

BEHAVIORAL REFERRAL FORM

STUDENT CONDUCT AND COMMUNITY STANDARDS

Date of Report: _____

Name of Student Involved: _____ Banner ID: _____

Telephone (if known): _____ E-mail: _____

Please refer to the *Student Code of Conduct*, appendices A and B, for behavioral expectations outlined in sections 202 and 203. The *Student Code of Conduct* is available in the Student Conduct and Community Standards (SCCS) office (UC 2.02.18), the appendix of the *UTSA Information Bulletin*, and on the SCCS website, <http://utsa.edu/studentlife/conduct>.

Please check the most appropriate charge(s) to define a student's alleged violation(s):

- | | | |
|--|--|----------------------------------|
| <input type="checkbox"/> Alcohol/Drugs | <input type="checkbox"/> Failure to Comply | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Assault | <input type="checkbox"/> False Information | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Computer Abuse | <input type="checkbox"/> Harassment | <input type="checkbox"/> Weapon |
| <input type="checkbox"/> Damage to Property | <input type="checkbox"/> Hazing | <input type="checkbox"/> Other |
| <input type="checkbox"/> Disruptive Behavior | <input type="checkbox"/> Sexual Assault | |

Date of Incident: _____ Time: _____ Location/Class: _____

Name of Faculty/Staff Witness(es): _____ Title: _____

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Name of Student Witness(es): _____ Banner ID: _____

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Summary of Alleged Behavior (Specific facts ***may be reviewed by the student.*** Attach additional sheets if ***necessary.***) Please type here:
Maximum Characters=300

Name of Person Bringing Charge(s): _____

E-mail Address: _____ Phone: _____ Campus Address: _____

DELIVER TO: Student Conduct and Community Standards, SU 2.02.18, (210) 458-4720

OR

Scan and e-mail to: Marian.Harris@utsa.edu and Anne.Jimenez@utsa.edu

MUST BE REVIEWED BEFORE SUBMITTED

Reviewed by: Supervisor: _____ Title: _____ Ext.: _____

Signature: _____ Date Reviewed: _____