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| Decision to suspend/exclude a student under the Code of Discipline |  |

These are not penalties, but measures to safeguard the investigation, to protect members of the University community or property. They may also protect the student against further allegations.

# Reason for suspension

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| To enable full and proper investigation by University or police |[ ]
| Risk of injury or harm to students, staff or property |[ ]

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| --- |
| Please specify why suspension is believed to be justified in this case. Any relevant bail conditions should be taken into account: |
|  |

# Measures taken

The risk to others must be balanced against our duty to the student and the student’s contractual rights with the University. The interference with the student’s access to education must be the minimum necessary to guard against harm.

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| Measures taken to facilitate student’s access to education |
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# Representation

Unless the risk is deemed too high, the student should normally be offered the opportunity to make representations about the suspension.

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| Has the student been permitted to make representations? |[ ]
| Student has been offered opportunity but did not make representations |[ ]

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| Student made representations. Please attach, and explain how the decision to suspend took account of these representations |
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| Risk too high to permit representations prior to suspension decision. Please explain. |[ ]
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# Appeal

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| Has the student informed of the right to appeal? |[ ]

# Details of support arrangements (e.g. Referred to Student Services).

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# Any significant dates (e.g. remand date)

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# Full details of the decision (e.g. areas of University where student may/may not enter; individuals the student may/may not contact).

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# Decision maker

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| --- | --- |
| Decision-maker name: |  |
| Date of decision: |  |
| Date to be reviewed: (The initial decision must be reviewed within four weeks) |  |

# Review of decision

|  |  |
| --- | --- |
| Name of reviewer: |  |
| Date of review: |  |

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| --- |
| Please specify what considerations were reviewed |
|  |

|  |  |
| --- | --- |
| Outcome of review: |  |
| Date to be re-reviewed:  |  |

# Re-review of decision

|  |  |
| --- | --- |
| Name of reviewer: |  |
| Date of re-review: |  |

|  |
| --- |
| Please specify what considerations were re-reviewed |
|  |

|  |  |
| --- | --- |
| Outcome of re-review: |  |
| Date to be re-reviewed:  |  |