



Academic Integrity Violation Report Form

If you have questions, please contact the Dean of Students Office at 334-5514.

This form should be filled out during the Faculty/Student Conference. Please read this document carefully. When completed, it constitutes an agreement between the student and the University community. Failure to abide by agreements in this document may result in the student's removal from UNCG.

Student's Name (please print): _____ Student ID#: _____

Address: _____ Phone: _____

City, State, Zip: _____ E-mail: _____

I. Student rights and options for the Faculty-Student Conference: The accused student should place his or her initials beside *EACH* statement of the student's rights signifying that the student has read and understands each right.

THE ACCUSED STUDENT SHALL INITIAL BY ALL STATEMENTS BELOW:

_____ I, the student, understand that I have the right to postpone the conference with the faculty member and/or entering my plea for at most two (2) business days.

_____ I, the student, understand that I am under no pressure, either overt or implied, to admit responsibility.

_____ I, the student, understand that if I do not admit responsibility, the matter will go through the Academic Integrity Panel Hearing Process.

_____ I, the student, understand that I cannot drop, nor grade replace a course in which an academic integrity violation occurred.

_____ I, the student, understand that I may consult with the Student Government Attorney General (office: 334-5720; cell: 669-9086) and the Dean of Students Office (334-5514).

_____ I understand that if I am a graduate student, an Academic Integrity violation could lead to the loss of funding provided by The Graduate School to include assistantships, fellowships, scholarships, and other benefits such as tuition waiver and health insurance.

II. Statement of Academic Integrity Violation: *(To be completed by the accuser/faculty member.)* I, the faculty member, believe that the student identified above has committed the following breach of the *Academic Integrity Policy* which is a violation of the University value of *Honesty*. (See Section III VIOLATIONS of the *Academic Integrity Policy*.)

Plagiarism Cheating Falsification Misuse of Academic Resources Facilitating Academic Dishonesty

Explanation/Description of violation: _____

The alleged violation occurred in _____ during _____ on _____
(course number and section) (semester) (date violation occurred)

The sanction proposed for this violation is _____
 (For sanction ranges, see Section III VIOLATIONS of the *Academic Integrity Policy*.)

III. Student Plea: THE ACCUSED STUDENT SHALL INITIAL BY ONE (1) CHOICE BELOW.

_____ A. I, the student, accept responsibility for this violation and the sanction(s) proposed by the faculty member, as described above. I understand that if this is my second proven or admitted violation, I will be either suspended or expelled from the University.

_____ B. I, the student, accept responsibility for this violation, but I do not accept the sanctions proposed by the faculty member, as described above. I understand that I must appeal the sanctions to the faculty member's Department Chair as specified in the Grade Appeals Process.

_____ C. I, the student, do not accept responsibility for the alleged violation and request that an Academic Integrity Hearing Panel review the allegation.

 Accused Student Signature

 Date of Signature

Instructor's Name: Mr. Ms. Dr. (please print) _____

Instructor Phone: _____ Instructor E-mail: _____

Instructor's Department & Campus Address: _____

 Instructor's Signature

 Date of Signature

Please send this completed form to:
 Dean of Students Office, 141 Mossman Building
<http://academicintegrity.uncg.edu>
 334-5514

3 copies: 1) Dean of Students; 2) Student; 3) Instructor

Revised 8/2008

