HONOR CODE VIOLATION REPORT

Note to Student:

• Today’s date is __________.
  
  o There is a mandatory two university business day waiting period before you can sign this form. That is, you may not sign this form until the third university business day after today’s date.
  
  o The deadline to sign is the close of business on the fifth university business day after today’s date.

• You can use this time to ask for information about Honor Code policies and procedures from the Advisory Resource Person in your College/School, or for advice from any other trusted source.

• If this HCVR is not signed by the fifth university business day, this case will be referred to the appropriate College/School Honesty Committee.

• Please initial here to indicate that you received the document on the date above, and that you understand this timeline and the consequences of not signing. You are not admitting guilt or agreeing to the alleged violation by initialing: _____

Student Name: ______________________________   Student ndID: ____________________

Instructor Name: ________________________

Course Information: Department: _______ Number: _______ Section: _______

Semester: _________ Year: __________

Level of Honor Code violation: Minor _____ Major _____ Flagrant_____
(For Guidance, see section 4.4 of the Procedural Appendix at honorcode.nd.edu)

Briefly describe the nature of the Honor Code violation:

Briefly describe the agreed-upon penalty:

We, the undersigned, attest that this report accurately states both the nature of the Honor Code violation that occurred in this course and the penalty that we have agreed is appropriate for this violation.
For the Instructor: I attest that I will not penalize the student for this infraction of the Honor Code in any way other than that described above.

Instructor Signature: _________________________________ Date: ____________________

For the Student: I hereby waive my right to a hearing to adjudicate this case. I understand that this agreement is permanent and irrevocable, and that I may not at any point endeavor to withdraw from this course. I understand that if I am found responsible for a second violation of the Honor Code, the Director of Academic Standards will assign a further penalty, up to and including dismissal.

Student Signature: _________________________________ Date: ____________________

This report must be signed by the student and the instructor, and each should keep a copy.

Send the original copy to the Office of Academic Standards, 217 Main Building. The Director of Academic Standards will review the form within seven days of receiving it. Please do not impose the penalty until you receive a confirmation.