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:

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________________________________________________________________________________

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.

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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/

University of California, Davis, Division of Student Affairs, Office of Student Judicial Affairs, February, 2008