



This form should be submitted to the appropriate Department Chair when a student wishes to contest a finding of academic misconduct.

Student Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

LUC Student ID #: \_\_\_\_\_

Student Email: \_\_\_\_\_@luc.edu

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**Appeal Statement**

Prepare a statement that explains in detail why you consider the finding of academic misconduct to be incorrect. Please note that a lack of intention to violate the Academic Integrity Policy by itself does not warrant grounds for an appeal. Include/attach any relevant materials to your appeal and explain their significance in the section below.

**Read Carefully Before Signing**

1. I have read the [Academic Integrity Policy](#), in the Graduate Academic Standards and Regulations in the University Catalog. I clearly understand the standards and regulations stated in this section.
2. I confirm that my appeal statement above is accurate, reasonable, and within the limits of these standards.
3. I confirm that I attempted to resolve this issue relating to academic misconduct with the faculty involved but was unable to reach a resolution.

Student Signature: \_\_\_\_\_

*For Office Use Only*

To be completed by Department Chair(s). If Department Chair(s) does not apply, completed by Dean's Designee of School.

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

**Grounds for Appeal:**

- Yes – refer to academic grievance hearing board**
- No – notify student of decision**

**Rationale:**

**Department Chair/Dean's Designee Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_