

Letter of Appeal

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [Recipient's Name]

[Title]

[Department/Office]

[School/University Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally appeal for the consideration of a pass/fail grading option for the [specific course or semester] due to [reason for request, e.g., extenuating circumstances, mental health concerns, etc.].

As a dedicated student, I have consistently worked hard to maintain my academic standing. However, due to [explain your situation briefly], I believe that the pass/fail grading policy would better reflect my understanding of the coursework while alleviating undue stress during this challenging time.

I kindly request that you take my situation into consideration, and I would be grateful for any opportunity to discuss this matter further. Thank you for your time and understanding.

Sincerely,

[Your Name]