

**The University of Arizona
Student Code of Academic Integrity**

Request for Appeal to University Hearing Board

Instructions for Student			
<p>This form is to be used if:</p> <ul style="list-style-type: none"> ○ You have been found responsible for a violation of the Student Code of Academic Integrity AND ○ The sanction imposed to you is University suspension or expulsion, permanent transcript notation or revocation of degree <ol style="list-style-type: none"> 1. Complete this form and deliver to the Dean of Students Office (Nugent Bldg., Room 100 or email to DOS-Codes@email.arizona.edu). 2. PLEASE NOTE to properly fill out this form you must use Adobe Reader or Acrobat 8.0 or greater. If any other PDF viewer is used (such as Apple Preview or Google Chrome PDF viewer) the form will not format correctly and the filled in fields will appear blank when received by our office. Make sure to save a copy of the completed form on your computer as a back up. 3. For more information, refer to http://deanofstudents.arizona.edu/policies-and-codes/code-academic-integrity, or contact the Dean of Students Office at 621-7057. 4. Refer to Student Disciplinary Procedures at http://deanofstudents.arizona.edu/sites/deanofstudents.arizona.edu/files/5-403StudentDisciplinaryProcedures8-2008.pdf 			
Student Information			
Name	ID Number		
Phone Number	UA Email		
Class/Instructor Information			
Class Number and Section	Instructor		
Instructor's Department			
Reason for Appeal (check one)			
<p>I am appealing: <input type="checkbox"/> The violation(s)</p> <p> <input type="checkbox"/> The sanction(s)</p> <p> <input type="checkbox"/> Both the violation(s) and the sanction(s)</p>			
Appeal Information			
<p>Violation(s):</p>			
<p>Sanction imposed:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> University Suspension <input type="checkbox"/> Revocation of Degree </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> University Expulsion <input type="checkbox"/> Permanent Transcript Notation </td> </tr> </table>		<input type="checkbox"/> University Suspension <input type="checkbox"/> Revocation of Degree	<input type="checkbox"/> University Expulsion <input type="checkbox"/> Permanent Transcript Notation
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Please provide a summary of each reason for your appeal in the space below or include a typewritten document with this form. *This information is required.*

Please deliver Request for Appeal to University Hearing Board (within 10 days of receiving decision from Dean of the College) to:

Hearing Board Technical Advisor
DOS-Codes@email.arizona.edu
The University of Arizona
Robert L. Nugent Building, Room 100
PO Box 210040
Tucson, AZ 85721-0040