



## University Hearing Board Student Application Form

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It is recommended you visit our website [www.uakron.edu/studentconduct](http://www.uakron.edu/studentconduct) to learn more about the University Hearing Board before completing the application.

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

School Address: \_\_\_\_\_  
Street City State Zip

Permanent Address: \_\_\_\_\_  
Street City State Zip

College: \_\_\_\_\_ Major: \_\_\_\_\_ GPA: \_\_\_\_\_

**Class Rank:**

Freshman  Sophomore  Junior  Senior  Graduate  Doctoral

**ESSAY:** (The essay should be typed and no more than one page in length)

Please describe why you are interested in serving as a student member of the University Hearing Board, and explain what qualities you possess that you believe will make you an effective member of the board.

**I hereby acknowledge that the information stated above is accurate and I give permission to the Department of Student Conduct to verify my conduct status and academic progress as a student at The University of Akron. By signing, I acknowledge my commitment to attend a mandatory training and serve on a minimum of three hearings per semester.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The average hearing board is about three hours and members need to commit to at least 3 hearings per semester. After all applications are submitted, the top applicants will be interviewed.

**Applications can be dropped off in the Department of Student Conduct & Community Standards - Simmons Hall Room 302, Attn: Deborah Novak or emailed to Deborah at - [dnovak@uakron.edu](mailto:dnovak@uakron.edu)**

Office Use Only: Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Entered By: \_\_\_\_\_ Date: \_\_\_\_\_