



University of Findlay

Academic Dishonesty Form

Step 1 - Infraction Summary (To be completed by the reporting faculty member)

Student Name _____ Student ID# _____

Course Number _____ Course Title _____

Course Session & Year _____

Academic Department _____

Instructor Name _____

Date Academic Dishonesty Discovered _____

Brief Description of Academic Dishonesty _____

Instructor Signature _____ Date _____

Confirmation Signature _____ Date _____

(Confirmation from the Designated College Delegate)

Course of Action: (Select all that apply)

Student will receive academic counseling from instructor.

Student will receive a zero (0) grade on the associated assignment.

Student will receive a grade of "F" for the course.

Other: _____

