STUDENT DISCIPLINARY APPEAL FORM

Internal Use Only
Date Received: **Initial:**
Date Resolved: **Initial:**

A student may appeal a disciplinary decision by filing a written notice of appeal. This form should be submitted to Craig Jackson, Vice President of Student Affairs, Room A-319 , 3300 Macon Tech Dr. Macon, Ga. 31206, cjackson@centralgatech.edu, phone: (478) 757-3508, fax: (478) 757-2574.

STUDENT FILING THE APPEAL:

Name: _____Telephone:_____Student ID: _____

Mailing Address: _____

DATE OF DISCIPLINARY SANCTION: _____TYPE OF SANCTION IMPOSED: _____

Description of Complaint: (*In the space provided below, please indicate the reason why you feel the disciplinary sanctions imposed by the Executive Director of Conduct, Appeals & Compliance, the Vice President for Student Affairs, or the college president designee were inappropriate.)*

SIGNATURE OF STUDENT FILING COMPLAINT:

In accordance with CGTC Student Code of Conduct procedures, I hereby certify that all of the information provided in this document is accurate to the best of my knowledge.

_____ _____

Signature **Date**