



## STUDENT'S DOCUMENTS AND WITNESS LIST

### PRESIDENT'S UBC VANCOUVER AND UBC OKANAGAN NON-ACADEMIC MISCONDUCT COMMITTEES

**STUDENT:**

*Full name*

*Student number*

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*Address*

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*Telephone number*

*Email*

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Indicate with a ✓ any attachments:

- Student's Documents
- List of Student's Recommended Witnesses, including a brief description of what information you believe each proposed witness may be able to provide

**Date:**

**Signature:**

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**NOTE: THESE SUBMISSIONS MUST BE FILED NO LATER THAN 10  
WORKING DAYS AFTER RECEIVING THE STATEMENT OF  
ALLEGATIONS FROM THE CHAIR**

## PERSONAL STATEMENT:

*(Please feel free to attach additional pages as required.)*

**Do you agree with the allegations made against you by the Student Conduct Manager?**

*(You must ✓ one.)*

**AGREE**

**DISAGREE**

**If you AGREE, provide any information that you feel will assist the Committee in understanding why you committed the misconduct, including any relevant extenuating circumstances. Documentation must be provided for verification if you are relying on medical or similar circumstances (e.g. doctor's note including doctor's contact information).**

**If you DISAGREE, provide any information that will assist the Committee in understanding the incident. Be sure to include all facts that you believe are relevant and will assist the Committee in understanding the incident.**