Please return to the Office of the Dean of the Graduate School, **Mitchell Hall 251**For questions and information please contact the Graduate Appeals Coordinator at gs-appeals@uwm.edu.

University of Wisconsin-Milwaukee Graduate School Request for Academic Misconduct Hearing

I request a hearing by members of the Graduate School Scholastic Appeals Committee (the Hearing Body) to appeal (*please select one and complete Professor's name*):

the allegation made by Professor	that I engaged in academic misconduct;
the sanction(s) recommended in conjunction with the allegation;	
both the allegation of misconduct and the recommended sanction(s).	
I understand that, per UWS 14.08 (3f), the Hearing Body may impose a disciplinary sanction that differs from the recommendation of the instructor or investigating officer. In other words, should the Hearing Body determine that the evidence presented at the hearing supports the allegation of misconduct, the Hearing Body may support the sanction(s) as recommended by the instructor, or impose a sanction that is either more or less severe than the sanction(s) the instructor recommends.	
I also understand that, per UWS 14.08 (3a), I have the right to choice. A representative may advise me, but I - and not the rethe hearing. At this time I (<i>please check one</i>):	
do not anticipate being accompanied by a representat	ive.
anticipate being accompanied by	, if he/she is available.
I understand that the person named above may be contacted with information about this hearing.	
My representative's email address is:	
I understand that the scheduling of the hearing will commence immediately upon receipt of this request. I understand the potential difficulties in scheduling the hearing, and I am willing to waive the requirement that the hearing take place within 10 days of receipt of this request. In general, I am available on the following days and times:	
I understand that, per UWS 14.08 (3a) I have the right to submit a written statement or evidence for review by the committee. I also understand that if I choose to do so, this should be provided to the Graduate School at least 7 days in advance of the hearing, to allow for review by committee members. I can be contacted at the following phone number(s) (daytime/evening), email address, and postal address:	
Print Name:	_
Signed:	Date: