

University of Miami Honor Code Alleged Violation Report

Course: _____ Section: _____ Classroom: _____	
Instructor: _____	
Student(s) Involved (only those being accused):	
Name: _____	Student Number: _____
Name: _____	Student Number: _____
Witnesses:	
Name: _____	Student Number: _____
Name: _____	Student Number: _____
Name: _____	Student Number: _____
Date of Incident: _____	Time of Incident: _____

Please describe the incident in question. Please be sure to include all pertinent facts. You may attach extra sheets if necessary.

Person Submitting Report: _____
Title: _____
Phone #: _____ Email: _____
Signature: _____ Date: _____

Please include any other documentation (papers, tests, etc.) as may be helpful in determining the truth of the charge made. Please mark this package "Confidential" and send to: Honor Council, Dean of Students' Office, Building 21-H, Locator Code 5570. If you have any questions, please contact the Honor Council Graduate Assistant at 305-284-5354 or via email at honorcouncil@miami.edu.