

Academic Integrity Referral Form

Documented Agreement

Student Being Referred		Faculty/Administrator Making Referral	
Name:		Name:	
Banner #:		Department:	Select
Violation Date:			
Course	Select	Course #	
Course Title:			
Alleged Violation (Drop down list)			
Violation 1:	select		
Violation 2:	select		
Violation 3:	select		
Violation 4:	select		
Description:			
Documented Agreement/Sanctions (drop down list and option for additional information)			
Sanction 1:	select		
Sanction 2:	select		
Sanction 3:	select		
Other:			
Signatures			
Referring Party:	Date		
Accused Student:	Date		
My signature indicates that I agree to the terms of the documented agreement and thus waive the right to appeal this agreement. I understand that if either a prior violation has been filed OR a future violation occurs, an Academic Integrity Board will be convened by the Provost Office for multiple violations.			