

Academic Honesty Report: Chair

To be completed by Department Chair, when necessary

Student's Name:	
Faculty Member's Name:	
Academic Department:	
Course Name:	
Incident:	
Affirm	
Deny	
Modification of Penalty (describe below)	
Chair's Signature and Date:	

Distribution:

- Student
- Faculty Member
- School Dean
- Dean of Students

Senate Approved 5-2-06

Provost/VPAA Revision 7/18/2019

Administrative Approval 9-6-06