Academic Misconduct

Student Academic Misconduct Referral Form

MIDDLE TENNESSEE STATE UNIVERSITY

Faculty Name: Date:

Department: Phone: E-Mail:

Course Prefix and Number: Section#: Semester:

Student Involved in the Misconduct (please fill out a separate form for each student involved):

Name: M #

Type of incident:

- ☐ Plagiarism
- ☐ Exam taker for hire
- ☐ Other
- ☐ Cheating
- ☐ Unapproved collaboration, team work, etc.

Explain Incident:

Have you met with the student to discuss this situation? ☐ Yes ☐ No ☐ Scheduled to Meet

If yes, please describe the discussion and any agreements made:

What academic penalty are you issuing to the student?

- ☐ Grade reduction
- ☐ Failing grade on exam, test, project, etc.
- ☐ Course failure
- ☐ Other (explain)

Please submit form and all documentation to Michael.Baily@mtsu.edu or 111 Cope Administration Building.