

REPORT OF SUSPECTED ON-CAMPUS SOCIAL MISCONDUCT BY UC DAVIS STUDENT

Date: _____

Name(s) and student ID number(s) of student(s) believed to have committed a violation:

Referring Party(ies):

Name: _____ Name: _____

Dept./Address: _____ Dept./Address: _____

Phone(s): _____

Phone(s): _____

E-mail address: _____ E-mail address: _____

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.

Did incident involve alcohol? Yes / No If yes, please answer the following:

1) Under 21 and drinking/possessing alcohol? yes / no

2) Furnishing alcohol to minors or intoxicated persons? yes / no

3) Did police make arrests? yes / no Names of students arrested: _____

4) Any injuries or emergency related to alcohol? yes / no

FAX report to: 754-6195

Student Judicial Affairs
3200 Dutton Hall

or e-mail:
sja@ucdavis.edu

If you have questions, please contact a Student Judicial Affairs staff member at 752-1128.