

<b>DOCUMENT TITLE</b>	Student Misconduct Policy Appeals Form
<b>DOCUMENT NUMBER</b>	E-2.5.2
<b>NAME OF POLICY THE DOCUMENT SUPPORTS</b>	Student Misconduct Policy
<b>TYPE OF DOCUMENT</b>	Form
<b>APPROVAL DATE</b>	July 05, 2022
<b>REPLACES (IF APPLICABLE)</b>	N/A
<b>LAST UPDATE OR AMENDMENT OR REVIEW DATE</b>	N/A
<b>POLICY HOLDER</b>	VP Student Experience
<b>RESPONSIBLE OPERATIONAL LEADER</b>	Director Student Affairs

## STUDENT MISCONDUCT POLICY APPEALS FORM

### PURPOSE

This form is to be used when a student wishes to appeal the Director's/designate's decision on a student misconduct policy violation. To receive consideration, all requests must be:

Initiated within **five (5) working days** of the Student being informed of the Outcome.

An Appeal must be made in writing to the Vice-President, Student Experience and provide all the following information:

- a. The Outcome which is being appealed;
- b. The grounds for the appeal (i.e., why the Student believes the appeal should be allowed);
- c. The Outcome which the student is seeking and the reasons why;
- d. Any and all documentation and submissions relevant to the Student's appeal

Please refer to the [Student Misconduct Policy](#) and the [Student Misconduct Process](#) for details of both the process and the grounds for an appeal.

If appealing the President's decision of a suspension, please see [E-2.4.3](#).

### INFORMATION PROVIDED BY STUDENT

<b>STUDENT NAME</b>	
<b>STUDENT C#:</b>	
<b>PHONE #:</b>	
<b>EMAIL:</b>	
<b>SCHOOL/PROGRAM:</b>	

**What decision are you appealing? Please provide details.**

**Why are you appealing the Director's/Designate's decision? Please choose the applicable ground(s) for an appeal.**

A substantial procedural error has been made in the process;

Evidence, not reasonably available at the time the Outcome was determined is available and the new evidence may change the Outcome;

The Outcome imposed is unreasonable or excessive in all the circumstances

Please provide details on why you believe you meet the ground(s) selected above.

**What outcome are you seeking and why? Please provide details.**

**BEFORE SUBMISSION, PLEASE CHECK THE FOLLOWING:**

- I have read the [Student Misconduct Policy](#) and the [Student Misconduct Process](#) and understand the Policy and its applicable processes.
  
- I have completed this form to the best of my ability. The information I provided above is accurate and complete.
  
- I have provided all supporting documentation that is relevant to this appeal request.

<b>STUDENT'S SIGNATURE:</b>	<b>DATE:</b>
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