

Request for Review

Name:			ID#:		
please	print		·		
Address:					
Address.	street	city	state	zip	RH/room #
Home Phone:		Cell Pho	one:		
Email address:					
	Review: The accused student at: (please check any or all that apple		eview of the dec	ision of the	hearing body on
	(1) the procedures set forth in this Code were not followed and, as a result, the decision was substantially affected;				
		ed were not appropriate for	the violation of	the Code fo	or which the
	(3) new information, sufficient to alter the decision, or other relevant facts were not brought out in the original hearing because such information and/or facts were not known to the Accused Student at the time of the original hearing.				
	all be limited to a review of the toe conducted by anyone invo- Student Code of Conduct, S	olved in the initial hearing. Section II: Disciplinary Procedure	s – Nonacademic M	Aisconduct Par	
Additional con	nments or explanations:				
Student Signat	ura.		Data		
Student Signat	uic		Date		
Received by S	tudent Affairs on:		_		
	Date				