

ACADEMIC INTEGRITY COUNCIL
Charge of Academic Dishonesty

(This form is to be used by students & administrators after contacting the Academic Integrity Office)

Date: _____
Your Name: _____
Your Phone #: _____
Your Email: _____
Your GW ID#: _____
Your Status: ___ Student ___ Administrator
Title: _____

Subject's Name: _____
Subject's ID #: _____

Please describe in detail the alleged violation of the Code of Academic Integrity, including the type of academic dishonesty (please attach additional sheets as necessary).

Please list any witnesses and their phone numbers/email addresses:

Witness	Phone Number	Email Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

Your Signature

Please keep a copy of this form for your records and forward a copy to the Academic Integrity Office at: 801 22nd St, NW, Phillips Hall, Suite 412, Washington, DC 20052, or email to: integrity@gwu.edu. The Academic Integrity Office will forward the charge to the student and contact all parties regarding a hearing to resolve the charge.