

**Academic Integrity Incident Form**

|  |  |  |  |
| --- | --- | --- | --- |
|  | |  | |
| Student Name |  | Student ID Number |
|  | |  | |
| Course Subject/Number |  | Course Name |  |
|  | |  | |
| Term/Year |  | Violation Date |  |

I, ***faculty name and title***, have found that *student name* has violated St. Cloud Technical & Community College’s Student Academic Integrity Code (SCTCC policy S3.28) in the following way(s):

Fabricating data or citations  
 Collaborating in areas prohibited by instructor  
 Facilitation or assisting with dishonesty  
 Tampering with or falsifying records  
 Cheating on examinations  
 Copying another’s work   
 Other (please describe): Click here to enter text.

**Details of alleged violation:** Be as specific as possible in stating the facts. List additional witnesses if known and give description of situation as well as any actions taken by instructor. (Supporting documentation may be attached.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | |
|  |  | |  | |
| Faculty Signature/E-Signature | | Date Notified Student of Incident | | Method of Notification to Student (In Person or Email) |

***Upon completion of this form: email to*** [***academicintegrity@sctcc.edu***](mailto:academicintegrity@sctcc.edu)

**Students**: If you do not accept the above allegation, you can complete the Academic Integrity Appeal Form. Students must submit their appeal within twenty (20) business days from the date they were notified of the Academic Integrity Incident. Appeals can be submitted to [***academicintegrity@sctcc.edu***](mailto:academicintegrity@sctcc.edu). The Academic Integrity website has the appeal form: <http://www.sctcc.edu/academic-integrity>.

Upon submission of this form, the student will receive an email with the information below:

St. Cloud Technical & Community College is a member of Minnesota State and is accredited by the Higher Learning Commission. ADA Accessible Facility. Affirmative Action/Equal Opportunity Education and Employer.