

**Southern Scholarship Foundation
Policy Violation**



Resident Name: _____ Email: _____

House: _____ Date Issued: _____ Issued By: _____

You are hereby notified that on _____ (date) you were found in violation of the Southern Scholarship Foundation or the Scholarship House Constitution policy relating to:

_____.

This form must be given to the DSA within 3 days of violation.

Description of violation(s) &/or listing out of fines:

I, _____ acknowledge that I have received the above violation.
Printed Resident Name

Please select one:

- I accept the violation and agree with all that is stated above. I do not need to appeal the violation.
- I accept the violation but would like to appeal the violation with Director of Student Affairs.
- I accept the violation but would like to appeal the violation with the Judicial Review Board.

Resident Signature

Date

House Manager Signature

Date