Academic Integrity Referral Form					
<b>Documented Agreement</b>					
Studer	nt Being Refe			dministrator Making Referral	
Name:			Name:		
Banner #:			Department:		
Violation Date	:				
Course			Course #		
Course Title	:				
Alleged Violation (Drop down list)					
Violation 1	:				
Violation 2	:				
Violation 3	:				
Violation 4	:				
Description	:				
Documented	Agreement/S	Sanctions (dro	p down list and	d option for additional information)	
Sanction 1	:				
Sanction 2	:				
Sanction 3	:				
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					

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.