

Attorney Information Form

The Office of Student Conduct will provide this form to all students prior to their disciplinary hearings. If the student chooses to have an advisor, this form should be filled out and provided to the Office of Student Conduct. All attorneys serving in this capacity must be admitted to practice law in the state of West Virginia.

Required Information

Advisor Name: _____

Bar Number: _____

Firm Name: _____

Address: _____

Email: _____

Phone(s): Office _____

 Cell _____

 Other _____

Student Advising: _____

Student is (check one):

Respondent

Victim

Other _____

My Role as an Attorney

As an attorney, I understand:

1. I may appear as counsel for the above student at the student conduct hearing.
2. I may communicate on behalf of my client with the Office of Student Conduct for matters related to the student's case, disciplinary proceedings or agreed resolutions.
3. Delays will not normally be allowed due to scheduling conflicts of legal counsel or concurrent legal proceedings.
4. I may be dismissed from a hearing should I fail to act in accordance with the outline procedures.

Confidentiality Acknowledgement

By serving as an attorney for the student, you will be privy to confidential materials/information that contain personally identifiable student information. The confidentiality of the process and the student names in the file must be protected.

I understand that the materials/information provided to me by the Office of Student Conduct at West Virginia University are protected by the Family Educational Rights and Privacy Act (FERPA). I agree not to share them with any person not authorized to review them unless otherwise permitted by law.

Signature of this document signifies your acknowledgement of these expectations.

Signature: _____

Date: _____

Please hand deliver or mail to:

Office of Student Conduct
660 N High St.
WVU Morgan House
PO Box 6430
Morgantown, WV 26506