

CONFIDENTIAL
Report of Suspected Violation of
Academic Dishonesty

A faculty member who suspects a student has violated Holy Names University's Procedures on Academic Dishonesty shall meet with the student face-to-face to discuss the matter with the student and hear the student's response. If, despite the faculty member's good faith effort to schedule such a discussion, the student fails to meet, the faculty member should complete the investigation, impose their recommended penalty, and complete this form within 15 days of the suspected violation.

After meeting with the student and conducting any additional investigation needed, the faculty member shall make a decision as to whether misconduct occurred.

- If the faculty member concludes that no misconduct occurred, the matter ends there. There is no academic sanction imposed, and there will be no record in the student's file of a dishonesty charge.
- If the faculty member concludes that academic dishonesty occurred, s/he may impose an academic sanction for the course. Sanctions that may be imposed by the faculty member include but are not limited to those listed on the attached form.

The faculty member should use this form if, at the conclusion of the informal student conference, s/he concludes that the student in question violated the Policy on Academic Honesty, or the student in question failed to meet with the faculty member. The faculty member completes and returns this form to The Assistant Academic Dean in Hester room 5 who tracks student conduct.

CONFIDENTIAL
Holy Names University
Academic Dishonesty Reporting Form

Please complete this form and return to the Assistant Academic Dean and your academic chairperson within 15 days of meeting with the student to discuss allegations. It is not necessary to type this form, but please make it legible!

1. It has been concluded that the following student committed a violation of the Holy Names University Procedures on Academic Dishonesty:

Name _____ Student ID# _____

Dept./Course No./Section No. _____

Semester/Year _____

2. Type of violation:

_____ Cheating _____ Plagiarism _____ Fabrication of Information

_____ Facilitation of Student Cheating _____ Other (please explain)

3. Summary of the incident (attach a summary if more space is needed):

4. Academic sanction imposed by instructor—check all that apply.

(Additional penalties may be imposed by the Vice President, Academic Affairs after reviewing this form and other records.)

- _____ referred for administrative sanctions
- _____ failing grade on assignment, exam, paper, or project involved
- _____ lower grade on assignment, exam, paper, or project involved
- _____ resubmit assignment, paper or project (specify requirements and due date)
- _____ retake exam
- _____ complete additional assignment, course work, exam, or paper
- _____ reprimand orally
- _____ no penalty
- _____ other (please specify sanction)

NOTE: A grade of "F" earned in the course as a result of sanctions for academic dishonesty is final and shall be placed on the transcript. If the student withdraws from the course, a "W" will not replace an "F" earned as a result of academic dishonesty.

Faculty Name (please print) _____

Dept. _____

Phone# _____

Signature _____

Date _____

5. Appeals: A student has the right to appeal the faculty member's decision that the student committed the alleged act of academic dishonesty (see the catalog, the Student Handbook for procedures, timeline and appropriate person to receive such appeal).

Should you have any questions about the discipline procedures, please contact the Assistant Academic Dean (510-436-1207).

6. Student Response:

A. I understand the violation with which I am charged and accept the faculty disposition. I understand that if circumstances warrant, the Vice President, Academic Affairs may consider additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Associate Academic Dean.

Student Signature _____ Date _____

Mailing Address _____

Phone _____

B. I understand the violation with which I am charged, but do not admit responsibility and claim my right to appeal. My appeal must be submitted in writing, first to the Chairperson of the Department or Division of the course within 15 days of the date I received this form. If I wish to appeal further I would do so to the Vice President for Academic Affairs within 15 days of receiving the response to my appeal to the Chairperson. I understand that if circumstances warrant, the Vice President of Academic Affairs may also consider additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Associate Academic Dean.

Student Signature _____ Date _____

Mailing Address _____

Phone _____

C. The course in which the alleged incident of academic dishonesty occurred in is taught on-line; therefore, the informal student conference was conducted via e-mail, chat, phone, or other remote communication. The student:

___ Selected response option A above.

___ Selected response option B above.

D. Please select all that apply and initial. A meeting was not held because:

___ student did not appear at scheduled meeting

___ student did not respond to my request for a meeting

___ would not sign this form

___ other (please explain):

_____ Faculty Initials