



AI Appeal Form
Office of Academic Affairs

Today's Date: _____

Student Information

Student Full Name: _____ ID#: _____

Phone: _____

Email: _____

Campus Mail: _____

Home Address: (if necessary) _____ City: _____ State: _____ Zip Code _____

Course Code

Course ID _____ Course Section _____ Semester Course Taken _____

Instructor Information

Instructor's Name: _____

Advocate Information

Advocate's Name: (if necessary) _____

I. Incident Information

In the space below, provide a clear description of the alleged violation. Include, if necessary, the location of the incident and a description of all parties involved.

II. The Nature of the Appeal

In the space below provide a rationale outlining the reason for the appeal. An appeal may be made on the basis of a disagreement about the violation of academic dishonesty and/or disagreement about the sanctions associated with this violation.

Describe the evidence you wish to present to the AI Hearing Board. You may attach any documentation that supports your appeal.

To the best of my knowledge, the information I have provided in this statement is truthful. I understand that I will be notified by the Academic Integrity Coordinator regarding the date of my hearing.

Student Signature _____ Date: _____