ACADEMIC HONOR POLICY: Hearing Referral Form

Note: This form is used by ins has a prior record of academic the instructor's opinion). Stud Sanction" form. <i>Students may n</i>	c dishonesty ents who acc	or when a firs cept responsil	st offense is <i>egregio</i> . Sility but reject the	<i>us</i> as defined e sanctions sl	in the Academic Ho hould be offered a "I	nor Policy (not by Disputing the
Student Name:		(EMPI	EMPLID: LIDs are 9 digits)		Student Email:	
Instructor Name:						
epartment/College:		Course:		Semester:		
Location of Incident:						
Alleged Violation: (Mark/check	k the number(s) corresponding	to the policy violation	r; see <u>https://f</u>	<u>da.fsu.edu/AHP</u>)	
1 2		3	4	5	6	7
Description of the Alleged Vie	olation:					
Date of Alleged Violation:						
Check reason for referral:						
Prior Record ************************************	************* ll documenta	**************************************	ed violation (paper	**************************************	*****	
I recommend that the student completion: YES	to have the NO	opportunity t	o expunge their re	ecord if no fu	arther misconduct oc	curs prior to degree
Instructors a	re welcome to p	rovide more con	text for their above r	recommendation	n on a separate document	:

Instructors: Contact 850-644-6876 or fda-faculty@fsu.edu for assistance

Students: Contact an Academic Honor Policy Advisor via this webpage: <u>https://fda.fsu.edu/academic-resources/academic-honor-policy/hearing-advising</u>