

(revised 01/16/2025)

*Upon finding evidence of a breach of academic, a faculty member completes and emails this Report of a Possible Breach of Academic Integrity form, along with documentary evidence, to the Dean of the school in which this course is housed.*

Faculty Name: \_\_\_\_\_ Date of Report: \_\_\_\_\_

### Student/Course Information

Student Name: \_\_\_\_\_ ID: \_\_\_\_\_ Email: \_\_\_\_\_

Course & Section: \_\_\_\_\_ Term: \_\_\_\_\_

### Details of Possible Breach of Academic Integrity

Faculty Summary: (Attach supporting documentation. Please attach proof of the breach—be specific and describe only what you have found. We cannot uphold decisions based upon suspicions without evidence.)

Faculty opinion on student's intent:

I believe this breach was intentional (student understood prior that it was a breach of academic integrity)

I believe this breach was unintentional (student did not understand prior that it was a breach of academic integrity)

### Faculty Decision

Option 1 – Support Services:

Referral to Academic Integrity Support Meeting

*Precludes the options for sanctions below and should be chosen when you believe that the student did not deliberately breach academic integrity or needs guidance to prevent future potential breaches.*

Option 2 – Suggested Sanctions (please choose ONE):

Issuance of formal warning—Student will receive letter from the Office of the Provost which will be kept on file

Failure of the assignment on which breach occurred

Failure of the course in which breach occurred

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received by Dean's Office: \_\_\_\_\_

Is this the student's first reported offense? (check w/Provost's Office)

Yes

No

Does the student admit to the breach?

Yes

No

Dean's Office informed the student of the right to appeal faculty recommendations, including referral to academic integrity support:

Date Informed: \_\_\_\_\_

Dean's Initials: \_\_\_\_\_

Accept referral and agree to academic integrity support meeting

Accept recommended sanction

Appeal recommendation of faculty member

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date appeal to the Academic Integrity Committee filed: \_\_\_\_\_

Was appeal filed with Academic Integrity Committee within 7 days of notification of action.

Yes

No

Action recommended by Academic Integrity Committee:

Uphold faculty decision

Reduce/Overturn faculty d

