Programs Involving Children
PS-01

About This Policy

Effective Dates:
04-30-2012

Last Updated:
10-07-2021

Responsible University Administrator:
Executive Vice President for University Academic Affairs

Policy Contact:
IU Office of Public Safety
iupic@iu.edu

Scope

1. This policy applies to:
   - All university employees, including all academic appointees (including student academic appointees), and permanent and part time staff
   - Students
   - Individuals volunteering on behalf of Indiana University (“university volunteers”)
   - All university units and
   - External organizations using Indiana University facilities for programs that are focused on children.

2. The program registration requirements set forth in this policy in Procedures Section B.4. do not apply to the following:
   - Units that have daily involvement with children as part of their primary mission, including pediatric medical departments, childcare facilities, undergraduate admissions, academic and athletic recruiting, and student teaching programs that are a degree requirement.
   - Research programs involving children that are approved through the Indiana University Institutional Review Board (IRB).

3. In all cases where a unit is not required to comply with this policy’s registration requirements, the unit is nonetheless required to comply with policy requirements regarding reporting, background checks, program-specific guidelines, any unit- or school-specific requirements, and any externally imposed requirements, such as state and federal laws and regulations, grant requirements, and/or licensure or accreditation standards.

4. If units with a registration exemption pursuant to Section B. above hold special events primarily focused on children, those events should still be registered. Any further unit exemptions require advance approval from Public Safety, which provides oversight to the PIC Program.

Policy Statement

Keys to Compliance

- Strict adherence to state law on reporting suspected child abuse
- Background checks
- Program-specific guidelines
- 14-day advance registration of PIC Programs
• Identification of a unit-specific PIC liaison

1. Reporting and Notification Requirement
   a. Indiana state law states that any person who has reason to believe that a child is a victim of child abuse or neglect has an affirmative duty to make an oral report to the Department of Child Services (DCS) 1-800-800-5556 and/or to the Indiana University Police Department (IUPD) or local law enforcement. Failure to report may result in criminal charges against the individual with the duty to make the report.
   b. In addition to notifying DCS and/or local law enforcement, state law and the university also require that all academic appointees, staff, students, and university volunteers report to IUPD:
      1. Any suspected abuse or neglect of a minor that occurs on Indiana University property and/or as part of an Indiana University program that occurs in any location.
      2. Any alleged violation of the sexual misconduct provisions of UA-03, Discrimination, Harassment, and Sexual Misconduct, by or against university students who are under 18 at the time of the incident.
   c. IUPD has an independent obligation to report any suspected abuse or neglect to DCS, after which DCS makes its own determination regarding investigation.
   d. All current university employees, students, and university volunteers who work with children on behalf of the university, or who are otherwise in a PIC Position, are required to notify their supervisor or the principal administrator of their academic unit immediately of any criminal convictions, felony charges, or substantiated reports of child abuse or neglect. Upon receipt of such a report, the supervisor or principal administrator is required to consult immediately with Public Safety and Institutional Assurance (PSIA) regarding next steps.
   e. Students working in a PIC Position must notify their supervisor immediately of any pending Student Code of Conduct charges filed through the campus student conduct office if such charges relate to an alleged violation of the sexual misconduct provisions of UA-03, Discrimination, Harassment, and Sexual Misconduct, or involve violence or a threat of violence. Upon receipt of such a report, the supervisor is required to consult immediately with PSIA regarding next steps.

2. Unit Responsibilities
   a. The unit head of any unit that includes employment positions that work with children (PIC Positions) or that conducts a PIC Program is responsible for ensuring that the unit conducts the background checks required by this policy and that funding is in place for the required background checks. The unit is responsible for tracking whether its employees in PIC Positions and its employees, students, and university volunteers who participate in PIC Programs have an up-to-date background check.
   b. Units must identify an employee to serve as a PIC liaison to facilitate compliance with this policy. The unit supervisor or the selected PIC liaison will receive annual training on PIC compliance, coordinate with PSIA on implementation of policy requirements, and work with administrative offices to ensure that all university employees, students, and university volunteers working with children on behalf of the university have received the background check required by this policy.
   c. Each unit should maintain, for a minimum of two years, a list of PIC Programs conducted by the unit and/or in any university facilities for which the unit has responsibility and that are used by, or used to host, PIC Programs.
   d. Units must retain background check information for a minimum of two years from the end of a PIC Program.
   e. At least 14 days prior to the start of a PIC Program, the responsible university unit must register the program information with PSIA by filling out the online form located on One.IU or linked at protect.iu.edu. For PIC Programs conducted on university property by external organizations, the IU unit responsible for the facility and/or coordinating with the external organization must ensure that the program information is submitted online. Recurring PIC Programs must submit a new program registration form at least once each year.
      Note: This is a registration process, not an approval process; however, registration information may be used for audit purposes or by the school, campus, or unit responsible for the PIC Program.

3. Background Checks
a. All university academic appointees, staff, students, university volunteers, or other individuals who will work with children must have a criminal background check, which includes a sex offender registry check.

1. In the case of employees (including students who are academic appointees or permanent or part time staff), the background check must be conducted as part of the hiring process.

2. If an employee in a non-PIC Position moves to a PIC Position or intends to volunteer with a PIC Program, or if the job duties of an employee in a non-PIC Position are later expanded to include work with children or PIC Programs, a new criminal background check, which includes a sex offender registry check, is required before the employee is allowed to work or volunteer with children.

3. An employment background check for a PIC Position conducted pursuant to this section also constitutes compliance with section d. below for employees, including students who are also academic appointees or permanent or part time staff, who also volunteer in PIC Programs that are unrelated to their job duties.

4. The background check for students and university volunteers (whether academic appointees, staff, or individuals who have no formal affiliation with the university) must be conducted prior to the first occasion of participation in a PIC Program.

5. The unit must conduct updated background checks every five years; however, individual programs or units may require more frequent updates.

b. No PIC Program shall allow the participation in the program of any university employee, student, or university volunteer whose criminal background check and/or sex offender registry check includes a conviction or pending felony charge for a sexually-based crime, a crime of violence, or a crime against a child (or children).

1. An individual with a substantiated report of child abuse or neglect, even if no conviction resulted, or a record of other offenses will be evaluated on a case-by-case basis by the PIC Program, PSIA, and the Office of the Vice President and General Counsel (OVPGC), in consultation with the appropriate university offices, to determine if the individual’s record should preclude participation. Depending on the circumstances, the appropriate university office may include one or more of the following:
   • IU Human Resources in conjuction with campus HR
   • Campus academic affairs
   • Campus student affairs

c. For PIC Programs or individuals for whom complete background checks are infeasible (for example, host families in foreign countries), the unit should perform checks to the fullest extent feasible and adopt other measures to protect the welfare and safety of children, to prevent child abuse, and to facilitate the reporting of abuse.

d. A unit that, on occasion, conducts a PIC Program for which large numbers of university volunteers is essential, or has invited guest performers to participate as part of a program (“large, occasional events or performances”), may request in its online program registration to adopt specific measures and safeguards other than background checks for one-time volunteers or performers. A request for an exemption from the background check requirement must be approved in advance by PSIA, and PSIA will advise the university unit as to what alternative measures and safeguards are appropriate given the size and nature of the event.

1. Examples of large occasional events include Science Olympiad, children’s reading/activity days, weekend swim meets, etc.

2. Examples of guest performers include musical or theatrical performers hosted at, for example, campus-specific performance venues such as the IUB Jacobs School of Music, the Madam Walker Theater at IUPUI, the IU Southeast Ogle Center, WTIU/WFIU, etc.

3. The request must identify the alternative measures and safeguards being proposed for the PIC Program and must, at a minimum, include the following:
   • University volunteers and guest performers must be supervised by a background-checked individual.
   • University volunteers must work in public places and must not be alone with children.
• The university unit hosting the PIC Program must check each university volunteer’s and performer’s name against the national sex offender registry.

• Prior to the start of the PIC Program, the university unit hosting the PIC Program must compile, and must subsequently retain for a period of two years from the end of the Program, the names and addresses of any university volunteers and guest performers who do not have a current background check.

  • The university unit hosting the PIC Program must require university volunteers and guest performers to check in to work the Program. Any university volunteer or guest performer whose name is not on the list may not participate in the Program. Any university volunteer or guest performer not known to a host employee working the Program must present photo identification.

4. The request must disclose whether university volunteers, guest performers, or any other adult participating in the PIC Program (such as chaperones) are background-checked under the authority of an organization external to the university.

5. Approval of requests for alternative measures and safeguards is not guaranteed and will be made by PSIA, and PSIA may make further inquiry related to background check policies and procedures of a university unit or participating organization as part of its approval decision.

e. Indiana University units conducting PIC Programs must use the university-designated vendor to complete background checks for anyone in an employee relationship: academic appointee, staff, or part time employee. IU units conducting PIC Programs that require background checks for students (who are not also employees) or university volunteers may pay for the background checks using the university-designated vendor or require those students or volunteers to pay for their own check via university designated vendor’s self-pay portal. More information about the background checks procedures is available at https://protect.iu.edu/police-safety/policies/programs-children/background-checks.html.

f. Background checks required for PIC Programs that are conducted on university property by external organizations are set forth in Section D.4.

4. Program-Specific Guidelines

a. All PIC Programs shall have in place and shall provide via electronic means to all program staff and volunteers, and shall enforce, rules and procedures that address the following areas:

1. Appropriate levels of access to and supervision of children, including appropriate staffing ratios based on the university’s PIC guidance at Protect IU.

2. Appropriate physical contact and communication (including via text or social media) with children by Program personnel based on the age of children and the nature of Program activities.

3. Appropriate forms including permission forms, medical information, emergency contacts, and liability waivers. Forms should be safeguarded and readily available.

   • Certain PIC Programs may collect protected health information (PHI) about its participants. The PIC Program is responsible for following all standards related to the collection, dissemination, retention, and disposition of PHI.

4. An incident report process to document any issues and/or concerns that includes a way for a designated contact within the PIC Program to promptly review incident reports and refer them to IUPD or others as appropriate. The process must also include clear reporting guidelines and protocols that indicate:

   • If there is a crime in progress, call 911
   • If the incident constitutes a crime, use IU’s reporting form
   • Who should receive a report (e.g., the program director)
   • When such reports are referred to IUPD or others as appropriate (e.g., recurring or serious incidents)
   • Age-appropriate information to be provided to participants on how and to whom to report their concerns about the Program, Program personnel, and other participants.
NOTE: These incident reports are in addition to the reporting requirements in Section A of this policy.

5. First aid and medical treatment, as well as dispensing and/or storage of medication. Program personnel must have training appropriate to the PIC Program’s activities.

6. A statement that addresses respecting the privacy of Program participants, including changing clothes/taking showers, use of cameras/phones, and digital privacy.

7. A statement that photos and videos of Program participants will not be used in promotional materials or social media by a PIC Program or Program personnel unless the participant’s parent or guardian executes a release.

b. PIC Programs must also have in place the following rules and procedures if they are applicable to the particular program:

1. Transportation, including the transportation of children at the beginning and end of the Program, to and from the Program, and within the Program, whether by parents, guardians, Program personnel, third-party providers (charter bus, taxi or hired car service, Uber, Lyft, etc.) or others.
   - Except in the case of an emergency, no Program personnel should travel alone with a minor.
   - University PIC Programs must also comply with IU policies regarding drivers and vehicles.

2. Plans for weather emergencies, if the Program is not inside a university facility where such plans are in place.

c. All PIC Programs that include overnight stays or use of university residences by children shall have the following additional rules and procedures in place:

1. Identification to be worn by Program personnel and, if appropriate, participants.

2. Curfews.

3. Substance-free housing and facilities.

4. Residential supervision.

5. Code of conduct for Program participants
   - Also required for semester-long or summer-long PIC Programs, irrespective of whether the Program participants stay in university residences.

d. All PIC Programs must comply with any applicable laws, regulations, and policies, including Title IX, ADA, FERPA, and Clery Act. For questions regarding compliance, please contact PSIA.

5. **PIC Programs by External Organizations Not Organized by the University**

a. The Office of the Vice President and University Counsel (OVPGC) has created a Facilities Use Agreement template that may be used to enter into contractual agreements with external organizations regarding the use of IU facilities, including PIC Programs. OVPGC must review and approve the completed Facilities Use Agreement template and all other contractual agreements unless the PIC Program director or other Program personnel has an active delegated signature authority from the Treasurer of Indiana University (See Signature Authority and Delegation) and no material changes to the approved template agreement have been made.

b. The content and form of any contractual agreement other than the approved Facilities Use Agreement template must be independently approved by an attorney in OVPGC. A contract that does not include the following provisions will not be approved:
   - Compliance with this policy as an express term of the contract.
   - Express acknowledgement and agreement that compliance with this policy includes immediate notification by the external organization to PSIA in the event of any suspected child abuse or neglect, or other reports of crimes.
   - An indemnification provision in which Indiana University is held harmless for the acts or omissions of other Program participants and third-party employees or agents.
c. When IU students are participating in an external program or event or are working with an organization that focuses on children as a service-learning activity or as part of an IU club or unit, the IU unit shall ascertain whether the external entity has its own policy on background checks and, if so, will follow that policy. The external entity has no background check policy, the parties shall work cooperatively to decide if the background check provisions of this policy should apply to the IU student’s participation in the particular program, event, or work with the organization. For questions about the university’s role with a particular external organization or program, please contact PSIA.

d. External groups using IU facilities must complete required background checks for anyone working with children that at least include:
   • A minimum of 7 years of name and address history from a Social Security Number trace;
   • County criminal history;
   • A national criminal database;
   • A check of the Indiana state sex offender registry; and
   • A check of the national sex offender registry.

6. Other Requirements
   The activities contemplated by a particular PIC Program may have licensure requirements (e.g., childcare or teaching) or other standards (e.g., concussion protocols or the use of safety or training equipment) that are not covered by this policy.

Reason For Policy

Indiana University, as part of its educational mission, has many university programs that are focused on children. The university also allows external organizations to use university facilities for programs that focus on children. Ongoing or planned events that are designed to include children, whether conducted by the university or by an external organization, are referred to as programs involving children, or PIC Programs. This policy has three principles:

1. The protection and safety of children in these programs should be the highest priority of the university and of organizations administering PIC Programs.

2. The university and members of the university community must comply with federal and state law requirements regarding reporting of abuse and neglect of children.

3. The policy must be flexible to accommodate the wide variety of PIC Programs.

Procedure

1. Reporting Suspected Abuse or Neglect
   a. In an emergency, or if you see a crime in progress, always call 911 immediately.

   b. Anyone who has reason to believe that a child is a victim of abuse or neglect must report it immediately to the Department of Child Services (DCS) or local law enforcement (Indiana Code § 31-33-5). To comply with the state law, oral reports may be made to either:

      • The anonymous Indiana Child Abuse and Neglect Hotline. Dial 1-800-800-5556.
      • The IU Police Department on any campus, or the local community police. Dial 911, or dial the local IUPD campus number or local community police department number.

2. Internal Procedures Following a Report of Abuse or Neglect
   a. State law requires that suspected cases of abuse or neglect on university property or as part of a Indiana University program must also be reported to a designated agent at the institution (IC 31-33-5). The designated agent at Indiana University is the Superintendent of Public Safety.
b. When the Superintendent of Public Safety receives a report and conveys that report to DCS, the following individuals or offices should be also notified of the report and involved, when appropriate, in the internal evaluation:
   • Campus police department
   • Campus Provost/Chancellor
   • Office of the Vice President and General Counsel
   • If a staff or hourly employee is involved: IUHR, in consultation with campus Human Resources
   • If a student involved: the campus student affairs office, as well as the head of the student's department or school
   • If an academic appointee is involved: the campus academic affairs office and the appointee's dean
   • Parents or guardians of the child, unless under the circumstances, they are the alleged abuser.

c. If the situation warrants, the alleged abuser may be immediately suspended from further participation in the PIC Program and may be suspended from employment (academic appointees or staff/part time employees) or school (students) pursuant to the applicable policies and procedures, pending an investigation. Academic appointees, staff or part time employees, or students may be subject to any other applicable disciplinary process as a result of the investigation.

d. The university shall cooperate with any external investigation conducted by the Department of Child Services (DCS) or law enforcement.

e. The Superintendent of Public Safety will assist responsible university offices with any internal investigation, including OVPGC, IUHR (if staff or part time employee), the chief student affairs official for the campus (if student), and the chief academic affairs official for the campus (if academic appointee), to determine if sanctions are warranted, up to and including dismissal. Legal prohibitions regarding physical presence on campus/trespassing may also be pursued. University and campus administrators shall follow the appropriate procedures in determining and issuing any sanction (university-wide and campus-specific academic policies, UHRS employee policies, Code of Student Rights, Responsibilities & Conduct). If the alleged abuser is one of the university officials identified herein, the Superintendent of Public Safety shall report and consult with the individual’s supervisor or, in any instance, the campus Provost/Chancellor, or the President, or the Board of Trustees if necessary.

f. If the alleged abuser is not a member of the Indiana University community but is present at IU through a third-party vendor or other external entity authorized to be on campus, that external entity will also be notified that the alleged abuser will no longer be permitted on university property.

g. Current university employees, students, and volunteers who work with children are required to immediately notify the university of any criminal convictions, felony charges, orders for protection, or substantiated reports of child abuse or neglect. Required notifications should be made immediately to an appropriate official at campus HR, campus academic affairs, campus student affairs, or to PSIA. A review of the situation will take place prior to the individual’s continuation of their work with children. Based on the circumstances and the nature of the allegation(s), and in the university’s sole discretion, an external entity conducting a PIC program on university property may also be prohibited from continuing the Program or use of the university’s facilities following such a report and may no longer be permitted on university property.

h. For any questions about reporting suspected abuse or neglect, as well as IU procedures, contact campus IUPD (contact information is included below).

3. Other Considerations:
In addition to the other policy requirements, it is important for PIC Programs to thoroughly think through their program activities and ensure they are providing a safe environment for children and others through appropriate rules and procedures. Further guidance and examples in formulating rules and procedures for PIC Programs are available at: https://protect.iu.edu/police-safety/policies/programs-children/index.html

Definitions
Child/Minor: Any individual under the age of eighteen (18).

Member of the Indiana University Community: Any individual who is a student, staff, faculty member, university official, or any other individual employed by, or acting on behalf of, the university; other individuals while on Indiana University property, including employees of third-party vendors and contractors, volunteers, and visitors.

PIC Administrator: The dean of a college or school or the dean’s designee, the chair of a department, the director of a program or division, or other administrator with primary responsibility for its curriculum.

PIC Programs: Ongoing or planned events that are designed to include children such as camps, fairs, lessons, workshops, clubs, teams, projects, practices, tours, or open-houses, research activities, recruiting activities, clinical settings, service learning.

The term “programs” does not include: 1) Single performances or events open to the general public that are not targeted toward children (such as varsity athletic competitions, plays, concerts). 2) Regularly scheduled classes or activities designed primarily for enrolled students who are age 17 and above.

NOTE: This definition may not capture certain circumstances in which minors are present on campus, and further consideration will be given as to whether they fall within the scope of the policy.

NOTE: This definition does not include the placement of students, for academic credit and/or clinical or student teaching requirements, with external entities. Rather, when schools and/or departments place students at external entities for such purposes, students must be informed of their obligation to comply with the external entity’s own policies and procedures, including those regarding background checks and working with minors.

PIC Positions: Positions that involve working with children. Human Resources or individual units may consider additional job-related aspects when designating a position as a PIC Position such as: building/office location, access to private information regarding children, and access to other vulnerable populations.

University Employees: All academic appointees (including student academic appointees), and permanent and part-time staff. No-pay affiliate faculty members of the IU School of Medicine, individuals who are required to have a faculty appointment to meet the School’s accreditation requirements, are not university employees.

University Property: Buildings, grounds, and land that are owned by Indiana University or controlled by Indiana University via leases or other formal contractual arrangements to house ongoing IU operations.

University Volunteers: Individuals volunteering with a PIC Program on behalf of Indiana University. A university volunteer may be an IU academic appointee or staff member, an IU student, or an individual who has no current employment or enrollment affiliation with the university (such as a retiree, an alumnus or a member of the community).

Sanctions

Programs in violation of this policy may be denied permission to continue operation at Indiana University. In addition, IUPD, in consultation with other appropriate university personnel, has the authority to determine that any PIC Program may be shut down due to serious behavioral and/or safety concerns. Any violations of university policies by an individual, including failure to report suspected child abuse or neglect in accordance with this policy, will be addressed in accordance with applicable university policies and procedures, which may include disciplinary actions up to and including termination from the university or suspension or expulsion from the university. Legal prohibitions regarding physical presence on campus/trespassing may also be pursued.

An academic appointee, staff/part time employee, student, or university volunteer may be suspended from participating in any PIC program during the pendency of an investigation of allegations of violation of this policy, the sexual misconduct provisions of UA-03, Discrimination, Harassment, and Sexual Misconduct, or behavior involving violence or threats of violence, irrespective of whether the allegations being investigated occurred as part of the individual’s participation in a PIC Program.

Suspected violations of law will be referred to law enforcement and may result in criminal penalties.
### Additional Contacts

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<thead>
<tr>
<th>Subject</th>
<th>Contact</th>
<th>Phone</th>
<th>Email</th>
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<tbody>
<tr>
<td>Superintendent of Public Safety</td>
<td>Benjamin Hunter</td>
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<td>IU Office of Public Safety</td>
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<td>IUE Police</td>
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<td>IUK Police</td>
<td>Thomas Remender, Chief of Police</td>
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<tr>
<td>IUN Police</td>
<td>Monte Davis, Chief of Police</td>
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<td>IUS Police</td>
<td>Stephen Miller, Chief of Police</td>
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<td>IUSB Police</td>
<td>Kurt Matz, Chief of Police</td>
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<td>IPFW Police</td>
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### History

This policy was established in 2012 as an interim policy, but in effect. A final and updated version was made effective in 2013. The policy was updated in April 2014 with additional resources and changes to background check procedures and again in July 2014 with minor revisions to the internal reporting procedures.
This policy was updated in August 2015 regarding research programs that are approved through the IU IRB process. This policy was reviewed and revised in 2017.

This policy was reviewed and revised on October 7, 2021.

Previous Versions:

**Effective Dates: 08/14/2015 - 09/27/2021**

**Effective Dates: 08/14/2015 - 08/04/2017**

**Effective Dates: 07/24/2014 - 08/14/2015**

### Related Information

- Programs Involving Children Additional Guidance
- Child Abuse: Recognition and Reporting - Training Information
- Sexual Abuse Prevention - Training Information
- IC 31-33-5 Duty to Report Child Abuse or Neglect
- IC 10-13-3 Criminal History Information
- IC 11-8-8 Sex Offender Registration
- IU Whistleblower Policy
- IU Policy - Minors in Hazardous Work Areas
- IU Policy - Background Checks for Employees
- COPPA - Children's Online Privacy Protection Act

### Related Forms

- National Sex Offender Registry
- Register Programs Involving Children
Student Rights Under FERPA and Release of Student Information
USSS-05

About This Policy

Effective Dates:
03-29-1977

Last Updated:
04-30-2020

Responsible University Administrator:
Executive Vice President for University Academic Affairs

Policy Contact:
Jim Kennedy
Assoc. Vice President for USSS
kennedjc@indiana.edu

Scope

This policy applies to students (former and current), faculty, staff, and contractual agents of the university, and individuals requesting access to student information.

Policy Statement

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include:

1. The right to inspect and review the student's education records within 45 days of the day the university receives a request for access.
2. The right to request the amendment of the student's education records that the student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.
3. The right to provide written consent before the university discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.
4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by Indiana University to comply with the requirements of FERPA.

Procedure

1. Student Access to Their Own Records
   a. Except as provided below, a student may obtain access to the student’s own education records for inspection and review as follows:
      1. The student may submit to the registrar, dean, head of the academic department, or other appropriate official, a written request that identifies the record(s) the student wishes to inspect.
      2. This university official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the university official to whom the request was submitted, that official will advise the student of the correct official to whom the request should be addressed.
      3. FERPA does not require the university to provide copies of education records to students unless failure to do so would effectively prevent the student from inspecting and reviewing the record. In all other cases, the university has the discretion to provide copies upon request.
4. Access to the requested records will be provided within 45 days of the request.

b. The following records are not available to the student:
   1. Confidential letters of recommendation placed in files prior to January 1, 1975;
   2. Records of parents’ financial status;
   3. Employment records that are kept in the normal course of business that relate exclusively to the student as an employee of the university and are not used for any other purposes. However, records relating to a student who is employed as a result of the individual’s status as a student (e.g., work study students and graduate assistants) are considered education records and are therefore available to the student;
   4. Medical and psychological records, see Section C.1. below;
   5. Reference letters, whether prepared by an individual on- or off-campus, for which the student waived the right to access to ensure the validity and confidentiality of the letters, subject to the following conditions:
      a. Waivers may be signed only for the specific purposes of application for admission, candidacy for honor or honorary recognition (including financial aid based at least in part on merit), and candidacy for employment.
      b. Waivers cannot be required.
      c. The student will be told, upon request, the names of individuals supplying references.

2. Process for Seeking Amendment to Education Records
   a. A student may seek an amendment to an education record that the student considers to be inaccurate, misleading, or in violation of privacy.
   b. To request an amendment, the student should submit a written request to the university official responsible for the record that clearly identifies the part of the record for which the student is seeking amendment and that specifies why that portion of the record should be amended.
   c. The chief student affairs official for the campus (or designee) will conduct a hearing at which the student may be assisted or represented by any person of the student’s choosing, including an attorney at the student’s own expense, and the student will be afforded a full and fair opportunity to present relevant evidence.
   d. The hearing will be held within a reasonable period of time; notice of the date, place, and time must be given reasonably in advance.
   e. The chief student affairs official for the campus (or designee) will provide the student with a written decision based solely upon the evidence presented which will be prepared within a reasonable amount of time and will include a summary of the evidence and the reasons for the decision.
      1. If the contested information is determined to be inaccurate, misleading, or in violation of privacy, the record custodian will amend the record, and the written decision will notify the student of the amendment.
      2. If the contested information is determined to be accurate, not misleading, and not in violation of privacy, the written decision will notify the student of the right to place a statement in the student’s educational record that comments on the contested information and/or articulates any reasons for disagreeing with the decision. This statement will be maintained as long as the student’s educational record is maintained, and the statement will be disclosed any time that the contested education record is disclosed.
   f. The decision of the chief student affairs official for the campus (or designee) is final.

3. Access to Student Records by University Officials
   a. Student records are open to university officials who have a legitimate educational interest in their contents, except where access is prohibited by special policies such as those governing medical and psychological records.
   b. A "university official," referred to as “school officials” in the federal regulations, is a person employed by the university in an administrative, supervisory, academic or research, or support staff position, including law
enforcement personnel and health staff; an individual or company with whom the university has contracted as its agent to provide a service (such as an attorney, auditor, collection agent, learning management system vendor (e.g., Canvas), or other contractor that has agreed to assume responsibility specifically for the security of student records in the capacity of a “university official”); an individual serving on the Board of Trustees; or a student serving on an official university committee, such as a residency, disciplinary, or grievance committee, or assisting another university official in performing that official’s tasks. Faculty members are considered to be advisors with a legitimate educational interest for all students currently enrolled in their classes or seeking enrollment, and others that they may be advising on an assigned basis.

c. The determination of "a legitimate educational interest" will be made by the university official responsible for the maintenance of the record. This determination must be made scrupulously and with respect for the individual whose records are involved.

d. Education records that are inaccessible to students under Section A.2. above may be used by university officials only for the purpose for which they were prepared.

4. Release of Education Records to Third Parties

a. FERPA authorizes the university to disclose education records or identifiable information to third parties (i.e., anyone not a “school official”) without the student's consent under the following circumstances:

1. Appropriate officials in connection with a health or safety emergency, based on the following considerations:
   a. The seriousness of the threat to health or safety;
   b. The need for access to the record in meeting the emergency;
   c. Whether the individual requesting the records is in a position to deal with the emergency;
   d. The extent to which time is of the essence in dealing with the emergency.

2. Federal officers as prescribed by law;
3. As required by state law;
4. Officials of other institutions at which a student seeks to enroll;
5. Individuals or organizations providing financial aid to students;
6. Accrediting agencies carrying out their functions;
7. Parents of a student who have established that student's status as a dependent according to Internal Revenue Code of 1954, Section 152;

   NOTE: While permitted under FERPA, Indiana University generally does not use this exception and in most cases will refer the parents to the Third Party Pin tool for access.

8. Parents of a student regarding the student’s violation of any federal, state or local law, or university policy governing the use or possession of alcohol or controlled substance if the university determines that the student committed a disciplinary violation and is under the age of 21;

9. Organizations, including but not limited to federal, state, and local agencies, and independent organizations and consortiums, conducting studies for, or on behalf of, the university for the purpose of developing, validating, or administering predictive tests, administering student aid programs, understanding and optimizing learning and improving instruction in higher education, provided that the study is conducted in a manner which will not permit release of the personal identification of students and/or their parents to anyone other than representatives of the organization, and that the information collected for the study will be destroyed when no longer needed for the purposes of the study;

10. Research organizations conducting studies that seek to develop, validate, or administer predictive tests, administer student aid programs or improve instruction at the university, provided that there is a data agreement in place with the university and that the organization guarantees no personal identification of students;

11. An alleged victim of a crime of violence of the results of any institutional disciplinary proceeding against the alleged perpetrator. Information may only be given in respect to the crime committed;
12. Information that the university has designated as “directory information,” so long as the student has not filed a FERPA restriction. Indiana University limits "Directory information" to:
   a. Student’s name;
   b. University e-mail address;
   c. Hometown city, state;
   d. Major field of study;
   e. Dates of attendance;
   f. Admission or enrollment status (admitted, full-time, part-time);
   g. Campus;
   h. School or division;
      i. Class standing (freshman, sophomore, junior, senior, graduate, professional, non-degree);
      j. Degrees and awards (includes candidates for degrees and conferred/awarded degrees);
   k. Activities;
   l. Sports and athletic information;
   m. Photographs, video/electronic recordings, voice recordings (“recordings”) of students who are participating in public events and classroom activities where the student is not the focus of the recording.

   NOTE: Recordings in which a student or students are the focus of the recording are education records. Examples include, but are not limited to a recording of a class presentation, a one-on-one discussion with a faculty member, or surveillance video used for disciplinary action.

   Campus-specific FERPA Restriction forms must be completed with the Office of the Registrar.

13. In response to a judicial order or lawfully issued subpoena, provided that the student is notified prior to compliance or provided that a reasonable attempt to notify the student has been made;

14. Other law enforcement agencies in the investigation of a specific criminal case;

15. The Attorney General of the United States (or designee) in response to an ex parte order in connection with the investigation or prosecution of terrorism crimes under the US Patriot Act;

16. Veteran’s Administration officials;

17. Representatives of the Department of Homeland Security or Immigration and Customs Enforcement for purposes of the coordinated interagency partnership regulating the Student and Exchange Visitor Information System (SEVIS).

b. The month and year of a student’s date of birth will be disclosed only for purposes of law enforcement, health and safety, and identity verification.

5. Retention
   a. Except as provided herein, a student’s education records will be maintained in accordance with retention standards applicable to the unit that maintains the record. However, if a student has requested access to a record in accordance with Section A.1. above, the record will not be disposed of before the student has been given access to it.
   b. The university official responsible for the maintenance of record (or designee) will ensure that only pertinent records are retained.

Definitions

Candidates for Degrees: Students who are enrolled in coursework (generally during their final semester) that, upon successful completion, will satisfy their degree requirements.
**Directory information:** Name; hometown (city, state), university e-mail address; major field of study; dates of attendance; admission or enrollment status (admitted, full-time, part-time); campus; school, or division; class standing (freshman, sophomore, junior, senior, graduate, professional, non-degree); degrees and awards; activities; sports and athletic information.

**Education Records:** Any information or data relating to a student recorded in any medium, including but not limited to: handwriting, print, tapes, film, microfilm, microfiche, and electronic media. Education records do not include records retained by a university official which are not accessible to anyone other than a substitute for that university official.

**Student:** An individual who has attended or is attending Indiana University and whose records are maintained by the university.

**Additional Contacts**

**Family Policy Compliance Office**
U.S. Department of Education
400 Maryland Avenue
SW Washington, DC 20202-5901

**History**

Approved: University Faculty Council 3/29/77; Amended 10/2/2001, Administrative Practice.

Updated in June 2016.

Revised in 2019 to update and to incorporate USSS-06, Student Rights Under FERPA; approved by the University Faculty Council 04/23/2019.
Eligibility to Use Information Technology Resources
IT-03

About This Policy

Effective Dates:
05-23-2006

Last Updated:
07-15-2015

Responsible University Administrator:
Office of the Vice President for Information Technology & Chief Information Officer

Policy Contact:
University Information Policy Office, uipo@iu.edu

Scope

This policy applies to all users of Indiana University information technology resources regardless of affiliation, and irrespective of whether those resources are accessed from on-campus or off-campus locations.

Policy Statement

Persons having the following affiliation(s) with Indiana University are eligible to access and use university information technology resources

1. Current academic appointees and staff, including post-doctoral fellows,
2. Currently enrolled students (including undergraduate, graduate, and non-degree students),
3. Retired academic appointees and staff,
4. Spouses/domestic partners of faculty or staff who become deceased after attaining official IU Retiree status as determined by age and years of service, and
5. Certain persons affiliated with external agencies collaborating with Indiana University.

The scope of access and use will vary in accordance with the affiliation, and may change from time to time. The university establishes procedures for verifying the eligibility of persons seeking to access and use university information technology resources. Eligibility to use university technology resources shall cease when the person no longer has an affiliation that supports eligibility. Procedures also describe the scope of access and use granted to persons with particular affiliations. The eligibility of all individuals will be tested automatically and periodically against official university sources, including employee, faculty, and student enrollment records. Other sources may be used where these records do not accurately reflect ongoing affiliation.

Unless eligible through another affiliation, alumni of Indiana University are not eligible to use university information technology resources.

The privilege of initial and continued eligibility to use university information technology resources by persons external to Indiana University requires initial and periodic verification by the appropriate department faculty member or administrator that the access is for purposes that support the mission of the university.

Initial and continued eligibility of retired faculty and staff to use university information technology resources is granted in recognition of honorable service to the university community. Access is generally limited to electronic mail and general purpose academic or research systems. Unless there are special circumstances in which retired faculty or staff require continued access to institutional information systems and data to support the university's mission, such access is removed upon termination of active employment. Service will be extended to retired account holders as long as computing resources are available to support it. If resources become constrained, this
practice will be reviewed and may be restricted or eliminated in favor of allocating required resources to uses by active faculty, students, and staff.

Initial and continued eligibility of spouses/domestic partners of faculty or staff who become deceased (after attaining official IU Retiree status as determined by age and years of service) to use university technology resources is granted in recognition of honorable service to the university community. A new account will be made available to the surviving spouse/domestic partner for his or her own use. Access is generally limited to electronic mail, and the service will be extended to the surviving spouse/domestic partner as long as computing resources are available to support it. If resources become constrained, this practice will be reviewed and may be restricted or eliminated in favor of allocating required resources to uses by active faculty, students, and staff.

**Reason For Policy**

Taxpayers, students, and other groups providing sources of funding that support information technology resources at Indiana University expect that use of these assets will be limited to eligible individuals who engage in support of the university's mission of research and creative activity, teaching and learning, and civic engagement.

**Procedure**

**Faculty and staff**

1. Tenure-track and non-tenure-track academic appointees, appointed staff, and hourly employees are eligible to use technology resources until the termination of their employment or appointment with the university. Eligibility will be based on information supplied by the campus faculty records and/or Human Resources offices.

2. Units are responsible for keeping official university personnel records updated to reflect new and departed personnel, including adjunct and visiting faculty appointments.

3. Once individuals are entered into the official university records system, they are able to create and maintain their own central computing accounts by visiting https://access.iu.edu.

4. Continued eligibility is automatic and based on official university records.

5. An employee's access to his or her accounts will be disabled after official university records indicate his/her employment has ceased.

6. Employee accounts will be deleted 180 days after the accounts have been disabled.

**Students**

1. Undergraduate, graduate, and non-degree students are eligible to use information technology resources for the duration of their enrollment. Eligibility is based on information supplied by the campus registrar's office.

2. Distance education students are eligible to use technology resources for the duration of their enrollment. Eligibility is based on information supplied by the relevant continuing studies/distance education unit (or campus/department equivalents), and may require the student to request access and pay a service fee.

3. Once individuals are entered into the official university records system, they may create and maintain their own central computing accounts by visiting https://access.iu.edu.

4. Continued eligibility is automatic for enrolled students, and enrollment status is based on official university records.

5. A student's access to his or her accounts will be disabled after official university records indicate the student is not enrolled.

6. Students who are no longer enrolled are eligible to use technology resources for purposes that directly support the mission of the university, with a written request from a university faculty member or academic faculty advisor. The sponsor submits the request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the faculty member or advisor is required, and accounts will be removed at the termination of the activity.

7. Student accounts will be deleted 180 days after they have been disabled.

**Alumni**
Indiana University Alumni are eligible for email accounts offered by the Indiana University Alumni Association. Registration information can be found at the IU Alumni Association web site.

Persons affiliated with external entities collaborating with Indiana University

1. Research collaborators are eligible to use technology resources if they are appointed as an academic no-pay, which carries a formal title. Generally, the individual must be making an extended, direct academic contribution to the university and have written certification of their affiliation from a Dean or Unit Head in order to qualify for an appointment. The appointment request is initiated by the academic unit with final approval by the Dean of the Faculties Office with option for renewal, unless terminated by the academic unit. Once individuals are entered into the official university records system as academic no-pay appointments, they are able to create and maintain their own central computing accounts by visiting https://access.iu.edu. Continued eligibility is automatic and based on official university records. Accounts will be disabled when official university records indicate appointment has expired.

2. Visiting students are eligible to use technology resources for the duration of their visit with written request from a sponsoring Indiana University faculty member only if such access is necessary to fulfill the purposes of the visit. Faculty sponsors can submit a request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the faculty sponsor is required, and accounts will be removed at the termination of the activity.

3. Contract employees/consultants are eligible to use technology resources for the duration of their contract, with written certification of need from the relevant Indiana University unit contract manager only if such access is necessary to fulfill the purposes of the contract. The required technology needs and limits thereon will be specifically defined in the associated contract. Contract managers can submit a request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the contract manager is required, and accounts will be removed at the termination of the activity.

4. Persons associated with external entities that have a contract or other collaboration with Indiana University are eligible to use technology resources for the duration of their contract or collaboration, with written certification of need from a full-time Indiana University faculty or staff member in the unit that is most closely associated with the activity, and only if such access is necessary to fulfill the purposes of the contract or collaboration. The required technology access and limits thereon will be specifically defined in the associated contract. Unit sponsors can submit a request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the sponsor is required, and accounts will be removed at the termination of the activity.

5. Others involved in short-term (less than one semester) temporary projects may be eligible to use technology resources, if such access is necessary to fulfill the purposes of the project, and with written certification from a university Dean, Director, or Department Chair that such project consists of activities that directly support the mission of Indiana University. Final review and approval of eligibility for such use is reserved to the Office of the Vice President for Information Technology. Certifying administrators can submit a request to add an affiliate account by visiting https://access.iu.edu. Renewals are not granted, and accounts will be removed at the termination of the activity.

6. Family members of permanent faculty, appointed staff, and hourly employees with no other affiliation to the university may be eligible to use technology resources with written certification from a university Dean, Director, or Department Chair that such person is involved in activities that directly support the mission of Indiana University. For academic activities, the Dean, Director, or Department Chair submits a request for an academic no-pay appointment through the unit human resources liaison. Once individuals are entered into the official university records system as academic no-pay appointments, they are able to create and maintain their own central computing accounts by visiting https://access.iu.edu. Continued eligibility is automatic and based on official university records. For non-academic activities, the Dean, Director, or Department Chair certifies that such person is involved in activities that directly support the mission of Indiana University. Final review and approval of eligibility for such use is reserved to the Office of the Vice President for Information Technology. The certifying administrator submits the request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the sponsoring Dean, Director, or Department Chair is required, and accounts will be removed at the termination of the activity.

7. Account sponsor responsibilities: Sponsors should weigh the risks of an affiliated user causing harm through inappropriate use of IU information technology resources against the benefits of the user having access.
Sponsors are responsible for taking steps to reduce the likelihood of inappropriate use (including appropriate user training). Additionally, prior to requesting the account, the sponsor and the person being sponsored should have a written agreement defining the terms of the affiliation relationship. Any written agreement must comply with university policy FIN-TRE-VI-100, Signature Authority and Delegation. Sponsors should consult with their department or unit on how best to document the user's affiliation with and responsibilities to both IU and the sponsor's department or unit.

Honorable service

1. Retired faculty and staff are eligible to use technology resources as long as there are resources available to support their continued use. Access shall be based on information supplied by the campus faculty records or human resource offices. Renewal is automatic and is based on official university records and continued active account use. If a resource supporting active users becomes constrained and the number of accounts belonging to retired members must be reduced, technology managers will use account longevity as the criterion for removing accounts as necessary to recover appropriate resources. These accounts will be the second candidates for removal in the case of constrained resources, after accounts of spouses/domestic partners of deceased faculty/staff have been removed.

2. Spouses/domestic partners of faculty/staff who become deceased after attaining official IU Retiree status as determined by age and years of service are eligible to use technology resources with a written request from the university Dean, Director, or Department Chair of the faculty/staff member, as long as there are resources available to support their continued use. A new account will be made available to the surviving spouse/domestic partner for his or her own use. The sponsor submits the request to add an affiliate account by visiting https://access.iu.edu. Periodic renewal by the sponsor is required. If a resource supporting active users becomes constrained and the number of accounts belonging to spouses/domestic partners of deceased faculty/staff must be reduced, technology managers will use account longevity as the criterion for removing accounts as necessary to recover appropriate resources. These accounts will be the first candidates for removal in the case of constrained resources.

Limited access

The university may also provide limited access accounts/services for specialized purposes, such as for potential students, admitted students who are not yet enrolled, conference attendees, or visitors requiring only access to the Internet from their personal computers. A service fee may be assessed for this access.

Suspension or termination of access

Service managers, system administrators, and security and network engineers may temporarily suspend or block access to an account when it reasonably appears necessary to do so in order to protect the integrity, security, and functionality of university or other computing resources, or to protect the university from liability.

Access to university technology resources may be removed immediately given a written request from the appropriate university authorities, the supervisor or executive administrator of an employee, or the sponsor of the account. Reasons for removal may include, but are not limited to, the following: the individual is terminated for cause and there is concern for safety of systems or data; there is reasonable belief that the individual to whom the account is assigned has perpetrated or is involved in illegal activities or activities that violate university policy. Before removing access for staff or faculty who are also students, the department should consult with the appropriate campus Dean of Students or equivalent.

The technician responsible for a particular service may disable access unilaterally if processes in an assigned account are causing or reasonably appear likely to cause damage to systems or data or serious service degradation for other users. Except when prohibited by law, inappropriate, or impractical, the technician will notify the involved individual prior to disabling the computer account. Where prior notification is not permitted, appropriate, or practical, the technician will make all efforts to notify the involved individual afterward in a timely manner. Unless other policies are invoked, access will be restored as soon as possible after the removal of the threat.

Username longevity

As of 2003, usernames are not re-used. Prior to that time, usernames may have been re-used after the accounts remained inactive for two years.
Access to other information technology resources
Procedures that describe the scope of access and use granted to persons with particular affiliations, and for verifying the eligibility of such persons, are available from the provider of the service to be accessed.

Consultation
The University Information Policy Office (UIPO) and/or regional Chief Information Officers (CIOs) are available to provide consultation or advice related to technology use or abuse to any university, campus, or department administrators or staff.

Definitions
Information technology resources includes all university-owned computers, peripherals, and related equipment and software; voice communications infrastructure, peripherals, and related equipment and software; data communications infrastructure, peripherals, and related equipment and software; all other associated tools, instruments, and facilities; and the services that make use of any of these technology resources. The components may be individually controlled (i.e., assigned to an employee) or shared single-user or multi-user; they may be stand-alone or networked; and they may be stationary or mobile.

Sanctions
Indiana University will handle reports of misuse and abuse of information and information technology resources in accordance with existing policies and procedures issued by appropriate authorities. Depending on the individual and circumstances involved this could include the offices of Human Resources, Vice Provost or Vice Chancellor of Faculties (or campus equivalent), Dean of Students (or campus equivalent), Office of the General Counsel, and/or appropriate law enforcement agencies. See policy IT-02, Misuse and Abuse of Information Technology Resources for more detail.

Failure to comply with Indiana University information technology policies may result in sanctions relating to the individual's use of information technology resources (such as suspension or termination of access, or removal of online material); the individual's employment (up to and including immediate termination of employment in accordance with applicable university policy); the individual's studies within the university (such as student discipline in accordance with applicable university policy); civil or criminal liability; or any combination of these.

History

- Revised April 22, 2016: updated all references to itaccounts.iu.edu to new tools at access.iu.edu.
- Revised July 13, 2015: added account sponsor responsibilities (revised language from KB).
- Revised September 9, 2014: updated limited access section.
- Reviewed December 2011.
- Revised August 17, 2011: changed titles in Sanctions section to more accurately reflect current usage.
- Revised December 20, 2010: changed language for retired spouses/domestic partners per UHRS request and after stakeholder review.
- Revised March 4, 2010: enhancing language in Sanctions section
- Updated procedures section for "Persons affiliated with external entities collaborating with Indiana University" to match academic no-pay process — September 23, 2008
- (1) Updated Alumni email eligibility to reflect new Alumni Association service — March 2, 2007
- Revised March 12, 2006
- Approved May 23, 2006
- Posted as an interim policy November 15, 2000

Related Information
**About sponsoring a computing account for an IU affiliate**

What are my responsibilities as a computer user at IU?

Policy VII-2 Associate to the Chancellor, Vice President, Provost, IU Alumni Association President

### Related Forms

- Memorandum of Understanding (MOU)
Signature Authority and Delegation
FIN-TRE-100

About This Policy

Effective Dates:
06-01-2003

Last Updated:
10-12-2021

Responsible University Administrator:
Vice President and Chief Financial Officer

Policy Contact:
Donald Lukes
University Treasurer
dlukes@iu.edu

Scope

All Indiana University units and employees.

Policy Statement

1. Pursuant to the Board of Trustees resolution, “Powers of the Treasurer,” dated June 21, 1991, the Treasurer of the Trustees of Indiana University and of the University (the Treasurer), and other officers acting in conjunction with the Treasurer are granted specific authority to execute certain documents on behalf of the university. When the Treasurer is absent, the President, the Vice President delegated by the President, or the Assistant Treasurer are authorized to execute, issue, and deliver documents which would otherwise be signed by the Treasurer.

2. No officer, agent, or employee of the university has the authority to sign contracts or other agreements on behalf of the university or any unit, department, or subdivision of the university in the absence of a formal delegation of authority as described in the following three paragraphs. This policy applies to all documents that obligate the university, irrespective of the title or designation of the document, e.g. “contracts,” “agreements,” “memorandum of understanding (MOU),” “memorandum of agreement (MOA),” and “purchase orders,” are all covered by this policy. Refer to the Definitions section of this policy for a more detailed description of documents that are covered by this policy.

3. The Treasurer may delegate the authority to sign such documents as are related to conducting the business operations of the university. This delegation shall be issued consistent with the parameters established in this policy and shall be made only by letter to the Secretary of the Board of Trustees and maintained as part of the official records of the Board. Any documents signed by the delegated individual shall have the same force and effect as if the documents were signed by the Treasurer. Any delegation of authority may be revoked at the discretion of the Treasurer.

4. In conjunction with a separate Board of Trustees policy which establishes and delegates purchasing authority for the University to the Associate Vice President for Procurement Services and that Associate Vice President’s delegates (campus purchasing directors and purchasing agents), the corresponding signature authority is hereby delegated to the Associate Vice President for Procurement Services and that Associate Vice President’s delegates with respect to the execution of purchase orders and related contractual agreements and documents necessary to contract the purchase of goods and services.

5. Each contract or other document signed by an authorized delegate must be reviewed and approved by the Office of the Vice President and General Counsel (OVPGC) prior to signature, unless:
   a. The delegation letter expressly authorizes the delegate to execute one or more specific documents that have been approved in form and substance by the Treasurer and OVPGC where the transactions are repetitive and the text of each document is highly standardized; or
b. The delegation letter expressly authorizes the delegate to sign certain types of documents without OVPGC review.

Reason For Policy

To establish and clarify protocols regarding signature authority and the delegation of signature authority with respect to contracts and agreements between the university and third parties.

Procedure

1. Any employee of the university who believes that a delegation of signature authority would be in the best interest of the university should request such authority in writing to the Treasurer of the University.
2. The Treasurer’s Office will notify and consult with the appropriate senior university official with regard to, and in advance of, making a delegation to an employee.
3. The Secretary of Board shall maintain an official record of such delegation.
4. The Treasurer shall require that all delegates provide a new certification every two years that such delegation is still required for the efficient conduct of university business. Records of such verification shall be maintained in the Office of the Treasurer.

Definitions

Affiliation Agreements: All agreements with hospitals, rehabilitation centers, elementary and secondary schools, educational or research organizations, and the like for placement of Indiana University students for internships and similar training experiences.

Bank Accounts: All documents related to opening, amending or closing bank accounts on behalf of the university; documents relating to the deposit and withdrawal of funds, and other documents needed to conduct such banking activities as required in the normal business of the university; and all documents relating to the investment of university funds as permitted by the Investment Policy approved by the Board of Trustees.

Business Transactions: All checks, contracts, agreements deeds, notes, bonds, leases, stock powers, repurchase agreements for real estate and any other documents obligating the Trustees of Indiana University. This category includes agreements with outside consulting firms; agreements to rent, lease or license of the use of facilities from outside entities whether for educational or social purposes; agreements with outside vendors or entertainment providers, and the like.

Debt Obligations and Loan Transactions: All documents required to conclude and amend loan transactions and issue notes in the name of “The Trustees of Indiana University” or “Indiana University” when the Board approves borrowing funds. Those documents specifically requiring the signature of the President of the Board, as required by the terms of the Indentures or prevailing law, are excluded from this policy.

Permit Applications and Certifications: All applications for environmental or construction-related permits, and any other regulatory certificate, permit, or similar documents that are required by state and federal regulators, and attendant reports and certifications of compliance.

Sponsored Research: All grant proposals, grant agreements, sub-grant agreements, contracts, subcontracts, purchase orders, and any other documents relating to external funding of research.

Tax Documents: Tax forms, tax returns, and any official correspondence with federal and state tax authorities and agencies.

Miscellaneous: Any and all other documents and transactions either referred to explicitly or implicitly in the Resolution.

History

This policy was established on June 1, 2003.
This policy was revised to add a Scope section on November 18, 2016.

This policy was fully reviewed, and non-substantive updates were made October 12, 2021.

**Related Information**

FIN-PUR-1.0, Purchasing Authority
Delegation of Signature Authority
Signature Authority Delegation Log
Discrimination, Harassment, and Sexual Misconduct

UA-03

About This Policy

Effective Dates:
03-01-2015

Last Updated:
08-14-2020

Responsible University Administrator:
President, Indiana University University Faculty Council

Policy Contact:
Jennifer Kincaid
University Director of Institutional Equity/University Sexual Misconduct and Title IX Coordinator/University ADA Coordinator
oie@iu.edu

Scope

1. This policy applies to all members of the Indiana University community, including:
   a. All students
   b. All academic appointees, staff and temporary (hourly) employees
   c. All others while on Indiana University property, including employees of third-party vendors and contractors, volunteers, and visitors, and others while involved in an off-campus Indiana University program or activity.
2. Other university policies and codes related to misconduct remain in effect for complaints of misconduct other than discrimination, harassment and/or sexual misconduct. However, any report or complaint of misconduct that includes elements of the covered behaviors below may be addressed in accordance with this policy and its related complaint resolution procedures.

Policy Statement

1. OVERARCHING POLICY TENETS
   a. Indiana University prohibits discrimination and harassment on the basis of age, color, disability, ethnicity, sex, gender identity, gender expression, genetic information, marital status, national origin, race, religion, sexual orientation, or veteran status (“protected classes”) in matters of admission, employment, housing, services, and in its educational programs and activities.
   b. This policy governs the university’s response to all forms of discrimination and harassment and sexual misconduct. Such behaviors are unacceptable under Indiana University policy. (See UA-01, Indiana University Non-Discrimination Policy.) The university does not tolerate conduct in violation of this policy and will take action to prevent and address such misconduct.
   c. It is the policy of the university to comply with all applicable federal and state laws regarding unlawful discrimination and harassment against protected classes. Procedures for reporting incidents of discrimination, harassment and/or sexual misconduct, and for investigating and adjudicating formal complaints, are part of this policy and are included below. These complaint resolution processes may vary depending on applicable law and policies relevant to the specific misconduct. In appropriate cases, and upon consultation with the Vice President and General Counsel, the university reserves the right to take prompt action in accordance with other university procedures. Questions about this policy, as well as the
applicable complaint and complaint resolution processes, may be directed to the appropriate contacts set forth in this policy. (See Additional Contacts.)

d. Individuals who believe they have experienced discrimination, harassment and/or sexual misconduct in violation of this policy, and all members of the university community who may be aware of such incidents, are encouraged to promptly report incidents of discrimination, harassment, and/or sexual misconduct to the appropriate designated officials. (See Additional Contacts.)

e. Some employees may have reporting obligations based on their role and responsibilities under this and other policies (See Employee Reporting Obligations.)

f. Retaliation against anyone who makes a report of discrimination, harassment and/or sexual misconduct, or who participates in an investigation under any of the complaint resolution procedures set forth herein, is prohibited. (See Retaliation.)

g. For every report, the university will review the circumstances of the reported conduct to determine whether the university has jurisdiction over the parties involved, and to take steps within its control to eliminate, prevent, and address the reported conduct. The university will respond promptly to all reports and assess all information available; the potential Complainant(s) will be offered information regarding resources and supportive measures, as well as options regarding reporting and applicable complaint resolution procedures. Where a formal complaint is filed or initiated, the university will provide a fair and impartial investigation and resolution, provide supportive and interim measures and, in the event a policy violation is found, impose appropriate sanctions and provide remedial measures. The appropriateness and severity of the sanctions imposed, up to and including termination or expulsion of the offender, will depend on the circumstances of the particular case. If the Respondent is not a member of the university community or is no longer affiliated with the university at the time of the report or at the time a formal complaint is initiated (including when the Respondent has graduated or left the university), the university typically is unable to take disciplinary action or conduct an investigation through the complaint resolution procedures herein.

2. JURISDICTION

a. This policy applies to any reported discrimination, harassment and/or sexual misconduct that is alleged to have occurred on campus, in the context of any university program or activity, or among current members of the university community off campus. This policy also applies to reported discrimination, harassment and/or sexual misconduct that has a continuing adverse effect or creates a hostile environment for one or more individuals.

b. The applicable complaint resolution process for addressing a formal complaint will depend on a number of factors, including the type and nature of the alleged conduct, the role of the parties, where the alleged conduct occurred, and applicable law.

c. In situations not covered above, but where the reported discrimination, harassment and/or sexual misconduct undermines the security of the university community or the integrity of the educational process or poses a serious threat to self or others, other applicable university procedures for general misconduct may be applied.

3. COVERED BEHAVIORS

This policy applies to the following behaviors and conduct. A formal complaint that a member of the university community engaged in one or more of these covered behaviors will be addressed pursuant to the applicable complaint resolution procedures.

a. Discrimination: Prohibited discrimination is treating someone differently based on their membership in a protected class, or any other classification protected by law, in matters of admissions, employment, education, or in the programs or activities of the university.

1. In determining whether discrimination occurred, the university considers whether there was an adverse impact on the individual’s work or education environment and whether individuals outside of the protected class received more favorable treatment. If there was an adverse impact on the individual’s work or education environment, the university considers whether there is a legitimate, non-discriminatory reason for the action.
2. Examples of discrimination can include refusing to hire or promote someone because of their membership in a protected class; denying someone a raise or employment benefit because of their membership in a protected class; reducing someone’s job responsibilities because of their membership in a protected class; denying someone access to an educational program based on their membership in a protected class; or denying someone access to a university facility based on their membership in a protected class.

b. **Harassment:** Harassment prohibited under this policy is verbal or physical conduct, or conduct using technology, directed toward someone because of their membership in a protected class (or a perception that someone is a member of a protected class) that has the purpose or effect of substantially interfering with the individual’s access to education or work, or creating an intimidating, hostile or offensive working environment or academic experience.

1. An individual’s subjective belief that behavior is intimidating, hostile, or offensive does not make that behavior harassment. The behavior must create a hostile environment from both a subjective and objective perspective such that it unreasonably interferes with, limits, or deprives a member of the university community of the ability to participate in or to receive benefits, services, or opportunities from the university’s education or employment programs and/or activities.

2. In determining whether a hostile environment exists, the university will examine the context, nature, scope, frequency, duration, and location of incidents, as well as the relationships of the individuals involved, and apply the appropriate standard according to the applicable complaint resolution procedures.

3. Examples of harassment can include offensive jokes, slurs, name-calling, intimidation, ridicule or mockery, or displaying or circulating offensive objects and pictures that are based on a protected class, including sex and gender-based harassment.

c. **Sexual Misconduct:** All forms of Sexual Misconduct, which are more fully defined within this policy:

   1. **Sexual Harassment**
   2. **Sexual Assault**
   3. **Sexual Exploitation**
   4. **Dating Violence**
   5. **Domestic Violence**
   6. **Stalking**

4. **INTELLECTUAL INQUIRY AND DEBATE**

   a. In determining whether discrimination, harassment and/or sexual misconduct has occurred and what type of remedy, if any, might be appropriate in a given case, the university will also consider the fact that free intellectual inquiry, debate, and constructive dialogue are vital to the university’s academic mission and must be protected even when the views expressed are unpopular or controversial. Accordingly, any form of speech or expressive conduct that is protected by state or federal law, including the First Amendment, is not subject to this policy.

   b. This policy is meant neither to proscribe nor to inhibit discussions, in or out of the classroom, of complex, controversial, or sensitive matters, including matters involving protected characteristics, when, in the judgment of a reasonable person, they arise for legitimate academic and pedagogical purposes. This includes intellectual inquiry, debate, and dialogue on related issues. The mere expression of views, words, symbols, or thoughts that some people find offensive does not by itself create a hostile environment.

5. **EDUCATION, PREVENTION, AND TRAINING**

   a. Every Indiana University campus shall publicize and provide ongoing educational programming for students, employees and other members of the university community to promote awareness of the problems caused by discrimination, harassment and sexual misconduct and to help prevent and attempt to reduce its occurrence. Educational programs and information will include campus-specific information on how and where to report, resources available, and safe and positive options for bystander intervention to address,
intervene, and prevent such conduct. Efforts will be made to ensure that educational programs are culturally relevant and inclusive of the diverse communities and identities found at each campus.

b. Employee training shall be provided to those involved in reporting, receiving reports, investigating, adjudicating, reviewing, and otherwise responding to charges of discrimination, harassment and/or sexual misconduct at the university. Certain training may be mandated by applicable federal or state law. The appropriate training will be tailored to the audience and will include reporting and response obligations, available resources, and information about how to prevent and identify discrimination, harassment and/or sexual misconduct. Individuals specifically involved in implementing this policy and its procedures will be trained regarding their application, conducting the investigations, hearings and other decision-making processes, conflict of interest and unconscious bias, and other aspects of this policy.

Reason For Policy

1. Indiana University is committed to the success, safety and well-being of all members of the university community, including students, academic appointees, and staff. Indiana University recognizes that discrimination, harassment, and/or sexual misconduct may result in grave and often long-lasting effects on those involved and is committed to conducting timely investigation of allegations and to taking appropriate actions and consequences following investigations.

2. Indiana University is committed to compliance with state and federal laws regarding discrimination, harassment and/or sexual misconduct, to making required reporting to state and federal agencies, and to working with law enforcement officials and agencies where applicable. The university is also committed to using its resources in research and education to improve programs aimed at preventing and reducing discrimination, harassment and sexual misconduct in our community and ensuring safe, diverse, equitable, and inclusive communities.

Procedure

1. TENETS APPLICABLE TO ALL COMPLAINT RESOLUTION PROCESSES

   a. University Provided Information:

      1. The appropriate designated official will promptly contact anyone who reports to the university that they have experienced discrimination, harassment, and/or sexual misconduct and will offer to meet and provide written information about:

         a. Potentially applicable university procedures, including to whom and how a formal complaint can be filed, as well as the individual’s rights and options within the university proceedings;

         b. If the conduct is of a potential criminal nature, options about the involvement of and reporting to law enforcement, and information about the importance of preserving evidence that may assist in proving the alleged criminal offense occurred, as well as how to preserve such evidence;

         c. Civil orders of protection issued by courts and how to obtain such orders; and

         d. Available campus and community resources, including the availability of supportive measures.

   b. Reporting an Incident:

      1. **In an emergency or where immediate help is needed, call 911.**

      2. Anyone wishing to report an incident of discrimination, harassment and/or sexual misconduct that may be of a criminal nature can do so by contacting local law enforcement. If the incident did not occur on campus, IUPD can help direct the individual to the appropriate law enforcement agency.

      3. The university encourages anyone who has experienced discrimination, harassment and/or sexual misconduct to report what happened to the university, to ensure they are informed of the available supportive measures, on and off campus resources, options to make a formal complaint, and applicable complaint resolution processes, and to allow the university to respond appropriately. Anyone wishing to report can do so by contacting the designated official on their campus. (See Additional Contacts.)

      4. Reports of sexual misconduct made to a **Responsible Employee** that are not initially reported to the University Sexual Misconduct & Title IX Coordinator and/or Deputy Sexual Misconduct & Title IX Coordinator(s) for the respective campus will be shared with those officials in a timely manner.
5. If a report of discrimination, harassment and/or sexual misconduct is not made initially to the Indiana University Police Department (IUPD), and the information indicates it may be a crime reportable under the Clery Act, non-identifying information regarding the date, time, location and nature of the crime will be shared with IUPD for purposes of complying with the Clery Act.

6. If the university receives a report that indicates law enforcement should be informed and involved due to the potential threat to health and safety of an individual or the university community, the university may also share the identifying information needed for appropriate response by IUPD or law enforcement agency with jurisdiction.

c. **Sexual Misconduct Involving a Child/Minor:**
   Sexual misconduct involving a child/minor (anyone under 18 years of age) must be reported. Indiana state law requires that any individual who has reason to believe that a child/minor is a victim of child abuse or neglect (including sexual misconduct) has an affirmative duty to make an oral report to the Indiana Department of Child Services hotline 1-800-800-5556 or to their local law enforcement or to IUPD. Failure to report may result in criminal charges. (See [PS-01, Programs Involving Children](#) for more information.)

d. **Amnesty:**
   1. The university strongly encourages students to report instances of discrimination, harassment and/or sexual misconduct. Therefore, students who report an incident pursuant to this policy will not be disciplined by the university for violations of the Code of Students Rights, Responsibilities & Conduct related to their drug and/or alcohol consumption in connection with the reported incident.
   2. Students are also afforded immunity against certain charges for alcohol-related crimes under Indiana’s Lifeline Law in connection with a report of a medical emergency, so long as they cooperate with law enforcement at the scene. (See IC 7.1-5-1-6.5.)

e. **Retaliation:**
   Protections against retaliation are critical to reducing the prevalence of discrimination, harassment, and sexual misconduct within the university community. Retaliation against anyone who has reported an incident of discrimination, harassment and/or sexual misconduct, provided information, or participated in procedures or an investigation into a report of discrimination, harassment and/or sexual misconduct, is prohibited by the university and may be considered and addressed as a potential violation of this policy or other applicable university policies. Acts of retaliation include intimidation, threats, and/or harassment, whether physical or communicated verbally or via written communication (including the use of e-mail, texts, and social media), as well as adverse changes in work or academic environments, or other adverse actions or threats. The university will take steps to prevent retaliation and will impose sanctions on anyone or any group who is found to have engaged in retaliation in violation of this policy. Concerns about potential retaliation in connection with a report of sexual misconduct should be reported to the designated officials under this policy. (See Additional Contacts.)

f. **Roles, Duties and Obligations of Certain Employees:**

   1. **Sexual Misconduct & Title IX Coordinators (“Coordinator(s)“):**
      a. The University Sexual Misconduct & Title IX Coordinator (“University Coordinator”) will be promptly informed of all reports of sexual misconduct and will oversee the university’s review, investigation, and resolution of those reports to ensure the university’s compliance with applicable law and this policy.
      b. Deputy Sexual Misconduct & Title IX Coordinators (“Deputy Coordinators”) will be promptly informed of all reports of sexual misconduct for their campus and pursuant to their specific delegated role, and will assist the University Coordinator in ensuring that outreach, response, investigation and adjudication occurs in accordance with applicable law and this policy.
      c. Deputy Coordinators and other officials within the university will work with the University Coordinator to ensure that adequate education, training, and appropriate resources are available and provided on their respective campus.

   2. **Equity Officials:**
a. The University Director of Institutional Equity will be promptly informed of all reports of discrimination and harassment and will oversee the university’s review, investigation, and resolution of those reports to ensure the university’s compliance with applicable law and this policy.

b. Campus Equity Officials will be promptly informed of all reports of discrimination and harassment for their campus and will assist the University’s Director of Institutional Equity to ensure that outreach, response, investigation and adjudication occurs in accordance applicable law and this policy.

c. Campus Equity Officials will work with the University’s Director of Institutional Equity and other officials within the university to ensure that adequate education, training, and appropriate resources are available and provided on their respective campus.

g. **Employee Reporting Obligations:**
   Certain employees within the university, based on the nature of their role and the type of information known to them, may have a duty to report discrimination, harassment and/or sexual misconduct to the appropriate designated university officials to ensure the university can respond promptly. These obligations are set forth below:

   1. **Discrimination & Harassment:** University employees with teaching responsibility or supervisory authority within the university are obligated to promptly report incidents of discrimination or harassment, to the designated campus Equity Official. (See [Additional Contacts](#).

   2. **Sexual Misconduct:**
      a. Employees designated as “Responsible Employees” are obligated to promptly report incidents of sexual misconduct to the University Coordinator or their designated campus Deputy Coordinator. (See [Additional Contacts](#))
      b. Responsible Employees include:
         1. All employees with teaching responsibility, including academic appointees, student academic appointees, and any others who offer instruction (whether in-person or online) or office hours to students;
         2. All advisors;
         3. All coaches and other athletic staff who interact directly with students;
         4. All student affairs administrators;
         5. All residential hall staff;
         6. All employees who work in offices that interface with students; and
         7. All supervisors and university officials.

   h. **Exempt Disclosures:**
      1. Employees who otherwise have reporting obligations under this policy are exempt from reporting disclosures of discrimination, harassment and/or sexual misconduct when made during limited situations, including:
         a. Disclosures made as part of participation in research activities that have received human subjects approval through the university’s Institutional Review Board (IRB);
         b. Disclosures made as part of an academic assignment;
         c. Disclosures made at public awareness events;
         d. Disclosures made during the course of communications protected as privileged communications under applicable law, including attorney-client privilege and medical professional privilege.
      2. Following such disclosures, and when appropriate given the circumstances, the Responsible Employee should offer resources and reporting information and options.
3. These limited exemptions from reporting do not relieve a university employee from the obligation to report a disclosure of child abuse or neglect, which must be reported to appropriate officials in all instances. (See Sexual Misconduct Involving a Child/Minor.).

4. Responsible Employees who are also Campus Security Authorities may still have an obligation to report information as required by the Clery Act and university policy UA-16 (Clery Act Compliance).

i. Confidential Employees

1. Certain university employees – based on their own professional licensure and the nature of their role on campus – have been identified by the university as Confidential Employees and are available to speak with individuals and maintain the individual’s desire for anonymity and absolute confidentiality. These Confidential Employees are exempt from the reporting requirements that apply under this policy. Individuals who desire anonymity in discussing and seeking assistance should contact and/or be referred to a Confidential Employee.

2. Confidential Employees include, but are not limited to:
   a. Licensed, professional mental health counselors working in that capacity for the campus, and those they supervise;
   b. Health care professionals and staff located in on-campus health care centers; and
   c. Any staff or specialists on a campus specifically designated as non-professional sexual assault advocates.

3. Faculty, staff, and other employees who are licensed mental health workers or are licensed medical workers, but who are not working in that capacity, such as faculty members in psychology, social work, nursing, etc., are not Confidential Employees under this policy.

4. Any Confidential Employee who is not a licensed mental health counselor or pastoral counselor serving in those roles must provide non-identifying aggregate information regarding any Clery crime known to them directly to IUPD.

5. Employees who are uncertain whether they have a reporting obligation under this section are encouraged to contact the designated officials for their campus to seek guidance.

j. Role of Law Enforcement

1. Any individual who has experienced discrimination, harassment and/or sexual misconduct that may be of a criminal nature is encouraged to contact IUPD or local law enforcement.

2. IUPD responds to emergency situations on Indiana University campuses and typically communicates and works with the appropriate designated officials to assist in investigations and incident response, as well as to track statistics for Clery Act reporting.

3. Individuals with a possible criminal case who have not made their initial complaint via the police will be provided with information about how to file a complaint with law enforcement. Individuals may also request assistance from campus authorities in notifying law enforcement. Individuals may decide not to notify law enforcement authorities and proceed only with a university investigation.

4. A university investigation under the complaint resolution procedures identified in this policy may be initiated and/or proceed simultaneously with a criminal case. The university will cooperate with law enforcement and, if requested by law enforcement, defer its fact gathering for a brief period during the evidence gathering stage of a criminal investigation. However, the university will not consider its investigation on hold pending a criminal prosecution or investigation, and will continue to communicate with individuals, address the need for any supportive measures regarding safety and well-being and resume its own fact gathering as soon as permitted.

5. The determination by law enforcement whether or not to prosecute a Respondent or the outcome of a criminal proceeding does not determine whether a violation of university policy has occurred. Records of university proceedings may be subpoenaed for a criminal prosecution.

k. Privacy
1. The university is committed to safeguarding the privacy of the parties in a manner consistent with the objective to effectively investigate and prevent incidents of discrimination, harassment and/or sexual misconduct. In all cases, the university will share the parties’ information and details of the allegation only with university officials, law enforcement personnel, and other individuals who have a legitimate administrative or legal reason to be so informed. Records will not be disclosed outside the university unless required by law or subpoena.

2. All individuals with knowledge of a reported incident of discrimination, harassment and/or sexual misconduct are expected to safeguard the privacy of those involved and are encouraged to report such knowledge to the appropriate officials.

I. Requests for No-University Action

1. If an individual discloses that they have experienced an incident of discrimination, harassment and/or sexual misconduct to the university, but indicates or requests that the university not investigate the particular incident, requests that no disciplinary action be taken, requests that the alleged perpetrator not be notified, or makes any similar request, the university will always consider such request(s), and will, in general, work to honor the request(s). Absent a formal complaint, the university will weigh such request(s) against its obligation to provide a safe, non-discriminatory environment for all, including for the individual who experienced the discrimination, harassment, or sexual misconduct. If the university determines that it is able to honor the individual’s request(s), the individual should understand that the university’s ability to meaningfully investigate the incident and/or respond appropriately may be limited. If, however, the university determines it must proceed under the circumstances, it will work to notify the individual in advance.

2. The university has designated the following official(s) to evaluate an individual’s request for no or limited action by the university in connection with a report of discrimination, harassment and/or sexual misconduct: i) the University Director of Institutional Equity and campus Equity Officials for reports of harassment or discrimination; and ii) the University Coordinator or the campus Deputy Coordinator for reports of sexual misconduct. These officials will consult with relevant administrators on their campus and the Office of the Vice President and General Counsel, where appropriate, in making these determinations.

m. Determination of Procedures in Response to Reports of Discrimination, Harassment or Sexual Misconduct

1. Determination by the university of applicable complaint resolution procedures upon receipt of a formal complaint after a report of discrimination, harassment and/or sexual misconduct will follow the steps identified below, depending on whether the Respondent is a student or employee, and whether the matter falls within the scope of Title IX or the other provisions of this policy. Employees who are also students may be subject to procedures for students or employees, or both.

2. If the individual reported as having been engaged in discrimination, harassment and/or sexual misconduct is not a student or employee of the university, the university shall take all appropriate measures to determine information regarding the individual, what occurred, whether another entity needs to be contacted to join in or assume an investigation (e.g., another institution of higher education), and to provide assistance in notifying the proper law enforcement authorities, if applicable. The university will also provide supportive and remedial measures, to the extent possible, to protect the reporting individual and eliminate any hostile environment.

3. The university reserves the right to investigate circumstances that may involve discrimination, harassment and/or sexual misconduct in situations where no complaint, formal or informal, has been filed. In limited circumstances, the university reserves the right to reopen a case previously considered closed in the event of new information or other appropriate circumstances.

n. Supportive and Interim Measures

1. Upon receiving a report of discrimination, harassment, or sexual misconduct, the university will offer and provide appropriate and necessary supportive measures, regardless of whether a formal complaint is filed, according to the specific needs and circumstances of the situation. These measures may vary
depending on an individual’s campus, an individual’s needs and specific circumstances; assistance in changing academic, living, transportation, and/or work situations; counseling services; advocacy and advising services; and assistance in obtaining protective orders.

2. In the event a formal complaint is filed and an investigation is initiated according to the complaint resolution procedures below, all parties will be offered supportive measures, and interim measures may be taken, depending on the specific allegations and circumstances, and may include suspension of the Respondent from campus or some portion of campus, pending completion of the investigation. When contemplating interim suspension of a student under this policy, campus interim suspension procedures will be followed.

3. In the event of a finding of responsibility following the university’s adjudication of a formal complaint, the university will take any additional and necessary measures with respect to the Complainant and other members of the community, as well as the appropriate disciplinary action with respect to the individual found responsible.

2. SUMMARY OF RIGHTS OF THE COMPLAINANT AND RESPONDENT IN ALL COMPLAINT RESOLUTION PROCEDURES
The rights of the parties in any of the complaint resolution procedures under this policy include:

a. To be fully informed of university policies and procedures, as well as the nature and extent of all alleged violations contained within the allegation.

b. To be treated with respect.

c. To be accompanied by an advisor present during all proceedings, investigation meetings, or related meetings.

d. To have adequate, reliable, and impartial investigation and appropriate resolution of all complaints of discrimination, harassment and/or sexual misconduct.

e. To be informed by the university of options to notify proper law enforcement authorities including on campus and local police, and the option to be assisted by campus authorities in notifying proper law enforcement, if the individual chooses.

f. To be notified of available resources including counseling, mental health, academic, legal and other support services, both at the university and in the community.

g. To have allegations investigated and adjudicated by individuals who are properly trained to investigate and resolve allegations of discrimination, harassment and/or sexual misconduct.

h. To participate in the investigation and complaint resolution process, including the opportunity to identify witnesses and other appropriate evidence, and to be informed of adverse evidence and provided the opportunity to respond to it through the process.

i. To have allegations investigated and adjudicated in a reasonable timeframe given the circumstances of the specific case.

j. To have the preponderance of the evidence standard (more likely than not) applied in determining responsibility.

k. To have appeal rights as afforded under the applicable complaint resolution procedures.

III. STUDENT DISCRIMINATION & HARASSMENT COMPLAINT RESOLUTION PROCEDURES
Complaints of discrimination and harassment alleged against a university student will be addressed according to the Code of Student Rights, Responsibilities & Conduct and the campus specific conduct procedures.

IV. ACADEMIC APPOINTEE & STAFF DISCRIMINATION & HARASSMENT COMPLAINT RESOLUTION PROCEDURES

1. Covered Behaviors
These procedures cover discrimination against or harassment of an individual based on their age, color, disability, ethnicity, sex, gender identity, gender expression, genetic information, marital status, national origin, race, religion, sexual orientation, or veteran status.
2. Initial Assessment
   a. Upon receipt of a report or complaint of discrimination and/or harassment, the Equity Official or other designated investigator will conduct an initial assessment to determine whether it falls within the scope of this policy, whether the conduct alleged rises to the level of an allegation of discrimination or harassment, and whether these procedures apply. If the allegations on their face do not rise to the level of a policy violation, but do indicate a matter of concern, the Equity Official and other offices will work to address the concern through other appropriate avenues. If a report or complaint raises allegations that are outside the scope of this policy, but may violate other university policy(ies), the matter will be referred to the appropriate university office.

   b. Where it is determined that the allegations fall under this part of the policy, the following complaint resolution procedures apply, except that allegations of sexual harassment may be addressed by the appropriate sexual misconduct complaint resolution procedures in this policy.

   c. When the initial assessment results in a decision not to proceed with the complaint under any university procedures, once notice is given to the parties, either party may appeal that decision to the Decisional Official (see below).

3. Discrimination Complaints Against a Unit or Department:
   a. In response to a complaint of discrimination, the Investigator will gather relevant information from the Complainant, the respective unit/department at issue, other university offices, and potential witnesses.

   b. After gathering all relevant information, the Investigator will make a determination whether discrimination occurred.

   c. The Investigator will issue a letter setting forth the relevant findings and, if applicable, any necessary remedial actions or other recommendations to the Complainant and the unit/department. In the event the findings include evidence of discrimination, the Investigator will advise the unit/department in taking any necessary and appropriate remedial action.

4. Discrimination or Harassment Complaints Against Academic Appointees or Staff:
   a. For the purpose of these procedures, relevant officials with key responsibilities are:

   1. Investigator – The Equity Official for the respective campus, or an appropriate designee, will conduct fact-finding as the Investigator and may coordinate the investigation with other offices such as human resources, academic affairs, and student affairs.

   2. Decisional Official (DO) – The DO will issue the decision determining responsibility and assigning appropriate sanctions, if applicable. The DO will be as follows, or an appropriate designee:

      a. For complaints against staff employees, including temporary (hourly), the DO will be the university employee relations director.

      b. For complaints against academic appointees, the DO will be the campus Vice Provost/Vice Chancellor for Academic Affairs.

      c. For complaints against a Dean, a Vice Provost, or a Vice Chancellor, the DO will be the campus Provost/Chancellor.

      d. For complaints against a University Vice President, a Provost, a Chancellor, or equivalent, the DO will be the President.

      e. For complaints against the President, the DO will be the Board of Trustees.

   3. Appellate Official (AO) – The AO may review the decision of the campus DO, following appeal by either party, and make a subsequent determination. The AO will be as follows, or an appropriate designee:

      a. For an appeal in a complaint against staff employees, including temporary (hourly), the Vice President of Human Resources.

      b. For an appeal in a complaint against academic appointees, the campus Provost/Chancellor.

      c. For an appeal in a complaint against a Dean, a Vice Provost, or a Vice Chancellor, the President.
d. For an appeal in a complaint against a Vice President, a Provost, a Chancellor, or equivalent, the Board of Trustees.

4. Faculty Board of Review (FBR) - In faculty cases, following the determination of the AO, the faculty member may request a review by the campus FBR, which may review and issue a recommendation to the AO.

b. Interim Action
If, upon the receipt of a complaint, the Equity Official determines a need for immediate interim action, e.g. removal, reassignment, administrative leave, or suspension, they shall consult with the DO and any other appropriate university officials. The DO may administer such interim action at any point in this process pending final outcome.

c. Informal & Alternative Resolutions

1. Informal Action:
   In appropriate cases, the university may pursue informal actions in connection with reported discrimination or harassment, including when the individual who may have experienced the conduct does not wish to pursue a formal complaint, and/or when there is not enough information to proceed with a formal complaint resolution process against a known Respondent. Informal actions will not result in findings related to responsibility or in sanctions, nor will an informal action preclude further steps, including formal resolution, if a complaint is later made or additional information is received by the university. Informal actions can include, but are not limited to, educational meetings, additional training, and/or continued monitoring.

2. Alternative Resolution Options:
   In appropriate cases, the university may pursue alternative resolution with the consent of all parties at any point in the complaint resolution process. These resolution options may include, but are not limited to facilitated mediation, development of an action plan, and other voluntary steps to resolve the matter. Under alternative resolution, the Complainant will not be required to resolve the problem directly with the Respondent, unless desired by the Complainant. All parties must be notified of the right to end the alternative resolution process at any time and to begin the formal process. Face-to-face mediation may not be required in cases involving any violence or where the complaint is made against an employee with a position of authority over the Complainant. The Investigator shall document the outcome of any alternative resolution and share with the Equity Official and the DO.

3. Acceptance of Responsibility:
   In cases where the Respondent expresses a willingness to accept responsibility for any or all allegations, the Respondent may be offered the opportunity to bypass the remainder of the investigatory stage of the complaint resolution process and agree to receive a sanction from the DO. In such situations, the parties will each be provided the opportunity to submit a written statement to the DO for consideration in determining appropriate sanctions. In determining sanctions in such cases, the DO shall consider only the allegations and parties’ written statements, the relevant facts gathered from the investigation, and past conduct history of the Respondent (if applicable). The right to appeal will be limited to an appeal on the grounds that the sanction is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

d. Investigation

1. Following the initial assessment, if a formal investigation is initiated, the Investigator(s) will notify the Complainant and the Respondent. The Respondent will be informed of the allegations made against them and shall be provided the opportunity to respond. The Respondent will be provided a date by which an appointment must be made to discuss the matter.

2. The Investigator will conduct fact-finding as to the allegations made against the Respondent and preserve all evidence collected.
3. The investigation may include, but is not limited to, interviews with the Complainant, the Respondent, and other witnesses identified as having information relevant to the allegations made, as well as the examination of written statements by the parties, relevant documents, and other relevant information. Information for the investigation may be provided by Complainant, Respondent, witnesses identified by any party, or the university. The Investigator shall ensure that the Respondent has been informed of all allegations raised and the name of the Complainant(s), and is provided the opportunity to respond.

4. Prior or subsequent conduct of the Respondent may be included in the investigation and considered in determining pattern, knowledge, intent, or motive. The determination of the relevance of pattern evidence will be based on an assessment of whether the previous or subsequent conduct was substantially similar to the conduct under investigation or indicates a pattern of similar prohibited conduct.

5. All members of the university are expected to cooperate fully with the investigative process. Interference with the investigation may result in disciplinary measures pursuant to applicable university policy and procedure. Any individual believed to have information relevant to an investigation may be contacted and requested to make an appointment to discuss the matter.

e. Report of Investigation

1. Following the investigation, the Investigator will provide a Preliminary Investigation Report to the parties. At that time, the parties will be provided access to the Investigation File. The parties will be provided 10 calendar days to review the Preliminary Investigation Report and provide any additional and/or clarifying information to the Investigator. This period of 10 days will be the final opportunity for parties to submit any additional information to the Investigator.

2. The Preliminary Investigation Report will include:
   a. The specific allegation(s);
   b. The Respondent's response to the allegation(s);
   c. A summary of the relevant information gathered from the parties, witnesses and other sources; as well as explanation for any information submitted or received that was determined not relevant for inclusion; and
   d. An analysis of the information.

3. At the conclusion of the 10-day period, the Investigator will review the information submitted by either party and determine whether and to what extent to incorporate such information into a Final Investigation Report. The Investigator will then finalize the Final Investigation Report and include a recommendation as to whether the Respondent is responsible or not responsible for the alleged violation(s) of this policy, using a preponderance of the evidence standard (more likely than not); and a recommendation as to appropriate sanctions, if any, as set forth below.

4. The Investigator will provide the Final Investigation Report to the DO, as well as to each party.

f. Finding and Decision

1. Upon receiving the Final Investigation Report, the DO shall issue a finding. The DO may consult with the Investigator concerning the investigation and recommendations. The DO will provide each party the opportunity to meet and provide comment and make a statement. If the DO wishes further consultation with the parties, the Investigator will facilitate consultations to ensure equal opportunities are provided for the parties.

2. The DO will issue one of the following findings, using a preponderance of the evidence standard:
   a. Finding of “No Violation”:
      If there is a determination that the behavior alleged and investigated did not violate the discrimination and harassment policy, the DO shall provide the parties written notice of the finding. In the event the investigation reveals that the employee may have violated a different university policy, the DO may address any such potential violation through other applicable university
policies. Documentation regarding a finding of “No Violation” shall be maintained with the campus Equity Official’s office, and not in the employee’s personnel file.

b. Finding of a “Violation”
If there is a determination that the behavior alleged and investigated was in violation of the discrimination and harassment policy, the DO shall issue the finding and sanction(s) based on the level of sanctions set forth below.

3. The DO shall provide the parties written notice of the finding and any sanctions, if applicable.

g. Sanctions
1. Sanctions for a violation of the university’s discrimination and harassment policy include the following:
   a. Level One Sanctions include sanctions that do not directly modify job duties or actual salary, such as informal discussions, additional training, periodic review, letter to personnel file or other similar corrective action (other than to promotion and tenure dossier, which is included in Level Two Sanctions below). Level One sanctions are not appropriate if Respondent is found responsible for a physical act of violence.
   b. Level Two Sanctions include sanctions that directly modify job duties, salary or job status, including affecting compensation, consideration in tenure or promotion decisions, suspension, and termination.

2. When determining the appropriate sanctions, consideration shall be given to the nature and severity of the behavior and the existence of any prior incidents or violations.

h. Appeals
1. Following the decision, either party may appeal to the Appellate Officer (AO) on the basis of:
   a. Significant procedural error that reasonably would have affected the outcome.
   b. Newly discovered evidence that reasonably would have affected the outcome.
   c. Significant bias in the process.
   d. The finding of responsibility is not supported by the evidence in the Investigation Report.
   e. The appropriateness of the sanctions.

2. A request for appeal must be submitted in writing to the AO within 10 calendar days of receiving the DO’s decision. The request must set forth the basis(es) for seeking an appeal and must include information to support such basis(es). If an appeal is submitted, all parties will be notified.

3. Upon receipt of appeal, the AO shall notify the other party in writing that an appeal has been filed and the basis(es) of the appeal, and shall allow the opportunity for other party to submit written statement in support or challenging the outcome to the AO within 5 calendar days.

4. The AO shall first determine whether the basis of appeal has been met, and if so, shall review the findings and any applicable sanctions, in making a determination.

5. The AO shall make a final determination within 15 calendar days of the receipt of any appeal, indicating one of the following:
   a. Affirming the DO’s original finding(s).
   b. Setting aside the DO’s original finding(s) and imposing a new finding and/or sanctions.
   c. Setting aside the DO’s original finding(s) and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).

6. To the extent possible, the parties will be notified simultaneously in writing of the final determination following an appeal.

i. Request for Faculty Board of Review
1. In cases involving a faculty member as a party, a faculty member sanctioned under this policy may submit a request for review by the Faculty Board of Review (FBR) following the determination of the AO. The request for review should be made according to the specific campus FBR policy, and campus FBR procedures will apply except as modified by the provisions below.

2. The basis(es) for appeal are the same as those for appeal to the AO. The request for a FBR must set forth the basis(es) for seeking review and must be submitted in writing within 15 calendar days of receiving the AO’s determination. For good cause shown, and bearing in mind the need for timely resolution, the timeframes set forth within these procedures may be extended. If a request for a FBR is submitted, the FBR shall notify the other party(ies), as well as the DO and the AO.

3. The FBR will only receive the Final Investigation Report; the written findings of the DO, along with comments submitted to the DO by any party named in the report; the written findings of the AO; and any sanctions. The FBR may not conduct new fact-finding. The FBR may seek training and additional information from the University Director of Institutional Equity.

4. Throughout the FBR process, hearing members and participants shall ensure that the privacy of the matter and the parties is upheld. If a hearing is held, it shall be closed to the public to protect the privacy of all parties. In addition to faculty members serving on the FBR hearing panel, others present during a hearing may include the party requesting review and that individual’s advisor, the other party(ies) named in the report and their advisor(s), the DO, the University Director of Institutional Equity, the Equity Official, and other university officials necessary to the proceedings. No witnesses will be allowed in the FBR. The faculty grievant, the Complainant, and one designated university official have the right to present a statement to the FBR in writing or orally, either personally or through an advisor. If any participant elects to make a statement, the FBR may pose questions related to their statement, but the other participants may not.

5. The FBR must be concluded promptly, and generally within 60 days of the request, absent special circumstances. After review, the FBR may recommend one of the following to the AO:
   a. Affirm the AO’s determination.
   b. Recommend an alternative finding and/or sanction.
   c. Recommend that the determination be set aside and a new investigation be conducted. (This option will generally be reserved for cases where significant procedural error has been identified and determined to have affected the outcome).

6. To the extent possible, the parties will be notified simultaneously in writing of the FBR’s recommendation to the AO.

7. Upon receipt of the FBR’s recommendation, along with any materials considered by the FBR, the AO will make a final determination within 10 calendar days, indicating one of the following:
   a. Affirming the prior determination on appeal.
   b. Setting aside the prior determination on appeal and imposing a new finding and/or sanctions.
   c. Setting aside the prior determination on appeal and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).

8. If the FBR recommends that the AO’s prior determination be modified, but the AO affirms the prior determination, the final determination shall be made by the President. To the extent possible, the parties will be notified simultaneously in writing of the President’s final determination. This concludes the appeal process.

j. Expectations for a Respectful Process
Every individual involved in a proceeding under this policy is entitled to be treated with respect. All parties and their advisors are required to follow the rules and procedures put in place to ensure a fair and respectful process. No one may intentionally harass or intimidate any party or witness, and university officials are authorized to halt such behavior.
V. OVERARCHING PROCEDURES FOR RESPONDING TO REPORTS OF SEXUAL MISCONDUCT

1. Covered Behaviors

Covered sexual misconduct behaviors include sexual harassment, sexual assault, sexual exploitation, domestic violence, dating violence, and stalking. Some covered behaviors will have different definitions depending on whether the complaint is proceeding under Title IX or University Complaint Resolution Procedures.

2. Complaint

a. When the campus Deputy Sexual Misconduct & Title IX Coordinator (“Coordinator”) receives a report alleging that a student or employee has engaged in sexual misconduct, and a Complainant can be identified, the Coordinator (or designee) will reach out to the Complainant and offer supportive measures and information about campus complaint procedures.

b. The Coordinator will determine if the Complainant would like to submit a formal written complaint. If the Complainant does not wish to submit a formal written complaint, the Coordinator will assess this as a request for no university action (see Request for No University Action) and, if necessary and appropriate, may choose to be the named Complainant. If the neither the Complainant nor the Coordinator chooses to submit a formal written complaint, the allegations must not be heard under Title IX Complaint Resolution Procedures, but may be reviewed under other university procedures.

c. If a formal written complaint has been submitted and signed by Complainant, the Coordinator will determine if the complaint meets the following criteria to proceed with the Title IX Complaint Resolution Procedures:
   1. At the time the formal written complaint is submitted and signed, the Complainant is a current IU student, employee, or is currently attempting to participate in an IU program or activity;
   2. The behavior alleged occurred as part of an IU program or activity; and
   3. The behavior alleged occurred against a individual in the United States.

d. If these criteria are not met either initially or as determined later in the process, or if the Complainant withdraws their complaint, the complaint must be dismissed under the Title IX Complaint Resolution Procedures; however, the allegations may be assessed under the University Complaint Resolution Procedures or other procedures.

e. Based on the allegations in the formal written complaint, the initial inquiry, and meeting with the Complainant, the Coordinator will also determine if the allegations fall into at least one of the following categories:
   1. The allegations include sexual assault, and/or dating violence, and/or domestic violence, and/or stalking;
   2. The allegations include quid pro quo sexual harassment;
   3. The allegations include sexual harassment that, if true, would be pervasive and severe and objectively offensive.

f. If the allegations do not fall into any of the above categories, the complaint will be dismissed under the Title IX Complaint Resolution Procedures. In that event, the complaint may be investigated under University Complaint Resolution Procedures or other procedures if applicable. If the allegations include behavior in one or more of the above categories, or if the Coordinator needs more information to make this determination, then the complaint may proceed to the investigation stage under Title IX Complaint Resolution Procedures.

g. In the event the complaint is dismissed under Title IX Complaint Resolution Procedures at any point, once notice of Title IX dismissal is given to the parties, either party may appeal that decision to the designated official. If the Coordinator chooses not to proceed with the complaint under any university procedures, once notice is given to the parties, either party may appeal that decision to the designated official on the following bases:
   1. Procedural irregularity that affected the outcome;
   2. New evidence that was not reasonably available at time determination of dismissal was made, that reasonably could have affected the determination; and/or
   3. The Title IX Coordinator(s), Investigator, or other official designated to make the determination of dismissal, had a conflict of interest or bias for or against the party(ies) that affected their determination.
h. When allegations implicate both University and Title IX Complaint Resolution Procedures, as well as other policies and procedures, the investigation may proceed under the Title IX Complaint Resolution Procedures and include charges under other processes within this policy or other university procedures.

VI. STUDENT SEXUAL MISCONDUCT – TITLE IX COMPLAINT RESOLUTION PROCEDURES

1. Covered Behaviors
   The following behaviors, as defined below, are covered under these procedures:
   a. Sexual Harassment
   b. Sexual Assault
   c. Dating Violence
   d. Domestic Violence
   e. Stalking

2. Officials
   For the purpose of these procedures, relevant officials with key responsibilities are:
   a. Investigator – An Investigator for the campus student affairs office, or an appropriate designee, will conduct fact-finding as the Investigator and will issue the Preliminary and Final Investigation Report.
   b. Hearing Panel – The hearing panel will review the case at the hearing and make a decision regarding whether or not the Respondent is found responsible and propose sanctions, if applicable. The Hearing Panel Chair will coordinate the process and make any determinations of relevance regarding questions asked by advisors.
   c. Sanctioning Official – Upon a finding of responsibility by the Hearing Panel, the Sanctioning Official will review the proposed sanctions and make the final determination of the sanctions to be applied to the Respondent.
   d. Student Affairs Official – The Student Affairs Official, which may be the campus dean of students, or an appropriate designee, may review the decision and sanction following an appeal by either party, and make a subsequent determination.

3. Investigation
   a. Upon receipt of a formal complaint of an allegation of Title IX sexual misconduct, the Investigator(s) will notify the Complainant and the Respondent. The Respondent will be provided a date by which an appointment must be made to discuss the matter. The Respondent shall be informed of the allegations made against them and shall be provided the opportunity to respond.
   b. The investigation may include, but is not limited to interviews with the Complainant, the Respondent, and other witnesses identified as having information relevant to the allegations made, as well as the examination of written statements by the parties, relevant documents, and other relevant information. Information for the investigation may be provided by Complainants, Respondents, witnesses identified by any party, or the university. Any individual believed to have information relevant to an investigation may be contacted and requested to make an appointment to discuss the matter. The university shall determine what information and evidence will be included in the Investigation Report, and all information submitted will be included in the Investigation File.
   c. Prior or subsequent conduct of the Respondent may be included in the investigation and considered in determining pattern, knowledge, intent, or motive. The determination of the relevance of pattern evidence will be based on an assessment of whether the previous or subsequent conduct was substantially similar to the conduct under investigation or indicated a pattern of similar prohibited conduct.
   d. All members of the university community, including the parties and witnesses, are expected to cooperate with the investigative and hearing process. Failure to comply with a request to make and/or keep an appointment related to an investigation may result in a disciplinary hold being placed on a student’s account and/or the initiation of student conduct charges for failure to comply.
Following the investigation, the Investigator will provide a Preliminary Investigation Report and Investigation File to each party and their advisor. The parties will be provided 10 calendar days to review the Preliminary Investigation Report and the Investigation File and provide any additional and/or clarifying information to the Investigator. This period of 10 days will be the final opportunity for parties to submit any additional information to the Investigator.

At the conclusion of the 10-day period, the Investigator will review the information submitted by either party and determine whether and to what extent to incorporate such information into a Final Investigation Report. The Investigator will provide the Final Investigation Report and Investigation File to each party and their advisor at least 10 days prior to the scheduled hearing.

When preparing the Final Investigation Report, the Investigator will determine the appropriate charge(s), if any, under this policy, to be placed on Respondent, and include the charge(s) in the Final Investigation Report. If the Investigator places a charge(s), the Final Investigation Report will be submitted to a hearing panel for the determination of responsibility, and the parties will be provided the Final Investigation Report and notified of next steps. If the Investigator determines that there is insufficient evidence to support placing a charge under the Title IX Complaint Resolution Procedures, the parties will be provided the Final Investigation Report and notified that no charges will be placed under Title IX sexual misconduct. If there are remaining charges under this policy or the Student Code, those may proceed according to the applicable procedures.

If it is determined at any time during this process that the allegations do not fit within Title IX sexual misconduct, the complaint will be dismissed under these procedures. The complaint may then be referred to other procedures within this policy or Student Code, if appropriate. The Complainant and Respondent will be notified of this dismissal and referral to other procedures (if applicable) in writing. The Complainant and Respondent will have the opportunity to appeal the dismissal to the designated Student Affairs official.

The Complainant may request to withdraw the complaint prior to the conclusion of the investigation by contacting the Investigator or appropriate Deputy Title IX Coordinator in writing. The Investigator or Deputy Title IX Coordinator will then determine whether to close the case or refer the complaint to other procedures within this policy or Student Code.

The investigation and determination of responsibility will be conducted in a reasonable timeframe given the circumstances of the specific case.

4. Selection of Advisors
   a. The Complainant and Respondent must have a Hearing Advisor that will be present during the hearing to conduct questioning of other parties. If the party does not identify in advance an advisor for this purpose, one will be appointed by the university. The university-provided Hearing Advisor is selected by the university and will not necessarily be an attorney, even if the other party is represented by an attorney. The Hearing Advisor may not participate or speak for the parties except during the questioning of other parties and witnesses. The Hearing Advisor is permitted to review the Investigation File.

   b. The Complainant and Respondent may have another advisor throughout the complaint resolution process that may accompany them during proceedings. The non-hearing advisor is not permitted to conduct any questioning at the hearing. Any advisor(s) engaged that is external to the university is at the expense of that party.

5. Alternative Resolution Options
   a. In appropriate cases, including cases where the Respondent expresses a willingness to accept responsibility for any or all charges, the university may pursue alternative resolution with the consent of all parties at any point in the complaint resolution process. Alternative resolution options may include, but are not limited to, acceptance of responsibility (see below), mediation, development of action plans, voluntary resolutions, appropriate sanctions, and/or appropriate remedies.

   b. Under any alternative resolution, the Complainant will not be required to resolve the problem directly with the Respondent, unless desired by the Complainant. All parties must be notified of the right to end the alternative resolution process at any time and to begin or resume the complaint resolution process. Face-
to-face mediation may not be used in cases involving physical or sexual violence. The Investigator shall document the outcome of any alternative resolution and share with the parties.

C. In cases where the Respondent expresses a willingness to accept responsibility for any or all charges in a case, the Respondent may be offered the opportunity to waive the right to a formal hearing as to the specific charge(s) and all related procedural guarantees, and agree to receive a sanction from the designated student affairs officer. In such situations, the parties will each be provided the opportunity to submit a written statement to the conduct officer for consideration in determining appropriate sanctions. The conduct officer shall consider only the parties’ written statements regarding sanctions, the relevant facts from the investigation, and past conduct history of the Respondent (if applicable). In such cases, the right to appeal will be limited to an appeal on the grounds that the sanction is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

6. Sexual Misconduct Hearing

A. A three-person hearing panel will be assembled to make a determination of Respondent’s responsibility as to the specific charge(s) set forth in the Final Investigation Report.

B. Hearing panel members will be drawn from the pool of faculty, staff, graduate students, and/or hearing officers retained by the university for purposes of adjudicating these hearings. At a minimum, at least one panel member shall be a student affairs administrator.

C. Upon review of the Final Investigation Report, all witnesses deemed relevant to the specific allegations will be called to the hearing.

D. The hearing is closed except for the parties, their advisor(s), the hearing panelists and other university officials necessary to facilitate the proceedings.

E. The hearing will take place in-person or will be conducted remotely via secure university software. Complainant and Respondent are expected to be available in-person or via video and audio for the duration of the hearing. Witnesses are expected be available in-person or via video and audio for the portion of the hearing relevant to their statement.

F. The Chair of the hearing panel shall review the charge(s) placed against the Respondent and the specific facts alleged.

G. Both the Complainant and the Respondent will have equal opportunity to provide a statement to the hearing panel.

H. No one other than the hearing panel members and the each party’s Hearing Advisor may pose questions during the hearing. The Complainant and Respondent may not directly question each other, but may provide questions to their Hearing Advisor to be asked of the other party on their behalf. The Chair, in consultation with hearing panelists and appropriate university officials, will determine if questions are relevant to the case.

I. The sexual misconduct hearing is recorded. Deliberations by the panel, following the hearing, are not recorded.

J. If any party or witness does not participate in the sexual misconduct hearing, the hearing may proceed; however, when deliberating, the panel may not consider the non-participating individual’s statements during the investigation in the determination. Evidence provided that is something other than a statement by the party or witness may be considered. The panel may consult with legal counsel to determine questions of admissibility. If Complainant or Respondent does not appear at the hearing, their Hearing Advisor should still ask any relevant questions of other party(ies) and witness(ies) on their behalf.

7. Decision & Sanctions

A. At the conclusion of a hearing, the panel shall deliberate without the parties present to determine responsibility for the specific charge(s) based on the evidence.

B. If, after deliberations, the hearing panel determines that the information contained in the Final Investigative Report and gathered during the hearing does not support by a preponderance of the evidence (more likely than not) that the Respondent is responsible for a violation of this policy and the Student Code, the hearing
panel will notify both the Respondent and the Complainant by means of a written notice. The Complainant and/or Respondent may request an appeal (see below).

c. If, after deliberations, the hearing panel determines that the information contained in the Final Investigative Report and gathered during the hearing does support by a preponderance of the evidence (more likely than not) that the Respondent is responsible for a violation of this policy and the Student Code, the hearing panel will propose sanctions. The proposed sanctions will be reviewed by the Sanctioning Official (or designee) to ensure that the sanctions are proportional to the severity of the violation and consistent with university standards. In the event of a conflict between the hearing panel and the Sanctioning Official, the Sanctioning Official will make the final decision regarding appropriate sanctions. The hearing panel will then notify the parties of the decision and sanctions by means of a written notice. The Respondent and/or the Complainant may request an appeal (see below).

d. Possible sanctions for cases in which a student is found in violation of this policy and the Student Code for acts of sexual misconduct include, but are not limited to formal warnings, behavioral assessment and/or counseling, required educational training, disciplinary probation, suspension, and/or permanent expulsion.

8. Appeal

a. The Respondent or the Complainant may appeal the decision of the Title IX hearing panel to the campus Student Affairs official (or designee). To initiate an appeal, a party must send written notice of appeal to the designated official. The written notice must include the basis(es) for seeking the appeal and include information to support such basis(es) (see below).

b. Timing:
The notice of appeal must be filed no later than ten calendar days after the date the written decision sent. If an appeal is submitted by a party, all parties will be notified and given the opportunity to submit a written statement, and the underlying decision and any corresponding sanction will be held in abeyance until final notice of the appeal outcome. During this time, supportive measures in place will remain in effect (e.g., no contact order). If no written request for an appeal is received by the university within the time specified, the decision of the hearing panel and any sanction(s) imposed will be final and in effect.

c. Basis(es) for Appeal:
The designated Student Affairs official will have the sole discretion in determining whether the basis for appeal has been met and whether the appeal can move forward. An appeal must be based on one or more of the following criteria:

1. Procedural irregularity that affected the outcome;
2. New evidence that was not reasonably available at time determination or dismissal made, that reasonably could have affected the outcome;
3. The Title IX Coordinator(s), Investigator(s), or hearing panelists had a conflict of interest or bias for or against the party(ies) that affected the outcome; and/or
4. The sanction imposed is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

d. Determination and Sanction

1. If the basis for appeal has been met, the designated Student Affairs official will review the written appeal and the pertinent part of the sexual misconduct hearing panel record only. The designated Student Affairs official will not consider new evidence or information that is not a part of that record, unless the appeal is submitted on the basis of newly available information. The designated Student Affairs official must render a determination within 15 calendar days of receipt of the appeal and may take any of the following actions:
   a. Affirm the original decision regarding responsibility.
   b. Affirm the original decision concerning the disciplinary sanction(s) to be imposed.
   c. Set aside the original decision regarding responsibility and impose a new decision.
d. Set aside the original decision regarding responsibility and order that a new sexual misconduct hearing be held before a new hearing panel.

e. Set aside the original decision concerning the disciplinary sanction(s) to be imposed and impose a different sanction or set of sanctions.

2. The designated Student Affairs official will notify the Respondent and the Complainant, in writing, of the determination and will initiate the necessary procedures to effectuate the determination.

3. The determination of the designated Student Affairs official is final and there will be no further appeals.

9. Notice
The Complainant and the Respondent will be provided written notice of the outcome of the sexual misconduct hearing, the appeals process, and the appeal determination, if applicable. Written notice will be provided electronically through Indiana University email accounts.

10. Requests for Accommodations and Special Circumstances
a. Just as students with disabilities may be eligible for accommodations in their classes, accommodations may be available for these procedures as well. Students with disabilities requesting accommodations and services under these procedures will need to present a current accommodation verification letter from the campus disability services office before accommodations can be considered and provided.

b. In appropriate circumstances, the university may utilize language translation services to assist in the investigation and/or hearing proceedings.

11. Expectations for a Respectful Process
Every individual involved in a proceeding under this policy is entitled to be treated with respect. All parties and their advisors are required to follow the rules and procedures put in place to ensure a fair and respectful process. No one may intentionally harass or intimidate any party or witness, and university officials are authorized to halt such behavior.

VII. ACADEMIC APPOINTEE AND STAFF SEXUAL MISCONDUCT – TITLE IX COMPLAINT RESOLUTION PROCEDURES

1. Covered Behaviors
The following behaviors, as defined below, are covered under these procedures:

a. Sexual Harassment
b. Sexual Assault
c. Dating Violence
d. Domestic Violence
e. Stalking

2. Officials
For the purpose of these procedures, relevant officials with key responsibilities are:

a. Investigator – The Deputy Coordinator(s) for the respective campus, or an appropriate designee, will conduct fact-finding as the Investigator and may coordinate with other offices such as human resources, academic affairs, and student affairs.

b. Hearing Official - A hearing official will be responsible for assisting the DO during the hearing process including reviewing the Investigation File, assisting with determinations of relevancy during questioning, and coordinating a fair and respectful hearing.

c. Decisional Official (DO) – The DO will be present at the sexual misconduct hearing and, following the hearing, will issue the decision determining responsibility and assign appropriate sanctions, if applicable. The DO will be as follows, or an appropriate designee:

   1. For complaints against staff employees, including temporary (hourly), the DO will be the university employee relations director.
2. For complaints against academic appointees, the DO will be the campus Vice Provost/Vice Chancellor for Academic Affairs.

3. For complaints against a Dean, a Vice Provost, or a Vice Chancellor, the DO will be the campus Provost/Chancellor.

4. For complaints against a University Vice President, a Provost, a Chancellor, or equivalent, the DO will be the President.

5. For complaints against the President, the DO will be the Board of Trustees.

d. **Appellate Official (AO)** – The AO may review the decision of the DO, following appeal by either party, and make a subsequent determination. The AO will be as follows, or an appropriate designee:
   1. For an appeal in a complaint against staff employees, including temporary (hourly), the Vice President of Human Resources.
   2. For an appeal in a complaint against academic appointees, the campus Provost/Chancellor.
   3. For an appeal in a complaint against a Dean, a Vice Provost, or a Vice Chancellor, the President.
   4. For an appeal in a complaint against a Vice President, a Provost, a Chancellor, or equivalent, the Board of Trustees.

e. **Faculty Board of Review (FBR)** – In faculty cases, following the determination of the AO, the faculty member may request a review by the campus FBR, which may review and issue a recommendation to the AO.

3. **Interim Action**

   If, upon the receipt of a complaint, the Coordinator or Deputy Coordinator determines a need for immediate interim action, e.g., removal, reassignment, administrative leave, or suspension, they shall consult with DO and any other appropriate university officials. The DO may administer such interim action at any point in this process pending final outcome.

4. **Informal & Alternative Resolutions**

   a. **Informal Action:**

   In appropriate cases, the university may pursue informal actions in connection with reported sexual misconduct, including when the individual who may have experienced the conduct does not wish to pursue a formal complaint, and/or when there is not enough information to proceed with a formal complaint resolution process against a known Respondent. Informal actions will not result in findings related to responsibility or in sanctions, nor will an informal action preclude further steps, including formal resolution, if a complaint is later made or additional information is received by the university. Informal actions can include, but are not limited to, educational meetings, additional training, and/or continued monitoring.

   b. **Alternative Resolution Options:**

   In appropriate cases, the university may pursue alternative resolution with the consent of all parties at any point in the complaint resolution process. These resolution options may include, but are not limited to facilitated mediation, development of an action plan, and other voluntary steps to resolve the matter. Under alternative resolution, the Complainant will not be required to resolve the problem directly with the Respondent, unless desired by the Complainant. All parties must be notified of the right to end the alternative resolution process at any time and to begin the formal process. Face-to-face mediation may not be required in cases involving any physical or sexual violence or where the complaint is made against an employee with a position of authority over the Complainant. The Investigator shall document the outcome of any alternative resolution and share with the Coordinator and the DO.

   c. **Acceptance of Responsibility:**

   In cases where the Respondent expresses a willingness to accept responsibility for any or all allegations in a case, the Respondent may be offered the opportunity to bypass the remainder of the investigatory stage of the complaint resolution process and agree to receive a sanction from the DO. In such situations, the parties will each be provided the opportunity to submit a written statement to the DO for consideration in determining appropriate sanctions. In determining sanctions in such cases, the DO shall consider only the allegations and parties’ written statements, the relevant facts gathered from the investigation, and past
conduct history of the Respondent (if applicable). The right to appeal will be limited to an appeal on the
grounds that the sanction is disproportionate to the violation(s) committed, in light of all relevant aggravating
and mitigating factors, and in consideration of applicable university guidelines.

5. Investigation
   a. Upon receipt of a signed formal complaint of sexual misconduct that falls within the scope of this policy, the
      university will take immediate and appropriate steps to investigate the allegations.
   b. The Investigator(s) will notify the Complainant and the Respondent.
   c. The Respondent shall be informed of the allegations made against them and shall be provided the
      opportunity to respond. The Respondent will be provided a date by which an appointment must be made
to discuss the matter.
   d. The Investigator will conduct fact-finding as to the allegations made against the Respondent and will
      preserve all evidence collected.
   e. The investigation may include, but is not limited to, interviews with the Complainant, the Respondent, and
      other witnesses identified as having information relevant to the allegations made, as well as the examination
      of written statements by the parties, relevant documents, and other relevant information. Information for
      the investigation may be provided by Complainant, Respondent, witnesses identified by any party, or the
      university. The Investigator shall ensure that the Respondent has been informed of all allegations raised
      and the name of the Complainant(s), and is provided the opportunity to respond.
   f. Prior or subsequent conduct of the Respondent may be included in the investigation and considered in
determining pattern, knowledge, intent, or motive. The determination of the relevance of pattern evidence
will be based on an assessment of whether the previous or subsequent conduct was substantially similar
to the conduct under investigation or indicates a pattern of similar prohibited conduct.
   g. All members of the university are expected to cooperate fully with the investigative process. Interference with
      the investigation may result in disciplinary measures pursuant to applicable university policy and procedure.
      Any individual believed to have information relevant to an investigation may be contacted and requested
      to make an appointment to discuss the matter.

6. Report of Investigation
   a. Following the investigation, the Investigator will provide a Preliminary Investigation Report to the parties.
      At that time, the parties will be provided access to the Investigation File. The parties will be provided 10
      calendar days to review the Preliminary Investigation Report and provide any additional and/or clarifying
      information to the Investigator. This period of 10 days will be the final opportunity for parties to submit any
      additional information to the Investigator.
   b. The Preliminary Investigation Report will include:
      1. the specific allegation(s);
      2. the Respondent’s response to the allegation(s);
      3. a summary of the relevant information gathered from the parties, witnesses and other sources; as
         well as explanation for any additional and/or clarifying information submitted or received that was
         determined not relevant for inclusion;
      4. an analysis of the information.
   c. At the conclusion of the 10-day period, the Investigator will review any additional information submitted that
      is directly related and make it available to both parties. The Investigator may incorporate such information
      into a Final Investigation Report.
   d. The Final Investigation Report will be submitted to the DO, and the parties will be provided the Final
      Investigation Report and notified of next steps in regard to the hearing.
   e. The investigation will be conducted in a reasonable timeframe given the circumstances of the specific case.

7. Selection of Advisors
   At any point in the investigation, but prior to the hearing, the Complainant and Respondent may select an advisor
of their choice, and at their expense, to advise them throughout the sexual misconduct process. If a party does
not have an advisor for the hearing, the university will provide one for them. The university-provided Hearing Advisor is selected by the university and will not necessarily be an attorney, even if the other party is represented by an attorney. The Hearing Advisor will have the opportunity to review all evidence collected in the investigation.

8. Hearing
   a. The complaint resolution process will include a live hearing. The hearing will be closed except for the parties, their advisors, the DO and Hearing Official, and other university officials necessary to facilitate the proceedings. Witnesses will be expected to be available in-person or via video and audio for the portion of the hearing relevant to their statement. The hearing will be recorded. Deliberations following the hearing are not recorded.
   b. At the request of either party, the hearing may occur with the parties located in separate locations using technology for those involved to see and hear each other.
   c. Complainants and Respondents are not permitted to personally conduct questioning. Each party’s Hearing Advisor may ask the other party and any witnesses all relevant questions, including those challenging credibility. Questions must be verbal, direct, and in real time. The Hearing Official and the DO will make determinations as to the relevance of questions and may exclude a question as not relevant.
   d. If a party or witness does not submit to cross-examination at the live hearing, the DO must not rely on any statement of that party or witness in making a determination of responsibility and may not draw any inference based solely on the non-participation of any party or witness.

9. Finding and Decision
   a. At the conclusion of a hearing, the DO, in consultation with the Hearing Official, shall deliberate without the parties present to determine responsibility for the specific allegations based on the evidence.
   b. If, after deliberations, the DO determines that the information contained in the Final Investigative Report and gathered during the hearing, does not support by a preponderance of the evidence (more likely than not) that the Respondent is responsible for a violation of university policies, the DO will notify both the Respondent and the Complainant by means of a written notice. The Complainant and/or Respondent may request an appeal (see below).
   c. If, after deliberations, the DO determines that the information contained in the Final Investigative Report and gathered during the hearing, does support by a preponderance of the evidence (more likely than not) that the Respondent is responsible for a violation of university policies, the DO will make the final determination regarding appropriate sanctions. The DO will then notify the parties of the determination and sanctions by means of a written notice. The Respondent and/or the Complainant may request an appeal (see below).
   d. The DO will issue one of the following findings, using a preponderance of the evidence standard:
     1. Finding of “No Violation” of the university’s policies:
        If there is a determination that the behavior alleged and investigated did not violate the university’s policies, the DO shall provide the parties written notice of the finding. Documentation regarding a finding of “No Violation” shall be maintained with the Deputy Title IX Coordinator’s office, and not in the employee’s personnel file.
     2. Finding of a “Violation” of the university’s policies:
        If there is a determination that the behavior alleged and investigated was in violation of the university’s policies, the DO shall issue the finding and sanction(s) based on the level of sanctions set forth below.
   e. The DO shall provide the parties written notice of the finding and any sanctions, if applicable.

10. Sanctions
   a. Sanctions for violations of this policy include the following:
     1. Level One Sanctions include sanctions that do not directly modify job duties or actual salary, such as informal discussions, additional training, periodic review, letter to personnel file (other than to promotion and tenure dossier which is included in Level Two Sanctions below). Level One Sanctions shall not be appropriate in the event the Respondent was found responsible for sexual assault or other sexual violence.
2. Level Two Sanctions include sanctions that directly modify job duties, salary or job status, including affecting compensation, consideration in tenure or promotion decisions, suspension, and termination.

b. When determining the appropriate sanctions, consideration shall be given to the nature and severity of the behavior and the existence of any prior incidents or violations.

11. Appeals

a. Following the decision, either party may request an appeal to the Appellate Officer (AO) on the basis of:
   1. Procedural irregularity that affected the outcome;
   2. New evidence that was not reasonably available at the time the determination was made and that reasonably could have affected the outcome;
   3. The Title IX Coordinator(s), Investigator(s), DO or hearing official had a conflict of interest or bias for or against the party(ies) that affected the outcome; and/or
   4. The sanction imposed is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

b. A request for appeal must be submitted in writing to the AO within 10 calendar days of receiving the DO's decision. The request must set forth the basis(es) for seeking an appeal and must include information to support such basis(es). If an appeal is requested, all parties will be notified and provided an opportunity to submit a written statement.

c. The AO shall first determine whether the basis of appeal has been met, and if so, shall review the findings and any applicable sanctions, in making a decision.

d. The AO shall make a final determination within 15 calendar days of the receipt of any appeal, indicating one of the following:
   1. Affirming the DO’s original finding(s).
   2. Setting aside the DO’s original finding(s) and imposing a new finding and/or sanctions.
   3. Setting aside the DO’s original finding(s) and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).

e. To the extent possible, the parties will be notified simultaneously in writing of the final decision following an appeal.

12. Request for Faculty Board of Review following the AO’s Determination

a. In cases involving a faculty member as a party, a faculty member sanctioned under this policy may submit a request for review by the Faculty Board of Review (FBR) following the determination of the AO. The request for review should be made according to the specific campus FBR policy, and campus FBR procedures will apply except as modified by the provisions below.

b. The basis(es) for appeal are the same as those for appeal to the AO. The request for a FBR must set forth the basis(es) for seeking review and be submitted in writing within 15 calendar days of receiving the AO’s determination. For good cause shown, and bearing in mind the need for timely resolution, the timeframes set forth within these procedures may be extended. If a request for a FBR is submitted, the FBR shall notify the other party(ies), as well as the DO and the AO.

c. The FBR will only receive the Final Investigation Report; the Investigation File; the written findings of the DO, along with comments submitted to the DO by any party named in the report; the written findings of the AO; and any sanctions. The FBR may not conduct new fact-finding. The FBR may seek training and additional information from the University Coordinator.

d. Throughout the FBR process, hearing members and participants shall ensure that the privacy of the matter and the parties is upheld. If a hearing is held, it shall be closed to the public to protect the privacy of all parties. In addition to faculty members serving on the FBR hearing panel, others present during a hearing may include the party requesting review and that individual’s advisor, the other party(ies) named in the report and their advisor(s), the DO, the University Coordinator, Deputy Coordinator, and other university officials necessary to the proceedings. No witnesses will be allowed in the FBR. The grievant, the Complainant,
and one designated university official have the right to present a statement to the FBR in writing or orally, either personally or through an advisor. If any participant elects to make a statement, the FBR may pose questions related to their statement, but the other participants may not.

e. The FBR must be concluded promptly, and generally within 60 days of the request, absent special circumstances. After review, the FBR may recommend one of the following to the AO:

1. Affirm the AO’s determination.
2. Recommend an alternative finding and/or sanction.
3. Recommend that the determination be set aside and a new investigation be conducted. (This option will generally be reserved for cases where significant procedural error has been identified and determined to have affected the outcome).

f. To the extent possible, the parties will be notified simultaneously in writing of the FBR’s recommendation to the AO.

g. Upon receipt of the FBR’s recommendation, along with any materials considered by the FBR, the AO will make a final determination within 10 calendar days, indicating one of the following:

1. Affirming the prior determination on appeal.
2. Setting aside the prior determination on appeal and imposing a new finding and/or sanctions.
3. Setting aside the prior determination on appeal and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).

h. If the FBR recommends that the AO’s prior determination be modified, but the AO affirms the prior determination, the final determination shall be made by the President. To the extent possible, the parties will be notified simultaneously in writing of the President’s final determination. This concludes the appeal process.

13. **Expectations for a Respectful Process**

   Every individual involved in a proceeding under this policy is entitled to be treated with respect. All parties and their advisors are required to follow the rules and procedures put in place to ensure a fair and respectful process. No one may intentionally harass or intimidate any party or witness, and university officials are authorized to halt such behavior.

**VIII. STUDENT SEXUAL MISCONDUCT – UNIVERSITY COMPLAINT RESOLUTION PROCEDURES**

1. **Covered Behaviors**

   The following behaviors, as defined below, are covered under these procedures:

   a. [Sexual Harassment](#)
   b. [Sexual Assault](#)
   c. [Sexual Exploitation](#)
   d. [Dating Violence](#)
   e. [Domestic Violence](#)
   f. [Stalking](#)

2. **Officials**

   For the purpose of these procedures, relevant officials with key responsibilities are:

   a. **Investigator** – An Investigator for the campus student affairs office, or an appropriate designee, will conduct fact-finding as the Investigator and will issue the Preliminary and Final Investigation Report.

   b. **Hearing Panel** – The hearing panel will review the case at the hearing and make a decision regarding whether or not the Respondent is found responsible and propose sanctions, if applicable. The Hearing Panel Chair will coordinate the process and make any determinations of relevance regarding questions posed.
c. **Sanctioning Official** – Upon a finding of responsibility by the Hearing Panel, the Sanctioning Official will review the proposed sanctions and make the final determination of the sanctions to be applied to the Respondent.

d. **Student Affairs Official** – The Student Affairs Official, which may be the campus dean of students, or an appropriate designee, may review the decision and sanction following an appeal by either party, and make a subsequent determination.

3. **Investigation**

a. If sexual misconduct proceedings are initiated, the Investigator(s) will notify the Complainant and the Respondent. The Respondent will be provided a date by which an appointment must be made to discuss the matter. The Respondent shall be informed of the allegations made against them and shall be provided the opportunity to respond. The Respondent is expected to participate in the investigation and all related procedures, including the sexual misconduct hearing.

b. The investigation may include, but is not limited to interviews with the Complainant, the Respondent, and other witnesses identified as having information relevant to the allegations made, as well as the examination of written statements by the parties, relevant documents, and other relevant information. Information for the investigation may be provided by Complainants, Respondents, witnesses identified by any party, or the university. Any individual believed to have information relevant to an investigation may be contacted and requested to make an appointment to discuss the matter. The university shall determine what information and evidence will be included in the Investigation File.

c. Prior or subsequent conduct of the Respondent may be included in the investigation and considered in determining pattern, knowledge, intent, or motive. The determination of the relevance of pattern evidence will be based on an assessment of whether the previous or subsequent conduct was substantially similar to the conduct under investigation or indicates a pattern of similar prohibited conduct.

d. All members of the university community, including the parties and witnesses, are expected to cooperate with the investigative and hearing process. Failure to comply with a request to make and/or keep an appointment may result in a disciplinary hold being placed on the student’s account and/or the initiation of student conduct charges for failure to comply.

e. Following the investigation, the Investigator will provide a Preliminary Investigation Report and Investigation File to each party and their advisor. The parties will be provided 10 calendar days to review the Preliminary Investigation Report and the Investigation File and provide any additional and/or clarifying information to the Investigator. This period of 10 days will be the final opportunity for parties to submit additional information to the Investigator. At the conclusion of the 10-day period, the Investigator will review the information submitted by either party and determine whether and to what extent to incorporate such information into a Final Investigation Report.

f. When preparing the Final Investigation Report, the Investigator will determine the appropriate charge(s), if any, under this policy, to be placed on Respondent, and include the charge(s) in the Final Investigation Report. If the Investigator places a charge(s), the Final Investigation Report will be submitted to a hearing panel for the determination of responsibility, and the parties will be provided the Final Investigation Report and notified of next steps. If the Investigator determines that there is insufficient evidence to support placing a charge, the parties will be provided the Final Investigation Report and notified that no charges will be placed. If there are remaining charges under the Student Code, those may proceed according to the applicable procedures.

g. The investigation and determination of responsibility will be conducted in a reasonable timeframe given the circumstances of the specific case.

4. **Selection of Advisors**

The Complainant and Respondent may have an advisor throughout the complaint resolution process that may accompany them during proceedings. Advisors are not permitted to speak on behalf of the parties or conduct any questioning at the hearing.

5. **Alternative Resolution Options**
a. In appropriate cases, including cases where the Respondent expresses a willingness to accept responsibility for any or all charges, the university may pursue alternative resolution with the consent of all parties at any point in the complaint resolution process. Alternative resolution options may include, but are not limited to, acceptance of responsibility (see below), mediation, development of action plans, voluntary resolutions, appropriate sanctions, and/or appropriate remedies.

b. Under any alternative resolution, the Complainant will not be required to resolve the problem directly with the Respondent, unless desired by the Complainant. All parties must be notified of the right to end the alternative resolution process at any time and to begin or resume the complaint resolution process. Face-to-face mediation may not be used in cases involving physical or sexual violence. The Investigator shall document the outcome of any alternative resolution and share with the parties.

c. In cases where the Respondent expresses a willingness to accept responsibility for any or all charges in a case, the Respondent will be offered the opportunity to waive the right to a formal hearing as to the specific charge(s) and all related procedural guarantees, and agree to receive a sanction from the designated student affairs conduct officer. In such situations, the parties will each be provided the opportunity to submit a written statement to the conduct officer for consideration in determining appropriate sanctions. The conduct officer shall consider only the parties’ written statements regarding sanctions, the relevant facts from the investigation, and past conduct history of the Respondent, if applicable. In such cases, the right to appeal will be limited to an appeal on the grounds that the sanction is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

6. Sexual Misconduct Hearing

a. A three-person hearing panel will be assembled for a sexual misconduct hearing to make a determination of Respondent’s responsibility as to the specific charge(s) set forth in the Final Investigation Report.

b. Hearing panel members will be drawn from the pool of faculty, staff and graduate students who have completed the university’s required annual training on issues related to sexual misconduct and university policies and procedures. At a minimum, at least one panel member shall be a student affairs administrator.

c. Upon review of the Final Investigation Report, the hearing panel will determine witnesses who may be called, if any, to participate in the hearing.

d. The sexual misconduct hearing is closed, except for the parties, their advisor, the hearing panelists and other university officials necessary to facilitate the proceedings.

e. The hearing will take place in-person or will be conducted remotely via secure university software. Complainant and Respondent are expected to be available in-person or via video and audio for the duration of the hearing. Witnesses are expected be available in-person or via video and audio for the portion of the hearing relevant to their statement.

f. The Chair of the hearing panel shall review the charge(s) placed against the Respondent and the specific facts alleged.

g. Both the Complainant and the Respondent will have equal opportunity to provide a statement to the hearing panel.

h. No one other than the hearing panel members, the Complainant, and the Respondent may pose questions during the hearing. The Complainant and Respondent may not directly question each other, but may submit questions to the Chair to be asked of the other party. The Chair or other panel members will review questions prior to posing to the other party to prevent questioning that is not permitted under these proceedings.

i. The sexual misconduct hearing is recorded. Deliberations by the panel, following the hearing, are not recorded.

7. Decision & Sanctions

a. At the conclusion of a hearing, the panel shall deliberate without the parties present to determine responsibility for the specific charge(s) based on the evidence.

b. If, after deliberations, the hearing panel determines that the information contained in the Final Investigative Report and gathered during the hearing, does not support by a preponderance of the evidence (more likely
than not) that the Respondent is responsible for a violation of this policy and the Student Code, the hearing panel will notify both the Respondent and the Complainant by means of a written notice. The Complainant
and/or Respondent may request an appeal (see below).

c. If after deliberations, the hearing panel determines that the information contained in the Final Investigative Report and gathered during the hearing, does support by a preponderance of the evidence (more likely than not) that the Respondent is responsible for a violation of this policy and the Student Code, the hearing panel will propose sanctions. The proposed sanctions will be reviewed by the Sanctioning Official (or designee) to ensure that the sanctions are proportional to the severity of the violation and consistent with university standards. In the event of a conflict between the hearing panel and the Sanctioning Official, the Sanctioning Official will make the final determination regarding appropriate sanctions. The hearing panel will then notify the parties of the determination and sanctions by means of a written notice. The Respondent and/or the Complainant may request an appeal (see below).

d. Possible sanctions for cases in which a student is found in violation of this policy and the Student Code for acts of sexual misconduct include, but are not limited to formal warnings, behavioral assessment and/or counseling, required educational training, disciplinary probation, suspension, and/or permanent expulsion.

8. Appeal

a. The Respondent or the Complainant may appeal the decision of the sexual misconduct hearing panel to the designated Student Affairs official (or designee). To initiate an appeal, a party must send written notice of appeal to the designated Student Affairs official. The written notice must include the basis(es) for seeking the appeal and include information to support such basis(es) (see below).

b. Timing:
The notice of appeal must be filed no later than ten calendar days after the date the written decision of the sexual misconduct hearing panel is sent. If an appeal is submitted by either party, all parties will be notified and the underlying decision and any corresponding sanction will be held in abeyance until final notice of the appeal outcome. During this time, any interim measures in place will remain in effect (e.g., no contact order, no trespass). If no written request for an appeal is received by the university within the time specified, the decision of the hearing panel and any sanction(s) imposed will be final and in effect.

c. Basis(es) for Appeal:
The designated Student Affairs official will have the sole discretion in determining whether the basis for appeal has been met and whether the appeal can move forward. An appeal must be based on one or more of the following criteria:

1. Procedural irregularity that affected the outcome;
2. New evidence that was not reasonably available at time determination or dismissal made, and that reasonably could have affected the outcome;
3. The Coordinator(s), investigator(s), or hearing panelists had a conflict of interest or bias for or against the party(ies) that affected the outcome; and/or
4. The sanction imposed is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

d. Determination and Sanction:
1. If the basis for appeal has been met, the designated Student Affairs official will review the written appeal and the pertinent part of the sexual misconduct hearing panel record only. The designated Student Affairs official will not consider new evidence or information that is not a part of that record. The designated Student Affairs official must render a determination within 15 calendar days of receipt of the appeal and may take any of the following actions:
   a. Affirm the original decision regarding responsibility.
   b. Affirm the original decision concerning the disciplinary sanction(s) to be imposed.
   c. Set aside the original decision regarding responsibility and impose a new decision.
   d. Set aside the original decision regarding responsibility and order that a new sexual misconduct hearing be held before a new hearing panel.
e. Set aside the original decision concerning the disciplinary sanction(s) to be imposed and impose a different sanction or set of sanctions.

2. The designated Student Affairs official will notify the Respondent and the Complainant, in writing, of the determination and will initiate the necessary procedures to effectuate the determination.

3. The determination of the designated Student Affairs official is final and there will be no further appeals.

9. Notice
The Complainant and the Respondent will be provided written notice of the outcome of the sexual misconduct hearing, the appeals process, and the appeal determination, if applicable. Written notice will be provided electronically through Indiana University email accounts.

10. Requests for Accommodations and Special Circumstances
a. Just as students with disabilities may be eligible for accommodations in their classes, accommodations may be available for these procedures as well. Students with disabilities requesting accommodations and services under these procedures will need to present a current accommodation verification letter from the campus disability services office before accommodations can be considered and provided.
b. In appropriate circumstances, the university may utilize language translation services to assist in the investigation and/or hearing proceedings.

11. Expectations for Respectful Process
Every individual involved in a proceeding under this policy is entitled to be treated with respect. All parties and their advisors are required to follow the rules and procedures put in place to ensure a fair and respectful process. No one may intentionally harass or intimidate any party or witness, and university officials are authorized to halt such behavior.

IX. ACADEMIC APPOINTEE AND STAFF SEXUAL MISCONDUCT – UNIVERSITY COMPLAINT RESOLUTION PROCEDURES

1. Covered Behaviors
The following behaviors, as defined below, are covered under these procedures:
   a. Sexual Harassment
   b. Sexual Assault
   c. Sexual Exploitation
   d. Dating Violence
   e. Domestic Violence
   f. Stalking

2. Officials
For the purpose of these procedures, relevant officials with key responsibilities are:

   a. Investigator – The Deputy Coordinator for the respective campus, or an appropriate designee, will conduct fact-finding as the Investigator and may coordinate with other offices such as human resources, academic affairs, and student affairs.

   b. Decisional Official (DO) – The DO will issue the decision determining responsibility and assigning appropriate sanctions, if applicable. The DO will be as follows, or an appropriate designee:
      1. For complaints against staff employees, including temporary (hourly), the DO will be the university employee relations director.
      2. For complaints against academic appointees, the DO will be the campus Vice Provost/Vice Chancellor for Academic Affairs.
      3. For complaints against a Dean, a Vice Provost, or a Vice Chancellor, the DO will be the campus Provost/Chancellor.
4. For complaints against a University Vice President, a Provost, a Chancellor, or equivalent, the DO will be the President.

5. For complaints against the President, the DO will be the Board of Trustees.

c. **Appellate Official (AO)** – The AO may review the decision of the campus DO, following appeal by either party, and make a subsequent determination. The AO will be as follows, or an appropriate designee:

1. For an appeal in a complaint against staff employees, including temporary (hourly), the Vice President of Human Resources.
2. For an appeal in a complaint against academic appointees, the campus Provost/Chancellor.
3. For an appeal in a complaint against a Dean, a Vice Provost, or a Vice Chancellor, the President.
4. For an appeal in a complaint against a Vice President, a Provost, a Chancellor, or equivalent, the Board of Trustees.

d. **Faculty Board of Review (FBR)** – In faculty cases, following the decision of the AO, the faculty member may request a review by the campus FBR, which may review and issue a recommendation to the AO.

3. **Initial Assessment**

a. Upon receipt of a report alleging that an employee has engaged in sexual misconduct, an Investigator will conduct an initial assessment to determine whether it falls within the scope of this policy, and whether the conduct alleged rises to the level of an allegation of sexual misconduct. If a complaint raises allegations that are outside the scope of this policy, but may violate other university policy(ies), the Investigator will refer the complaint to the appropriate university office.

b. In the event the Investigator determines not to pursue an investigation under this policy, that decision may be appealed by either party to the DO, requesting a review of the decision not to proceed with an investigation. Upon review, the DO may uphold that decision or order an investigation to proceed.

c. In the event the Investigator determines that the allegations fall within the scope of this policy, the process that follows shall apply.

4. **Informal & Alternative Resolutions**

a. **Informal Action:**

In appropriate cases, the university may pursue informal actions in connection with reported sexual misconduct, including when the individual who may have experienced the conduct does not wish to pursue a formal complaint, and/or when there is not enough information to proceed with a formal resolution process against a known Respondent. Informal actions will not result in findings related to responsibility or in sanctions, nor will an informal action preclude further steps, including formal resolution, if a complaint is later made or additional information is received by the university. Informal actions can include, but are not limited to, educational meetings, additional training, and/or continued monitoring.

b. **Alternative Resolution Options:**

In appropriate cases, the university may pursue alternative resolution with the consent of all parties at any point in the investigation process. These resolution options may include, but are not limited to mediation, development of an action plan, and voluntary resolution of the matter. Under alternative resolution, the Complainant will not be required to resolve the problem directly with the Respondent, unless desired by the Complainant. All parties must be notified of the right to end the alternative resolution process at any time and to begin the formal process. Face-to-face mediation may not be used in cases involving any physical or sexual violence or where the complaint is made against an employee with a position of authority over the Complainant. The Investigator shall document the outcome of any alternative resolution and share with the University Coordinator and the DO.

c. **Acceptance of Responsibility:**

1. In cases where the Respondent expresses a willingness to accept responsibility for any or all allegations in a case, the Respondent will be offered the opportunity to bypass the remainder of the investigatory stage of the grievance process and agree to receive a sanction from the DO. In such situations, the
parties will each be provided the opportunity to submit a written statement to the DO for consideration in determining appropriate sanctions.

2. In determining sanctions in such cases, the DO shall consider only the allegations and parties’ written statements, the relevant facts gathered from the investigation, and past conduct history of the Respondent, if applicable. The right to appeal will be limited to an appeal on the grounds that the sanction is disproportionate to the violation(s) committed, in light of all relevant aggravating and mitigating factors, and in consideration of applicable university guidelines.

5. **Interim Action**
   If, upon the receipt of a complaint, the Coordinator, or their designee, determines a need for immediate interim action, e.g. removal, reassignment, administrative leave, or suspension, they shall consult with the DO and any other appropriate university officials. The DO may administer such interim action at any point in this process pending final outcome.

6. **Investigation**
   
a. Following the initial assessment, if a formal investigation is initiated, the Investigator(s) will notify the Complainant and the Respondent. The Respondent shall be informed of the allegations made against them and shall be provided the opportunity to respond. The Respondent will be provided a date by which an appointment must be made to discuss the matter.

b. The Investigator will conduct fact-finding as to the allegations made against the Respondent and will preserve all evidence collected.

c. The investigation may include, but is not limited to, interviews with the Complainant, the Respondent, and other witnesses identified as having information relevant to the allegations made, as well as the examination of written statements by the parties, relevant documents, and other relevant information. Information for the investigation may be provided by Complainant, Respondent, witnesses identified by any party, or the university. The Investigator shall ensure that the Respondent has been informed of all allegations raised and the name of the Complainant(s), and is provided the opportunity to respond.

d. Prior or subsequent conduct of the Respondent may be included in the investigation and considered in determining pattern, knowledge, intent, or motive. The determination of the relevance of pattern evidence will be based on an assessment of whether the previous or subsequent conduct was substantially similar to the conduct under investigation or indicates a pattern of similar prohibited conduct.

e. All members of the university are expected to cooperate fully with the investigative process. Interference with the investigation may result in disciplinary measures pursuant to applicable university policy and procedure. Any individual believed to have information relevant to an investigation may be contacted and requested to make an appointment to discuss the matter.

7. **Report of Investigation:**
   
a. Following the investigation, the Investigator will provide a Preliminary Investigation Report to the parties. At that time, the parties will be provided access to the Investigation File. The parties will be provided 10 calendar days to review the Preliminary Investigation Report and provide additional and/or clarifying to the Investigator. This period of 10 days will be the final opportunity for parties to submit any additional information to the Investigator.

b. The Preliminary Investigation Report will include:
   
   1. The specific allegation(s);
   2. The Respondent’s response to the allegation(s);
   3. A summary of the relevant information gathered from the parties, witnesses and other sources; as well as explanation for any information submitted or received that was determined not relevant for inclusion; and

c. At the conclusion of the 10-day period, the Investigator will review the information submitted by either party and determine whether and to what extent to incorporate such information into a Final Investigation Report.
Report. The Investigator will then finalize the Final Investigation Report and include a recommendation as to whether the Respondent is responsible or not responsible for the alleged violation(s) of this policy, using a preponderance of the evidence standard (more likely than not); and a recommendation as to appropriate sanctions, if any, as set forth below.

d. The Investigator will provide the Final Investigation Report to the DO, as well as to each party.

8. Finding and Decision

a. Upon receiving the Final Investigation Report, the DO shall issue a finding. The DO may consult with the Investigator concerning the investigation and recommendations. The DO will provide each party the opportunity to meet and provide comment and make a statement. If the DO wishes further consultation with the parties, the Investigator will facilitate consultations to ensure equal opportunities is provided for the parties.

b. The DO will issue one of the following findings, using a preponderance of the evidence standard:

1. Finding of “No Violation”:
   If there is a determination that the behavior alleged and investigated did not violate this policy, the DO shall provide the parties written notice of the finding. In the event the investigation reveals that the employee may have violated a different university policy, the DO may address any such potential violation through other applicable university policies. Documentation regarding a finding of “No Violation” shall be maintained with the campus Deputy Title IX Coordinator’s office, and not in the employee’s personnel file.

2. Finding of a “Violation”:
   If there is a determination that the behavior alleged and investigated was in violation of this policy, the DO shall issue the finding and sanction(s) based on the level of sanctions set forth below.

c. The DO shall provide the parties written notice of the finding and any sanctions, if applicable.

9. Sanctions

a. Sanctions for a violation of this policy include the following:

1. Level One Sanctions include sanctions that do not directly modify job duties or actual salary, such as informal discussions, additional training, periodic review, letter to personnel file (other than to promotion and tenure dossier which is included in Level Two Sanctions below). Level One Sanctions shall not be appropriate in the event the Respondent was found responsible for sexual assault or other sexual violence.

2. Level Two Sanctions include sanctions that directly modify job duties, salary or job status, including affecting compensation, consideration in tenure or promotion decisions, suspension, and termination.

b. When determining the appropriate sanctions, consideration shall be given to the nature and severity of the behavior and the existence of any prior incidents or violations.

10. Appeals

a. Following the decision, either party may appeal to the Appellate Officer (AO) on the basis of:

1. Significant procedural error that reasonably would have affected the outcome.

2. Newly discovered evidence that reasonably would have affected the outcome.

3. Significant bias in the process.

4. The finding of responsibility is not supported by the evidence in the Investigation Report.

5. The appropriateness of the sanctions.

b. A request for appeal must be submitted in writing to the AO within 10 calendar days of receiving the DO’s decision. The request must set forth the basis(es) for seeking an appeal and must include information to support such basis(es). If an appeal is requested, all parties will be notified.

c. The AO shall first determine whether the basis of appeal has been met, and if so, shall review the findings and any applicable sanctions, in making a determination.
d. The AO shall make a final determination within 15 calendar days of the receipt of any appeal, indicating one of the following:
   1. Affirming the DO’s original finding(s).
   2. Setting aside the DO’s original finding(s) and imposing a new finding and/or sanctions.
   3. Setting aside the DO’s original finding(s) and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).

e. To the extent possible, the parties will be notified simultaneously in writing of the final determination following an appeal.

11. Request for Faculty Board of Review
   a. In cases involving a faculty member as a party, a faculty member sanctioned under this policy may submit a request for review by the Faculty Board of Review (FBR) following the determination of the AO. The request for review should be made according to the specific campus FBR policy, and campus FBR procedures will apply except as modified by the provisions below.
   b. The bases for appeal are the same as those for appeal to the AO. The request for a FBR must set forth the basis(es) for seeking review and be submitted in writing within 15 calendar days of receiving the AO’s determination. For good cause shown, and bearing in mind the need for timely resolution, the timeframes set forth within these procedures may be extended. If a request for a FBR is submitted, the FBR shall notify the other party(ies), as well as the DO and the AO.
   c. The FBR will only receive the Final Investigation Report; the Investigation File; the written findings of the DO, along with comments submitted to the DO by any party named in the report; the written findings of the AO; and any sanctions. The FBR may not conduct new fact-finding. The FBR may seek training and additional information from the University Coordinator.
   d. Throughout the FBR process, hearing members and participants shall ensure that the privacy of the matter and the parties is upheld. If a hearing is held, it shall be closed to the public to protect the privacy of all parties. In addition to faculty members serving on the FBR hearing panel, others present during a hearing may include the party requesting review and that individual’s advisor, the other party(ies) named in the report and their advisor(s), the DO, the University Coordinator, Deputy Coordinator, and other university officials necessary to the proceedings. No witnesses will be allowed in the FBR. The grievant, the Complainant, and one designated university official have the right to present a statement to the FBR in writing or orally, either personally or through an advisor. If any participant elects to make a statement, the FBR may pose questions related to their statement, but the other participants may not.
   e. The FBR must be concluded promptly, and generally within 60 days of the request, absent special circumstances. After review, the FBR may recommend one of the following to the AO:
      1. Affirm the AO’s determination.
      2. Recommend an alternative finding and/or sanction.
      3. Recommend that the determination be set aside and a new investigation be conducted. (This option will generally be reserved for cases where significant procedural error has been identified and determined to have affected the outcome).
   f. To the extent possible, the parties will be notified simultaneously in writing of the FBR’s recommendation to the AO.
   g. Upon receipt of the FBR’s recommendation, along with any materials considered by the FBR, the AO will make a final determination within 10 calendar days, indicating one of the following:
      1. Affirming the prior determination on appeal.
      2. Setting aside the prior determination on appeal and imposing a new finding and/or sanctions.
      3. Setting aside the prior determination on appeal and ordering a new investigation (this option will generally be reserved for cases where significant procedural error has been identified to have affected the outcome).
h. If the FBR recommends that the AO's prior determination be modified, but the AO affirms the prior
determination, the final determination shall be made by the President. To the extent possible, the parties
will be notified simultaneously in writing of the President's final determination. This concludes the appeal
process.

12. **Expectations for a Respectful Process**

Every individual involved in a proceeding under this policy is entitled to be treated with respect. All parties and
their advisors are required to follow the rules and procedures put in place to ensure a fair and respectful process.
No one may intentionally harass or intimidate any party or witness, and university officials are authorized to
halt such behavior.

**Definitions**

**Advisor**: Any individual who may assist, support, guide, and advise the Complainant or Respondent during the
investigation, conduct proceedings, and/or related meetings. An Advisor serving is this role, who may otherwise
be a Responsible Employee, not need report sexual misconduct when they learn about prohibited conduct i) that
is directly related to the case in which they are serving as an advisor; ii) from the party who they are serving as an
advisor to; and iii) in the course of their advising.

**Campus Security Authority (CSA)**: A term used in the Clery Act to describe someone who has significant
responsibility for student and campus activities. The Clery Act (34 CFR 668.46) defines a CSA as:

1. A campus police department or a campus security department of an institution.
2. Any individual or individuals who have responsibility for campus security but who do not constitute a campus
   police department or a campus security department, such as an individual who is responsible for monitoring
   entrance into institutional property.
3. Any individual or organization specified in an institution's statement of campus security policy as an individual
   or organization to which students and employees should report criminal offenses.
4. An official of an institution who has significant responsibility for student and campus activities, including but not
   limited to student housing, student discipline, and campus judicial proceedings.

Pastoral and professional counselors are not considered a Campus Security Authority when acting in their roles as
a pastoral or professional counselor.

section 1092(f)), a federal law that requires institutions such as Indiana University to collect and publish statistics
for certain crimes reported to have occurred on the university’s “Clery Geography” (i.e., occurring on campus, on
public property within or immediately adjacent to campus, and on other non-campus university property), for the
purpose of informing current and prospective students, faculty or staff. Each Indiana University campus publishes
an Annual Security Report under the Clery Act, which contains these crime statistics, as well as campus-specific
information on resources, campus emergency responses, safety and security policies, and disciplinary procedures.
These crime statistics include, but are not limited to domestic violence, dating violence, sexual assault, and
stalking. Clery also requires “timely warnings” be issued to the campus community for crimes occurring on Clery
Geography that are considered a serious or continuing threat to students, faculty or staff. Under Clery, any good
faith report of a crime occurring on Clery Geography must be included in the statistical data.

**Complainant**: An individual who may have experienced discrimination, harassment and/or sexual misconduct.
A Complainant may choose whether or not to file a formal complaint. The university may serve as the Complainant
when an individual(s) who has experienced the alleged discrimination, harassment and/or sexual misconduct does
not wish to fully participate and the university has determined it is necessary to move forward under the applicable
procedures.

**Complaint (formal)**: A document submitted and signed by a Complainant or signed by the appropriate Title IX
Coordinator alleging conduct that may in violation of this policy against a Respondent and requesting that the
university investigate the allegation.

**Confidential Employees**: [see above]
Consent: An agreement expressed through affirmative, voluntary words or actions, and mutually understandable to all parties involved, to engage in a specific sexual act at a specific time

1. Consent can be withdrawn at any time, as long as it is clearly communicated.
2. Consent cannot be coerced or compelled by force, threat, deception or intimidation.
3. Consent cannot be given by someone who is incapacitated, as defined below.
4. Consent cannot be assumed based on silence, the absence of “no” or “stop,” the existence of a prior or current relationship, or prior sexual activity.

Incapacitation: An individual is incapable of consent if they are unable to understand the facts, nature, extent, or implications of the situation due to drugs, alcohol, a mental disability, being asleep or unconscious, or based on their age (pursuant to Indiana law). With respect to alcohol and drugs, intoxication and/or impairment is not presumptively equivalent to incapacitation. Consent does not exist when the individual initiating sexual activity knew or should have known of the other individual’s incapacitation.

Dating Violence:

FOR TITLE IX COMPLAINT RESOLUTION PROCEDURES:

Violence committed by an individual who is or has been in a social relationship of a romantic or intimate nature with the Complainant. The existence of such a relationship shall be determined based on the Complainant’s statement and with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the individuals involved in the relationship. For the purposes of this definition—

1. Dating violence includes, but is not limited to, sexual or physical abuse or the threat of such abuse.
2. Dating violence does not include acts covered under the definition of domestic violence.

FOR UNIVERSITY COMPLAINT RESOLUTION PROCEDURES:

Violence or the threat of violence committed by any individual who is or has been in a relationship of a romantic or intimate nature with the Complainant. The existence of such a relationship will be determined based on a consideration of the length of the relationship, the type of relationship, and the frequency of interactions between the individuals involved in the relationship.

Days: References to days shall mean calendar days unless business days is expressly specified.

Discrimination: [see above]

Domestic Violence:

FOR TITLE IX COMPLAINT RESOLUTION PROCEDURES:

Violence committed which would constitute felony or misdemeanor crime of violence under criminal law:

1. By a current or former spouse or intimate partner of the Complainant;
2. By a person with whom the Complainant shares a child in common;
3. By a person who is cohabitating with, or has cohabitated with, the Complainant as a spouse or intimate partner;
4. By a person similarly situated to a spouse of the Complainant under the domestic or family violence laws of Indiana;
5. By any other person against an adult or youth Complainant who is protected from that person’s acts under the domestic or family violence laws of Indiana.

FOR UNIVERSITY COMPLAINT RESOLUTION PROCEDURES:

Violence or the threat of violence by an individual against another individual who:

1. is or was a current or former spouse or intimate partner of the Complainant;
2. is or was living with Complainant as if their spouse or intimate partner;
3. has a child in common with;
4. is a minor subject to the control of; or
5. is an incapacitated individual under the guardianship or otherwise subject to the control of the other individual regardless of whether the act or threat has been reported to a law enforcement agency or results in a criminal prosecution.

Employee: This term shall be synonymous with and include all employees working for Indiana University – academic employees, including faculty and other instructors, and staff, including full-time, part-time, and temporary (hourly) employees at any university campus or working on behalf of the university.

Equity Officials: The individual designated by the university to respond to allegations of discrimination or harassment based on a protected class(es) against members of the university community. In some circumstances, this can include their designee. Members of the university community may contact the University or campus Equity Official regarding the applicable policy and processes.

Finding of Responsibility or Finding of a Violation: Means that it is more likely than not that the Respondent has engaged in the alleged conduct in violation of this policy. A preponderance of the evidence standard must be used when determining responsibility for violations under this policy.

Formal Complaint: Means a document signed and submitted by the Complainant, and alleging discrimination, harassment, sexual misconduct and/or retaliation by a Respondent and requesting that the university investigate the allegation(s). The complaint may be submitted in person, by mail, or by electronic mail, to the appropriate Coordinator or Equity Official identified in this policy. (In some circumstances, the Coordinator or Equity Official may file a formal complaint to initiate a formal investigation.)

Force: The use of physical force which overcomes the individual's resistance; or the threat of physical force, express or implied, against the individual or a third-party that places the individual in fear of death or in fear of serious personal injury to the individual or a third-party where the individual reasonably believes that the actor has the present or future ability to execute the threat.

Harassment: [see above]

Hearing Advisor: A person chosen by a party, or appointed by the institution if the party does not identify one, to accompany the party to their Title IX hearing for the purpose of conducting questioning of the other party(ies) and witness(es).

Indiana University Program or Activity: A program or activity sponsored, conducted, or authorized by Indiana University, including but not limited to, classes, internships, practica, field trips, study abroad programs, student teaching, or research, or a program or activity sponsored, conducted, or authorized by the university. For Title IX purposes, “program or activity” includes those that occur in a building owned or controlled by a student organization that is officially recognized by the university.

Indiana University Property: Buildings, grounds, and land that are owned by Indiana University or controlled by Indiana University via leases or other formal contractual arrangements to house ongoing university operations.

Interim Suspension: Temporary removal of a Respondent pending completion of an investigation. The determination to interim suspend shall be done in accordance with the campus interim suspension procedures and, for Title IX complaints, shall include an individualized assessment and determination that an immediate threat to the physical health or safety of any student or other individual arising from the allegations of sexual harassment justifies removal.

Laws and Regulations: Relevant laws and regulations that may apply to allegations raised under this policy include, but are not limited to: Age Discrimination Act of 1975; Age Discrimination in Employment Act of 1967; Americans with Disabilities Act of 1990; Equal Pay Act of 1963; Lilly Ledbetter Fair Pay Act of 2009; Genetic Information Discrimination Act of 2008; Pregnancy Discrimination Act of 1978; the Department of Labor’s Executive Order 11246; Section 402 of the Veterans Readjustment Act of 1974; Section 503 of the Rehabilitation
Act of 1973; Title VI and VII of the Civil Rights Act of 1964; Title IX of the Education Amendments of 1972; the requirements of federal research agencies; and relevant state laws and regulations.

**Member of the Indiana University Community:** Any individual who is a student, staff, faculty member, university official, or any other individual employed by, or acting on behalf of, the university; other individuals while on Indiana University property, including employees of third-party vendors and contractors, volunteers, and visitors. An individual’s status in a particular situation shall be determined by the Sexual Misconduct & Title IX Coordinator or the Equity Official, in consultation with applicable campus offices.

**Respondent:** Any member of the university community alleged to have engaged in conduct that could constitute discrimination, harassment, and/or sexual misconduct; or retaliation for engaging in protected activity under this policy.

**Sanctioning Official:** An individual with extensive knowledge of the applicability and implementation of the proceedings conducted pursuant to this policy who is authorized by the university to confer with a hearing panel about the range of available sanctions in a particular case, to make sanctioning determinations, and to ensure that the sanctions imposed are proportional to the severity of the violation and consistent with university standards. A Sanctioning Official is designated on each campus by the campus’s Senior Student Affairs Administrator in consultation with the University Title IX Coordinator. Subject to the approval of the campus’s Senior Student Affairs Administrator and University Title IX Coordinator, a Sanctioning Official is authorized to appoint a designee who will perform the Sanctioning Official’s duties in the event of the absence or unavailability of the Sanctioning Official.

**Sexual Assault:**

**FOR TITLE IX COMPLAINT RESOLUTION PROCEDURES:**

Sexual Assault Includes:

1. Sex Offenses, Forcible—Any sexual act directed against another person, without the consent of the Complainant, including instances where the Complainant is incapable of giving consent. It includes:
   a. Forcible Rape -- Penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the Complainant.
   b. Forcible Sodomy—Oral or anal sexual intercourse with another person, forcibly and/or against that person’s will or not forcibly or against the person’s will (non-consensually) in instances where the Complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity.
   c. Sexual Assault With An Object—To use an object or instrument to penetrate, however slightly, the genital or anal opening of the body of another person, forcibly and/or against that person’s will or not forcibly or against the person’s will (non-consensually) in instances where the Complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity.
   d. Forcible Fondling—The touching of the private body parts of another person (buttocks, groin, breasts) for the purpose of sexual gratification, forcibly and/or against that person’s will (non-consensually) or not forcibly or against the person’s will in instances where the Complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity.

2. Sex Offenses, Nonforcible—Nonforcible sexual intercourse. It includes:
   a. Incest—Nonforcible sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by Indiana law.
   b. Statutory Rape—Nonforcible sexual intercourse with a person who is under the statutory age of consent according to Indiana law IC 35-42-4-9.

**FOR UNIVERSITY COMPLAINT RESOLUTION PROCEDURES:**

Sexual Assault Includes:
1. Non-consensual sexual penetration is committed when an individual subjects another individual to sexual penetration without the consent of the individual, and/or by force.

2. Non-consensual sexual contact is intentional sexual touching by an individual of the intimate area of another individual (i.e., genitals, breasts, buttocks) or intentional sexual touching of another individual with any of these body parts, without the consent of the individual, and/or by force.

**Sexual Exploitation**: Conduct that extends the bounds of consensual sexual activity with or without the knowledge of the other individual for any purpose, including sexual gratification, financial gain, personal benefit, or any other non-legitimate purpose. Examples of sexual exploitation include but are not limited to:

1. Non-consensual streaming, audio- or video-recording, photographing, or transmitting intimate or sexual utterances, sounds, or images without consent of all parties involved;
2. Allowing others to view sexual acts (whether in person or via a video camera or other recording device) without the consent of all parties involved;
3. Engaging in any form of voyeurism (e.g., “peeping”);
4. Prostituting another individual;
5. Compelling another individual to touch their own or another individual’s (third-party) intimate parts without consent;
6. Knowingly exposing another individual to a sexually transmitted disease or virus without that individual’s knowledge;
7. Deception regarding contraceptives; and
8. Inducing incapacitation for the purpose of making another individual vulnerable to non-consensual sexual activity.

**Sex/Gender-Based Harassment**: Sex/gender-based discrimination is verbal, nonverbal, graphic, or physical aggression, intimidation, or hostile conduct based on sex, sex-stereotyping, sexual orientation, or gender identity, but not involving conduct of a sexual nature, when such conduct is sufficiently severe, persistent, or pervasive that it interferes with or limits an individual’s ability to participate in or benefit from the university’s education or work programs or activities. For example, persistent disparagement of an individual based on a perceived lack of stereotypical masculinity or femininity or exclusion from an activity based on sexual orientation or gender identity is prohibited under this policy.

**Sexual Harassment**:

FOR TITLE IX COMPLAINT RESOLUTION PROCEDURES:
Conduct on the basis of sex or that is sexual in nature that satisfies one or more of the following:

1. An employee of the university conditioning the provision of an aid, benefit, or service of the university on an individual’s participation in unwelcome* sexual conduct; and/or
2. Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the recipient’s education program or activity.

   Sexual Harassment also includes sexual assault, dating violence, domestic violence and stalking defined herein.

   Severity, pervasiveness, and objective offensiveness are evaluated based on the totality of the circumstances from the perspective of a reasonable person in the same or similar circumstances as the Complainant, including the context in which the alleged incident occurred and any similar, previous patterns that may be evidenced.

FOR UNIVERSITY COMPLAINT RESOLUTION PROCEDURES:
Conduct on the basis of sex or that is sexual in nature that satisfies one or more of the following:

1. A member of the university conditioning the provision of an aid, benefit, or service of the university on an individual’s participation in unwelcome* sexual conduct.
2. Unwelcome conduct determined by a reasonable person, to be so severe, pervasive or persistent, and objectively offensive, that it effectively denies a person equal access to the university’s education program or activity.

   Sexual Harassment also includes sexual assault, dating violence, domestic violence and stalking defined herein.

   Severity, pervasiveness, persistence, and objective offensiveness are evaluated based on the totality of the circumstances from the perspective of a reasonable person in the same or similar circumstances as the Complainant, including the context in which the alleged incident occurred and any similar, previous patterns that may be evidenced.

**Sexual Misconduct:** Broad term to encompass the range of sex-based behaviors covered by this policy.

**University Sexual Misconduct & Title IX Coordinator:** The individual designated by the university to coordinate the university’s compliance with Title IX and respond to allegations of sexual misconduct by members of the university community. In some circumstances, this can include the Sexual Misconduct & Title IX Coordinator’s designee. Members of the university community may contact the University or campus Deputy Sexual Misconduct & Title IX Coordinator regarding the sexual misconduct policy and process.

**Sexual Penetration:** Sexual intercourse in its ordinary meaning, cunnilingus, fellatio, anal intercourse, or any intrusion, however slight, of any part of the actor’s or individual’s body or any object manipulated by the actor into the genital or anal openings of the individual’s body.

**Stalking:**

*FOR TITLE IX COMPLAINT RESOLUTION PROCEDURES:*

Engaging in a course of conduct directed at a specific person that would cause a reasonable person to

1. fear for the person’s safety or the safety of others; or

2. suffer substantial emotional distress.

*FOR UNIVERSITY COMPLAINT RESOLUTION PROCEDURES:*

A knowing or an intentional course of conduct involving repeated or continuing harassment of another individual that would cause a reasonable person to feel terrorized, frightened, intimidated, or threatened and that actually causes the victim to feel terrorized, frightened, intimidated, or threatened. The term does not include statutorily or constitutionally protected activity.

For the purposes of the definitions above—

Course of conduct means two or more acts, including, but not limited to, acts in which the Respondent directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person’s property.

1. Reasonable person means a reasonable person under similar circumstances and with similar identities to the Complainant.

**Student:** Defined by the [Code of Student Rights, Responsibilities, and Conduct](#).

**Student Affairs Officer:** An individual authorized by the university and the campus chancellor or provost to be responsible for the administration of the Student Code of Rights and Responsibilities on a campus, or, in certain circumstances that individual’s designee.

**Sanctions**

Violations of this policy by an individual will be addressed in accordance with applicable university policies and procedures, referenced above, which may include disciplinary actions up to and including expulsion or termination from the university. When determining appropriate sanctions, the university may consider prior findings of misconduct. Violations of law will be addressed by law enforcement and may result in criminal penalties.
## Additional Contacts

### Title IX Coordinator
Jennifer Kincaid  
University Director of Institutional Equity & Title IX Coordinator  
Carmichael Center  
Suite L03  
530 E. Kirkwood Ave.  
Bloomington, IN 47408  
812-855-4889  
oie@iu.edu

### Deputy Sexual Misconduct & Title IX Coordinators

<table>
<thead>
<tr>
<th>Institution</th>
<th>Name</th>
<th>Phone Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Jennifer Kincaid, University Director of Institutional Equity &amp; Title IX Coordinator</td>
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</tr>
</tbody>
</table>
### IU Police Departments

<table>
<thead>
<tr>
<th>Department</th>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superintendent of Public Safety</td>
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<tr>
<td>IUS Police</td>
<td>Stephen Miller, Chief of Police</td>
<td>812-941-2400</td>
<td><a href="mailto:sfmiller@ius.edu">sfmiller@ius.edu</a></td>
</tr>
<tr>
<td>IUSB Police</td>
<td>Kurt Matz, Chief of Police</td>
<td>574-520-5522</td>
<td><a href="mailto:kumatz@iusb.edu">kumatz@iusb.edu</a></td>
</tr>
<tr>
<td>IUFW Police</td>
<td>Tim Potts, Chief of Police</td>
<td>260-481-6827</td>
<td><a href="mailto:police@pfw.edu">police@pfw.edu</a></td>
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### Campus Student Affairs

<table>
<thead>
<tr>
<th>Campus</th>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
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<tbody>
<tr>
<td>IUB</td>
<td>Dave O'Guinn, Vice Provost for Student Affairs and Dean of Students</td>
<td>812-855-8188</td>
<td><a href="mailto:vpsa@indiana.edu">vpsa@indiana.edu</a></td>
</tr>
<tr>
<td>IUPUI</td>
<td>Eric Weldy, Vice Chancellor Division of Student Affairs</td>
<td>317-274-3290</td>
<td><a href="mailto:eweldy@iupui.edu">eweldy@iupui.edu</a></td>
</tr>
<tr>
<td>IUE</td>
<td>Amy Jarecki, Dean of Students</td>
<td>765-973-8525</td>
<td><a href="mailto:ajarecki@iue.edu">ajarecki@iue.edu</a></td>
</tr>
<tr>
<td>IUK</td>
<td>Audra Dowling, Dean of Students</td>
<td>765-455-9204</td>
<td><a href="mailto:iukdos@iuk.edu">iukdos@iuk.edu</a></td>
</tr>
<tr>
<td>IUN</td>
<td>Alexis Montevirgen, Vice Chancellor for Student Affairs</td>
<td>219-980-6586</td>
<td><a href="mailto:nwstuaff@iun.edu">nwstuaff@iun.edu</a></td>
</tr>
<tr>
<td>IUS</td>
<td>Amanda Stonecipher, Vice Chancellor for Enrollment</td>
<td>812-941-2115</td>
<td><a href="mailto:agstone@ius.edu">agstone@ius.edu</a></td>
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<tr>
<td>Campus Academic Affairs</td>
<td>Management and Student Affairs</td>
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<td>IUSB</td>
<td>Monica Porter, Vice Chancellor for Student Affairs and Diversity</td>
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<td>574-520-4252</td>
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<td><a href="mailto:moport@iusb.edu">moport@iusb.edu</a></td>
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<td><strong>Campus Academic Affairs</strong></td>
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<tr>
<td>IUB</td>
<td>Eliza Pavalko, Vice Provost for Faculty and Academic Affairs</td>
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<td>812-855-2809</td>
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<td><a href="mailto:vpfaa@indiana.edu">vpfaa@indiana.edu</a></td>
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<td>IUPUI</td>
<td>Kathy Johnson, Executive Vice Chancellor and Chief Academic Officer</td>
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<td>317-274-4500</td>
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<td>IUE</td>
<td>Michelle Malott, Executive Vice Chancellor, Academic Affairs</td>
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<td>765-973-8320</td>
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<td>IUK</td>
<td>Mark Canada, Executive Vice Chancellor for Academic Affairs</td>
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<td><a href="mailto:marcanad@iuk.edu">marcanad@iuk.edu</a></td>
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<td>IUN</td>
<td>Vicki Román-Lagunas, Executive Vice Chancellor for Academic Affairs</td>
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<td><a href="mailto:viroman@iun.edu">viroman@iun.edu</a></td>
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<td>IUS</td>
<td>Kelly Ryan, Executive Vice Chancellor for Academic Affairs</td>
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<td>812-941-2208</td>
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<td><a href="mailto:ryanka@ius.edu">ryanka@ius.edu</a></td>
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<td>IUSB</td>
<td>Linda Chen Interim Executive Vice Chancellor for Academic Affairs</td>
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<td>574-520-4183</td>
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<td><a href="mailto:lchen@iusb.edu">lchen@iusb.edu</a></td>
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<tr>
<td>IUFW</td>
<td>Ann Obergfell Associate Vice Chancellor of Academic Affairs and Operations</td>
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<td><strong>Campus Human Resources Offices</strong></td>
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<td><a href="http://hr.iu.edu/">http://hr.iu.edu/</a></td>
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<td>812-855-2172</td>
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<td><a href="mailto:uhrs@indiana.edu">uhrs@indiana.edu</a></td>
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<td><a href="http://www.hra.iupui.edu/">http://www.hra.iupui.edu/</a></td>
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<td><a href="mailto:gvanalst@iuk.edu">gvanalst@iuk.edu</a></td>
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<td>219-980-6775</td>
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<td><a href="mailto:hmw@iun.edu">hmw@iun.edu</a></td>
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<td></td>
<td><a href="mailto:HR@ius.edu">HR@ius.edu</a></td>
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</table>
Indiana University Policy: Discrimination, Harassment, and Sexual Misconduct

Office for Civil Rights
U.S. Department of Education
Office for Civil Rights
Lyndon Baines Johnson Department of Education Bldg
400 Maryland Avenue, SW
Washington, DC 20202-1100

Telephone: 800-421-3481
FAX: 202-453-6012; TDD: 800-877-8339
Email: OCR@ed.gov
Website: http://www2.ed.gov/about/offices/list/ocr/index.html

Equity Officials

<table>
<thead>
<tr>
<th>Campus</th>
<th>Contact</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>IUSB</td>
<td>Jennifer Kincaid, University Director of Institutional Equity &amp; Title IX Coordinator</td>
<td>812-855-7559</td>
<td><a href="mailto:oie@iu.edu">oie@iu.edu</a></td>
</tr>
<tr>
<td>IUPUI</td>
<td>Anne Mitchell, Director, Office of Equal Opportunity</td>
<td>317-278-9230</td>
<td><a href="mailto:amitch29@iupui.edu">amitch29@iupui.edu</a></td>
</tr>
<tr>
<td>IUE</td>
<td>Tracy Amyx, Director of Affirmative Action/EEOC Officer</td>
<td>765-973-8402</td>
<td><a href="mailto:trramyx@iue.edu">trramyx@iue.edu</a></td>
</tr>
<tr>
<td>IUK</td>
<td>Sarah Sarber, Chief of Staff/Deputy Title IX Coordinator</td>
<td>765-455-9204</td>
<td><a href="mailto:shawkins@iuk.edu">shawkins@iuk.edu</a></td>
</tr>
<tr>
<td>IUN</td>
<td>Carolyn Hartley, Director, Interim Director of EOAA Programs</td>
<td>219-980-7205</td>
<td><a href="mailto:aneeali@iun.edu">aneeali@iun.edu</a></td>
</tr>
<tr>
<td>IUS</td>
<td>James J. Wilkerson, Director, Office of Equity and Diversity</td>
<td>812-941-2306</td>
<td><a href="mailto:eqdivix@ius.edu">eqdivix@ius.edu</a></td>
</tr>
<tr>
<td>IUSB</td>
<td>Laura Harlow, Director of Institutional Equity &amp; Inclusive Excellence</td>
<td>574-520-5536</td>
<td><a href="mailto:lewhitne@iusb.edu">lewhitne@iusb.edu</a></td>
</tr>
</tbody>
</table>

History

This policy was established in 2015. It incorporates and supercedes the Indiana University Policy Against Sexual Harassment, which was effective in 1998.

Approved by the University Faculty Council, February 24, 2015 by the attached resolution.
Approved by University President, March 1, 2015.

Revisions to policy approved by UFC and University President, August 25, 2016.

Revision to policy approved by UFC November 29, 2016; approved to be made effective on January 1, 2017, by University President.

Revisions to policy approved by UFC November 28, 2017; approved to be made effective on January 1, 2018 by University President.

Revisions to policy approved by UFC April 23, 2019; approved to be made effective on July 1, 2019 by University President.

Revision to policy approved by UFC on August 10, 2020, and University President on August 14, 2020 to become effective on August 14, 2020. The policy was revised in part to comply with new federal Title IX regulations and in part to articulate procedures related to reports of alleged discrimination, harassment, and/or sexual misconduct that are not covered by the new federal regulations. The procedures in this revised policy apply to reports received by the university on or after the effective date.

Previous Versions by Effective Dates:

03/01/2015 - 08/25/2016
08/25/2016 - 01/01/2017
01/01/2017 - 01/01/2018
01/01/2018 - 07/01/2019
07/01/2019 - 08/14/2020

Related Information

IU's Stop Sexual Violence Website www.stopsexualviolence.iu.edu
Americans with Disabilities Act (ADA)
Non-Discrimination/Equal Opportunity/Affirmative Action
Clergy Act Compliance
Code of Student Rights and Responsibilities
Code of Academic Ethics
Programs Involving Children
Annual Security & Fire Safety Reports (including Clery Crime Statistics)