

Personal Misconduct Reporting Form

Indiana University Purdue University Indianapolis

Send all information to Tralicia Lewis, Director, Office of Student Rights, Responsibilities, and Conduct, Campus Center CE 350. Retain a copy of everything you send.

Note: the information stated in this form may be used in university conduct hearings.

Name of person making report _____ Date _____

IUPUI email address _____ Phone number _____

Type of incident (refer to Code of Student Rights, Responsibilities, and Conduct)

- | | | |
|-----------------------------|--------------------------|------------------------|
| -Abuse (physical or verbal) | -Alcohol or Drugs | -Computer Misuse |
| -Failure to comply | -Disorderly Conduct | -Forgery or False Info |
| -Lewd or Indecent Behavior | -Destruction of Property | -Theft |
| -Sexual Assault/Rape | -Weapons | -Harassment |
| -Other _____ | | |

Student (s) Involved

Name _____ University ID _____
Name _____ University ID _____
Name _____ University ID _____
Name _____ University ID _____

Date of Incident _____ Time of Incident _____ am/pm

Location of Incident or Department and Course Number _____

Did the student threaten you or others? _____ yes _____ no

Describe what occurred. Attach a detailed description of the incident.

Witnesses to the Incident

Name _____ Contact (email or phone) _____

Name _____ Contact (email or phone) _____