



**WILMINGTON
UNIVERSITY**

Office of the Registrar
320 DuPont Highway
New Castle DE 19720
(302) 356-6930/Fax (302) 328-8907
registrar@wilmu.edu - www.wilmu.edu

Student Request for a Hearing

To: Registrar Date _____

From: Student's Name _____ Student ID Number _____

I request a formal hearing concerning correction of what I believe to be inaccurate or misleading information contained in my education records.

The following education record(s) is/are being contested:

I am contesting the information because:

(Use back of sheet if additional space is needed)

Please notify me of the date, time, and place of hearing. My address and telephone number follows:

Home Address _____

Phone Number _____

Student's Signature _____



From: _____ Hearing Officer Date: _____

To: Student's Name _____

The Decision of the Vice President of Academic Affairs is as follows:

NOTE to Student: If the student disagrees with the Vice President of Academic Affairs decision, he/she has the right to place in his/her record a written statement commenting on the information in the record and or/stating his/her reasons for disagreeing with the decision. This explanation will become part of the student's education record as long as this record is maintained and whenever a copy of this record is sent to any party, the explanation will accompany it.

NOTE to Vice President of Academic Affairs: The Vice President of Academic Affairs shall send a copy of this decision to the student and a copy to the Registrar.