ACADEMIC INTEGRITY VIOLATION NOTIFICATION FORM
(One student per form)

DATE: ____________________________________________
TO: ______________________________________________
FROM: _____________________________________________

SUBJECT: Alleged Violation of the Academic Integrity Policy

Enclosed you will find a copy of a report which indicates a possible violation of Wright State University’s Academic Integrity Policy. It is very important that you contact me no later than

____________________________________  \_________  \_________
Time  Day  Date

to schedule a meeting to discuss this issue. Please contact me between 9:00 a.m. and 5:00 p.m., Monday through Friday to schedule your appointment. I can be reached by phone at ____________________________
or by e-mail at ________________________________________________.

Please be aware that if you should fail to schedule a meeting by the date noted, or choose not to attend your scheduled appointment, a decision will be made in your absence based upon the information available as to whether or not a violation of Academic Integrity has taken place. Additionally, you will be billed a $35.00 non-appearance fee and referred to the Academic Integrity Hearing Panel for possible disciplinary action. Please refer to the Student Code of Conduct at http://www.wright.edu/community-standards-and-student-conduct/code-of-student-conduct/academic-integrity for information about the judicial process.

Thank you for your cooperation in this matter.

Distribution:
Copy - Student: Send to student with a copy of the Academic Integrity Violation Form
Copy - Faculty Member: Retain if found responsible or referred to Academic Integrity Hearing Panel, destroy if case is dismissed
Copy - Office Community Standards and Student Conduct: Send if found responsible or referred to Academic Integrity Hearing Panel

Revised 7/25/2016

Wright State University Office of Community Standards and Student Conduct - 022 Student Union 937.775.4240