Northwest Community Healthcare (NCH)

PARAMEDIC PROGRAM

**Academic Dishonesty Reporting Form**

This report is to be used by faculty or preceptors to report incidents of Academic Dishonesty within the Paramedic Program and any academic penalties recommended as a result. This form should be completed after communication is unsuccessfully attempted or completed with the student about the incident. You should retain original copies of any test, paper, plagiarized, or falsified documents until the timeframe has passed for the student to challenge the process and/or penalties imposed as described in System policies G1 and D1. You are welcome to append and upload copies of supporting documentation to this form for recordkeeping purposes. A copy of this report will be provided to the student and the EMS MD. Please do NOT include your personal contact information or any other information that you do not want others to see. If you have any questions, please contact the Paramedic Program Director at cmattera@nch.org .

**Background Information**

Be advised that the student(s) involved will receive a copy of this report. Please provide the following:

Your full name: 

Your title: 

Your office phone number: 

Your email address: 

Date of incident:  *must be formatted* ***MM-DD-YYYY***

Time of incident:

Hour : Minute AM or PM

Course Number (ex. EMS 217 hospital clinical; EMS 215 field internship):

**Student(s) Alleged of Academic Dishonesty**

Provide the correct spelling of each student's name. You only need to submit one incident report for each act of dishonesty (i.e. if multiple students were involved in cheating together on a group assignment, you only need to submit one incident report form. If several students individually plagiarized on an assignment independent from each other or were found cheating on a quiz or exam, or submitted falsified documents you should submit one incident report for each)

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| --- |
| Student name(s) PRINT: |

**Incident Information**

Please provide the following information about the incident.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nature of Violation:

|  |  |  |
| --- | --- | --- |
| Plagiarism: Blatant copying | Cheating: Exam/quiz | Falsification of information |
| Plagiarism: Source(s) not cited | Cheating: Assignment | Unauthorized collaboration |
| Plagiarism: Other | Cheating: Placement test | Facilitation of academic dishonesty |
| Other (please explain) |

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| Describe the dishonesty that was observed and/or suspected:What action(s) did you take at the time the dishonesty was discovered/suspected?How did you attempt to approach the student with your observations/concerns? |
| **What was the outcome of your outreach to the student about the incident?**Student accepts responsibility and understands the likely academic penalty.Student accepts responsibility but does not agree with the recommended academic penalty.Student denies the allegation; does not accept responsibility for dishonesty.Student declined the opportunity to meet or did not attend the meeting.Student did not respond to my attempts to contact him/her. List dates and nature of attempts:Other outcome; please describe: |
| **What academic penalty(ies) are you recommending for the dishonesty that occurred?** (Check all that apply)F for course and recommend dismissal from programReduction in grade for courseF or Zero on quiz, exam, assignment, or clinical shiftReduction of grade or points on exam or assignmentOpportunity to resubmit assignment; repeat clinical shift; or extend internship phase Please be aware that if the student has engaged in prior academic dishonesty, if this incident is egregious, or if the dishonesty is not related to a specific course, the student may also be charged through the student misconduct process in addition to receiving the academic penalty you are recommending. Academic penalties are determined by the Paramedic Program Director and EMS Medical Director and can include a variety of responses, including, but not limited to those listed above plus educational activities, probation or expulsion from the Program.By submitting this report, you are acknowledging that the information provided may be viewed by Paramedic Program officials. The information will also be maintained in accordance with applicable record keeping practices. (This includes the Family Educational Rights and Privacy Act (FERPA), which means that if information contained in this report leads to a formal student conduct process, the student whose behavior is in question has the right to review the relevant content.)I understand.  |

**Supporting/Related Documentation**

Photos, video, email, and other supporting documents may be attached. *Maximum 25 megabytes per file*

While not required, supporting documentation can include photocopies of: the student(s)' paper or test, original content that was plagiarized; copies of answer sheets, falsified documents etc. Retain the originals until requested by the EMS office.

**Submit to**: Connie J. Mattera (EMS Administrative Director and Paramedic Program Director) cmattera@nch.or

**EMS OFFICE USE ONLY:**

Final outcome