

REPORT OF ACADEMIC MISCONDUCT

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 _____ **Date:** _____

Signature of Student _____ **Date:** _____

_____ I have viewed the evidence, acknowledge the infraction and agree with the action taken by professor.
_____ I have viewed the evidence and acknowledge the infraction, but wish to appeal the action taken by the professor.
_____ 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.

Student comments about the infraction: The student is encouraged to write a personal statement about the alleged incident and submit it to the Academic Dean's Office within one week of signing this form, even if he/she does not intend to appeal.

Signature of Witness _____
(Name) (Position)