INTO OREGON STATE UNIVERSITY

Student Behavioral and Academic Conduct Report Form

Please complete the first page of this form for all student behavioral or academic conduct issues which result in a verbal warning. Please also complete the second page if the behavioral or academic conduct issue results in an additional penalty from the instructor, of you are requesting an additional penalty from the Care and Conduct Coordinator. Once completed, please return the form to your Program Manager. Assistance for this process can be found in the Staff Info Depot = Forms & Policies = Student Behavioral and Academic Conduct.

Please select:

[] This behavioral/academic conduct issue resulted in a verbal warning. The student was advised that a record of the issue will be sent to the Program Manager and Student Care and Conduct Coordinator and kept on record for 5 years.

(complete page 1 and submit to the Program Manager, copying the Student Care and Conduct Coordinator)

This behavioral/academic conduct issue resulted in a verbal warning and an additional penalty, or a recommendation for an additional penalty.
 (\scomplete pages 1 and 2 and submit to the Program Manager, copying the Student Care and Conduct Coordinator)

Student's name		ID ու	umber			
Student's e-mail	Date of violation					
Course	Program:	AE	GE	Pathway	Level	
Instructor's name	Instructor's e-mail					
[] Behavioral Conduct or						

[] Academic Conduct

If Academic Conduct, which type(s) of academic dishonesty was/were evident:

[] **Plagiarism** (representing the words or ideas of another person as one's own)

[] Cheating (use or attempted use of unauthorized materials, information, or study aids)

[] Assisting (helping another commit an act of academic dishonesty)

[] *Fabricating* (falsification or invention of any information)

[] *Tampering* (altering or interfering with evaluation instruments or documents)

INSTRUCTOR'S SUMMARY OF INCIDENT Submit additional page(s) if needed and attach to this form:

* To be completed by STUDENT in the case of a verbal warning.

[] I understand that (1) I have been given a verbal warning, (2) that a record of the issue will be sent to the Student Care and Conduct Coordinator and kept on record for 5 years and (3) that there is no further penalty.

INTO

Student's Signature

Date

Instructor's Signature

Date

INSTRUCTOR, you are completing this page because the behavioral/academic conduct issue resulted in a verbal warning and an additional penalty or a recommendation for an additional penalty. Before assigning an additional penalty, please confirm who you have consulted:

□ I have consulted with a member of the Management team. Who?_____

□ I have consulted with another colleague(s). Who?_____

INSTRUCTOR'S PENALTY	CARE AND CONDUCT RECOMMENDED
Note penalty(s) below, give additional information if	PENALTY
necessary and sign.	Note recommended penalty(s) below, give additional
	information if necessary and sign
[] Official Written Warning	
[] Behavior Expectations Agreement	[] No Contact Order
[] Penalty on a piece of academic work	[] Required Educational Activity (i.e. community service)
[] Penalty for class/course/program	[] Informational meeting with campus partner
[] Student asked to leave the class (reported after	[] Other (please give details) :
occurrence of penalty)	
[] Other (please give details) :	If necessary, please give any additional detail or information
	regarding the recommended penalty:
If necessary, please give any additional detail or information	
regarding the penalty:	
Note: Information regarding OSU sanctions can be found	
here and other options should be discussed with the	Note: Information regarding OSU sanctions can be found
Program Manager and/or the Care and Conduct Coordinator:	here and other options should be discussed with the with
http://oregonstate.edu/studentconduct/code/index.php#sanc	the Program Manager and/or the Care and Conduct
tions	Coordinator:
	http://oregonstate.edu/studentconduct/code/index.php#sanc
	tions
Instructor's Signature:	Date:

Response/Explanation - in the case of a conduct violation with a penalty/penalty recommendation (to be completed by STUDENT)

Student may attach additional page(s) if needed.

Please check one.

[] I accept responsibility for the conduct violation(s) described above.

[] I disagree that a conduct violation has occurred. I understand that I have 5 business days to appeal the charge to the Student Care and Conduct Coordinator.

Student's Signature:

Date:

INSTRUCTOR, if the box above is not signed by the student, please note reason:

□ Student was unavailable to meet with me. Please attach evidence (e.g. emails) of reasonable attempts to contact the student.

□ Student met with me but refused to sign.

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INTO

□ Other (please give reason):

Thank you for your assistance. Please return to your Program Manager, coping the Care and Conduct Coordinator