



KSU Dept. of Student Conduct and Academic Integrity (SCAI)
Formerly Office of Judiciary Programs

Student General Misconduct Incident Report

Please print this form and return it to the SCAI Dept. Mail drop #3801

Do not use this form if the incident took place in university housing, even if the students involved are not residential students. Please contact the appropriate CRL and have him/her use departmental software instead.

Faculty/Accuser Name: _____ Date: _____

Department _____ Phone: _____

Student (s) Involved in the Misconduct:

Name: _____ KSU ID#: _____

Name: _____ KSU ID#: _____

Misconduct Occurred:

Date of Incident: _____ Time of Incident: _____

Location of Incident: _____

Others Involved in Incident: _____

Code of Conduct regulation(s) allegedly violated: _____

Explanation of Incident: (Attach additional pages, if needed)

This statement is a true and accurate representation of the facts of the incident.

Signature _____ Date: _____

For SCAI Use Only

Received: _____ File Number: _____