

CSU Chico School of Nursing
Disciplinary Appeal Form

The School of Nursing discipline procedure allow students to initiate an appeal of a Student Affairs Committee recommendation by filling out, signing, and filing this form.

The student must complete this form and return it to the School of Nursing office, no later than five instructional days (Monday through Friday) after receiving notification of the Student Affairs Committee's recommendation and/or decision.

The student's failure to file this request for an appeal within the designated timeframe and in the manner specified shall constitute a waiver of your right to a hearing for appeal. If you do not fill out this form completely, you will waive your right to an appeal.

If you have any questions about this form or your right to appeal, contact Director of the School of Nursing via email or phone at (530) 898-3481.

REQUEST FOR APPEAL

I, _____ (please print) hereby request an appeal of the Student Affairs Committee recommendation dated ____.

I received the Recommendation Notice on _____.

Address

Telephone: Day _____

Evening _____

Email address _____

Cell Phone _____

Student ID# _____

Student signature

Date