

Report to Honor Code Council Intervention Sub-Committee

2. REPORTER (may remain anonymous, however appreciate your name for follow-up): 3. NATURE OF COMPLAINT: 7. Description of Complaint:	we 5. DATE OF DISCOVERY: 6. DATE OF SUBMISSION:
	6. DATE OF SUBMISSION:
7. Description of Complaint:	
8. Additional Information Attached (if applicable):	
This information represents a truthful and accurate representation and agree to abide by my rights and obligations as	
9. Signature of Reporter (may remain anonymous, see abo	ove) Date
9. How to turn in form: Completed reports should be turned Mallory Wilson in Student Services. Reports will be acted up	
FOR OFFICE USE ONLY:	
10. RECEIVED BY:	11. DATE RECEIVED:
	/ /
12. Reporter: 13. CAS	SE NUMBER:
15. 67.	