

REPORT ON VIOLATION OF ACADEMIC INTEGRITY

Date _____

Student _____
(last) (first) (ID)

Course _____
(number) (title) (semester/year)

Professor _____

Type of infraction:

_____ Plagiarism
_____ Other: _____

Brief description of the infraction: (Attach specific evidence)

Action taken by Professor:

_____ failing grade for course
_____ failing grade for assignment
_____ redo the assignment for _____ credit
_____ other: _____

Signature of Professor _____

Signature of Student _____

_____ I have viewed the evidence and acknowledge the infraction.
_____ I have viewed the evidence but do not acknowledge the infraction and wish to appeal this charge to the appropriate academic administrator from the Dean's Office.

Signature of Witness _____
(name) (position)

