



Academic Dishonesty Incident Report

Date: _____

Date of Incident: _____

Student Name: _____

Course Title and Number: _____

Reporting Professor: _____

E-mail: _____

Extension: _____

Policy Violated

See WPI Campus Planner and Resource Guide

Description of Incident

Please attach separate sheets as necessary.

Requested Action

- Please check the student's judicial record for previous offenses and contact me at the extension above.
- The student in question requests a hearing before the Campus Hearing Board.
- The case will be handled at the department level with the student's permission. A Department Agreement Form is attached.

Please send the completed form to the Dean of Students Office, Campus Center, and mark the envelope "Confidential". One of the Case Officers in the Dean of Students Office will contact you.