

**Texas A&M University - Corpus Christi  
Judicial Appeals Form**

Please check one of the following statements below.

**1. I wish to appeal the:**

\_\_\_\_\_ Decision from my judicial hearing.

\_\_\_\_\_ Sanction from my judicial hearing.

**2. I was notified of the decision on \_\_\_\_\_  
Date**

**3. The hearing date was on: \_\_\_\_\_  
Date**

**4. I understand that I have 5 business days from receipt of my notification to submit my appeal. I choose to appeal based on the following criteria (Check all that apply):**

\_\_\_\_\_ The student's rights were violated in the hearing process. Describe in detailed irregularities in fairness and/or procedures.

\_\_\_\_\_ There is new evidence sufficient to alter the decision that were not known to me at the time of the original hearing.

\_\_\_\_\_ The evidence did not support the decision. Describe why the evidence did not support the decision.

\_\_\_\_\_ The sanctions imposed were not appropriate for the violation. Describe why the sanctions imposed were not appropriate.

Your appeal must be typed and submitted along with this appeal form. Please address your letter of appeal to Dr. Eliot Chenaus, Vice President of Student Affairs, Division of Student Affairs, Suite 318, Corpus Christi, Texas 78412. **Any appeals received after 5 business days from the date of the receipt of the notification letter will be void.**

**Name:** \_\_\_\_\_ **ID#** \_\_\_\_\_

**Date Received:** \_\_\_\_\_