

## **Investigation Participation Form**

Name: Rocket #:
Classification: ☐ 1 <sup>st</sup> Year ☐ 2 <sup>nd</sup> Year ☐ 3 <sup>rd</sup> Year ☐ 4 <sup>th</sup> Year ☐ Graduate
Local Address:
Mobile Number:
UToledo E-Mail Address:
You have identified yourself as having knowledge of, or have been identified as witness to, an incident involving alleged violation(s) of The University of Toledo Student Code of Conduct. As such, you are being asked to participate in an official University investigation. You have an obligation to respond truthfully and completely to the questions asked by the University Official(s) conducting this investigation. Failure to do so may result in student conduct action being taken against you.
Information provided to the Investigator(s) can result in the issuance of charges of alleged violations of the UToledo Student Code of Conduct. Therefore, you should be aware that you can choose not to make a statement. In addition to providing information to the Investigator(s), you have the option to report this matter to appropriate law enforcement officials. Actions taken by the University should not be construed as preventing/precluding your option to pursue action local law enforcement.
Please acknowledge each statement by placing your initials in the space provided:
I will be accurate and truthful in my statements to the Investigator(s).
I have the option to make a report with the appropriate law enforcement agency.
I understand that any information I provide in this investigation may be made available the respondent and/or complainant (if applicable) if the University Office of Student Conduct a Community Standards decides to move forward with conduct charges.
I understand that any attempt to disrupt and/or obstruct the investigation into this mat with individual(s) directly or indirectly involved may result in individual University Student Conduct violation(s).
Date:
Student Name (Printed):
Student Signature:
Investigator A Name (Printed):
Investigator B Name (Printed):