ACADEMIC INTEGRITY RESOLUTION FORM

Student’s Name: __________________________  Instructor’s Name: ______________________________

UID: ___________________________________  Class: ________________________________________

Course/Section #: _________________________  Department: __________________________________

Date/Time of Incident: _____________________  Office Address/Phone: ___________________________

A meeting to discuss an alleged violation(s) was held with the instructor above in accordance with the Academic Integrity Policy. At the meeting, the following information was determined and the findings are hereby on record.

Please check all that apply:

☐ The student failed to appear or reschedule and is therefore being issued the sanction(s) below. In addition, the student is being referred to the Academic Integrity Hearing Panel for further action as a result of their failure to participate in the process

☐ The student denied responsibility

No agreement of violation reached; referral to Academic Integrity Hearing Panel for adjudication. If found responsible, my sanction recommendations are check below.

☐ Student admitted responsibility for violation and was issued the sanction(s) below (please check all that apply).

Sanctions issued or recommended:

☐ Written reprimand
☐ Retake/Replace assignment
☐ Grade of “0” for the assignment, examination, paper or project
☐ Reduction of final course grade to ______
☐ Grade of “F” for the course
☐ Referral to Academic Integrity Hearing Panel for further sanctioning. This is if faculty member feels additional nonacademic sanctioning is necessary.

Note: In the event an incident is not resolved at the time final grades are to be submitted the Registrar, a temporary grade of “N” should be assigned. Please contact the Office of Community Standards and Student Conduct at studentconduct@wright.edu to have the “N” grade posted.

Instructor’s Signature: ________________________________________________   Date: __________________________

Student’s Signature: _________________________________________________   Date: __________________________

Your signature indicates you (the student) have discussed this incident with your instructor. Furthermore, you agree the information listed above is accurate and you have received a copy of this form. Please understand that if you have denied responsibility for this violation, this matter will be referred to the Academic Integrity Hearing Panel for further adjudication.

Student failed to appear or student refused to sign document
(Please circle one)

Distribution:
Copy – Student: Give to student at conclusion of meeting if found responsible or if being referred to Academic Integrity Hearing Panel
Copy – Faculty Member: Retain in file.
Copy – Office of Community Standards and Student Conduct: Forward if student is found responsible or referred to Academic Integrity Hearing Panel.

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Wright State University Office of Community Standards and Student Conduct - 201 Student Union - (937) 775-4240