Texas A&M University-Corpus Christi
Denial of Informal Resolution Meeting Outcome

1. The Informal Resolution Meeting took place on ___________________________.
   (date)

2. Summary of Rights
   Please initial in the space provided indicating that you understand each statement.
   
   a. _____ I have 5 business days from the day my outcome notification was sent to submit my denial of the outcome of the Informal Resolution Meeting.
   b. _____ I have the right to have an advisor assist me during the hearing. My advisor can confer with me only. He/she cannot speak to the hearing body nor ask questions on my behalf during the hearing process.
   c. _____ I have the right to present witnesses and/or documentation and information to help support my case.
   d. _____ I must provide the name of my requested advisor, any witnesses and copies of any information/documentation I wish to present during the hearing to the Student Conduct Officer in writing at least 2 business days prior to the hearing.
   e. _____ If I fail to appear at the hearing, all matters described will be considered true and I will waive my right to a hearing. In addition, the hearing body may make a determination in my absence. I understand that consideration for the hearing day, time and location will be made in accordance with my academic schedule only.
   f. _____ Notification of a hearing date, time and location will be sent via email whenever possible, or unless otherwise noted.
   g. _____ I have the right to appeal the decision/sanction of the hearing body within 5 business days. I understand that the only acceptable ground for appeal are a violation of the proscribed guidelines and/or new information being obtained. Additionally, I am aware that the appeal must meet the criteria outline in the Student Code of Conduct.

Please address your denial of outcome to:

Student Conduct Officer
Office of the Associate Dean of Students
Texas A&M University-Corpus Christi
6300 Ocean Drive Unit 5792
University Center – Room 206
Corpus Christi, TX 78412

Name: (please print)______________________________________________________________
ID#__________________________________________________

Signature:_____________________________________________________________