



Notification of Academic Integrity Policy Violation Great Falls College MSU

Print Form

INSTRUCTOR _____ DATE OF INCIDENT _____

COURSE NAME & NUMBER _____

STUDENT(S) INVOLVED: (Name & ID Number) _____

(Please use one form for each student involved in the incident.)

NATURE OF VIOLATION (Include a brief description of the incident and attach any documentation):

- Cheating
 Falsification/Fabrication
 Tampering
 Plagiarism
 Facilitation of academic misconduct
 Multiple Submissions
 Other academic misconduct

Description of Incident:

Incident discussed with student(s)? Yes No If No, Why?

Witnesses? Yes No If Yes, name(s):

Instructor's academic sanction [e.g., "F" grade or "0" score, etc.]

- Oral reprimand
 Written reprimand (copy attached)
 An assignment to repeat the work or an alternate assignment
 A lower grade or failing grade on the particular assignment or test
 A lower grade or failing grade in the course

Description of Sanction:

Instructor's Signature _____

Date _____

OFFICE USE ONLY

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Division Director

Associate Dean for Student Services

Associate Dean for Student Services
2100 16th Avenue South
Great Falls, MT 59405
406-771-5133

* Full documentation of the incident should accompany the copy of this form that goes to the Associate Dean of Student Services