Academic Integrity Violation Report Form

Student Name: __________________ Course No: __________________
Student ID: __________________ Course Name: __________________
Date of Incident: __________________ Faculty Name: __________________
Term of Incident: __________________ Faculty Phone/E-mail: __________________

Brief description of violation (if necessary, additional sheets may be used).

Brief description of discussion held with student(s).

Sanction determined by instructor.

Student's Signature Accepting Sanction ____________________________
Instructor's Signature Accepting Sanction ____________________________

SEND TO:
Frederick Whelan, Assistant Dean
Arts and Sciences Undergraduate Studies
140 Thackeray Hall