

Please provide all information on this form in printed or typed format and return form to your School Dean.

Student Name:		SID:	
Course:	Semester:	Year:	
Campus/Center:	Faculty Initiator:		
Sexual harassment issues are	reported directly to Human Resou	rces, 652-6532.	
Indicate the following violati	ion(s) of academic integrity:		
☐ Cheating			
☐ Fabrication			
☐ Facilitating Academic Dish	nonesty		
☐ Interference or Sabotage			
Plagiarism			
Retaliation			
☐ Unauthorized Collaboratio	n		
Incident Description (Describ	oe incident <u>in detail</u> and include da	ate, time, location and witnesses.):	
Attach additional sheets as ne	eded.		
As a result of this violation,	the faculty initiator recommend	ds the following sanction(s) be taken	
☐ Do not contact student; ins	stead, file documentation in stude	nt's file in the Discipline Office	
☐ Written Reprimand			
☐ Oral Reprimand			
☐ Failing Grade for the Assig	gnment		
☐ Failing Grade for the Cour	se		
☐ Disciplinary Probation			
☐ Summary School Suspens Removal for the day of		include: to	
Restitution			
Suspension			
Expulsion			
Other Sanction:			

Student was informed of violation? Yes	☐ No, then wh	y?
Faculty Initiator's Signature:		Date:
Phone Number:	Email:	
STUDENT SECTION (Optional)		
I agree with the incident description		
☐ I do NOT agree with the incident descrip	otion	
Student Signature	Date	
Student refuses or is unable to sign form	n, state reason:	
DEAN SECTION		
Date met with the student:		
Recommended sanction taken:		
Date student was notified in writing that incident	dent report is con	ocluded:
Date faculty initiator was notified that incider	nt report is conclu	uded:
Dean's Signature	Date	