TO: The Academic Senate
FROM: Faculty Affairs Committee (FAC)
SUBJECT: Modification of the Academic Dishonesty Incident Report Form
PURPOSE: For Action by the Academic Senate

ACTION REQUESTED: That the Academic Senate Approve the proposed Modifications to the Academic Dishonesty Incident Report Form

BACKGROUND
INFORMATION: At its meetings on February 20 and May 21, 2008 the Faculty Affairs Committee discussed the questions provided by AVP Bellone regarding the Academic Dishonesty Policy and Incident Report form. FAC voted to approve the changes to the Incident Report form, as highlighted on the attachment. FAC also voted that university actions regarding academic dishonesty should remain the same as in the past:

- FAC voted that the SYS+ notation “No credit repeat” was preferred over the PeopleSoft notation of “Academic Dishonesty: Not eligible for Repeat”

- FAC wanted no change in the policy for when the “No Credit Repeat” notation should be placed on the student’s transcript. Current policy is to place it when the course grade has been adjusted

- FAC wanted no change in current practice of leaving the “No Credit Repeat” notation on the transcript forever

- FAC wanted no change in the policy of how the “No Credit Repeat” notation can be removed which is covered by Section 5 of the current Academic Dishonesty Policy.
ACADEMIC DISHONESTY INCIDENT REPORT

Name of Student: ________________________________________________________________

Last    First    Initial    NetID (Required)

Name of Instructor: __________________________________________________________________

Last    First

Department: _______________________
Office: _______________________
Phone: _______________________

Course Name & Number: _____________________  Date of Incident: _______________________

Location of Incident: ______________________________________________________________

Brief Statement of Incident (use attachment if necessary): _________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Was the Student Informed? (see 3.1. 3.2)______________________________________________

If so, how and when? _____________________________________________________________

Please select which action is being taken as a result of this incident (check all that apply):

☐ Student has been issued a warning.
☐ Student is required to resubmit work or retake an exam under specified conditions and with a possible grade penalty.
☐ Grade has been adjusted for the assignment. The grade has been changed to _________.
☐ Grade for the course has been adjusted. The grade has been changed to _____________.

*Please note if the course grade is adjusted, academic renewal will not be permitted.

Instructor’s Signature: ___________________________ Date: __________________

Department Chair’s Acknowledgement: ______________________ Date: __________________

Dean’s Acknowledgement: _________________________ Date: __________________