



Disciplinary Appeal Request Form

Instructions

How to Submit

This completed form must be submitted in writing or email to the Director of the Student Conduct and Title IX (TitleIX@grayson.edu) within 10 College District business days of the date of the administration's written notice of sanction being imposed.

Student Information

Student Name: _____

Student ID Number: _____

Date of Birth (MM/DD/YYYY): _____

Phone Number: _____

College Email Address: _____

Disciplinary Action Being Appealed

Date of Administration's Written Notice (MM/DD/YYYY): _____

Type of Sanction Imposed (Select One):

- Warning
- Probation
- Restitution/Fine
- Restriction
- Other

If you selected "Other", please specify other sanction: _____

Note: This appeal form is for penalties *other than suspension or expulsion*, in accordance with College District policy.

Basis for Appeal

Please clearly state the reason(s) you are appealing the disciplinary decision. Attach additional pages if necessary.

Requested Outcome

Please describe the outcome you are requesting as a result of this appeal.

Acknowledgment and Certification

By signing below, I acknowledge that:

- I am requesting a review by the Disciplinary Appeals Committee.
- This appeal is being submitted within **10 College District business days** of the date of the administration's written notice.
- The information provided is accurate and complete to the best of my knowledge.

Student Signature: _____

Date: (MM/DD/YYYY) _____

Office Use Only

Date Appeal Received (MM/DD/YYYY): _____

Received By: _____

Appeal Timely Filed:

Yes

No

Date Forwarded to Disciplinary Appeals Committee (MM/DD/YYYY): _____