

Academic Misconduct Report Form

File #: _____

A: To be completed by reporting employee

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| Student name: | Student ID: |
| Instructor/staff name: | Course #: |

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| <u>Type of Academic Misconduct</u> <input type="radio"/> Cheating <input type="radio"/> Plagiarism | <u>Date of Incident:</u> |
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Provide a description of the incident. Attach supporting documents (copy of assignment, names of witnesses, evidence of unauthorized sources, etc.) as necessary.

Describe the sanction imposed, including any mark penalties or remedial agreements made with the student.

Would you like to refer this student to any of the following college services? (These are recommendations only, and cannot be included in your sanction above.)

| | |
|---------------------------------------|---|
| <input type="radio"/> Tutorial Centre | <input type="radio"/> Services for Students with Disabilities |
| <input type="radio"/> Writing Centre | <input type="radio"/> Academic Integrity Workshop |

Signature of instructor/staff: _____

Date of incident: _____

Date of student notification: _____

The personal information collected on this form is used for administering the investigation and adjudication of academic misconduct reports. Collection is authorized under section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act* and is managed in accordance with the Act. Questions about the collection and use of the personal information can be directed the Office of Student Judicial Affairs, Room 1-207, 10215 108 Street NW, Edmonton, AB T5J 1L6, 780.644.6490.

Academic Misconduct Report Form

B: To be completed by student

You have five business days (day one is the first working day after you are notified) to fill out Section B and return it to your instructor or the OSJA. If you do not return the form, this will be interpreted as acceptance of both the description and the sanction. If you have any questions about this form, contact the Office of Student Judicial Affairs by email at OSJA@norquest.ca or by phone at 780.644.6490.

| | |
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| Do you agree with the description of the incident? | <input type="radio"/> Yes <input type="radio"/> No |
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| Do you agree with the sanction that has been imposed? | <input type="radio"/> Yes <input type="radio"/> No |
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If you answered "no" to any of the above, explain. Attach supporting documents as necessary.

Signature of student: _____

Date: _____

Return form by: _____

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C: To be completed by the Office of Student Judicial Affairs

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| Are there any previous incidents on record? | <input type="radio"/> No <input type="radio"/> Yes File: _____ |
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| File forwarded for review to (provide name): | <input type="radio"/> Program Chair <input type="radio"/> Associate Dean <input type="radio"/> Dean/Director <input type="radio"/> Hearing Panel <input type="radio"/> None |
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