

**University of Arizona
Code of Academic Integrity
Record of Faculty/Student Conference**

Instructions for Faculty

1. If you have questions, or for more information, contact the Dean of Students Office at **621-7059**
2. Confer with student in private and keep proceedings confidential
3. Present and review the evidence and ask the student to explain
4. Determine if evidence supports a conclusion that the student has violated the Code
5. If a violation occurred, complete this form
6. Hand-deliver completed form to student or send via return-receipt mail
7. Send a copy to the Dean of your college and Dean of Student's Office

FACULTY INFORMATION

| | |
|------------------------------------|---------------------------|
| Faculty Name | Campus Phone |
| Faculty Department | Campus Address |
| Date Form Completed | Semester (required) |
| Class/Section | Date of Alleged Violation |
| Date of Faculty/Student Conference | |

STUDENT INFORMATION

| | |
|-------------------------|-------------------|
| Name | Student ID number |
| Address | |
| | Phone |
| Student's email address | |

VIOLATIONS (check box applicable)

| | | | | | |
|--------------------------|------------------------------------|--------------------------|-------------------|--------------------------|-------------------------|
| <input type="checkbox"/> | Plagiarism | <input type="checkbox"/> | Copying on a test | <input type="checkbox"/> | Using cheat sheets |
| <input type="checkbox"/> | Test modification | <input type="checkbox"/> | Stand in for test | <input type="checkbox"/> | Unauthorized assistance |
| <input type="checkbox"/> | Failure to comply with class rules | <input type="checkbox"/> | Other | | |

Summarize the case:

SANCTIONS

Written warning (this form may constitute written warning)

Loss of credit for work involved in violation of code

Reduction in the course grade

Failing grade in the course

| | | |
|---|---|---------------------|
| <input type="checkbox"/> Notation on transcript | <input type="checkbox"/> Temporary Notation | If Temporary, then: |
| | <input type="checkbox"/> Permanent Notation | From _____ |
| | | To _____ |

| | | |
|---|-------------------------------------|----------------------|
| <input type="checkbox"/> Suspension From: | <input type="checkbox"/> Program | Length of Suspension |
| | <input type="checkbox"/> Department | _____ |
| | <input type="checkbox"/> College | |

NOTE: If suspension is sanction, please consult with student's academic dean

| | |
|--|-------------------------------------|
| <input type="checkbox"/> Expulsion From: | <input type="checkbox"/> Program |
| | <input type="checkbox"/> Department |
| | <input type="checkbox"/> College |
| | <input type="checkbox"/> University |

NOTE: If expulsion is sanction, please consult with student's academic dean

| | |
|----------------------|------|
| Signature of Faculty | Date |
|----------------------|------|

Instructions for Students

1. Carefully read this form and the Code of Academic Integrity at <http://www.dos.web.arizona.edu/academicintegrity/index.html>
2. If you agree the violation occurred, review the sanctions
3. If you accept the sanctions, the case is complete
4. If you do not agree that you violated the code or with the sanctions imposed, you **may appeal to the faculty member's Dean**
5. You have **10 academic days** from receipt of this form to submit an appeal
6. **If you have questions, or for more information contact the Dean of Students Office at 621-7059**
7. Please sign and date this form where indicated below. Your signature on this form means that **you understand the information above and are aware of your right to appeal.**

| | |
|----------------------|------|
| Signature of Student | Date |
|----------------------|------|