**Student Conduct**

**Appeal Request Form**

Name: Date:

LOLAID#: Phone Number:

Local Address:

Date of Hearing: Code Sections Found In Violation:

**REASONS FOR APPEAL**

**Appeals are possible when one or more of the following circumstances apply:**

1. Student received an excessive sanction when compared to previous sanctions for similar violations under similar circumstances.
2. Discovery of significant new information relevant to the case.
3. Procedural error regarding the student’s rights involving error in the administration of judicial procedures by the hearing body/officer or related administrators.
4. If you are the complainant (victim), you can also appeal if you feel the outcome of the hearing was arrived at improperly.

# Please answer the following key questions related to your judicial case:

Do you believe any of your rights were violated due to procedural error?

 Yes No

Do you believe you have any new substantial evidence relevant to your case?

 Yes No

Do you believe the sanction(s) imposed was excessive when compared with previous sanctions for similar violations under similar circumstances?

 Yes No

(Victim) Do you believe the outcome of the hearing was arrived at improperly?

 Yes No

# An answer of “Yes” to any of the questions listed above provides grounds for appeal. Please attach a typed narrative with this form which provides specific information relevant to that question(s).

**WRITING AN EFFECTIVE APPEAL**

**In order to write an effective appeal, you must:**

* Reasons the sanction of behavior of academic misconduct was unwarranted.
* Provide clear rationale and documentation tied to and stating the appropriate condition for appeal. (Ex. Copy of course syllabus, disputed assessment materials, or other materials as necessary)

**Other Notes:**

* State the grounds for the appeal.
* Provide strong supporting information for those grounds.
* Conclude with a closing statement.

**APPEAL DUE DATE AND IMPORTANT INFORMATION**

* APPEALS MUST BE SUBMITTED BY **4:00 P.M.** BY THE **FIFTHTEENTH CALENDAR DAY** AFTER THE INITIAL SANCTION LETTER HAS BEEN ISSUED.
* Appeals are to be submitted to the **Dean of Students Office** or **Office of Academic Affairs** depending on the origination of your sanction.
* **This form is required** to be submitted with the appeal letter and all other related documentation.

 I hereby confirm that all submitted information is accurate to the best of my knowledge.

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