

Record of Meeting of Academic Honesty Case (Form A)

To be completed at the Program level and forwarded, with relevant documentation, to the Faculty of Graduate Studies Appeals and Academic Honesty Committee via Office of the Dean, Faculty of Graduate Studies.

Student information					
Name		Student number			
Program		Degree & level of study			
Course/activity		Course director/supervisor			
Contact information					
Mailing Address		City	Province	Postal Code	
E-mail		Phone number (primary)	Phone numb	er (secondary)	
			l		
Nature of (suspected) offe	ence (e.g., plagirism, cheating,	etc.)			
Record of exploratory med	eting with student				
Date (mm/dd/yyyy)	Present at meeting				
Outcome of exploratory m	eeting				
 No breach has occurred Student accepts responsibility for breach of academic honesty, and student and Course Director agree on penalty recommendation (please attach Form B) 		Agreement as to breach of academic honesty, but no joint recommendation with regard to penalty (please attach Form B)			
		No resolution/agreement	t		

Privacy: Personal information in connection with this form is collected under the authority of *The York University Act*, 1965 and will be used for educational, administrative and statistical purposes. If you have any questions about the collection, use and disclosure of personal information by York University, please contact: Faculty of Graduate Studies, 230 York Lanes, (416) 736-2100 x 55521.

Record of Meeting of Academic Honesty Case (Form A)

Summary of exploratory meeting (attach a separate page if necessary)			
Ctudent's grade breakdown in course			
Student's grade breakdown in course			
Outline of assignment			
Student signature			
Statem Signature			
Date (mm/dd/yyyy)			
, , , , , , , , , , , , , , , , , , , ,			

Student's Acknowledgement of Academic Offense (Form B, sec. I)

Must be accompanied by Form A.

To the best of my knowledge, the summary of	the exploratory meeting accurately represents the offense and facts of the case.
Course director signature	Date (mm/dd/yyyy)
I accept responsibility for having committed th	ne academic offense described above.
Student signature	Date (mm/dd/yyyy)
Joint Statement of Recomm	nended Penalty (Form B, sec. II)
-	sult the Senate Policy on Academic Honesty for guidelines regarding range of greed-upon penalty cannot exceed failure in a course.
Recommended penalty or penalties	
	d be undertaken only after the Course Director and Student have confirmation faculty of Graduate Studies Appeals and Academic Honesty Committee.
Rationale for this recommendation	
	or educative action described above be imposed. We understand that this e Faculty of Graduate Studies Appeals and Academic Honesty Committee.
Course director signature	Date (mm/dd/yyyy)
Student signature	Date (mm/dd/yyyy)

Individual Statements of Recommended Penalty (Form B, sec. III)

Consult the Senate Policy on Academic Honesty for guidelines regarding the range of penalties before completing this section. Continue recommended penalty and/or rationale on a separate page if necessary.

Student's recommended penalty				
If a remedial penalty has been recommended, it is understood that failure by the student to comply satisfactorily will result in the assignment of the following penalty.				
Rationale for this recommendation				
Student signature	Date (mm/dd/yyyy)			
Course director/program's recommended penalty				
If a remedial penalty has been recommended, it is understood that failure by the student to comply satisfactorily will result in the assignment of the following penalty.				
Rationale for this recommendation				
Course Director/Program Representative signature	Date (mm/dd/yyyy)			