Academic Violation Reporting Form

Student's Name: _____ ID Number: _____

Instructor's Name: _____ Phone: _____

Date of Incident: _____ Type of Incident: ☐ Cheating or ☐ Plagiarism

Course in which the violation occurred: _____

I, _____, understand that I have committed an academic violation in the course listed above. I have discussed with my instructor the egregious nature of the offense and have been made aware of the punishment in which I am receiving for the offense.

Nature of the complaint: _____

Consequence: (Please check appropriate outcome(s))

☐ Rewrite/Retake (with no penalty)

☐ Rewrite/Retake (reduction in grade)

☐ Failure for assignment/exam

☐ Failure of class

☐ Recommendation to honor court

_____
Student's Signature Date

_____
Instructor's Signature Date

_____
Department Chair's Signature Date