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:

☐ The severity of the sanction was not consistent with the severity of the offense.

☐ The finding of the code having been violated was not substantiated by the evidence.

☐ The student’s due process rights as outlined in this code were violated, which materially or substantially impacted the decision. Those rights believed to be violated must be specified.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>ID Number</th>
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<tr>
<th>Hall/Complex &amp; Room # or Off-Campus Address</th>
<th>Cell Phone Number</th>
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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): ___________________________

[Clipped section for brevity]