Date:

Name of Instructor: Email:

Course Name:

Course Prefix & Number: CRN:

Full Name of Student Involved:

700 Number of Student:

*(Please fill out a separate form for each student if multiple students were involved in the same incident.)*

Brief description of incident, including the date and time of the incident:

Resolution/action taken & date:

***Faculty Member****: The faculty member must notify the student by meeting with the student (for online/distance courses, alternative meeting methods may substitute) and sending an e-mail with this form attached. The Assistant Vice President for Student Success should be copied on the email to the student using this address: msunkel@coloradomesa.edu.*

***Students:*** *Students have a right to appeal any sanction applied by following the “Appeal Procedure for Sanctions for Academic Dishonesty” as stated in the CMU Maverick Guide.*

The student was notified on by means of:

 (Date)

\_\_\_CMU e-mail \_\_\_Phone Call \_\_\_Personal Meeting \_\_\_Other (please specify):

Signature of Faculty Member Date Signature of Department Head Date