



Conduct Violation Appeal Form

This form is for appealing Administrative Hearing decisions. Appeals must be submitted within *five working days* of the date on the Administrative Hearing Outcome notice (*refer to Section VIII. Appeal Procedures of NDSCS.edu/Student-Rights*). Complete this form and submit to the Department of Residential Life, Riley Hall 130.

Appeals must specify in detail one or more of the following reasons:

- New or contradictory evidence exists that was not available at the time of the original decision.
- Student’s due process rights were violated. The rights believed to be violated must be specified.

Last Name	First Name	ID Number

Hall/Complex & Room # or Off-Campus Address	Cell Phone Number

Incident Date:	e-mail Date:
	“Subject: Administrative Hearing Outcome”

Violation: _____

Be thorough and specific in giving your reasons for this request. If you wish, you may attach supporting information.

Provide Explanation below or attach documentation:

Signature: _____ **Date:** _____

For Office Use Only:

Date Received: _____

Hearing Date*: _____ Hearing Officer Assigned: _____

*Schedule 3 days (at minimum) after receiving

- Granted
 Denied
 Alternate Findings/Sanctions

Conduct Officer Signature: _____ Date Reviewed: _____

Entered

Notification Sent (e-mail)