## ACADEMIC HONOR POLICY: Hearing Referral Form

Note: This form is used by instructors to refer cases to Academic Honor Policy Hearings. It should be used when the student has a prior record of academic dishonesty or when a first offense is *egregions* as defined in the Academic Honor Policy (not by the instructor's opinion). Students who accept responsibility but reject the sanctions should be offered a "Disputing the Sanction" form. *Students may not drop, withdraw from, or change the grading basis of courses involving Academic Honor Policy allegations.* 

Student Name:	EMPLID:(EMPLIDs are 9 digits)	Student Email:	
Instructor Name:	Instr	ructor Email:	
Department/College:	Course: Semester:		
Location of Incident:			
Alleged Violation: (Mark/check the number(s) correspon	nding to the policy violation; see <u>h</u>	ttps://fda.fsu.edu/AHP)	
1 2 3	4	5 6	7
Date of Alleged Violation:  Proposed Sanction:			
Check reason for referral:  Prior Record Student does referral.	not Accept Responsibility	Egregio	ous Offense
**************************************	**************************************	*********	******
I recommend that the student to have the opportunction: YES NO	nity to expunge their record	if no further misconduct occu	rs prior to degree
Instructors are welcome to provide me	ore context for their above recomn	nendation on a separate document.	
Student Signature:	Date:		
Instructor Signature:	Date:		
(Note: This agreement becomes a confidential stud	lent record of academic dish	onesty.)	

Instructors: Contact the Vice Rector for Academic Affairs for assistance at 317 0367 or aanyfanti@fsu.edu

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