

Conduct Hearing Advisor Request Form

Students who are alleged to have violated conduct policies and procedures may request permission for the assistance and support of an Advisor during the process. Conduct Hearing Advisors, once authorized by the OSCP Director or designee, may accompany the student in conduct hearing panel proceedings.

Conduct Hearing Advisors are prohibited from participating directly in any of the proceedings, including but not limited to direct interaction with hearing panel members, verbally or in writing, related to the matter. A student with a disability affecting communication may seek a reasonable accommodation to allow an advisor or interpreter to present on their behalf.

Students should not select an individual with the actual or effective purpose of disrupting the proceedings, causing emotional distress to parties involved, or otherwise attempting to disrupt the process. Students are expected to ensure their chosen Advisor is familiar with and compliant with all procedural requirements. Individuals who may serve as witnesses in the conduct process may not be a Conduct Hearing Advisor.

This request must be emailed to OSCP@westernu.edu at least three (3) days prior to the scheduled student conduct meeting or hearing.

Name of Conduct Hearing Advisor:

Address:

Email Address:

Phone:

Limited Release of Information for Conduct Proceedings

The Family Educational Rights and Privacy Act (FERPA) allows students to give higher education administrators permission to release educational records and/or information, including student conduct records.

By submitting this form, I am requesting permission to be accompanied by the above referenced individual during my participation in the University student conduct process. I have shared information about the hearing process with this individual, including the role of an Advisor in the conduct process. I further understand that if this individual does not adhere to the expectations of the role, they may be removed from the hearing.

Additionally, I am requesting that:

- Copies of any related official communications (i.e., Conduct Hearing Panel's decision) regarding this matter be sent to the above referenced individual. I recognize that a failure to select this option will result in all official communications regarding this matter being issued only to myself.

Student Name: _____

ID #: _____

Student Signature: _____

Date: _____

For University Use

- Received by: _____ Date: _____
- Reviewed by OSCP Director or designee: _____ Date: _____
- Decision: ☐ Authorized ☐ Denied: _____

SUBMIT A COPY TO THE REGISTRAR WITHIN 48 HOURS OF COMPLETION