

**Northern Illinois University
Office of Community Standards & Student Conduct
Academic Misconduct Incident Report**

Student Name: _____ Phone: _____

Address: _____

SS#: _____ Major Code: _____ Classification: _____

Department: _____ Course # & Name: _____

Alleged misconduct:

___ Examination date _____ time _____ place _____

___ Paper or project

Statement of facts:

I affirm by my signature that I understand my rights and options as described in the Student Judicial Code.

The case was resolved at the department level.

Sanction: ___ F in course ___ F on exam or paper.

Other (specify): _____

Faculty signature: _____ Date: _____

Student signature: _____ Date: _____

The case was not resolved at the department level.

___ Faculty member recommends sanction greater than a grade of F

___ Student will dispute the facts of the incident through an Academic Misconduct Hearing.

Faculty signature: _____ Date: _____

Student signature: _____ Date: _____

Judicial Affairs Office disposition

Judicial Affairs Officer signature: _____

Date: _____