Earlham College Academic Integrity Violation Form

Student Name: _____ **Date of Violation:** _____

Instructor Name: _____ **Course #:** _____
(Please Print)

Course Title: _____

Has the Student been notified of violation: _____

Did you and the student reach an understanding of the incident in question? -
_____

Explanation of Incident:

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RECOMMENDED SANCTION: _____

Signature: _____ **Date:**_____