

<b>Waiver of Investigation or Appearance before Faculty Affairs Committee</b>			
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Reference Number 2.00 Forms	Board Approval 5/2006	Effective Date 7/1/2018	Page 1 of 1
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TO: \_\_\_\_\_ DATE: \_\_\_\_\_

I waive all rights under the faculty appeals, complaint, disciplinary and dismissal procedures due to the personal or confidential nature of my involvement. I understand that waiving my right is my decision and that I have not been made nor asked to waive these rights by the University or any representative of the University.

POLICY: \_\_\_\_\_ POLICY#: \_\_\_\_\_

REASON FOR WAIVER: \_\_\_\_\_  
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Signature

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Date