

Submitted on (date and	
time):	

Received by (initials):\_

## INSTITUTE OF AMERICAN INDIAN ARTS

## REQUEST FOR HEARING STUDENT HEARING AND REVIEW PANEL

This form must be submitted within 24 hours of receipt of the Dean or Housing Director's decision, and it must be completed in its entirety in order to be heard by the Panel.

mber Cell Pho	Cell Phone Number			Cell Phone Number Hearing and Review Panel process in the IAIA Stu	
State	Zip				
E-mail Address:					
First	Middle Initial				
	E-mail Address:				

What decision are you appealing? By whom?

Step 1A: Please describe in detail the incident for which you received disciplinary action and what specifically about the decision are you appealing. Use additional sheets if necessary.

Step 2A: Please provide a description of all pieces of evidence not presented at the disciplinary meeting that are your bases for appeal. Include name(s) of witness(s) and a summary of the testimony to be provided. Use additional sheets if necessary.

Name of Witness(s)	<u>E-mail</u>		Phone No.
Step 3: What is the resolution you are see	eking from the Panel:	Reversal	Modification
Other:			
I attest that the information submitted in	this request is complet	e, truthful and accur	ate.
Student Signature:		Dat	e:

12/5/2023