

## **Examination Incident Report Form**

This form is to be completed by the Invigilator of an examination, in consultation with other Invigilator/s or AIHE staff who may have witnessed any alleged misconduct, to report on any examination incident, including disturbance to an examination or breaches of examination procedures by a student.

Examples against each incident type are provided as a guide only.

Please send the report with any supporting documents to the Head of School within 24 hours of the examination.

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Subject code and name							
Examination date & session (am/pm)							
AIHE student number							
Student name							
2. INCIDENT TYPE (Please tick as appropriate)							
Examination disruption (e.g. power failure,	noise disruption, evacuation of exam venue, etc)						
Examination script issue (e.g. errors or om	issions on the examination paper)						
Examination security breach (e.g. missing	examination papers/completed workbooks)						
Student identity not confirmed (e.g. student	nt has presented to examination without photo ID)						
Student illness and/or absence (after the	commencement of examination)						
Alleged academic misconduct:							
Student identification discrepancy (e.g. st	udent appearance and ID photograph do not match)						
Student misbehaviour (e.g. non-compliance	e of instruction from Invigilator)						
Unauthorised materials or devices (e.g. ir	n possession of electronic device or attempting to use written notes)						
Cheating/collusion (e.g. any attempt to che	at/collude or communicate with or copy from another student)						
Other (give details in 'Incident Details' section	Other (give details in 'Incident Details' section below)						
3. INCIDENT DETAILS  Please provide a short report of the incident including details of:  i) What happened (description of incident)  ii) When (what time did the incident occur)  iii) Who (was involved in the incident including student(s); invigilator(s); witnesses  iv) How the incident was dealt with any action taken							



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Invigilator's Name:		Invigilator's	Signature:	Date:						
Co-Invigilator's Name	<b>:</b> :	Co-Invigilator's Signature:		Date:						
OFFICE USE ONLY – AIHE Student and Academic Services										
Date form received			Action taken:							
Form checked by										
4. STUDENT RESPONSE TO THE INCIDENT Student to complete this section in cases of alleged academic misconduct acknowledge that I have read this incident report and I:										
<ul> <li>☐ do agree with its contents</li> <li>☐ do not agree with its contents.</li> <li>☐ have ☐ have not provided a response below outlining my account of the incident.</li> </ul>										
Student account of the incident:										
Student's Name:		Student's Signature:		Date:						
5. ASSESSMENT OF ALLEGATION  Any alleged academic misconduct must be reviewed by the relevant Head of School to assess if a breach of academic integrity has occurred.										
Date of review										
I have reviewed the incident report and any attached documents and find that:										
☐ There has been no misconduct and no further action is required										
☐ There has been misconduct, which will be dealt with in accordance with AIHE's Academic Integrity Procedure										
Head of School's Nan	ne:	Head of School's Signature:		Date:						