

Attachment A

**Clarkson College
Academic Integrity Conference Form**

This form is to be mutually completed by the student and instructor when issues of Academic Integrity are in question. If more than one student has allegedly violated the policy, a separate Conference Form is required for each student.

Student's Name _____ Date _____

Student's Program of Study _____

Course Number and Title _____

Indicate the Academic Integrity violations (select all that apply):

- | | | |
|--------------------------------------|--|---|
| <input type="checkbox"/> Cheating | <input type="checkbox"/> Collusion | <input type="checkbox"/> Plagiarism |
| <input type="checkbox"/> Fabrication | <input type="checkbox"/> Failure to Report | <input type="checkbox"/> Misrepresentation |
| <input type="checkbox"/> Sabotage | <input type="checkbox"/> Failure to Contribute | <input type="checkbox"/> Other (Please specify) _____ |

Attach rationale and all supporting evidence for the stated Academic Integrity Policy Violation to this form. Evidence should have clear facts and be convincing.

Part II:

Student's Comments:

Results:

- ☐ I agree with the faculty's decision. I am aware that I have fourteen (14) business days from the date this form is signed to submit an appeal in writing to the VPAA, including all evidence.
- ☐ I disagree with the faculty's decision. I am aware that I have fourteen (14) business days from the date this form is signed to submit an appeal in writing to the VPAA, including all evidence.
- ☐ The student selected not to sign or return the form within one (1) business day from the initial meeting scheduled with the faculty.
Student did not meet with faculty member within five (5) business days after multiple attempts to contact the student.

Faculty's Signature

Date

Student's Signature

Date

Copy to: VPAA, Student's Program Director, Student