Review Board Application

Students may submit an application to initiate a hearing for the purpose of appealing SU decisions that they believe were unfair or in violation of the SU’s Constitution, Union Bylaw, policies or procedures.

Instructions:

1. Tell us your name and how we can contact you. Anonymous applications will not be considered.
2. Be concise, provide factual details and attach any evidence. You must clearly explain how the alleged facts have resulted in a violation of the SU’s Constitution, Bylaws, policies or procedures, or how these have resulted in unfair processes. You cannot appeal a decision simply because you are unhappy with the decision or do not like the result of an election.
3. Review Board applications are only accepted in person at the SU Main Office (MSC room 251), Monday to Friday 8:30 am to 4:30 pm. Applications and supporting documents must be submitted to the front desk in a sealed envelope, marked private and confidential. Ensure that the envelope is addressed to the attention of the Review Board Chair.

Applicants can expect to receive an initial receipt of the application from the Review Board Chair within two business days of submitting an application.

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| **Applicant Information**  *(include organization/group name if applying on behalf of an organization/group)* | |
| Name of Applicant(s): |  |
| UCID Number: |  |
| Phone Number: |  |
| Email: |  |

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| **Allegation of Facts**  *Describe the decision being appealed (i.e. What happened? Who was involved?). Include the name and position of relevant parties to the decision and provide a timeline of events. Make sure to reference any additional supporting documents you might include with your application, including notable correspondence related to the decision.* |
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| **Reasoned Argument**  *The Review Board has jurisdiction only over justiciable issues of the Union. This means that the Review Board can only make decisions or determinations regarding issues that the SU has the authority to decide. To describe the basis for your application, cite relevant sections of the Constitution, Union Bylaw, Union policy or procedures that you believe were violated or unfair and provide a comprehensive explanation of how the alleged facts constitute such a violation.* |
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| **Remedies Sought**  *Applicants must clearly state the outcome they are seeking as a result of their application to the Review Board. (E.g. To invalidate and overturn an election result or a CRO, SLC, committee or elected official decision)* |
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| Signature of Applicant |  |
| Submission Date |  |