

Academic Integrity Referral Form

Documented Agreement

Student Being Referred		Faculty/Administrator 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/Sanctions (drop down list and option for additional information)			
Sanction 1:			
Sanction 2:			
Sanction 3:			
Other:			
Signatures			
Referring Party:		Date	
Accused Student:		Date	
<p>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.</p>			