



### Formal Hearing Request - ATTN: University Registrar

I wish to appeal the outcome of my request to amend or remove information in my student education record. I request a formal hearing concerning correction or removal of what I believe to be inaccurate or misleading information contained in my education records.

_____	_____
<i>Full Name (first, middle, last)</i>	<i>Student Id Number (917#)</i>
_____	_____
<i>Address</i>	<i>Telephone</i>
_____	_____
<i>City, State, and Zip</i>	<i>Email Address (UWG email preferred)</i>

<b>The following education record(s) is/are being contested:</b>   
<b>I am contesting the information because (use back of page if additional space is needed)</b>   

Please notify me of the date, time, and place of the hearing.

_____	_____
<i>Student's Signature</i>	<i>Date</i>

**Student:** Return this form along with a copy of your photo ID to the Momentum Center, 1601 Maple Street, Carrollton, GA 30118 EMAIL [studentsolutions@westga.edu](mailto:studentsolutions@westga.edu)

Decision of the Hearing Panel			
<b>Disposition of request (circle one):</b>	Will Amend	Will Remove	Denied
<b>The decision of the Hearing Panel is as follows (use back of page if additional space is needed):</b>   			
_____	_____	_____	_____
<i>Chairperson (print)</i>		<i>Title</i>	
_____	_____	_____	_____
<i>Chairperson Signature</i>		<i>Date</i>	
<b>Chairperson:</b> Must send a copy of the Panel's decision to the student making the request and forward original either to the Registrar's Office so a copy can be saved in the Student's record. Email: <a href="mailto:registrar@westga.edu">registrar@westga.edu</a>			