



# Academic Dishonesty Report Form

Please read document carefully. When complete it constitutes an agreement between you and the University community.

**To be completed by the complainant**

Complainant's Name (please print): \_\_\_\_\_ Department: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Accused Student's Name (please print): \_\_\_\_\_ and ID #: \_\_\_\_\_

I believe the student named above has committed academic dishonesty, as I next describe (**include documentation such as plagiarized sources, SafeAssign report, or similar documents** when submitting to the Office of Student Accountability and Advocacy):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of the offense: \_\_\_\_\_ Course name & number: \_\_\_\_\_

*Check all that apply*

\_\_\_\_\_ I have imposed a grade of Zero (or F) on the above assignment.

\_\_\_\_\_ I have assigned an "F" for the course. If a student is found guilty of academic dishonesty as a result of the student accountability process, an "F" will be recorded as that student's grade.

\_\_\_\_\_ I believe this act of Academic Dishonesty requires a greater sanction and I request a Resolution Conference.

\_\_\_\_\_ Because the act of Academic Dishonesty occurred at the end of the term, I am assigning a semester grade of "I".

\_\_\_\_\_ It has not been feasible to show the accused student this report.

\_\_\_\_\_ The accused student has refused to complete his/her portion of this report.

Complainant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**To be completed by the accused student**

By signing your initials, choose one of the three responses below.

If you do not select the first choice, then this case will be heard through the student accountability process which is outlined in the University of New Orleans Student Code of Conduct. The UNO Student Code of Conduct appears in the University of New Orleans Student Policy Manual, which can also be found on the University's web page, <http://www.uno.edu>.

\_\_\_\_\_ I admit to an act of academic dishonesty, as described above, and accept the penalty which has been so far imposed.

\_\_\_\_\_ I admit to an act of academic dishonesty as described above, but the penalty which has been so far imposed is inappropriate, and I request a Resolution Conference.

\_\_\_\_\_ I deny having committed academic dishonesty as alleged above and feel no penalty should be imposed and I request a Resolution Conference.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Distribution: 1) Original to Complainant; 2) Copy to Student; 3) Copy to Director, Student Accountability, Advocacy & Disability Services; 4) Copy to Department Chair; 5) Copy to Dean of Instructor's College**