

University of South Florida
USF Sarasota-Manatee, Office of Student Services
Student Judicial Services
Student Referral Form

Name of Student being Referred: _____

Student ID Number (if known): _____

Address (if known): _____

Telephone Number (if known): _____

Date and Time of Incident: _____

Location of Incident (i.e. course, room number, etc.): _____

Explanation of Incident:

Continue on back if necessary

Complainant

Name: _____

(Check one) Student Staff Faculty Other _____ If student, Student ID number _____

Address: _____ Email Address: _____

Telephone Number: _____

List relevant witnesses:

I, _____ request a referral of the incident to the USF Sarasota-Manatee Disciplinary Officer for the purpose of further investigation to determine whether or not a violation of the University's Student Code of Conduct has occurred.

Signature: _____ Date: _____

Return to: Pamela Doerr, Vice Chancellor Student Services, SMC C107, 359-4348