



Academic Integrity Violation Form

Instructor Report

I believe that the student identified below has committed the following breach of the Academic Integrity Policy:

Student Name _____ Student ID _____

Conference Date: _____

(Check one and then describe)

Cheating Plagiarism Falsification Facilitating Academic Dishonesty

The alleged offense occurred in the course:

Course _____ Semester _____ Date _____ Location _____

The penalty proposed for this offense is:

Instructor's Name _____

Instructor's Signature _____

Date _____

After completing both the Instructor Report and Student Response sections of this form, please return both pages to the Academic Integrity Coordinator, care of the Academic Success Center, Rowley 1034

Student Response

Conference Date: _____

Please read carefully. Your response constitutes an agreement between yourself and the University community. Failure to abide by agreements in this document can result in dismissal from Marymount University.

Acknowledgement of Rights (Read and place your initials on each line signifying that you have read and understood each right)

Initials I am aware that the Academic Integrity Policy recommends that I confer with the faculty member regarding the violation.

Initials I understand that I may continue the conference at this time, that I may postpone the conference for up to two business days, or that I may refuse to participate in the conference.

Initials I understand that I am under no pressure, either overt or implied, to admit responsibility, and that I do not have to accept the penalty suggested by the faculty member.

Initials I understand that if I do not agree to have a conference with the faculty member, do not admit responsibility, or do not accept the suggested penalty, the matter will go through the Hearing Panel process.

Initials I understand that I can consult the Student Government Judicial Board representatives and/or the Academic Integrity Coordinator for information about the Academic Integrity process.

I Choose to (Please initial ONE option)

Initials Continue the conference.

Initials Postpone it for up to two business days.

Initials Stop the conference and refer the matter to a Hearing Panel.

Acknowledgement of Options - To Be Completed After the Conference (Please initial ONE option)

Initials I accept responsibility for this offense and the penalty proposed by the faculty member. I understand that if this is my second proven offense, I am subject to suspension or expulsion from Marymount University.

Initials I accept responsibility for this offense but do not accept the penalty proposed by the faculty member. I request that a Hearing Panel review the matter.

Initials I do not accept responsibility for the alleged offense and request that a Hearing Panel review the allegation.

Student's Name _____

Student ID # _____

Student Signature _____

Date _____