CONFIDENTIAL
Report of Academic Misconduct

AGREED SETTLEMENT

Send hard copy to: Brian Fabien, Associate Dean
Office of Academic Affairs, Box 352180

Date of Report: ____________________

Student’s Name: ____________________  Student #: ____________________

Student’s Dept.: ____________________

Course: _____________________________  Quarter & Year: _______________

Type of assignment or exam: ___________________________

Instructor’s Name: ____________________  Department: _______________
Box #: _____________

CHECKLIST OF PROCEDURES:

□ Brief statement of allegation (e.g., plagiarized on assignment #3)

□ Sanction recommended by course instructor (e.g., grade of “0” given on assignment):

□ Verification that student understands a record of this case will be maintained by the Associate Dean for Academic Affairs and, if it is discovered that this is not the first case of misconduct, the case automatically goes through the Referral to the Council on Educational Policy Process.

INSTRUCTOR’S SIGNATURE: ____________________________

STUDENT’S SIGNATURE: ____________________________
(Student’s signature signifies agreement with instructor’s conclusion/proposed sanction)

This is an educational record and the student has the right to see it.