ACADEMIC MISCONDUCT REPORT FORM (AMRF)

Examination or Coursework

This report is required by the Academic Integrity Policy and the 2015 Examinations Regulation 35.20 of the University College. A notation of 'Suspected Misconduct' is to be made on the student's script and the student allowed to complete the examination/test. The Invigilator/Lecturer observing the behaviour shall complete the report. The Chief Invigilator/Lecturer shall collect any relevant evidence. The student shall read the report and give his/her statement in response overleaf. The report is to be submitted to the Assistant Registrar, Examinations Unit in the case of academic misconduct in an examination and to the Dean, through the Department Head of the course, in the case of a course test or other coursework.

MISCONDUCT OCCURING IN:	☐ Examination	☐ Class Test	☐ Take-home assignment
то:	☐ Assistant Registra	r, Head of Exams	☐ Dean of Faculty
FROM:			
DATE AND TIME OF INCIDENT:		Name of Reporting Invigilator	/ Lecturer
VENUE (if exam):			
COURSE CODE/TITLE:			
STUDENT'S ID NO.:			
STUDENT'S NAME:			
STUDENT'S DEPT.:			
TYPE OF ACADEMIC MIS	SCONDUCT:		
☐ cheating	☐ plagiarism	☐ self-plagiaris	m / multiple submissions
☐ collusion	☐ falsification	n □ seeking an u	nfair advantage
□ other			

	tefacts to this report. Continu	e overleaf or attach additional the Hearing Committee during o	pages as necessary.
EPORTING			
NVIGILATOR/LECTURER:			
	Name	Signature	Date of Report
	Name	3	,,
	Name		
DEPARTMENT HEAD: "UDENT'S STATEMENT (Pleas	Name se respond to the report presen	Signature ated above, indicating any and a	Date Received
	Name se respond to the report presen		Date Received
UDENT'S STATEMENT (Pleas	Name se respond to the report presen considered by the relevant auth	Signature Ited above, indicating any and a thorities. Attach additional page	Date Received all aggravating or s as necessary):
UDENT'S STATEMENT (Pleas mitigating factors to be o	Name se respond to the report presen	Signature ated above, indicating any and a	Date Received
DEPARTMENT HEAD: TUDENT'S STATEMENT (Pleas	Name se respond to the report presen considered by the relevant auth	Signature Ited above, indicating any and a thorities. Attach additional page	Date Received all aggravating or s as necessary):