

## **Ohlone College Academic Dishonesty Reporting Form**

A faculty member who suspects a student has violated Ohlone College's Procedures on Academic Dishonesty shall meet with the student face-to-face to discuss the matter with the student and hear the student's response. If, despite the faculty member's good faith effort to schedule such a discussion, the student fails to meet, the faculty member should complete the investigation, impose their recommended penalty, and complete this form.

After meeting with the student and conducting any additional investigation needed, the faculty member shall make a decision as to whether misconduct occurred.

- If the faculty member concludes that no misconduct occurred, the matter ends there. There is no academic sanction imposed, and there will be no record in the student's file of a dishonesty charge.
- If the faculty member concludes that academic dishonesty occurred, s/he may impose an academic sanction for the course. Sanctions that may be imposed by the faculty member include but are not limited to those listed on the attached form.

The faculty member should use this form if at the conclusion of the informal student conference they conclude that the student in question violated the Procedures on Academic Dishonesty, or the student in question failed to meet with the faculty member. Complete and return this form to Ron Travenick, Vice President, Student Services in 7112 and send a copy to your academic dean.

The Vice President, Student Services tracks student conduct. Contact this office for inquiries regarding possible past incidents of academic dishonesty for specific students (659-6262).

## Academic Dishonesty Reporting Form

Please complete this form and return to the Vice President, Student Services and your academic dean within 14 days of meeting with the student to discuss allegations. It is not necessary to type this form, but please make it legible!

1. **It has been concluded that the following student committed a violation of the Ohlone College Procedures on Academic Dishonesty:**

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Dept./Course No./Section No. \_\_\_\_\_

Semester/Year \_\_\_\_\_

2. **Type of violation:**

\_\_\_\_\_ Cheating      \_\_\_\_\_ Plagiarism      \_\_\_\_\_ Fabrication of Information

\_\_\_\_\_ Facilitation of Student Cheating      \_\_\_\_\_ Other

3. **Summary of the incident (attach a summary if more space is needed):**

4. **Academic sanction imposed by instructor – check all that apply.** (Additional penalties may be imposed by the Vice President, Student Services after reviewing this form and other records.)

\_\_\_\_\_ referred for administrative sanctions

\_\_\_\_\_ required to drop/withdraw from course

\_\_\_\_\_ failing grade on assignment, exam, paper, or project involved

\_\_\_\_\_ lower grade on assignment, exam, paper, or project involved

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

\_\_\_\_\_ retake exam

\_\_\_\_\_ complete additional assignment, course work, exam, or paper

\_\_\_\_\_ reprimand orally

\_\_\_\_\_ no penalty

\_\_\_\_\_ other (please specify sanction)

NOTE: A grade of "F" earned in the course as a result of sanctions for academic dishonesty is final and shall be placed on the transcript. If the student withdraws from the course, a "W" will not replace an "F" earned as a result of academic dishonesty.

Faculty Name (please print) \_\_\_\_\_

Dept. \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

5. **Appeals:** A student has the right to appeal the faculty member's decision that the student committed the alleged act of academic dishonesty.

Should you have any questions about the discipline procedures, please contact the Vice President, Student Services (510-659-6262).

**6. Student Response:**

- A. I understand the violation with which I am charged and accept the faculty disposition. I understand that if circumstances warrant, the Vice President, Student Services may consider additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Vice President, Student Services.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

- B. I understand the violation with which I am charged, but do not admit responsibility and claim my right to appeal. The appeal must be submitted in writing, to the Vice President, Student Services, within 14 days of the date signed above. I understand that if circumstances warrant, the Vice President may also consider additional sanctions. I understand that this form will be kept in a confidential file in the Office of the Vice President, Student Services.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

- C. The course in which the alleged incident of academic dishonesty occurred in is taught on-line; therefore, the informal student conference was conducted via e-mail, chat, phone, or other remote communication. The student:

\_\_\_ Selected response option A above.

\_\_\_ Selected response option B above.

- D. Please select all that apply and initial. A meeting was not held because:

\_\_\_ student did not appear at scheduled meeting

\_\_\_ student was unavailable to meet

\_\_\_ student did not respond to my request for a meeting

\_\_\_ would not sign this form

\_\_\_ other (please explain):

\_\_\_\_\_ Faculty Initials