

YOUNGSTOWN STATE UNIVERSITY ACADEMIC INTEGRITY FORM

For alleged violations of the Academic Integrity policy, as defined in The Student Code of Conduct



Faculty Name & Department: _____ Date: _____

Student's Name: _____ YSU Banner ID: _____

Violation description: (Please attach statement with additional information.)

- Warning: _____
- Lowering the grade on the exam, paper, or assignment: _____
- Lowering the final grade: _____
- Other: _____ Due: _____
- Request additional action from the Academic Grievance Subcommittee, such as removal from a course, suspension, or expulsion: _____

By signing this form, I:

- Acknowledge that the conduct process and my rights within that process have been reviewed with me, including that I have five (5) University working days to sign and return this form.
- Have the option to meet with my Departmental Chairperson and College Dean prior to signing this form.
- Acknowledge that I was given the ability to inspect and review all relevant information regarding the violation(s) in question.
- Voluntarily waive my right to a hearing regarding these charges and accept this agreement as final resolution of this matter.
- Understand that if I fail to meet any of the conditions listed above, I may be subject to further disciplinary action and/or an administrative hold may be placed on my account.
- Understand this report will be forwarded to The Office of Student Conduct for review.
- Understand that refusal to sign this document or failure to respond will result in a referral for an Academic Grievance Hearing.

I agree to the charge:

I agree to the sanction:

Student Signature

Student Signature

Date

- Student did not respond. Student declined to sign.

Faculty Member Name

Faculty Member Signature

Date

*I acknowledge receipt of this form.

Chairperson's Name

Chairperson's Signature

Date

Dean's Name

Dean's Signature

Date

A letter will be emailed to your YSU email address, which will serve as the formal acknowledgement of this agreement.