



## Student Conduct Appeal Request Form

Please print clearly with a pen or type the information on this form. Deliver this form, along with your typewritten appeal letter to the Office of the Dean of Students located in room 213, Guerrieri Student Union. Your appeal must be received by 5:00 p.m. within five (5) class days following the written notification of the primary decision. **You must get the certification box at the bottom filled out when you submit this form.** Please retain a copy of this form for your records and refer to the Student Code of Conduct Policies and Procedures Handbook for additional information on appeals.

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

I wish to appeal the primary decision on the following grounds: (check all that apply):

- a. Specified procedural errors or errors in interpretation of University regulations were so substantial as effectively to deny the student a fair hearing;
- b. New and significant information became available and could not have been discovered and/or provided by a properly diligent student before or during the original hearing;
- c. Student requests an evaluation of assigned sanction(s) because of extraordinary circumstances; and/or
- d. A violation of substantive due process occurred (ie. The decision was based on an illegal or constitutionally impermissible consideration such as race, gender, exercise of First Amendment freedoms, etc.).

### **For Office Use Only**

This appeal request was received on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
at \_\_\_\_\_ a .m./p.m., in the Dean of Students Office.

Received by: \_\_\_\_\_ (printed name)

Title: \_\_\_\_\_

Signature: \_\_\_\_\_