
REQUEST FOR APPELLATE CONSIDERATION

Student Conduct Process

Name: _____ SID: _____

Address _____ Phone: _____

THIS APPEAL FORM MUST BE RETURNED TO THE OFFICE OF STUDENT CONDUCT (LOCATED IN UC ANNEX, SUITE 207) WITHIN FORTY-EIGHT (48) HOURS.

INSTRUCTION: You are to list below each decision you wish to appeal. Explain in detail the reasons for appeal which you believe apply to your case. Make certain that your reasons are substantial and can be verified. Attach any related documents you have to support your stated reasons.

The appeal authority will general limit its review of the original hearing record to the following three (3) issues. Check the issues that will be addressed in your appeal. (Check ALL that apply.)

- 1. An alleged violation of the rights guaranteed the accused has occurred
- 2. The sanctions and/or conditions of sanctions are extraordinarily disproportionate to the violation(s)
- 3. The discovery of new and significant information that would have affected the outcome of the hearing and that was not known, or could not reasonably have been discovered and/or presented at the time of the hearing

Be advised that the decision to grant or deny an appellate hearing to you will depend upon the clarity of this written request and upon the merit of its supporting documentation and/or argument. Attach additional pages to this form as necessary. (Please type or print all information given so that is legible.)

NOTE: At any level of appeal, the appellate authority may impose less severe sanctions as well as more severe sanctions.
