete details and reason for inquiry below.) | | | |

Notes:

・This Sheet cannot be used to request corrections to grades.

・Please carefully confirm the course evaluation methods in the syllabus when making an inquiry.

**■For administrative staff**

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| --- | --- | --- | --- | --- |
| Date of Receipt | Receipt Seal |  | Date of Response | Total |
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**■Instructor's reply (Please submit to appropriate office after filling in this box)**

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| Responder: |

Student Affairs Committee Member Confirmation (Signature)　　　　　 　 　  
Student Confirmation (Signature)

　　 　For courses with no grade recorded, please inquire directly at the appropriate office