

Student Conduct Case Referral Form
American University

(Please print this form and return to Student Conduct and Conflict Resolution Services, 408 Butler Pavilion, or fax to (202) 885-1594. Questions contact Student Conduct at (202) 885-3328.)

Complainant

Name:
Dept:
Address:
Telephone:
Class Year (if applicable):

Respondent(s) (List additional names on pages, if needed)

Name:
AUID:
In-session address:
Telephone:
Class year:
School:
Date of birth:

Name:
AUID:
In-session address:
Telephone:
Class year:
School:
Date of birth:

INCIDENT INFORMATION:

Date of Incident:
Time of Incident:
Location of Incident:

Others involved in the incident (please make reference to them in the description of the incident):

Student Conduct Code (SCC) – Prohibited Conduct VI. regulation(s) allegedly violated:

Explanation of Incident: (Attach additional pages, if needed)

The statements are a true and accurate representation of the incident as it occurred, and I understand that intentional misrepresentation of facts may result in disciplinary action. I understand that this information will become a matter of record with Student Conduct and Conflict Resolution Services and could be used by a hearing panel or hearing officer. By signing this form, I give consent to release all relevant information pertaining to this incident.

Complainant Signature _____ Date: _____

For Office Use Only
Received by: _____ File Number _____

Follow up action (if any): _____