



**Discrimination, Harassment and Retaliation Grievance/Complaint Procedure**  
**Appeal Form: Hearing Panel Determination**

This form should be used to appeal all hearing panel determinations

<b>Name:</b>	<b>Phone #:</b>
	<b>E-Mail Address:</b>
<b>Title/Status:</b>	<b>Office or Unit:</b>
<b>Date of Hearing Panel Determination:</b>	<b>Date Reconsideration Filed:</b> <i>Requests for an appeal must be filed within five days of the hearing panel's determination.</i>
<b>Determination(s) being appealed:</b>	
<b>Basis for appeal – check all that apply:</b>	
<input type="checkbox"/> <b>Significant procedural irregularity that denied me a fair process.</b> <i>You must specify the alleged procedural error—identify which provision of the hearing process was violated and how it was violated.</i>	
<input type="checkbox"/> <b>The determination was inconsistent with the evidence.</b> <i>A determination that there was no violation means that the hearing panel found that the evidence did not show that it was more likely than not that a violation of the university discrimination policy occurred. If you disagree with that determination, you may appeal on that basis.</i>	
<input type="checkbox"/> <b>Material new evidence has come to light, which was previously unavailable.</b> <i>Any new evidence may not be merely corroborative or repetitive. If you are providing new evidence, you must provide the reason for your submission (i.e. the evidence was unknown during the investigation; the evidence was unavailable during the investigation).</i>	
<b>In a separate document, please provide an explanation for the basis of your appeal and provide any other relevant documentation or other evidence.</b>	
<b>Upon submission of this appeal, the Provost will notify the other party, who has three days to provide a response to be considered in his review of the appeal. The Provost's determination is final and is not subject to further appeal.</b>	
<b>Employee's Signature:</b>	