Faculty Report Form Incidents of Suspected Academic Dishonesty

Please complete this form in full to report any instance of suspected academic dishonesty. Make a copy for your records and forward the original, along with copies of any supporting documentation (e.g., exam, answer sheet, student's paper with notations, examples of plagiarized sources) where appropriate to the:

Office of the Dean of Students 55 Lexington Avenue Room 2-255 for Box B2-255	Questions and follow up can be directed to Dr. Ron Aaron at 646-312-4577 or Chris Diggs at 646-312-4573	
Instructor Name:		
Department:	Telephone No.:	
E-Mail Address:		
Course:	-	
Student Name:	Student ID #:	
Date of Incident:		
Type of Incident: Cheating	PlagiarismOther	
Explanation of Incident:		
What is your stated policy on cheating anA failing grade on the exam/paper	d plagiarism: A failing grade in the courseOther (please explai	n):
Have you spoken with the student about h	is/her alleged behavior?	
If so, did the student admit to the charge of YesNo	of cheating, plagiarism or other act of academic dishonesty?	
If so, has the student agreed to your recor	nmended sanction?	
YesNo		
Signature of Faculty Member	Date	