

**BRIGHAM YOUNG UNIVERSITY-HAWAII
HONOR CODE FORMAL ADMINISTRATIVE REVIEW APPLICATION FORM**

To be eligible for an administrative review, this form must be completed and submitted to the Dean of Students by _____.

Name: _____ ID# _____

Current Address: _____

Telephone/Cell: _____

Honor Code Office action: _____ Action date: _____

List below the people you anticipate will participate in your behalf during the review process. You may have two (2) people for personal support (one can be an attorney) as well as witnesses that can give first hand testimony relating to the case.

Support People

Name	Address	Phone

Attorney (You may have an attorney present at the review hearing, but only for purposes of consultation, not to represent or speak for you.)

Name	Address	Phone

Witnesses (Include a brief description of their first-hand testimony.)

Name	Address	Phone	Testimony

Signature: _____ Date: _____

Your signature on this form grants permission for disclosure by the Honor Code Office to the Administrative Review Committee of all facts of your case known to the Honor Code Office.

Attach any supporting documents that you wish to have considered in the Administration Review Process.