

University Secretariat

SENATE APPEALS COMMITTEE NOTICE OF DISCIPLINE APPEAL

Please complete the form below and email/deliver to:

Attention: Vice-Chair (Student Affairs) University Secretariat/Legal Counsel Dalhousie University Room 210, 6299 South Street Halifax, Nova Scotia B3H 4R2 Email: <u>discipline.appeals@dal.ca</u>

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STUDENT NUMBER: _____

DESCRIPTION OF APPEAL	
Course name:	Course number:
Instructor:	
Faculty:	
Date of Senate Discipline Committee hearing panel's written decision:	
Copy of Senate Discipline Committee hearing panel's decision attached? Y	
GROUNDS OF APPEAL	

Provide a brief description of the grounds for your appeal and the facts that support your appeal. Attach additional pages if you need them. (See paragraph 5 under "Jurisdiction" of the <u>Senate Appeals Committee</u> <u>Jurisdiction and Appeals Procedures</u> for permitted grounds of appeal)

Room 210, Henry Hicks Academic Administration Building. • Dalhousie University • Halifax, NS B3H 4R2 Canada Tel: 902.494.7619 • Email: discipline.appeals@dal.ca • Web: www.senate.dal.ca

TIMELINES

Please note that the Senate Appeals Committee Terms of Reference state that an academic appeal "shall be submitted within 30 calendar days of the date that the decision under appeal was sent to the student."

Does your appeal apply with this time requirement? Yes ____ No ____

If no, please provide reasons why an extension of time should be granted in your case. Attach additional pages if you need them. (See paragraph 2 under "Procedures" of the <u>Senate Appeals Committee Jurisdiction and</u> <u>Appeals Procedures</u> for timeline requirements)

THE HEARING

You are entitled to an oral hearing. If, however, you would prefer that the hearing panel only consider written submissions, you can waive this entitlement.

Would you prefer to waive your right to an oral hearing and only make written submissions? Yes _____ No ____

Will you have a representative? Yes <u>No</u> (Should you choose to have an advocate, please email <u>dsas@dal.ca</u> (Dalhousie Student Advocacy Service).

If yes, please provide the representative's contact information:

ame:	
1ailing Address:	
mail:	
elephone:	

vide your current contact information so you may be contacted with respect to this appeal: Mailing Address:	YOUR CONTACT INFORMATION	
Email:	de your current contact information so you may be contacted with respect to this appeal:	
	Mailing Address:	
	Telephone:	

 Signature:
 Date:

(Updated: 01102024