**School/Department of ……………..**

**Academic Misconduct Meeting – Student Statement**

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| **Student Name**: School to complete |
| **Student ID Number**: School to complete |
| **Programme of Study**: School to complete |

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| **Nature of alleged misconduct**: School to complete |
| **Module(s) affected**: School to complete (if applicable) |
| **Date of Meeting**: School to complete |
| **Deadline for return of Student Statement: School to complete** |

Please provide a written statement which:

* Acknowledges what it is you are alleged to have done
* Acknowledges why what is alleged counts as academic misconduct
* Provides an account of events, which may include an explanation for your behaviour

You may continue on a separate sheet if you wish.

If the statement is not returned by the deadline indicated above, the Head of School will proceed based on the findings of the School investigation.

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| Student’s Signature: | Date: |