

CONFIDENTIAL

REPORT OF SUSPECTED ACADEMIC MISCONDUCT

Date: _____

Course Title and Number: _____

Name(s) and student ID number(s) of student(s) believed to have violated the Code of Academic Conduct:

Referring Party(ies):

Name: _____	Name: _____
Dept./Address: _____	Dept./Address: _____
E-mail address: _____	E-mail address: _____
Phone(s): _____	Phone(s): _____

(Please include # where message can be left)

Description of circumstances of suspected violation (e.g., date of incident, location, facts leading to suspicion of violation, name(s) of witness(es)). If more space is needed, please attach additional sheets.

*Please attach or mail exams, papers, or other relevant evidence.
Retain originals or copies for your own records in a secure location.*

Submit reports to: Student Judicial Affairs **or e-mail: sja@ucdavis.edu**
3200 Dutton Hall **or fax: 530-754-6195**

If you have questions regarding suspected violations or disciplinary referrals, please contact Student Judicial Affairs at 752-1128 or sja@ucdavis.edu, or see the SJA website at <http://sja.ucdavis.edu/>