



EASTERN CONNECTICUT STATE UNIVERSITY  
A Liberal Education. Practically Applied.

University Student Conduct System: Application for Review

Office of Student Conduct

Wood Support Services, 254

Tel: 860-465-0063 Fax: 860-465-5028

This form must be filed with the Office of Student Conduct no later than three University Calendar days after the Notice of Decision Letter is delivered.

Student's Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

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

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

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

Date of the hearing: \_\_\_\_\_

*Please check the ground or grounds for your requested Review. Please be as specific as possible when explaining the reasoning. Feel free to use the back of this page as necessary.*

\_\_\_\_\_ (i) the procedures set forth in this Code were not followed and, as a result, the decision was substantially affected.

\_\_\_\_\_ (ii) the sanction(s) imposed were not appropriate for the violation of the Code for which the Accused Student was found responsible.

\_\_\_\_\_ (iii) new information, sufficient to alter the decision, or other relevant facts were not brought out in the original hearing because such information and/ or facts were not known to the Accused Student at the time of the original hearing.

Please note: You will be notified when a decision is made concerning this matter via university email. If you have any questions please contact the Office of Student Conduct or consult the CSCU Student Code of Conduct, Number 6 "Review."