

Warren College Elections
Violation Grievance Form
Submit this form to the Dean of Student Affairs office

Complainant Name: _____ Spokesperson Phone: _____

Official Spokesperson (can be complainant): _____ Spokesperson E-Mail: _____

Spokesperson Mailing Address: _____

Accused Name (or slate name): _____

Specific violations (include nature, date, time, place, other parties involved):

Summary of relevant supporting evidence:

Judicial relief sought:

I hereby acknowledge that the above statements are true and am requesting the Warren College Judicial Board hold hearings to determine judicial relief.

Signature of complainant

Date

FOR OFFICIAL USE ONLY

Date of filing: _____

Received by: _____