



STUDENT CONDUCT

Expungement Request Form

I hereby request that my disciplinary record be evaluated to be expunged. I understand this request may take up to 5-7 business days to process. *Requests cannot be made over the phone, nor can they be processed without a student's signature. Electronic signatures will be accepted.*

Please complete the questions below. The asterisk (*) indicates a required field.

*Full Name (Please print)

*Signature

*Today's Date

*Date of Birth

Phone

Current E-mail Address

Auburn University Student Information

*First Name When Enrolled

*Middle Name When Enrolled

*Last Name When Enrolled

*Dates of Enrollment (list years):

to

Student ID#

***Please check the boxes below to indicate you understand your record will not be expunged if any of the following apply:**

- If there was more than one violation of the Code of Student Conduct
- If sanction(s) were not completed by the required deadline
- If the incident resulted in physical abuse, providing alcohol to minors, possession of drugs (other than marijuana), distribution or sale of drugs, violation of the weapons policy, sexual misconduct, discrimination, harassment, and/or suspension/expulsion

***In addition to this request form, I have included the following required documents:**

- A minimum of 1 page summary (1" margins, 12 point Times New Roman font, double spaced) stating 1) what steps were taken to address the behavior, 2) how behavior has changed since the incident, and 3) what was learned from the incident. The paper must include proper grammar, correct spelling, sentence structure, and cohesive organization of thought. Only college-level work will be accepted.

The following additional prompts may be helpful when writing the reflection paper: Describe the nature of the violation for which you were found responsible. How does this violation impact other people? What changes have you made that will continue to be useful after college? How do you plan to keep this violation from happening in the future?



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***Verification Waiver:**

- I hereby waive my privacy rights, including, but not limited to, any rights pursuant to the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and grant my consent to authorize the Auburn University Office of Student Conduct to verify the information on this form. I understand this may include contacting my advisor and/or the Registrar's Office to confirm my graduation status.

Complete routing instructions below:

***I would like to be notified of whether my request was approved or denied in the following manner:**

- By mail (Must include a self-addressed, stamped envelope.)
- By e-mail
- By fax
- I will pick up the decision in person at the Student Conduct Office, Auburn University Melton Student Center Suite 1206
- Other