

# How to Use the Remediation Form

The remediation form is used by instructors to submit a final grade, after a student has been given permission to remediate portions of a course.

After clicking the “Remediation Form” link in Faculty Self-Service, instructors will be guided through a series of prompts, to submit a final grade.

Note: All remediated coursework must be completed within one term following the original course. Remediation after the one term timeframe requires a Petition for Exception to Policy approved by your Associate Dean.

**Faculty & Advisor Services**

Hello Stuart Ibsen.

Welcome to Faculty Self-Service

- Faculty**
  - Faculty Grade Entry
  - View Class Lists
- Faculty Forms**
  - Removal of Incomplete Grade
  - Change of Grade
  - Remediation Form**
- Advisors**
  - Advisee List/Search
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- Personal Information & User Account**
  - Complete Outstanding Action Items
  - Change OHSU Network Account Password (on OHSU network only)
  - Change Faculty ID Number Password

Search OHSU Class Schedule

If you have any questions contact the Registrar's Office at [regohsu@ohsu.edu](mailto:regohsu@ohsu.edu) or 503-494-7800.



## Remediation Form

Per Policy 02-70-020 (University Grading) a student receiving a final grade of C, D, F, or NP may be permitted to remediate portions of the course instead of repeating the course in its entirety. Use this form to submit the final grade after the required components have been remediated. The specific courses that allow remediation and the maximum course letter grades for remediated courses are determined by the academic program offering those courses.

*This form must be completed by the instructor of the course. Your signature is required. Responses to all questions are required.*

All remediated coursework must be completed within one term following the original course. Are you submitting this form within the one-term time limit (or within the time limit of an approved exception)?

Yes

No



Instructor Name

Instructor email

School in which the course was taken [departmental official to whom form will be copied]

School of Dentistry

School of Medicine - Grad Programs or BS Program

School of Medicine - MD

Student Name

Student ID Number (e.g. U000xxxxx)

Term the course was originally taken (e.g., Fall 2022)

Course Code (e.g., MED 501)

Course Title

### Final Grade After Remediation

P

A

A-

B+

B

B-

C+

C

C-

### Instructor Signature

SIGN HERE

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clear

