

**Exam Petition Form**  
**Allied Health Department | Mineral Area College**

- The Exam Petition Form must be submitted to the course instructor within 24 hours of grades being posted.
- The instructor will only consider questions presented on the Exam Petition Form.

Student Names: \_\_\_\_\_

\_\_\_\_\_

Course: \_\_\_\_\_ Date: \_\_\_\_\_

Test Question Number: \_\_\_\_\_ Test Date: \_\_\_\_\_

We are petitioning review of test item: (Briefly describe question)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Rational: (Explain why you believe the test item is incorrect)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

References: (Cite book and page number to validate your petition)

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