

UNIVERSITY BOARD OF APPEALS DECISION FORM
Washington and Lee University

OFFICE USE ONLY
Date Entered ____/____/____
By _____

Identify Original Proceeding (Conduct Body; Student or Organization Charged; Finding and Sanction(s))	
Name of Persons(s) or Organization Making Appeal (if an organization, identify Student Representative)	Name of Hearing Advisor(s) or Advisor of Choice
Names of Original Claimant and Respondent	
Witness(es)	

APPEAL – Grant or Deny

- Deny and Reasons(s) for UBA’s rejection of Appeal (check all that apply)
 - reasonable basis for sanction
 - no new relevant information presented
 - no procedural defect/error
 - no extraordinary circumstances
- Grant if the UBA reasonably determines the ground(s) would more likely than not impact the underlying decision, and Reason(s) for UBA’s granting of Appeal: (check all that apply)
 - no reasonable basis for sanction
 - new relevant information presented
 - procedural defect/error
 - extraordinary circumstances

HEARING (if applicable)

Was the person or organization making the appeal present at the hearing? yes no
 Was the chair of the original conduct body present at the hearing? yes no
 Was the original respondent or complainant present at the hearing? Respondent yes no Complainant yes no

UBA DECISION, IF APPEAL GRANTED

Part One - -- Affirm or Remand Finding(s) of Conduct Body

- Affirm
- Remand the case to the original conduct body due to (check all grounds that apply):
 - new relevant information presented
 - procedural defect/error
 - extraordinary circumstances

Part Two - --Affirm or Modify the Sanction(s) of the Conduct Body

- Affirm
- Modify Sanction upon a finding of (check all grounds that apply)
 - no reasonable basis in imposing the sanction AND:
 - Impose a different sanction than the original conduct body __
 - Reduce the sanction of the original conduct body __
 - Vacate the sanction of the original conduct body __

IF the SANCTION is MODIFIED, Change the Sanction Imposed by the Conduct Body to:

- Conduct Probation for the next ____ weeks, beginning _____, ending _____.
 - Educational/Counseling Consultation due by _____.
 - \$ ____ Alcohol/Substance Educational Fee
 - Community Restitution for ____ hours due on _____. These are to be served at _____
- Contact Person _____ Phone _____

- Suspension beginning _____ with earliest readmission on _____
- Dismissal beginning _____
- Other _____

FACTS SUPPORTING DECISION AND ANY MODIFICATION OF SANCTION:

(For remand, address new evidence presented, procedural defect/error and/or extraordinary circumstances justifying remand. For modification of sanction, address how sanction violates university policy and/or why UBA found no reasonable basis for sanction. For specifics of UBA sanction modification(s), provide factors considered for each modification.)

Hearing Completed on ____/____/____ at _____ am/pm

Margin of Vote on FINDING: _____

Margin of Vote on SANCTION: _____

University Board of Appeals Members (print/sign)

_____/_____ (chair)

_____/_____

_____/_____

Attachments (as available): Petition for Appeal; Respondent’s Written Response; Other Written Submissions

