

SENATE APPEALS COMMITTEE  
NOTICE OF DISCIPLINE APPEAL

University Secretaria

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: [discipline.appeals@dal.ca](mailto:discipline.appeals@dal.ca)

NAME: \_\_\_\_\_ 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? Yes ___ No ___ |                      |

| GROUND OFS 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 <a href="#">Senate Appeals Committee Jurisdiction and Appeals Procedures</a> for permitted grounds of appeal) |
| _____   |
| _____   |
| _____   |
| _____   |

### 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 [Senate Appeals Committee Jurisdiction and Appeals Procedures](#) for timeline requirements)

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### 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 \_\_\_

**YOUR CONTACT INFORMATION**

Provide your current contact information so you may be contacted with respect to this appeal:

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Updated: 01102024)