ACADEMIC HONOR POLICY STEP 1 AGREEMENT

Before attempting to reach a Step 1 Agreement, call the Office of Faculty Development and Advancement at 644-6876 to check the student's record.

Student Name:		EMPLID: Student Email:					
	Instructor Email:						
Department/College:							
Location of Incident							
Alleged Violation: (Check nu	umber of code viola	ution – see <u>https://fda.f</u> s	su.edu/AHP)				
1 2	3	4	5	6	7	8	
Description of Alleged Viol	lation:						
Date of Alleged Violation:							
Proposed Sanction:							
Troposed Sanction.							
Students should contact the Offi	ice of Student Con	nduct and Community S	tandards for assisi	ance at the <u>Acader</u>	<u>nic Honor Policy 2</u>	<u> 4dviser</u>	
Request Form or sccs@fsu.edu.	. 1 151 . 1	0 11:	1	D. I 1		,	
I hereby agree that I have v and agree to the proposed s					nner described a	above	
Student Signature:				Date:			
Faculty Signature:				Date:			
(Note: This agreement become				nonestry)			
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Instructors should contact the O							
The instructor should send this	form to:						