



ACADEMIC MISCONDUCT REPORTING FORM

Before proceeding with a conference with the student, the instructor should consult the [Code of Student Rights, Responsibilities, and Conduct](#) (the Code) and the [IU Northwest Student Code of Conduct Hearing Procedures](#). Should you have any questions about the discipline procedures, please contact the Dean of Students.

The instructor should use this form at the conclusion of the informal conference to document compliance with the Code. The instructor is required to report the matter, in writing, to the Dean of Students, who will inform the student of their right to have the decision reviewed by a higher authority.

1. I have concluded that the following student committed a violation of IUN's academic misconduct policy:

Name _____ Student ID# _____

Dept. & Course No _____ Section No. _____

2. Type of violation (please attach a detailed summary of the incident):

Cheating

Fabrication

Facilitation

Interference

Plagiarism

Violation of Course Rules

3. Academic sanction imposed by the instructor.

no penalty

resubmit assignment, paper or project (specify requirements and due date)

retake exam

complete additional assignment, course work, exam or paper involved

lower grade on assignment, exam, or paper involved

failing grade on assignment, exam or paper involved

required to withdraw from course with W or F, at instructor's discretion

a lowered final grade or failing grade for the course – please specify grade

Instructor Name (please print) _____ Office location _____

Signature _____ Date _____ Phone _____

4. **Appeals: A student has the right to appeal** the faculty member's decisions that the student committed the act of misconduct and/or the faculty member's decision to impose a particular academic sanction.

5. **Student Response:**

A. I understand the violation with which I am charged, accept faculty disposition, waive my right to a hearing and accept the academic sanction. I understand that if circumstances warrant, the Dean of Students may consider additional sanctions and a hearing with proper notification will be held to consider any additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Dean of Students.

Student Signature _____

Mailing Address _____

Phone _____ Date _____

B. I understand the violation with which I am charged, **but do not admit responsibility and claim my right to a hearing** in accordance with the policy of the unit responsible for the course in which the violation allegedly occurred. The appeal must be submitted, in writing to the appropriate office within the academic unit in which the violation occurred, within 7 days of being notified in writing of the faculty member's decision concerning the violation. I understand that if circumstances warrant, the Dean of Students may also consider sanctions and a hearing with proper notification will be held to consider any additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Dean of Students.

Student Signature _____

Mailing Address _____

Phone _____ Date _____

C. The student did not appear, was unavailable, or would not sign this form. _____
(instructor initials)

6. **Department Chair's Signature (if applicable)** _____

7. **Dean's Signature (if applicable)** _____

SEND THE COMPLETED FORM TO: Vice Chancellor for Student Affairs and Enrollment Management, nwstuaff@iun.edu, Savannah Center 223, 3400 Broadway, Gary, IN 46408, fax 219-980-6587