REPORT OF ACADEMIC DISHONESTY
FORMAL CHARGE

STUDENT NAME ___________________________________________ ID _____________________
COURSE ________________________________________________ SEMESTER/YEAR __________
INSTRUCTOR ___________________________________________ DEPT _____________________
E-MAIL ________________________________________________ TELEPHONE # ______________

DESCRIPTION OF INCIDENT: Attach additional pages if necessary

SANCTION: __________________________________________________________________

(Please note that no sanction may be implemented nor a grade submitted until the appeal process has been completed. If grades are due while a charge is pending submit INC)

Contacted student?: NO ____ YES ____ Date of contact: __________

Student has been informed of the Academic Honesty Policy, including the right to appeal formal charges of academic dishonesty? NO ____ YES ____

Instructor’s Signature ________________________________________ Date _____________________

Please forward this completed form to:
Academic Honesty Board, c/o Office of the Provost, 373 Whitmore - or - honesty@umass.edu

For general information about academic honesty standards or the university’s policy you may contact the University Ombuds Office at 413-545-0867 or e-mail: ombuds@ombuds.umass.edu

This space for use by the Academic Honesty Office:

Charge received: Notification sent: