



PACIFIC LUTHERAN UNIVERSITY
ACADEMIC DISHONESTY REPORT FORM

Instructor _____ **Date of Report** _____

Course Department and Number _____ **Course Name** _____

STUDENT(S) INVOLVED

<i>Name</i>	<i>Student ID Number</i>	<i>Name</i>	<i>Student ID Number</i>
_____	_____	_____	_____
_____	_____	_____	_____

SUMMARY OF FACTS

Please complete as specifically as possible all sections which apply.

Date of Incident(s) _____

Location of Incident(s) _____

Coursework in which dishonesty is suspected

Please indicate what percentage of course grade this work represents.

_____ Term Paper	_____ Final Examination
_____ Lab	_____ Other Examination
_____ Oral Presentation	_____ Other _____

Witnesses to the Incident(s)

<i>Name</i>	<i>Student ID Number</i>	<i>Name</i>	<i>Student ID Number</i>
_____	_____	_____	_____
_____	_____	_____	_____

Do you wish to convene an Academic Dishonesty Hearing Panel? YES _____ NO _____

An Academic Dishonesty Hearing Panel will automatically be convened if there is already another report on file.

Please provide a complete summary of the incident. Your summary must include the following:

- how you became aware of the misconduct;
- a description of the misconduct (see Academic Integrity Policy for violations);
- a description of any physical evidence (attach evidence if available);
- if appropriate, a diagram of the locations of the student(s) involved and witnesses if applicable;
- evidence which may support allegations of plagiarism, including photocopies or citations of original materials.

Signature of Reporter _____ **Date** _____

Please submit this form and all evidence to the Chair of the Campus Life Committee.