



Office of Student Conduct

Student Conduct
Informational Form
To Be Completed by Student

Office Use Only

Incident #: _____
MM/DD/YY and time of meeting:

Staff Person Initials:

Prior to meeting with an Ohio Northern University staff person, please complete this form. The form will be placed in your file, which is kept in the Student Affairs office for **four** years after separation from ONU.

First Name

Last Name

Student I.D. #

Email (@onu)

GPA

Phone #

What is your class year?

1st/P1

2nd/P2

3rd/P3

4th/P4

5th/P5

6th/P6

What college are you enrolled in?

A&S

Bus. Admn.

Eng.

Pharm.

Law

Major

List any on or off-campus employment

List any co-curricular or Athletic activities (regardless of season)

You were documented for an incident and will be meeting to discuss that incident. If you wish, you may provide a narrative of the events from your perspective:

TO BE COMPLETED FOLLOWING MEETING

Policy Violation(s) Discussed: _____

Signature of Student Accepting Responsibility for violation(s) listed above

Initial if you *do not* accept responsibility and wish to go to a hearing.