

## AUTHORIZATION TO WAIVE THREE-DAY NOTIFICATION FOR DISCIPLINARY HEARING

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I, \_\_\_\_\_,  
(Print Name)

do hereby waive my right to a three-day notification of my scheduled Student Disciplinary Hearing and elect to have it heard on \_\_\_\_\_. By doing so, I waive my right to appeal any outcome or sanction based on not adhering to Due Process based on not having a three-day notification as is stated in the Guide to Student Discipline and the Student Handbook. I recognize that I have been informed that I am entitled to the three-business-day notification, but have decided to waive that right.

<i>Student Signature:</i>	<i>Date:</i>
<i>Witness Signature:</i>	<i>Date:</i>

UNIVERSITY POLICE DEPARTMENT  
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