

DUQUESNE UNIVERSITY
Academic Due Process Grievance Form

Part I. Instructions

- A. Before preparing a grievance under Academic Due Process, you should study carefully the Academic Due Process regulations approved by the University President. Copies of the current regulations are available in the office of the Vice President for Academic Affairs and in the Student Government Association Office.

- B. Before you return this *Academic Due Process Grievance Form* to the Student Government Association Vice President for Academic Affairs, it is recommended that you seek the advice and counsel of one or more of the following individuals:
 - 1. Student Government Association Vice President for Academic Affairs, faculty member, administrator, or student of your choice who is informed about the procedures of the Academic Due Process Policy.
 - 2. Faculty Advisor (your major)
 - 3. Academic Advisor (School or Advising and Counseling Center)
 - 4. Academic Dean of your school

- C. The submission of this form does not constitute an automatic granting of a formal hearing before the University Academic Due Process Committee. Within thirty (30) days of the filing of this grievance, you will be notified of the disposition of your request by the University Vice President for Academic Affairs.

Part II. Statement of the Alleged Grievance

(to be completed by the individual filing the grievance)

Date of filing: _____

Person against whom grievance is being filed: _____

Position within the University (include name of school):

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Part III. General Information

Name of Person Filing Grievance: _____

Permanent Address:

Street: _____

City: _____ State: _____ Zip: _____

Phone Number where you can be reached: _____

School Address

Street: _____

City: _____ State: _____ Zip: _____

Phone number where you can be reached: _____

If a Formal Hearing is granted, I will:

Represent Myself

Represent myself with the aid of an advisor

Advisor will represent me

Attorney will represent me (please see restrictions that apply)

Please list the people that you have talked to about this grievance and the date that you talked to them.

Faculty Member: _____ Date: _____

Department Chairperson: _____ Date: _____

Dean: _____ Date: _____

SGA Vice President of Academic Affairs: _____ Date: _____

State clearly the grievance upon which the hearing is being requested. If additional space is needed to complete your answers, please attach additional sheets of paper of the same size. Refer to alleged infractions of the Academic Due Process Policy by quoting the

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applicable portion thereof, including heading. Please attach copies of anything that will help the University Vice President for Academic Affairs in his decision.

PLEASE TYPE ALL INFORMATION USE THE SPACE BELOW

Signature of Aggrieved Party

Date of Filing

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Part IV. Filing Procedure

Return this form to the Student Government Association Vice President of Academic Affairs, room 302 Union. Before returning this form, make sure all information herein is accurate to the best of your knowledge.

Remember: As stated in the University Student Code, supplying false information to a University officer with the intent to defraud or deceive is punishable by the possible dismissal from the University and possible criminal prosecution by Civil authorities.

Received: _____
SGA Vice President of Academic Affairs

Date: _____