

Faculty Report Form

It is necessary to complete this form to report any instance of suspected and/or resolved academic dishonesty. Make a copy for your records and forward the original, along with copies of all available supporting documentation, to the:

Office of the Academic Integrity Officer

The City College of New York

Instructor Name: _____
Dept.: _____
Tel. No: _____ Email: _____
Course: _____ Section: _____ Semester: _____
Student Name: _____
Student ID#: _____
Date of Incident: _____
Type of Incident:
Cheating _____ Plagiarism _____ Other _____
Explanation of Incident:

Did the student admit to the charge of cheating, plagiarism or other act of academic dishonesty? Yes _____ No _____

Explanation:

Explanation of recommended sanction:

Referral to the Academic Integrity Officer _____

Signature of Faculty Member _____

Date: _____

Resolution of the Case after Adjudication

Academic Sanction _____

Disciplinary Sanction _____

Signature of Academic Integrity Officer _____

Date: _____