APPEAL OF DISCIPLINE SANCTION
TO THE UNIVERSITY DISCIPLINE COMMITTEE
Student Health Center 210

Date of appeal: _____

Student's Name: _____

Student's Signature: _____

I.D. #: _____

Address: _____

Telephone #: _____

Reasons for appeal (select one or more):

1.) Denial of due process (i.e., failure to follow stated procedures)
2.) Inadequate evidence to justify the decision
3.) Sanction is not keeping with the gravity of wrong-doing (i.e., too harsh)

Explain each reason listed (add additional pages if necessary):

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