



2021-2022 FACULTY SENATE

The eighth regular meeting of the 2021/2022 Faculty Senate will be held on **Tuesday, April 26, 2022**, at 2:10 pm as a virtual meeting, using WebEx.

AGENDA

**Revised*

[WebEx meeting link](#)

I. Call to Order

II. Approval of Minutes

[March 29, 2022](#)

III. Special Order of the Day

A. Roll Call

B. [Announcements](#)

C. Scott Shook, Chair of the ECU Board of Trustees

D. Philip Rogers, Chancellor

E. Ron Mitchelson, Interim Vice Chancellor for Health Sciences

F. LaKeshia Alston Forbes, Associate Provost for Equity and Diversity*
[Memo – Highlight Initiatives Designed to Improve Faculty Diversity
Initiatives Designed to Improve Faculty Diversity](#)

G. Ralph Scott, Faculty Assembly Delegate
Report on [April 22, 2022 UNC Faculty Assembly Meeting](#)

H. Purificación Martínez, Chair of the Faculty

I. Question Period

IV. Unfinished Business

V. Report of Graduate Council

Graduate Council, Ron Preston

Formal faculty advice on curriculum and academic matters acted on and recorded in the [April 18, 2022](#), Graduate Council meeting minutes, including level I action items from the [March 16, 2022](#),

[March 30, 2022](#), and [April 13, 2022](#), Graduate Curriculum Committee meeting minutes which were approved by its delegated authority and are reported here for informational purposes.

Programmatic action item (CG 22-05) recorded in the [April 18, 2022](#), Graduate Council meeting minutes, included level II programmatic action items from the [March 16, 2022](#), and [April 13, 2022](#), Graduate Curriculum Committee meeting minutes, which were forwarded to the Educational Policies and Planning Committee (EPPC), including discontinuation of an existing certificate (level II) Nurse Anesthesia Certificate from the Department of Advanced Nursing Practice and Education within the College of Nursing, and a revision of an existing certificate (level II), to move the academic home of the [Biostatistics Certificate](#) from the Department of Biostatistics within the College of Allied Health Sciences to the Department of Public Health within the Brody School of Medicine.

Graduate Policy action items (GC 22-06) approved by the Graduate Council and recorded in the [April 18, 2022](#), Graduate Council meeting minutes included [a recommendation to the research division \(REDE\) to revise the "Doctoral Students Tuition Remission, Fees, Compensation, Supplementation"](#) policy with language that allows faculty to write in out-of-state tuition remissions for full-time Ph.D. students supported on their grants.

VI. Report of Committees

A. Writing Across the Curriculum, Lisa Ellison

Curriculum and academic matters acted on and recorded during the [April 11, 2022](#) meeting, including retention of Writing Intensive (WI) designation after notification of curricular changes to ANTH 4025.

B. Admission and Retention Policies Committee, Eli Hvastkovs

Proposed revisions to *ECU Faculty Manual* Part VI., Section II. Academic Integrity (attachment 1).

C. Unit Code Screening Committee, Ken Ferguson*

End-of-year report on status of codes *(for information only)*

~~Revised College of Engineering and Technology Unit Code of Operations.~~ *(postponed until Fall 2022)*

D. Undergraduate Curriculum Committee, Stacy Weiss

Curriculum and academic matters acted on and recorded during the [March 3, 2022](#) meeting, including curricular actions in the following units:

- Department of Technology Systems within the College of Engineering and Technology (both consent agenda items and regular agenda items)
- School of Music within the College of Fine Arts and Communication
- Department of Clinical Laboratory Science within the College of Allied Health Sciences

Curriculum and academic matters acted on and recorded during the [March 24, 2022](#) meeting, including actions in the following units:

- Department of Technology Systems within the College of Engineering and Technology (both consent agenda items and regular agenda items)
- Department of Philosophy and Religious Studies within the Thomas Harriot College of Arts and Sciences
- Department of English within the Thomas Harriot College of Arts and Sciences

And curriculum and academic matters acted on and recorded during the [April 7, 2022](#) meeting, including curricular actions in the following units:

- Department of Anthropology within the Thomas Harriot College of Arts and Sciences (both consent and regular agenda items)
- Department of Foreign Languages and Literatures within the Thomas Harriot College of Arts and Sciences
- Interdisciplinary Programs within the Thomas Harriot College of Arts and Sciences (both consent agenda and regular agenda items)
- Department of Accounting within the College of Business
- Miller School of Entrepreneurship within the Department of Business
- Department of Mathematics, Science, and Instructional Technology Education within the College of Education
- Department of Recreation Sciences within the College of Health and Human Performance
- Department of Human Development and Family Science with the College of Health and Human Performance
- Department of Chemistry within the Thomas Harriot College of Arts and Sciences
- Department of Biology within the Thomas Harriot College of Arts and Sciences
- Department of Biostatistics within the College of Allied Health Sciences

E. Educational Policies and Planning Committee, John Collins

1. Curriculum and academic matters acted on and recorded during the [April 8, 2022](#) meeting, including the following:
 - new graduate certificate in Pharmaceutical Sciences and Technologies
 - moving the graduate certificate in Biostatistics to the Department of Public Health within the Brody School of Medicine
 - new graduate certificate in School Counseling
 - program revision of the MAEd in Elementary Education
 - program revision of the MAEd in Middle Grades Education
 - new undergraduate certificate in Multicultural Literature
 - new graduate dual degree Hispanic Studies MA and Marriage and Family Therapy MS
 - new Accelerated BS in Criminal Justice/MS in Criminal Justice
 - new undergraduate minor in Medical Humanities
 - program revision of the BS in Information and Computer Technology
 - APR unit response for Sociology
 - Discontinuation of graduate certificate in Nurse Anesthesia
2. [Proposed reorganization of the Health Sciences academic units](#)
3. Proposed reorganization of the Department of Public Health
 - [Proposal](#)
 - [Guidelines for the Reorganized Department of Public Health in the Brody School of Medicine](#)
 - [Tenured and Probationary Term \(Tenure-Track\) Position Tenure and Promotion Guidelines for the Department of Biostatistics](#)

F. University Budget Committee, Page Varnell

[Response to Budget Cuts Presented at University Council](#) (*for information only*)

G. Faculty Governance Committee, Mark Bowler

1. Formal faculty advice on the Academic Computer Use interim regulation (attachment 2).
2. Proposed revisions to *ECU Faculty Manual* Part VIII., Section I., Subsection VIII. Faculty Personnel Files (attachment 3).

H. Faculty Welfare Committee, Pamela Reis

Formal faculty advice on Use of University Property Regulation (attachment 4)

H. Distance Education and Learning Technology Committee, Melinda Doty

1. Formal faculty advice on Software and Data Collection Services Acquisition Interim Regulation (attachment 5).
2. Formal faculty advice on the Computer Replacement/Retirement Program (attachment 6).
3. Addition of content to DE modules addressing copyright (*for information only*)

I. Research and Creative Activities Committee, Joi Walker*

Formal faculty advice on Regulation on Reporting and Responding to Allegations of Research Misconduct (formerly titled "Regulation on Research Conduct") (attachment 7)

J. General Education and Instructional Effectiveness Committee, George Bailey*

1. Curriculum and academic matters acted on and recorded during the [March 21, 2022](#) meeting, including:

- The following transfer credit approvals:
 - General Education Natural Sciences (GE:SC) credit for CH 120: Drugs & Their Implications to Society from Sacred Heart University
 - Domestic Diversity (DD) credit for SOC 200: Introduction of Sociology from Valencia Central Alabama Community College
 - General Education Humanities (GE:HU) and Global Diversity (GD) credit for HUM 170: The Holocaust from Cape Fear Community College
 - Domestic Diversity (DD) credit for HIST 1311: History of the United States to 1865 from the University of Texas-Arlington
 - General Education Fine Arts (GE:FA) credit for ARTT 100 (7380): Introduction to Drawing from University of Maryland Global Campus
- Notification of banking of the following General Education/Diversity courses:
 - ANTH 2200 Introduction to Cultural Anthropology (GE:SO, GD)
 - ANTH 3013 Cultures of Mainland Southeast Asia (GD)
 - ANTH 3002 Cultures of East Asia (GE:SO, GD)
 - ANTH 4054 Anthropology of Religion (GD)
- Notification of discontinuation of the following General Education/Diversity courses:
 - ANTH 3009 Motherhood of God in Asian Traditions (GE:SO, GD)
 - ANTH 4050 Psychological Anthropology (GD)
- Maintaining General Education Natural Sciences (GE:SC) credit for BIOL 2015/2016 after removal of prerequisite
- Maintaining General Education Humanities (GE:HU) and Global Diversity (GD) credit for GRBK/ASIA 2010 after prerequisite revisions
- Maintaining General Education Humanities (GE:HU) credit for GRBK 2400 after prerequisite revision
- Maintaining General Education Humanities (GE:HU) credit for GRBK 2500 after prerequisite revision
- Maintaining General Education Humanities (GE:HU) credit for GRBK 3001 after co/pre-requisite revision
- Maintaining Global Diversity (GD) credit for GRBK 3601 after co/prerequisite revision
- General Education Humanities (GE:HU) and Domestic Diversity (DD) credit for RELI 3400 History of the Devil in the Judeo-Christian Traditions
- Domestic Diversity (DD) credit for ANTH 3026

And curriculum and academic matters acted on and recorded during the [April 18, 2022](#) meeting, including:

- Continuation of of (GE:SO) and Global Diversity credit for ANTH 3200, Women's Roles in Cross-Cultural Perspective, after the removal of all the prerequisites (ANTH 1000, ANTH 2010, and ANTH 2200).
- Recommendation to revise the General Education Fine Arts Learning Outcomes based on information obtained during the assessment process. The request is to revise the current Fine Arts outcomes, which read:

"The following program learning outcomes define the fine arts competency. Students who have completed the general education fine arts requirements can:

1. *Apply knowledge of an area in the fine arts to describe specific artists, works, movements and creative processes and their significance to the human condition.*
2. *Analyze diverse genres, styles, and techniques in their appropriate cultural and historical context.*
3. *Apply discipline-specific knowledge in the fine arts to evaluate the relevance of the fine arts to cultural and personal growth."*

As follows:

"The following program learning outcomes define the fine arts competency. Students who have completed the general education fine arts requirements can:

1. *Apply knowledge of the human condition in an area in the fine arts to convey meaning through creating, performing, producing, or responding within an artistic form.*
2. *Analyze diverse genres, styles, and techniques in their appropriate cultural and historical context.*
3. *Synthesize and relate discipline-specific knowledge in the fine arts through the artistic processes of creating, performing, producing, presenting or responding as applicable to cultural and personal growth."*

2. Recommendation to adopt a General Education Learning Outcomes Enhancement Procedure (attachment 8)

K. Committee on Committees, Melinda Doty*

Second reading of proposed revisions to the charges of 14 University Standing Academic Committees (attachment 9).

VII. New Business

ADMISSION AND RETENTION POLICIES COMMITTEE REPORT
Proposed revisions to *ECU Faculty Manual* Part VI., Section II. Academic Integrity

The Committee received feedback from units and from the Office of Student Rights and Responsibilities indicating dissatisfaction with some of the updates to this procedure, especially the requirement for a formal departmental meeting involving the unit head to consider allegations of academic integrity violations. Chair Martínez conferred with the Office of University Counsel and learned that the interpretation of the UNC Code that seemed to require a formal departmental meeting was no longer favored and that the Committee could remove that requirement and still remain in compliance. The Committee has revised the policy to take into account the feedback received.

Additions in **bold** and deletions in ~~strikethrough~~.

PART VI – TEACHING AND CURRICULUM REGULATIONS, PROCEDURES
AND ACADEMIC PROGRAM DEVELOPMENT

SECTION II

Academic Integrity
(Text moved from former Part IV)

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- VI. Procedure for Reporting a Suspected Academic Integrity Violation
 - A. Notice of Suspected AIV and Scheduling the Initial Meeting
 - B. ~~Provisions for Special Cases~~ **Meeting Procedures**
 - C. ~~Formal Departmental Meeting~~ **Student Withdrawal From Course**
 - D. Outcome of ~~Formal Departmental~~ **the Initial** Meeting
 - E. ~~AIB Hearings~~ **Provisions for Special Cases**
 - F. ~~Appeals~~ **Referral to the UCAI for AIB Review**
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- VII. Records
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- IX. Review of AIV Process

I. Statement of Academic Integrity

Academic integrity is the application of pertinent personal virtues, such as honesty, responsibility, authenticity, honor, and justice, to academic work. Academic integrity is a cornerstone value of the intellectual community at East Carolina University. Academic integrity is required for students to derive optimal benefit from their educational experience and their pursuit of knowledge. Violating the principle of academic integrity damages the reputation of the university and undermines its educational mission. Without the assurance of integrity in academic work, including research, degrees from the university lose value; and the world beyond campus (graduate schools, employers, colleagues, neighbors, etc.) learns that it cannot trust credits, or a diploma earned at ECU. For these reasons, academic integrity is required of every ECU student.

Maintaining the academic integrity of ECU is the responsibility of all members of the academic community. Faculty should ensure that submitted work accurately reflects the abilities of the individual student. Toward this end, faculty should—through both example and explicit instruction—instill in students a desire to maintain the university’s standards of academic integrity and provide students with strategies that they can use to avoid intentional or accidental violation of the academic integrity policy.

II. Purpose and Scope

This document sets forth democratic procedures to follow for suspected academic integrity violations (AIVs) at ECU as well as possible penalties. These procedures comply with the minimal due process standards of 700.4.1 of the UNC Policy Manual (<https://www.northcarolina.edu/apps/policy/index.php>). These procedures pertain to anyone registered for an academic course at the University, including but not limited to, undergraduate and graduate students who are classified as degree or non-degree seeking, as well as visiting students, and students studying abroad. The Academic Integrity Regulation also applies to student violations discovered after the student has completed the course, has left the University, or has graduated. Depending on the circumstances of the case, degree revocation may be a consequence, as outlined in the relevant catalog. All students are responsible for conducting themselves in a manner that enhances a learning environment where the rights, dignity, worth, and freedom of each member of the academic community are respected. Upon acceptance of admission to ECU, each student agrees to abide by the policies of the University and to conduct themselves on- and off-campus in a manner consistent with its educational mission. Students have a responsibility to review the Academic Integrity Regulation and other policies, and, if necessary, to seek clarification from the Office of Student Rights and Responsibilities (OSRR).

ECU’s policy on research misconduct is a separate and independent process from this AIV process. “Research Misconduct” is defined as fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting the results. The determinations, results, procedures, and outcomes of the Research Misconduct Proceedings shall rely on ECU’s PRR on the Regulation on Research Misconduct (<https://www.ecu.edu/prr/10/45/01>), which is necessary for university compliance with this UNC system policy as well as with state and federal laws. It is recommended that all faculty, staff, and students be familiar with the Research Misconduct Proceedings Regulation. The procedures for reporting, investigating, and determining penalties in

cases of academic integrity violations under these procedures for Academic Integrity shall not supersede procedures for reporting, investigating, and determining penalties for Research Misconduct. Cases and questions related to Research Misconduct should be reported to the Office of Student Rights and Responsibilities (OSRR).

1. In addition to the expectations of Academic Integrity provided by the Faculty Manual, certain academic departments, programs, colleges, and schools, especially at the professional and graduate level, may have additional ethical and behavioral expectations of their students, including expectations for the conduct of research; further, units may also establish additional penalties for AIVs. As a result, various academic units and administrative departments have policies specific to their area of responsibility. It is the responsibility of each student to be familiar with University policies and procedures applicable to the University generally, as well as any individual program or unit. This Academic Integrity Regulation and related policies and procedures are available on-line within the University's Policy Manual.

2. In addition to the consequences outlined in this Regulation and the possible penalties and sanctions discussed below, students who represent units within the University to third-parties, such as medical students, dental students, graduate students, student athletes, resident advisors, student organization leaders, and residential students may also be subject to additional consequences under the standards set by those units.

III. Definitions of Academic Integrity Violations

An academic integrity violation (AIV) is defined as any activity that exhibits dishonesty in the educational process or that compromises the academic honor of the university. Examples of AIVs include, but are not limited to, the following:

1. Cheating: Unauthorized aid or assistance or the giving or receiving of unfair advantage on any form of academic work. Examples of cheating include, but are not limited to: copying from another student's paper or receiving unauthorized assistance during a quiz or examination; using books, notes, or other devices when these are not authorized; improperly obtaining tests or examinations; collaborating on academic work without authorization and/or without truthful disclosure of the extent of that collaboration; allowing or directing a substitute to take an examination.

2. Plagiarism: Copying the language, structure, ideas, and/or thoughts of another and adopting the same as one's own original work. Examples of plagiarism include, but are not limited to: submitting a paper that has been purchased or downloaded from an essay-writing service; directly quoting, word for word, from any source, including online sources, without indicating that the material comes directly from that source; omitting a citation to a source when paraphrasing or summarizing another's work; submitting a paper written by another person as one's own work.

3. Falsification/Fabrication: The statement of any untruth, either spoken or written, regarding any circumstances related to academic work. This includes any untrue statements made with regard to a suspected AIV. Examples of falsification/fabrication include, but are not limited to: making up data, research results, experimental procedures, internship or practicum experiences, or otherwise claiming academic-related experience that one has not actually had; inventing or submitting deceptive citations for the sources of one's information; submitting a false excuse for an absence from class or other academic obligation.

4. Multiple submission: The submission of substantial portions of the same academic work for credit more than once without authorization from the faculty member who receives the later submission. Examples of multiple submission include, but are not limited to: submitting the same

essay for credit in two courses without first receiving written permission; making minor revisions to an assignment that has already received credit in a course and submitting it in another class as if it were new work.

5. Violation assistance: Knowingly helping or attempting to help someone else in an act that constitutes an AIV. Examples of violation assistance include, but are not limited to: knowingly allowing another to copy answers during an examination or quiz; distributing test questions or examination materials without permission from the faculty member teaching the course; writing an essay, or substantial portions thereof, for another student to submit as his or her own work; taking an examination or test for another student; distributing information involving clinical simulation and skills assessments.

6. Violation attempts: Attempting any act that, if completed, would constitute an AIV as defined herein. In other words, it does not matter if a student succeeds in carrying out any of the above violations, the fact that a violation was attempted is itself a violation of academic integrity.

IV. University-Wide Responsibility to Report AIVs

AIVs are unfair to honest students and they damage the quality and reputation of the entire university. Thus, the University places obligations on students and community members to report information on AIVs based on the principle that ignoring AIVs is as problematic as actively committing an AIV.

A. Responsibilities of Faculty, Teaching Assistants, and other Instructional Personnel

Faculty, teaching assistants, and other instructional personnel are responsible for communicating university-wide expectations for academic integrity, for example, by providing copies of this AIV Regulation or by providing a reference to it in their course syllabus to ensure that students are accountable for conforming their conduct to these expectations. It is also recommended that faculty, teaching assistants, and other instructional personnel communicate clear ground rules for academic work conducted under their supervision and take reasonable steps to prevent AIVs. For example, faculty, teaching assistants, and other instructional personnel should: prevent unauthorized access to examinations during the development, duplication, and administration of such exams; avoid reusing prior examinations (in whole or in part) to the extent possible; take all reasonable steps consistent with physical classroom conditions to reduce the risk of cheating during the administration of examinations; and maintain proper security during the administration of examinations, including as appropriate overseeing distribution and collection of examinations, and proctoring the examination session.

If faculty, teaching assistants, or other instructional personnel suspect an AIV, they should:

1. follow the procedures for responding to suspected AIVs (enumerated below, Section VI). The responsibility for following the stated procedures also includes but is not limited to, the following: obeying time constraints of this regulation, providing proper notice to the **respondent** student **alleged to have committed an AIV**, refraining from taking unilateral punitive action, and reporting the alleged violation to the Office of Student Rights and Responsibilities (OSRR), and the department chair (or his/her designee), as required; and
2. cooperate with the OSRR, **Academic Integrity Review Committee (AIRC)**, the **Academic Integrity Appeal Board (AIAB)**, and the Academic Integrity Board (AIB) when these bodies are conducting investigations, administering hearings and/or reviewing matters of academic integrity. The cooperation may call for actions such as providing testimony or other evidence, recommending appropriate sanctions, or helping to bring the matter to a prompt conclusion.

B. Responsibilities of Students:

ECU students are responsible for promoting academic integrity in the ECU community by upholding it in their own work and by reporting any suspected violations. A student knowing of circumstances in which an AIV may have occurred (or is likely to occur) should bring this knowledge to the attention of a faculty member or OSRR.

ECU students are responsible for understanding what plagiarism is, learning the recognized techniques of proper attribution of sources used in the preparation of written work, and identifying allowable resource materials or aids to be used during examination or in completion of any graded work. Students should seek clarification from faculty if it is not clear whether a certain action would violate this Academic Integrity Policy.

ECU students are responsible for complying with faculty classroom procedures designed to reduce the possibility of cheating—such as removing unauthorized materials or aids from the classroom and protecting one’s own examination paper from the view of others.

ECU students are responsible for maintaining the confidentiality of examinations by divulging no information concerning an examination, directly or indirectly, to another student.

ECU students are responsible for reporting any instance in which reasonable grounds exist to believe that a student has given or received unauthorized aid in graded work or in other respects committed an AIV. Such report should be made to the OSRR, the Office of the Dean of Students (DOS), or other appropriate instructor or official of their college or school.

ECU students are responsible for cooperating with the OSRR in the investigation and hearing of any incident of alleged violation, including providing testimony when called upon.

C. Responsibilities of other University Community Members

Other ECU community members are responsible for promoting academic integrity in the ECU community both by upholding it in their own work and by reporting any suspected AIV. An ECU community member knowing of circumstances in which an AIV may have occurred (or is likely to occur) should bring this knowledge to the attention of a faculty member or the OSRR. The AIV form for reporting to OSRR can be found at <https://osrr.ecu.edu/faculty-staff/>

D. Responsibilities of the Office of Student Rights and Responsibilities (OSRR)

The OSRR is responsible for discussing the suspected AIV with the instructor of record for the course(s) involved. The OSRR, in consultation with the faculty member(s), will follow the procedures outlined in this Regulation. The OSRR is responsible for acting as a source of information and liaison concerning this Regulation and procedure for faculty, teaching assistants, other instructional personnel, department chairs, administrators, and students.

The OSRR is also responsible for coordinating the staffing and for maintaining of the University Committee on Academic Integrity (UCAI), the Academic Integrity Review Committee (AIRC), and the Academic Integrity Board (AIB), **and the Academic Integrity Appeals Board (AIAB).**

E. University Committee on Academic Integrity (UCAI) Composition and Membership

1. Faculty members – Sixteen faculty members, at least six (6) of whom have graduate faculty status, each of which is elected for three-year staggered terms by the Faculty Senate.
2. Student members – Sixteen students, at least six (6) of whom are graduate students, elected by and from among the members of the Student Conduct Board. These students shall serve for a one year term and may be reelected for one additional one year term.
3. The Director of the OSRR, or designee, shall serve as an administrative officer of the committee, but shall not participate in hearings.

The members of the UCAI form the following Boards:

1. Academic Integrity Review Committee (AIRC): Is a three-member panel consisting of: one administrator from OSRR (designated by the Director of OSRR); one student member from UCAI; and one faculty member from UCAI. In cases involving possible academic integrity violations by a graduate student, the faculty appointed to the AIRC must have graduate faculty status and the student must be a graduate student. The AIRC is charged with reviewing student appeals from a Department's finding and/or academic penalty imposed, **or if there was a violation of due process or material deviation from substantive and procedural standards,** the AIRC will review the appeal request to determine if it is appropriate to forward it to the AIB. (See below for appeal grounds and standard of review.)
2. Academic Integrity Board (AIB): Is a panel of five UCAI members; three faculty members and two students. The AIB is charged with determining whether a student has violated this policy and, if appropriate, assigning academic penalties and/or sanctions, in matters referred to OSRR for UCAI review. This includes: appeals from the Initial Meeting; cases in which the department recommends additional sanctions (e.g. suspension or expulsion) after an Initial Meeting; in cases of repeat violations, multi-student violations; or suspected violations at the undergraduate level that occur outside of a specific course. In all matters where the respondent student is a graduate student, at least two of the three faculty members must have graduate faculty status; and every attempt should be made to ensure that all three faculty members on the board have graduate faculty status. Additionally, in cases involving possible violations by graduate students, the student members of the board must be graduate students. The AIB will select a chair from among its faculty membership. All members of the AIB may vote on the selection of a chair.
3. **Academic Integrity Appeal Board (AIAB): is a panel of five UCAI members; three faculty members and two students. The AIAB is charged with hearing cases referred to an AIAB by the AIRC. The AIAB determines if the appeal letter submitted by the student has merit and if the original decision made by the instructor should be altered. The AIAB can determine the following: (1) affirm and uphold the instructor's original determination and sanction assigned; (2) affirm and uphold the instructor's original determination that AIV occurred and alter the sanction assigned; (3) determine that there was not enough information to uphold the instructor's finding that an AIV occurred. The AIAB is not charged with determining if suspension or expulsion is warranted. Cases involving a recommendation of suspension or expulsion are referred to the AIB for a hearing. Detailed procedures for AIAB hearings are available from the OSRR. If the AIRC grants an AIAB hearing to a student, OSRR will notify the student and faculty member in writing of the date, time, and location of the hearing.**

V. Rights and Responsibilities

A. Respondent **Student** Rights and Responsibilities

A student whose conduct is under review is a Respondent **student (“the student”)** and has the rights and responsibilities listed below. The Respondent **student** may forfeit any of these rights if, after being given appropriate notice and opportunity to exercise these rights, he/she fails to do so.

1. Respondent **Student** Rights:

- a. The right to an objective and impartial evaluation of the complaint.
- b. The right to be present during the meeting with the instructor of record and during the AIB hearing (if applicable).
- c. The right to reasonable access to all information gathered throughout the investigation pertinent to the alleged violation.
- d. The right to present information relevant to the alleged violation, including inviting witnesses.
- e. The right to respond to information presented against the Respondent **student**.
- f. The right to a separate meeting with a faculty member or AIB hearing in cases involving multiple Respondents **students**. Charges against multiple Respondents **students** involved in the same incident may be heard in a single case only if each Respondent **student** consents to such a proceeding.
- g. The right not to provide information, with the understanding that the University will make a determination with or without the Respondent's **student's** information.
- h. The right to review of the decision, after receiving written notice of the outcome, including to appeal as described below.
- i. The right to be informed of pertinent University-based support services.

Respondent **Student** Responsibilities:

- a. The responsibility to be honest and direct in communicating with individuals involved in the Academic Integrity process.
- b. The responsibility to review this Academic Integrity policy and procedures and to seek clarification if necessary.
- c. The responsibility to respond in a timely manner to University requests for information, to promptly schedule meetings when requested, and to arrive on time for scheduled meetings.
- d. The responsibility to provide the decision-maker with pertinent information that the Respondent **student** would like considered in the review of the alleged violation.
- e. The responsibility to participate in the Academic Integrity process in a manner that is civil and respectful.

B. Complainant **Instructor** Rights and Responsibilities

A faculty member, teaching assistant, or other instructional personnel who alleges a violation of this Regulation is (the Complainant **instructor**) and has the rights and responsibilities listed below. The Complainant **instructor** may forfeit any of these rights if, after being given appropriate notice and opportunity to exercise these rights, he/she fails to do so.

1. Complainant **Instructor** Rights:

- a. The right to an objective and impartial evaluation of the complaint.
- b. The right to invite relevant witnesses with knowledge of the alleged AIV.

- c. The right to submit a written statement.
- d. The right, after receiving written notice of the outcome, to review the decision, if permitted under ECU policies, University of North Carolina System policies and local, state, and federal laws.

2. **Complainant Instructor** Responsibilities:

- a. The responsibility to provide a copy of the course syllabus and all relevant controlling documents (e.g. project instructions).
- b. The responsibility to be honest and direct in communicating with individuals involved in the conduct process.
- c. The responsibility to review this Academic Integrity Policy and its procedures, and to seek clarification if necessary.
- d. The responsibility to respond in a timely manner to University requests for information, to promptly schedule meetings when requested, and to arrive on time for scheduled meetings.
- e. The responsibility to provide the decision-maker(s) with pertinent information that the **Complainant instructor** would like considered in the review of the alleged violation.
- f. The responsibility to participate in the Academic Integrity process in a manner that is civil and respectful.

C. Bias

If the **Respondent student** and/or **Complainant instructor** believes that one or more of the fact finders, such as ~~the Department Chair (or designee),~~ a member(s) of the AIRC, **AIAB** or the AIB, has a conflict with, bias about, or an interest in a case that may unduly influence the decision making either positively or negatively, the **Respondent student** and/or **Complainant instructor** may request a different Panel or Official. The challenging party will be asked to provide specific reasons for the challenge. If the challenge is made concerning the **Formal Departmental Meeting**, ~~then the Department Chair (or designee) will be responsible for making a determination following the request, and may decide to recuse and replace themselves.~~ If the challenge is made concerning the AIRC, **AIAB**, or the AIB, then the Chair of the UCAI along with the Director of the OSRR, or designee, will determine whether the identified panel member should be removed. If the removal of a panel member results in fewer than five panel members, parties will be given the option to consent to continuing with the existing panel (less than 5 members) or to reschedule the hearing for review by a full panel.

D. Contact Information

Students have the responsibility to update personal contact information on their Pirate Port account as soon as it changes and to consistently monitor their ECU e-mail account and telephone answering equipment, as the University frequently communicates through these modes.

VI. Procedure for Reporting a Suspected Academic Integrity Violation

Outlined below is a formal procedure for reporting suspected AIVs. This procedure applies to all ECU students regardless of mode of instruction. Additional information regarding AIVs in distance education (DE) courses is available from OSRR.

Standard of Evidence: The standard used throughout the academic integrity process to reach case resolution is preponderance of the evidence. This standard will be used to evaluate the evidence for purposes of making findings and drawing conclusions for an investigation conducted

under this Regulation. To meet the standard of preponderance of evidence, the evidence must demonstrate that it is more likely than not that the alleged conduct occurred. Formal rules of evidence do not apply to student conduct cases.

All complaints of suspected AIVs will be reviewed by the OSRR to track and to determine whether the reported behavior is governed by this Regulation. Anonymous complaints may result in a formal charge if they contain sufficient information to independently establish a violation of this policy.

Retaliation: The University does not tolerate retaliation against individuals who file a complaint. Retaliation means any act of interference, restraint, penalty, coercion, reprisal, intimidation, threats, or harassment against an individual for using applicable policies responsibly (including testifying, assisting, or participating in a hearing, proceeding, review process or investigation; opposing an illegal act; or exercising any other right protected by this policy). Students who retaliate against such persons will be held accountable under the Student Conduct Process (<https://www.ecu.edu/prr/11/30/01>). It is the responsibility of the target of the retaliation to immediately report the behavior to OSRR. **In certain circumstances OSRR may determine it necessary to implement directives and/or interim measures while the allegation of retaliation is being investigated.**

A. Notice of Suspected AIV and Scheduling the Initial Meeting

The Initial Meeting is designed as the primary hearing for Academic Integrity Violations.

If it is believed that an AIV has occurred in the Complainant's instructor's course, then the student will be invited to an Initial Meeting with the Complainant instructor. The purpose of this meeting is to gather information and to provide the student (Respondent) with the opportunity to respond to the allegations. !

Formal review of a suspected AIV is initiated upon sending notice of the Initial Meeting. Any informal discussions between faculty and student about coursework prior to the Initial Meeting is not considered part of the formal AIV review process. ~~The Initial Meeting is designed for the Complainant to gather information, discuss the allegation with the Respondent, and provide evidence of the suspected violation.~~

In a case where the AIV involves multiple students (for example, cheating rings), the **instructor may consult OSRR to determine if the instructor or OSRR should handle the case. The nature and scope of the suspected AIV will determine who resolves the matter. OSRR reserves the right to refer the case to theUCAI for an AIB hearing regardless of who handles the case. A cheating ring is three or more students working together in a non-course sanctioned manner that improperly benefits at least one of the students in the group. If the faculty member and/or OSRR determine that the nature of the cheating ring is egregious, it has significant impact to the integrity of the course, and/or the students involved have previous academic integrity violations, a recommendation of suspension or expulsion may be warranted.** ~~Complainant should submit a report of the suspected AIV(s) to OSRR for handling. In the event that OSRR receives credible reports of multi-student violations, it reserves the right to refer the case to theUCAI for an AIB hearing.~~

B. Initial Meeting Procedures

To initiate the formal review of a suspected AIV, the Complainant (as a designated University

official) shall provide written notice of the Initial Meeting to the **Respondent student**. This notice:

1. must be sent by some method with evidence of dispatch (e.g., email from the **Complainant's instructor's** official ECU email account to the **Respondent's student's** official ECU email account, or hand-delivered letter accompanied by a brief form that the **Respondent student** signs to indicate the note was delivered);
2. must be sent to the **Respondent student(s)** involved within seven (7) calendar days of the time the suspected violation comes to the attention of the **Complainant instructor**. (If the AIV is discovered during a time when regularly scheduled classes are not being held, the seven (7) calendar days shall be counted starting with the next day regularly scheduled classes are held.);
3. must communicate the following important information:
 - a. a specification of the suspected AIV(s);
 - b. a brief description of the material evidence supporting the allegation;
 - c. the proposed academic penalty and a list of the possible sanctions/penalties, including any program specific AIV penalties, if appropriate. If the **Complainant instructor** believes that the alleged violation(s) could result in suspension, this possibility must be stated, and the **Respondent student** shall be provided written notice that the matter will be referred to OSRR for review following any recommendation of suspension for a hearing process in accordance with the requirements of applicable ECU and UNC system policies. Further, if the **Complainant instructor** believes that the alleged violation(s) could result in expulsion, this possibility must be stated and the **Respondent student** shall be provided written notice that expulsion precludes matriculation at any UNC constituent institution, and that the matter will be referred to OSRR for review following any recommendation of expulsion for a hearing process in accordance with the requirements of applicable ECU and UNC system policies;
 - d. instructions for the **Respondent student** to contact the **Complainant instructor** to set up the Initial Meeting, including appropriate contact information for the **Complainant instructor**;
 - e. a statement presenting the option to bypass the Initial Meeting and accept the academic penalty proposed by the **Complainant instructor**, including instructions for how to do so; and
 - f. a copy of the student's rights and responsibilities form (available on the OSRR webpage <https://osrr.ecu.edu/faculty-staff/>)

~~A student may not withdraw from a course while a suspected AIV is being investigated. The AIV investigation is commenced once notice of the Initial Meeting or notice of the AIB hearing is sent, whichever comes first. If hand-delivered, then the commencement date is based upon the signed note of receipt.~~

If a faculty member finds an AIV at the end of the semester and the student has already attended the last scheduled class session and final exam, the faculty member should follow the steps above and notify the **Respondent student** in writing of a suspected violation and mark a grade of Incomplete (I) until the investigation is complete.

Upon delivery of the written notification from the **Complainant instructor**, the **Respondent student** has seven (7) calendar days to contact the **Complainant instructor** and schedule a day and time for the Initial Meeting. If the **Respondent student** fails to respond to **Complainant instructor** notification within seven (7) calendar days, the **Respondent student** shall forfeit the opportunity to respond. However, the Director of OSRR (or designee) may decide to reopen a case if good cause exists or extenuating circumstances explain the

Respondent's **student's** failure to respond in a timely manner (e.g. medical issue, family death, etc.).

In the event that the Respondent **student** fails to respond to the notice, the Complainant **instructor** may find the Respondent **student** responsible for the AIV and may impose an appropriate academic penalty (as outlined below; see Section VI.C). If so, the Complainant **instructor** will need to complete an Academic Integrity Violation Form (AIV form) (which is available on the OSRR webpage <https://osrr.ecu.edu/faculty-staff/>) and submit it to the OSRR within twenty-four calendar days of the date on which the notice of a suspected violation was sent to the Respondent **student**. OSRR will notify the Respondent **student**, in writing, of the Complainant's **instructor's** decision and the academic penalty within seven (7) calendar days of receiving the AIV form. The written notice shall include a copy of the student's rights and responsibilities form and inform the Respondent **student** of their right to appeal and the appeal process (described below). In the event that the Respondent **student** involved in the violation is a graduate student or is in a degree program that has additional penalties for or policies regarding academic integrity violations (**i.e., professional medical or dental school student**), the OSRR will also submit a copy of the AIV form to the appropriate program administrator.

In some instances, there may be a reasonable delay in the reporting of the AIV to OSRR as well as OSRR informing the student of the instructor's decision and academic penalty assigned. Reasonable delays will be communicated in writing to the student. The communication regarding the delay will be sent in writing to the student but may not be sent prior to the seven (7) calendar days given for notification from the instructor and/or OSRR. The communication may be provided after the seven (7) days have passed based on the reason for the delay, which may include protecting the integrity of the investigation related to the AIV. Reasonable delays may include, but are not limited to times when there are scheduled breaks (fall, winter, spring, summer), natural disasters, instances involving multiple students, proctored exams, or the need for further investigation into the allegation. If an instructor or OSRR have documented and communicated the reason for a reasonable delay, the delay would not constitute a violation of due process or material deviation.

The Respondent may waive the Formal Departmental Meeting and accept an academic penalty proposed by the Complainant during or after the Initial Meeting. The waiver and acceptance must be in writing and signed by the Respondent. Waivers are made available by the OSRR at <https://osrr.ecu.edu/faculty-staff/>.

If the Respondent does not accept responsibility for the alleged AIV at the Initial Meeting (or waive their rights to proceed) a Formal Departmental Meeting shall be held within twenty-four calendar days of the date that the suspected AIV came to the Complainant's attention.

B. Provisions for Special Cases

1. If a Complainant discovers a suspected violation in which the currently enrolled Respondent has used the work of a student either in a different section of the course or has taken a course at a different time, the Complainant should follow the procedures for the Initial Meeting and what follows (described in the previous section and below) for the Respondent enrolled in their course. If the other student involved is enrolled in another section of the course or if the student took the class during a different time (different semester), then the Complainant should submit the AIV Form directly to OSRR for an AIB hearing.

2. If a Complainant discovers a suspected violation at a time immediately after the Respondent is no longer within the Complainant's course, the Complainant should refer the case, including all evidence related to the suspected violation, directly to OSRR for an AIB hearing via the AIV Form. The AIB will review the evidence submitted (e.g., syllabus, any AI statement signed by the student, documents such as the paper and SafeAssign or other software used to find a suspected violation, etc.) through its normal hearing procedures and impose an appropriate academic penalty or sanction if a violation is found.

3. University Community Complainant: If the suspected AIV occurs outside of a specific course, the case will be referred directly to OSRR for an AIB hearing. (The AIV Form is available at <https://osrr.ecu.edu/faculty-staff/>). In the case of a suspected AIV reported directly to OSRR for which an instructor of record can be identified, OSRR will first consult with the faculty member(s) in charge of the course(s) affected. The faculty member will determine whether to pursue the alleged violation against the student in their course. If the faculty member decides to pursue, the procedures of the Initial Meeting and subsequent procedures (as described below) shall be followed. Following this consultation, if the suspected violation(s) is egregious, pervasive, or involves multiple students, OSRR may decide to pursue the alleged AIV(s) and additional academic penalties or sanctions outside of that course by taking the case to the UCAI for an AIB hearing.

4. Graduate Advisor or Director Complainant: If the suspected AIV involves a graduate student and occurs outside of a specific course, the case will be referred to the student's Faculty Advisor who will serve in the role of the faculty member in the steps above and below. In the event that no Faculty Advisor can be identified, the Graduate Program Director will serve in the role of the faculty member in the process described above and below. The Advisor or Director will then follow the procedures of the Initial Meeting and what follows or refer the case to the OSRR, whichever is applicable.

If the suspected academic violation involves a professional school student, the school may have its own panel or board and may have supplemental processes or procedures, and/or additional academic penalties or sanctions, as long as the professional program and its procedures comport with 700.4.1 of the UNC Policy on Minimum Substantive and Procedural Standards for Student Disciplinary Proceedings, as well as Federal, State and Local Law. The Complainant is also required to follow the procedures of this Regulation and report the suspected AIV to OSRR. Also, the professional school's panel does not have the authority to suspend or expel a student from the University; all matters where a suspension or expulsion from the University is recommended shall be referred to OSRR.

C. Formal Departmental Meeting

The Formal Departmental Meeting is designed as the primary formal hearing for Academic Integrity Violations. The Formal Departmental Meeting is not necessary, nor required, if the Respondent waives their right to this Formal Departmental Meeting during the Initial Meeting. A determination as to responsibility and/or assignment of penalty/sanction may be made at, or following, the Formal Departmental Meeting.

The Formal Departmental Meeting shall be held within twenty-four (24) calendar days of the date that the suspected AIV came to the Complainant's attention. The Respondent, Complainant, or the Department Chair (or designee) may request a reasonable postponement of the Formal Departmental Meeting by contacting the other parties, in writing, no fewer than two (2) business days before the scheduled meeting. Any requests for postponement must explain the reason for the request and provide an alternate meeting date and time. The

Department Chair (or designee) will make the final determination of the meeting date and time.

1. Participating Parties and Nonparticipating Observers

The Complainant and the Department Chair (or designee) are required to participate in the Formal Departmental Meeting. The Respondent is strongly encouraged, but not required to participate. If the Respondent does not participate after being properly notified, the matter will be decided on the basis of information gathered by the Complainant or Department Chair. Witnesses with information relevant to the alleged AIV may be invited by the Respondent or Complainant. Character witnesses may not participate in the Meeting, but may submit written statements. The Respondent and the Complainant **The student and the instructor** may each have a nonparticipating observer at the Formal Departmental **Initial** Meeting. The Complainant's **instructor's** nonparticipating observer should be another faculty member from the same department. The Respondent **student** may select a faculty member, parent, or student who is not involved in the suspected AIV, as his/her **their** nonparticipating observer. The observer(s) may attend the Meeting and take careful notes for reference, but they may not actively participate or present information, **this includes verbal or in writing**. The Meeting is closed to the public and no individuals except those described above may attend **unless the student or instructor have received an ADA accommodation through the university or arranged and received permission for an individual to provide language translation to either party**.

2. Meeting Procedures

The Department Chair (or designee) shall ensure an orderly meeting and that both the Complainant and Respondent have the opportunity to present evidence, including but not limited to witness testimony and relevant documents.

C. Student Withdrawal from Course

A student may not withdraw from a course while a suspected AIV is being investigated. The AIV investigation commences once notice of the Initial Meeting or notice of the AIB hearing is sent, whichever comes first. If hand-delivered, then the commencement date is based upon the signed note of receipt.

If a student attempts to withdraw before any hold is placed on the student's academic record, the faculty member or OSRR will inform the registrar that the student is not allowed to withdraw while the AIV investigation progresses and to reinstate them back into the class. Once the AIV process has concluded, if the penalty assigned is an "XF" the student may not receive a W for the course.

D. Outcome of the Formal Departmental **Initial** Meeting

The Department Chair (or designee) **instructor** shall evaluate evidence presented at the Formal Departmental **Initial** Meeting and determine if a preponderance of evidence supports the conclusion that the Respondent **student** is responsible for an AIV. The Department Chair (or designee) **instructor** shall also determine the appropriate academic penalty and/or sanction, in consultation with the Complainant's recommendation. The outcome of the Formal Departmental **Initial** Meeting shall be communicated to the student within ten (10) calendar days of the Meeting. **In certain circumstances there may be a delay in communication of the outcome. The communication regarding the delay will be sent in writing to the student but may not be sent prior to the ten (10) calendar days given for notification of**

the outcome from the instructor The communication may be provided after the ten (10) days have past based on the reason for the delay, which may include protecting the integrity of the investigation related to the AIV. If a determination is made in the absence of the Respondent student because the Respondent student failed to attend the Meeting, the Complainant instructor must complete and submit the Academic Integrity Violation Form (AIV form; available on the OSRR webpage <https://osrr.ecu.edu/faculty-staff/>) to OSRR within twenty-four (24) calendar days from the date of **the initial notice to the student regarding the AIV violation Respondent notification.** The Chair (or designee) instructor can make any of the following determinations and/or assign the following academic penalties:

1. No violation found: ~~The Department Chair (or designee)~~ **The instructor** determines that the evidence fails to indicate that an AIV occurred, and therefore, no penalty will be imposed. The ~~Department Chair~~ **instructor** will notify the student in writing of this decision, and no AIV form will be submitted to the OSRR.

2. Violation found: The ~~Department Chair (or designee)~~ **instructor** determines that the evidence indicates that the Respondent student is responsible for an AIV and that an academic penalty is appropriate. If the Respondent student does not appear for a scheduled meeting, the ~~Department Chair (or designee)~~ **instructor** may make a determination in the Respondent's **student's** absence. ~~The Department Chair shall impose the academic penalty recommended by the Complainant, provided that, however, the penalty is an academic penalty, and~~ **In no case can the Chair instructor issue a sanction of suspension or expulsion.** The ~~Department Chair (or designee)~~ **instructor** shall submit a completed AIV form to OSRR within ten (10) calendar days of the Meeting. If the ~~Department Chair (or designee)~~ **deems the penalty to be disproportionate to the AIV, the Chair will indicate this finding on the AIV Form submitted to OSRR.** Furthermore, if the Complainant or ~~Department Chair (or designee)~~ **instructor** believes the violation is egregious enough to warrant further university action and **an additional sanction, the Department Chair (or designee) to the instructor's sanctions, the instructor** will include such a statement on the AIV Form submitted to OSRR.

~~Possible academic~~ **If OSRR determines that the case warrants additional sanctions, OSRR may assign sanctions in addition to the** penalties, ~~include,~~ **assigned by the instructor. The following** but are ~~not limited to,~~ **possible additional sanctions that may be assigned by OSRR:** written warning, additional work or learning opportunity, ~~reducing the grade on the assignment(s), or reducing the overall course grade.~~

If at any time during the review of the alleged AIV, in the ~~Complainant's~~ **instructor's** discretion, the ~~Complainant~~ **instructor** determines the penalty for the alleged AIV should be something less than a grade reduction (e.g., a warning, some additional work or learning opportunity) then the ~~Complainant~~ **instructor** is required to formally notify the Respondent student and to formally report the decision and imposed ~~academic penalty~~ **educational resolution** to ~~the respective Department Chair (or designee) and~~ OSRR (for its records). If at any point, however, the ~~Complainant~~ **instructor** determines that the AIV warrants a grade reduction or other substantial academic penalty, either as a result of the initial determination and penalty assignment, or as a result of a student failing to complete alternative work or learning opportunities assigned as an initial penalty, the ~~Complainant~~ **instructor** must follow the reporting process to OSRR for its review, support, and coordination.

If the penalty assigned is a failure for the course, OSRR will inform the registrar to record a final grade of "XF" on the Respondent's **student's** transcript to indicate that failure in the course was the result of an AIV. The "X" indicates the matter is related to a responsible finding of AIV. ~~If the Complainant regards the AIV as severe enough to warrant additional sanction~~

~~such as suspension or expulsion, the Department Chair shall indicate this recommendation on the AIV form, and the matter will be referred to OSRR for review. The decision to pursue suspension or expulsion will be made by OSRR.~~

The “X” designation must remain on the student’s transcript for at least one year and will be removed from the official transcript after one year only if the student has completed the academic integrity training module and obtained the approval of the Director of the OSRR. The approval of the Director of the OSRR must be obtained through the submission of a formal written request for removal of the “X” designation. Courses in which a student receives a grade of “XF” are not eligible for grade replacement even if the “X” is removed from the official transcript. All courses for which a student receives an “XF” will be factored into the student’s GPA, even if the “X” is removed from the official transcript and the course is retaken.

If the instructor regards the AIV as severe enough to warrant additional sanction such as suspension or expulsion, they shall indicate this recommendation on the AIV form, and the matter will be referred to OSRR for review. The instructor must have also informed the student of the recommendation of suspension or expulsion in their initial meeting or in their notice of the outcome of the AIV to the student. The decision to pursue suspension or expulsion will be made by OSRR. OSRR may make the determination that the AIV or the student’s prior AI violations warrant a review for suspension and in those cases, notification of suspension or expulsion as a recommended sanction will come from OSRR.

OSRR shall provide written notification to the ~~Respondent~~ **student** of the Department Chair’s decision and the imposed academic penalty within seven (7) calendar days of receiving the AIV form. The written notice shall include a copy of the student’s rights and responsibilities form and inform the ~~Respondent~~ **student** of their right to appeal and the appeal process (described below). In the event that the ~~Respondent~~ **student** involved in the violation is a graduate student or is in a degree program that has additional penalties for or policies regarding AIVs, the OSRR will also submit a copy of the AIV form to the appropriate program administrator.

~~3. Disagreement between Complainant and Department Chair (or designee).~~

~~If there is a disagreement between the Department Chair (or designee) and Complainant regarding responsibility for the violation or academic penalty imposed, the Complainant may appeal the decision to the respective college Dean (or administrative designee) for review. In such cases, all information related to the AIV shall be submitted to the Dean (or designee) for review. The review shall be resolved within fourteen (14) calendar days. If the Dean (or designee) rules in favor of the Department Chair (or designee), that decision will be final. If the Dean (or designee) rules in favor of the Complainant, the AIV process will resume following the procedure to report the AIV to OSRR as outlined in part VI.D.2.~~

E. Provisions for Special Cases

- 1. If an instructor discovers a suspected violation in which the currently enrolled student has used the work of a student either in a different section of the course or has taken a course at a different time, the instructor should follow the procedures for the Initial Meeting and what follows (described in the previous section and below) for the student enrolled in their course. If the other student involved is enrolled in another section of the course or if the student took the class during a different time**

(different semester), then the instructor should submit the AIV Form directly to OSRR for an AIB hearing.

2. If an instructor discovers a suspected violation at a time immediately after the student is no longer within the instructor's course, the instructor should refer the case, including all evidence related to the suspected violation, directly to OSRR for an AIB hearing via the AIV Form. The AIB will review the evidence submitted (e.g., syllabus, any AI statement signed by the student, documents such as the paper and SafeAssign or other software used to find a suspected violation, etc.) through its normal hearing procedures and impose an appropriate academic penalty or sanction if a violation is found.
3. **University Community:** If the suspected AIV occurs outside of a specific course, the case will be referred directly to OSRR for an AIB hearing. (The AIV Form is available at <https://osrr.ecu.edu/faculty-staff/>). In the case of a suspected AIV reported directly to OSRR for which an instructor of record can be identified, OSRR will first consult with the faculty member(s) in charge of the course(s) affected. The faculty member will determine whether to pursue the alleged violation against the student in their course. If the faculty member decides to pursue, the procedures of the Initial Meeting and subsequent procedures (as described below) shall be followed. Following this consultation, if the suspected violation(s) is egregious, pervasive, or involves multiple students, OSRR may decide to pursue the alleged AIV(s) and additional academic penalties or sanctions outside of that course by taking the case to theUCAI for an AIB hearing.
4. **Graduate Advisor or Director** If the suspected AIV involves a graduate student and occurs outside of a specific course, the case will be referred to the student's Faculty Advisor who will serve in the role of the faculty member in the steps above and below. In the event that no Faculty Advisor can be identified, the Graduate Program Director will serve in the role of the faculty member in the process described above and below. The Advisor or Director will then follow the procedures of the Initial Meeting and what follows or refer the case to the OSRR, whichever is applicable.
5. **Professional school student:** If the AIV involves a professional school student, the school may have its own panel or board and may have supplemental processes or procedures, and/or additional academic penalties or sanctions, as long as the professional program and its procedures comport with 700.4.1 of the UNC Policy on Minimum Substantive and Procedural Standards for Student Disciplinary Proceedings, as well as Federal, State and Local Law. The instructor is also required to follow the procedures of this Regulation and report the suspected AIV to OSRR. Also, the professional school's panel does not have the authority to suspend or expel a student from the University; all matters where a suspension or expulsion from the University is recommended shall be referred to OSRR.

4. F. Referral to theUCAI for AIB Review

If a Respondent's student's case is referred for AIB review, OSRR will notify the Respondent student of the referral within seven (7) calendar days of receiving the AIV form. The role of the AIB hearing is to review the entirety of the case, including determination of responsibility, assignment of academic penalty, and additional recommended University sanctions (if applicable). There are threefour situations in which OSRR will refer the case to theUCAI for AIB review:

1. In a case where the recommended sanction includes suspension or expulsion.
2. In a case where the student has prior AIV. If OSRR finds that the **Respondent student** has a prior AIV on file, the case **will may** be referred to the UCAI for an AIB hearing to consider whether additional academic penalties or sanctions are appropriate based on a pattern of behavior and a history of prior AIV findings.
3. In a case where the AIV involves multiple students. OSRR will receive all reports of suspected AIVs involving multiple students (for example, cheating rings). **The instructor will consult with OSRR to determine the best course of action.** Faculty members, students, and community members should, in all cases, report suspected AIVs involving multiple students to OSRR. **In the event that** **If** OSRR receives credible reports of multi-student violations, it reserves the right to refer the case to the UCAI for an AIB hearing.
4. **When an AIV occurs outside a specific course or once the course has concluded; or may involve multiple courses.**

The AIV form, and all records concerning disciplinary actions brought against **Respondent(s) student(s)** for academic infractions, including charges, evidence, transcripts, recordings, summaries, appeals, correspondence, and other related records, shall be kept by the OSRR in compliance with applicable record retention periods, including the retention of records for a period of eight (8) years; in matters where suspension or expulsion is assigned as a sanction, records shall be retained permanently. **In instances where suspension or expulsion are assigned, the student's transcript will be noted for the duration of the suspension and expulsion periods.** Record retention is maintained in compliance with the most recent UNC Records Retention and Disposition Schedule (§12.13) and Federal Code 20 USC 1232g; and is subject to change to remain in compliance with the governing law.

~~E. AIB Hearings (In lieu of Formal Departmental Meeting and for appeals Formal Departmental Meeting)~~

~~As stated above, an AIB Hearing will be convened: (1) as an appeal of the Formal Departmental Meeting; (2) when the alleged AIV occurs outside a specific course; or (3) is egregious enough that it involves possible sanctions of suspension or expulsion. (In addition to Formal Departmental Meeting appeal, examples include, but are not limited to, sanction of suspension or expulsion, cases of repeat AIVs, multi-student AIVs, or suspected violations at the undergraduate level that occur outside of a specific course.)~~

G. AIB Hearings

If an AIB Hearing is convened: In the case of an alleged AIV by a graduate student, at least two of the three faculty members must have graduate faculty status and every attempt should be made to ensure that all three faculty members on the AIB board have graduate faculty status. Further, in these matters, the student members of the board must be graduate students. The AIB will select a chair from among its faculty membership. All members of the AIB may vote on the selection of a chair.

~~All AIB hearings are reviewed de novo (from the beginning), meaning that whether the case originates from a Formal Departmental Meeting or as an AIB hearing, the case will be reviewed in its entirety, including~~ **All AIB hearings will include** a review of all facts and allegations to determine responsibility and the appropriate penalty/sanctions (if applicable).

The Director of the OSRR (or designee) will notify the parties involved of a meeting of the AIB **within ten (10) calendar days of receipt of a case that requires an AIB hearing.** The

Complainant **instructor** (if appropriate), the Respondent **student**, witnesses, Student Advisors, and the five (5) Panel members shall be provided not less than 10 calendar days' notification of the date, time, and place of the AIB meeting. Appropriate waivers of the Family Educational Rights and Privacy Act (FERPA) must be obtained prior to any hearing, in accordance with applicable law. If a grade for the Respondent **student** must be submitted prior to the conclusion of the AIB process, the Complainant **instructor** shall record a grade of incomplete, pending a decision by the AIB.

1. Participating Parties and Nonparticipating Observers

The required participating parties **include all individuals who have relevant information related to** are the **alleged AIV(s), including but not limited to: a student, department chair, instructor, witnesses, Complainant, the Respondent, and the five AIB panel members, witnesses for the Complainant and/or Respondent, and any other person party** called by the AIB Chair **or OSRR; and the five AIB panel members.**

If the Respondent **student** or Complainant **instructor** would like to request the assistance of a Student Advisor, the Respondent **student** or Complainant **instructor** may contact OSRR for assistance. The Director of the OSRR (or designee) is a nonparticipating observer. If the Respondent **student** or Complainant **instructor** (if appropriate) fail to appear without prior approval of the OSRR administrative officer, the AIB will proceed with an absentia hearing.

The student may have a non-participating support person present with them during the hearing. This individual is not allowed to present information or speak on behalf of the student.

Attorneys are not permitted to participate in the AIB unless the Respondent **student** is facing pending criminal charges stemming from the incident in question or if the University is otherwise required by law to allow an attorney to be present. In such situations, the attorney may only advise their client. The attorney is not permitted to actively participate in the AIB, for example, the attorney may not ask questions or present information, except and unless allowing the Respondent's **student's** attorney to participate is otherwise required by law. The Respondent **student** will assume all responsibility for attorney fees.

2. Hearing Procedures

The AIB Chair will give an extensive and detailed summary of the case, present materials relevant to the case, and direct the AIB hearing. Detailed procedures for AIB hearings are available from the OSRR. A determination of whether the Respondent **student** committed the AIV, and a determination of an appropriate sanction/penalty, if applicable, will be made by a simple majority of the AIB. The AIB chair will vote only in the case of a tie. **Detailed procedures for AIB hearings are available from the OSRR.**

The Director of the OSRR (or designee) will serve as administrative officer and is responsible for maintaining accurate and complete records of the proceedings. The hearing will be audio recorded; however, recording quality problems and/or malfunctions will not invalidate or nullify the decision of the AIB.

The recording is for appeal purposes and is the official recording of the hearing and property of ECU.

AIB hearings are closed to the public.

AIB members and staff assigned to perform work related to the hearing shall report any potential procedural irregularities or procedural errors that come to their attention, which may have occurred before or during the hearing, to the Director of OSRR for review by the Senior Vice Chancellor for Academic Affairs (or designee). The Senior Vice Chancellor for Academic Affairs (or designee) shall have the authority to determine whether corrective action, including but not limited to, a new hearing, is necessary to correct such procedural errors. This review does not constitute an appeal, and is a separate, independent review of the hearing procedures.

F. H. Appeals

Appeals to the Initial Meeting decision and/or the AIB decisions are referred to the Academic Integrity Appeals Board (AIAB). During an appeal, the appealing party has the burden of showing either (1) a violation of due process; or (2) a material deviation from Substantive and Procedural Standards adopted by the Board of Governors:

1. **Violation of Due Process.** Due Process requires notice and an opportunity to be heard. A violation of due process means that the appealing party was not provided the required notice or an opportunity to be heard due to specified procedural errors, or errors in interpretation of University policies or regulations, that were so substantial as to effectively deny the **Respondent student** a fair hearing. Reasonable deviations from the procedures set out in this Regulation will not invalidate a decision or proceeding unless the **Respondent student** can show that, but for the deviation or error, there likely would have been a different outcome in the case.
2. **Material Deviation from Substantive and Procedural Standards.** Material Deviation from Substantive and Procedural Standards require that the decision reached be neither arbitrary nor capricious. A material deviation from substantive standards means that there is a lack of information in the record that could support the decision or sanction(s). This does not mean the information presented at the hearing can be re-argued on appeal; rather, it requires showing that no reasonable person could have determined the **Respondent student** was responsible or could have imposed the sanction that was issued, based upon the information in the record. A material deviation from procedural standards means that a lack of information in the record that could support the decision is due to a procedural error that resulted in the proffered evidence or testimony being excluded.

The **Respondent student** must specify in writing (“appeal letter”) which grounds form the basis for the **Respondent’s student’s** appeal. The **Respondent student** must provide factual information to support the appeal and explain what outcome is sought. The **Respondent student** has a right to be assisted in preparing their written **challenge appeal** by a licensed attorney or non-attorney advocate, at the **Respondent’s student’s** expense.

The appeal letter must be dated, signed by the **Respondent student**, and received by OSRR within five (5) calendar days from the date that the written decision on **the outcome and sanctions** is provided to the **Respondent student**, either by hand delivery or by delivery or attempted delivery through e-mail. Appeals should be directed to osrr@ecu.edu; or 364 Wright Building. Failure to deliver the written notice of appeal within this time limit will render the decision of the **Department Chair/AIB final and conclusive instructor**. An extension of time for good cause may be requested within the five day limit, but it is within the discretion of OSRR to grant or deny such requests.

Appeals will be limited to the record of the hearing, including the supporting documents provided by the **Respondent student** and available records (“written record”) within OSRR **and**

the student's written appeal.

In appeals from a ~~Formal Departmental~~ **the Initial** Meeting, the AIRC will review the written record and make a determination as to whether a decision and/or sanction is supported by the evidence and whether the decision or penalty/sanction should be altered; **and if there was a violation of due process or material deviation from substantive and procedural standards. If an appeal hearing is granted it will be referred to the AIAB.** If the AIRC denies the appeal, the decision of the ~~Department Chair~~ **instructor** and any assigned sanctions are effective immediately, and the student will have no further appeal opportunities. ~~The AIRC decision is final.~~

The final decision of the AIRC will be made within **forty-five (45)** calendar days ~~after~~ **of OSRR receiving** the ~~hearing and~~ **report of the AIV. The student** will be ~~shared with the Respondent~~ **notified** in writing **of the outcome of the AIRC's review of the appeal** within ten (10) calendar days of the ~~date the~~ **AIRC's** decision ~~was made~~. The decision will include a brief summary of the information upon which the decision was based.

The AIRC decision is final.

In appeals from a hearing before the AIB where suspension is assigned, the Director of OSRR will compile the written record and provide it to the Senior Vice Chancellor for Academic Affairs (or designee) who will make the final administrative determination. The Vice Chancellor (or designee) will determine whether to impose the sanctions recommended by the AIB, to modify the sanctions recommended by the AIB, to refer the case back to OSRR for a new hearing before a different AIB, or to take other necessary administrative action.

In appeals from a hearing before the AIB where expulsion is recommended, the Director of OSRR will compile the written record and provide it to the Senior Vice Chancellor for Academic Affairs (or designee) who will make the final administrative determination. The Vice Chancellor (or designee) will determine whether to impose the sanctions recommended by the AIB, to modify the sanctions recommended by the AIB, or to refer the case back to OSRR for a new hearing before a different AIB, or to take other necessary administrative action. If the Vice Chancellor (or designee) determines that the student should be expelled from the University, the student has the right to file an appeal by following the process described in Section G below.

The final decision in cases where suspension or expulsion is the sanction will be made within 45 calendar days after the hearing and will be shared with the ~~Respondent~~ **student** in writing within ten (10) calendar days of the date on which the decision was made. The letter will include a brief summary of the information upon which the decision was based and any appeal rights, including the time limits during which to appeal and the permitted grounds for appeal.

Requests for reconsideration based on new information, sufficient to alter a decision and not reasonably available at the time of the decision, should be directed to the original decision-maker. ~~A Complainant~~ **An instructor** or ~~Respondent~~ **student** has one calendar year after the final imposition of sanctions by the University to present new information.

G. Appeal of Expulsion

Should the Senior Vice Chancellor for Academic Affairs (or designee) uphold a recommendation of expulsion, the ~~Respondent~~ **student** has the right to appeal the decision to the East Carolina University Board of Trustees. The ~~Respondent~~ **student** should send a

written appeal by certified or registered mail, return receipt requested, or by another means that provides proof of delivery to the Assistant Secretary to Board within ten (10) calendar days after the notice of the Vice Chancellor's decision is sent to the **Respondent student**. A copy should also be provided to the Office of Student Rights and Responsibilities and the Vice Chancellor for Legal Affairs and University Counsel of East Carolina University. If the appeal is received in a timely manner, the Board of Trustees will establish a schedule for its review. If the **Respondent student** fails to comply with the schedule, the Board of Trustees may dismiss the appeal. The decision of the Board of Trustees is final.

VII. Records

A. Family Educational Rights and Privacy Act of 1974: Academic Conduct case information is recorded and maintained by OSRR in compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA). Generally, information contained in OSRR files that personally identifies a student will not be released without the written and dated consent of the student identified in the record. However, disciplinary records may be shared with third parties to the extent allowed under FERPA. For specific information on FERPA, please contact the Registrar's Office.

B. Maintenance of Records: Academic Conduct records are maintained by the OSRR for at least eight (8) years from the completion of the last sanction imposed. Records of students, who have been suspended or expelled, and of those who have a pending case or have not completed sanctions, are kept indefinitely.

C. UNC Suspension/Expulsion Database: Information about students who are suspended, expelled, or have serious pending cases is entered into a UNC database, where it is stored permanently. All UNC constituent institutions have access to this information.

D. Transcript Notation: Academic Conduct suspensions and expulsions will be permanently marked on the student's transcript **for the duration of the suspension**.

E. Awarding of Degrees: The University does not award degrees solely because a student successfully completed all academic requirements. Violations of this Regulation and/or the Student Code of Conduct, including academic and non-academic violations, may impact the awarding of a degree, and if a student has a disciplinary complaint pending, the awarding of the degree may be delayed until the complaint is resolved, and, if imposed, the sanctions have been completed.

F. Withdrawal: Students with a pending AIV case will not be permitted to withdraw from the University without first resolving the case, or receiving permission from the Director of OSRR to do so.

G. Continual Enrollment: Students with a pending AIV case might be prohibited from future enrollment until the AIV matter is resolved by the University. **In cases where the student withdraws from the University, the AIV case will still be adjudicated.**

VIII. Annual Reports

At the end of each academic year, theUCAI shall prepare a report summarizing its work. This annual report shall be submitted early in the fall semester to the Faculty Senate, the Student Government Association (SGA), and the Academic Council.

IX. Review of the AIV Process

The Faculty Senate will convene the AIV Review Committee every three (3) years. This

committee will assess the effectiveness of the AIV process and related policies and recommend any changes in policy or procedure to the Faculty Senate.

Originally Approved (entire document): Faculty Senate Resolution #83-26, April 1983
East Carolina University Chancellor

Amended:

FS Resolution #83-30 thru #83-34, April 1983 Chancellor

FS Resolution #84-42, January 1985 Chancellor

FS Resolution #87-16, October 1987 Chancellor

FS Resolution #11-36, June 2011 Chancellor

FS Resolution #20-18, June 2021 Chancellor

Faculty Senate Agenda

April 26, 2022

Attachment 2.

FACULTY GOVERNANCE COMMITTEE REPORT

Formal faculty advice on the Academic Computer Use interim regulation

Chair of the Faculty Martínez charged the Distance Education and Learning Technology (DELT) Committee to review the Academic Computer Use Interim regulation this academic year, and to send their feedback to the Faculty Senate office so it could be forwarded to the Faculty Governance Committee for additional comment. Chair Martínez thought feedback from both the DELT Committee and the Faculty Governance Committee would be appropriate, given the issues presented in the regulation. Once the Faculty Governance Committee has added their feedback, the combined advice will be presented as formal faculty advice to the Faculty Senate (under a Faculty Governance Committee report).

As requested, the Faculty Governance Committee has reviewed the university's interim policy on Academic Computer Use, with additions proposed by ITCS.

It shares the [concerns raised by the Distance Education and Learning Technology \(DELT\) Committee](#):

1. Games, which are now a common subject of academic scholarship, should be removed from the list of prohibited apps in 4.9.1.
2. Item 4.9.6, which seems to allow arbitrary, unrestricted surveillance of university employees whenever they use university computers, should be stricken entirely.
3. Item 4.9.5, which prohibits the installation of any software that has not been approved by ITCS, should be stricken entirely. The threat of ransomware is real, but that threat must be balanced against the freedom to experiment, which is essential to the academic enterprise. In its current form, the prohibition in 4.9.5 is too broad to become permanent policy.

In addition, Faculty Governance suggests the following changes:

1. A new item, under General Statement: "1.2.6. ECU will provide a single source of all information technology-related rules and regulations for employees to reference." This is important if we actually want employees to follow the rules.
2. In 2.5, the standard for posting and sending materials is unrealistically high. Instead of guaranteeing that "material must be accurate," employees should be required not to post or send materials that are "deliberately inaccurate" or "known to be inaccurate." This item's requirement to specify a receiver of all materials used, posted, or sent seems unnecessary.
3. In 4.2, the policy needs to clarify that this rule governs what employees can publish on university infrastructure. (As written, the regulation seems also to govern what employees can publish on all platforms -- including privately-owned servers --, which would be an infringement on free speech.)

Additions in **bold** and deletions in **highlight**.

Policy	REG08.05.10
Title	Academic Computer Use
Category	Information Technology
Sub-category	Security and Compliance
Authority	Chancellor
History	ITCS Policy No. 1.600 (supercedes policy dated April 17, 1998); Revised and placed in University Policy Manual April 30, 2018.
Contact	Chief Information Officer, (252) 328-9000 University Student and Employee Computer Use Policy
Related Policies	Regulation on Conflicts of Interest, Commitment, and External Professional Activities for Pay East Carolina University Copyright Regulation
Additional References	Freedom of Expression Regulation

Introduction

1.1. Purpose

To govern the use of university computer systems, which includes hardware, data, software and communication networks.

1.2. General Statement

1.2.1. Freedom of expression and academic freedom are limited to no greater degree in electronic formats than in printed or oral communication. Individual faculty members are entitled to full freedom in research and in the publication of results. Academic freedom includes freedom of artistic expression through electronic means as well as in familiar and traditional media. Intellectual property in electronic form is as fully protected as are those properties in other forms. Individual faculty members are entitled to freedom in the classroom in discussing their subject, including those formats used in virtual spaces and areas where communication is inherent in the teaching and learning process.

1.2.2. The university provides academic access to a functioning system of electronic communication on a nondiscriminatory basis, without regard to the perceived merit of a particular content or subject matter or the views of users. Equality of access is assured without regard to race, gender, nationality, age, religion, disability, or sexual orientation.

1.2.3. The university relies heavily upon its computer information systems to meet operational, financial, educational and informational needs. It is essential that East Carolina University's computer systems, and computer networks, as well as the data they store and process, be operated and maintained in a secure environment and in a responsible manner. It is critical that these systems and machines be protected from misuse and unauthorized access.

1.2.4. This policy applies to university computer systems and refers to hardware, data, software and communications networks associated with these computers. ~~In particular, t~~This policy covers computers ranging from multi-user timesharing systems to single user personal computers, whether stand-alone or connected to the network.

1.2.5. Individual faculty members shall make every effort to show that they are not speaking for the university when they are not. Special care shall be taken in posting or distributing digital material, on a web page or site created and accessed through the university computing system. Individual faculty members must avoid or dispel any inference that the speaker represents the views of the university or of faculty colleagues. Individual faculty members are responsible for following federal, state, University of North Carolina Board of Governors, and university laws and policies.

1.2.6. ECU will provide a single source of all information technology-related rules and regulations for employees to reference.

2. Regulatory Limitations

2.1. The university may monitor access to the equipment and networking structures and systems to ~~insure~~**ensure** the security and operating performance of its systems and networks and to enforce university policies. Monitoring or otherwise accessing individual faculty member's computers to enforce university policies requires specific approval of the Chancellor or the Chancellor's designee.

2.2. The university reserves the right to limit access when federal or state laws or university policies are violated or where university contractual obligations or university operations may be impeded.

2.3. The university may authorize confidential passwords or other secure entry identification; however, employees have no expectation of privacy in the material sent or received by them over the university computing systems or networks. While general content review will not be undertaken, monitoring of this material may occur for the reasons specified above. Again, monitoring or otherwise accessing individual faculty members' computers to enforce university policies requires specific approval of the Chancellor or the Chancellor's designee.

2.4. The university generally does not monitor or restrict material residing on university computers housed within a private domicile or on non-university computers, whether or not such computers are attached or able to connect to campus networks.

2.5. All material prepared and utilized for work purposes and posted to or sent over university computing and other telecommunication equipment, systems or networks must **not** be **deliberately inaccurate** ~~and must correctly identify the creator and receiver of such.~~

3. Permissible Uses

3.1. Faculty members are expected to follow this policy and any related university rules, regulations and procedures for university work produced on computing equipment, systems and networks. Faculty members may access these technologies for personal uses if the following restrictions are followed.

3.1.1. The use is lawful under federal or state law.

3.1.2. The use is not prohibited by Board of Governors, university or institutional policies.

3.1.3. The use does not overload the university computer equipment or systems, or otherwise harm or negatively impact the system's performance.

3.1.4. The use does not result in commercial gain or private profit (other than allowable under university intellectual property policies).

3.1.5. The use does not violate federal or state laws or university policies on copyright and trademark.

3.1.6. The use does not state or imply university sponsorship or endorsement.

3.1.7. The use does not violate state or federal laws or university policies against race or sex discrimination, including sexual harassment.

3.1.8. The use does not involve unauthorized passwords or identifying data that attempts to circumvent system security in any way attempts to gain unauthorized access.

4. Other Computer Usage Guidelines

4.1. Users are to have valid, authorized accounts and may only use those computer resources which are specifically authorized. Users are responsible for taking reasonable precautions to safeguard their own computer account.

4.2. Users who choose to publish home pages on ~~the World Wide Web~~ **university infrastructure** must identify themselves as the author. In addition, they must include a disclaimer that any personal home page content reflects their own views and not necessarily that of the university. Furthermore, any links to other Web resources must be identified.

4.3. Users may not change copy, delete, read or otherwise access files or software owned by other parties without permission of the custodian of the files or the system administrator. Users may not bypass accounting or security mechanisms to circumvent data protection schemes. Users may not attempt to modify software except when intended to be user customized.

4.4. Users shall assume that any software they did not create is copyrighted. They may neither distribute copyrighted proprietary material without the written consent of the copyright holder nor violate copyright or patent laws concerning computer software, documentation or other tangible assets.

4.5. Users must not use the computer systems to violate any rules in the East Carolina University faculty manual, or any local, state or federal laws.

4.6. University policies stated in the faculty manual of which individual faculty members should be aware that may bear on computer use include: Part IV, Section V, External Professional Activities for Pay; Part VII, Section II.G., Copyright Procedures; and Appendix I, East Carolina University Policy on Conflicts of Interest and Commitment.

4.7. North Carolina statutes of which individual faculty members should be aware that may bear on computer use include: 14-190-1, Obscene Literature and Exhibitions; 114-15.1., Denial of Computer Services to an Authorized User and 114-14.1 Department Heads to Report Possible Violations of Criminal Statutes Involving Misuse of State Property to the State Bureau of Investigation.

4.8. United States statutes of which individual faculty members should be aware that indirectly may bear on computer use include Title 18, Section 1030, Fraud and Related Activity in Connection with Computers.

4.9. The following general categories of software are specifically prohibited on all University Information Technology resources unless specifically authorized for university business, academic, or research requirements.

4.9.1. Software used that compromises and impacts the security or integrity of the University network and security controls such as P2P, **games**, hacking tools, password descramblers, network sniffers, and port scanners.

4.9.2. Software that proxies the authority of one user for another, for the purpose of gaining access to systems, applications, or data illegally.

4.9.3. Software which instructs or enables the user to bypass normal security controls.

4.9.4. Any other software specifically identified as prohibited by Information Technology and Computing Services.

4.9.5. Personal software which the University has not permitted or licensed or authorized for university business, academic or research requirements shall not be installed on university-owned computers.

4.9.6 All University-owned equipment is subject to monitoring for compliance.

4.9.105. It is the responsibility of each user of university-owned equipment to ensure that the software installed on their computer is in compliance with all applicable University and IT policies.

Faculty Senate Agenda
April 26, 2022
Attachment 3.

FACULTY GOVERNANCE COMMITTEE REPORT
Proposed revisions to *ECU Faculty Manual* Part VIII., Section I.,
Subsection VIII. Faculty Personnel Files

Additions in **bold** and deletions in ~~strikethrough~~.

VIII. Faculty Personnel Files

- A. ~~Article 7 of Chapter 126~~ of the General Statute of North Carolina **The Human Resources Act, Chapter 126 of the North Carolina General Statutes**, shall govern matters relating to an employee's personnel file, its contents, and permissible access. Current **North Carolina** General Statutes may be requested through the Office of University Counsel (~~formerly, the University Attorney~~) or through ~~references in~~ Joyner Library. **They may also be accessed at the North Carolina General Assembly website.**

Timing of storage and transfer of personnel records vary depending on the specific type of document. Refer to the Records Retention and Disposition Schedule for the Institutions of the University of North Carolina System and ECU Records Management.

~~For questions regarding personnel file, contact~~ **The Faculty Senate Office, the appropriate Academic Affairs Division Vice Chancellor Office, and/or the University Counsel Office can be consulted for more information or clarification related to personnel files.**

B. **Definition and Content**

North Carolina General Statutes § 126-22 defines and lists the type of information that is appropriately contained in a personnel file of a state employee. That statute and status applies to individuals employed by East Carolina University. The provisions for access to records apply to former employees and applicants the same as they apply to present employees. Not all information related to an employee is regularly maintained in an individual's Personnel File. However, all employment-related documentation gathered by ECU, such as information related to an individual's application, selection, promotion, demotion, transfer, leave, salary, contract for employment, benefits, suspension, performance evaluation, disciplinary actions, and termination is maintained in an individual's personnel file.

No material obtained from an anonymous source shall be placed in the personnel file except for data from student opinion surveys. Data from student opinion surveys shall

be submitted by the authorized surveying agent to the faculty member and the unit administrator. As noted in other areas of the *Faculty Manual*, evaluations and other documentation shall not include, refer to, or be based on information the employee (i.e. subject of the evaluation or documentation) has not been provided and given the opportunity to respond to, consistent with due process.

“Personnel File” means any employment-related or personal information gathered by an employer or by the Office of State Human Resources. Employment-related information contained in a personnel file includes information related to an individual’s application, selection, promotion, demotion, transfer, leave, salary, contract for employment, benefits, suspension, performance evaluation, disciplinary actions, and termination. Personal information contained in a personnel file includes an individual’s home address, social security number, medical history, personal financial data, marital status, dependents, and beneficiaries. “Record,” as used in this Part VIII of the *Faculty Manual*, means the personnel information that each employer is required to maintain in accordance with G.S. 126-123.

The Personnel Action Dossier (PAD) and Portfolios for Advancement in title are evaluative documents, employment-related personnel information, and a part of the faculty member’s personnel file. The personnel file is University property and is retained by the University.

Contents of the personnel file are kept in accordance with the Records Retention and Disposition Schedule approved by the Chancellor. Timing of storage and transfer vary depending on the specific type of document. Please refer to the following websites for additional information: [Records Retention and Disposition Schedule for the Institutions of the University of North Carolina System](#) and [ECU Records Management](#).

C. Location Access

a. Privacy of Personnel File

Consistent with North Carolina law, and with the exception of certain information deemed to be open to public inspection under NCGS 126-23(a), the information contained in a personnel file is confidential. Access to personnel file records is limited to individuals in the supervisory chain who are above the employee who is the subject of the records, or persons authorized by the institution to carry out authorized administration functions, for purposes of official University business only. Additionally, the Chancellor, as the head of the institution, may authorize disclosure of personnel file information in order to maintain the level or quality of services provided by ECU or to maintain the integrity of the institution. There are other statutory exceptions that can be found in NCGS 126-24, which provides for additional information about authorizations for personnel file access.

b. Faculty Member Access to their own Personnel File

The contents of a faculty member’s Personnel File are maintained by University officials as required by federal and state laws and regulations, as well as, the policies of The University of North Carolina System office and East Carolina University. The contents of a faculty member’s Personnel File may be maintained by various departments or units based on relevant employment responsibilities and authority. Examples of possible locations throughout the University where employees may find contents of their Personnel File, as well as other personnel related records, are listed below. Not every faculty member will have a file or records/materials in every location. A faculty member

seeking access to personnel related file(s) and records/materials, is encouraged to contact their respective unit administrator, Academic Affairs Division personnel/human resources office, or the Faculty Senate Office. Questions related to legal issues involving personnel files/records should be directed to the Office of University Counsel.

Examples of possible employment-related offices where faculty Personnel Files and/or personnel records/materials may be located, include but are not limited to:

- Primary employment unit (such as department or school)
- Joint appointment unit, if applicable
- College/School Dean's Office or Library Director's Office
- Academic Affairs Division Office and personnel support/administrative section
- ECU Office of Human Resources
- ECU Offices within the Division of Administration and Finance (such as Payroll, Grants Administration, and Financial Services Accounting Office)
- ECU Office for Equity and Diversity (Equal Employment Opportunity office)
- ECU Office of University Counsel
- ECU Office of Internal Audit and Management Advisory Services
- ECU Office of ADA Coordinator
- Faculty Senate Office

Personnel records exist in various locations across campus. Academic Affairs and the Health Sciences divisions will maintain comprehensive lists of locations where files may be found on a website accessible to faculty members. The Faculty Senate office can direct faculty members to the appropriate website.

All records used in the formal evaluation of faculty members should be located in the primary collection of documents that are kept in the department or unit that are part of the personnel file, hereafter referred to as the department/unit personnel file. The unit administrator can inform the faculty member of the location of evaluative material.

An appeal hearing file or an investigative file prepared by the EEO Office or by the Office of University Counsel may include materials such as: filed grievances; appeals of non-reappointment or non-conferral of tenure; complaints filed by or against a faculty member with the ECU EEO Office alleging sexual harassment, discrimination based on race/ethnicity, color, genetic information, national origin, religion, sex (including pregnancy and pregnancy related conditions), sexual orientation, gender identity, age, disability, political affiliation, and veteran status ("Protected Class"), or a violation of the amorous relations policy; and records relating to any disciplinary action against a faculty member.

Information retained in the EEO Office or the University Counsel's Office will remain confidential, but the documents collected and/or created in those offices are usually considered part of an investigative/preparation file and are not considered part of the department/unit personnel file. Disclosure of documents in those files is subject to applicable University policies and state laws. Additionally, in accordance with the relevant University policy and state laws, the University will formally notify the faculty member of any complaint or grievance formally filed against a faculty member and will follow the procedures prescribed for due process. In most cases, documents containing employment related or personal information maintained in the EEO Office or University Counsel's Office will be duplicates of documents in the department/unit personnel file. In all cases, the documents in those files will be available for review by the faculty member, except that the University does not waive rights

and responsibilities to limit disclosure recognized by law, including but not limited to attorney-client communication privilege and attorney work product privilege.

A faculty member may obtain copies of any materials contained in the personnel file subject only to restrictions provided by state law. Faculty members may obtain access to their departmental/unit personnel file by submitting advance notice of at least 4 calendar days to the unit administrator. Documents restricted by North Carolina General Statutes § 126-24(1) will be removed before providing access to the file. The unit administrator must arrange to have office staff available to oversee the review process to ensure the integrity and safekeeping of the records and to assist in making copies of the file, if applicable.

Access to a faculty member's Personnel File by someone other than the faculty member associated with the file is governed by North Carolina Statutes §§126-22, 126-23, and 126-24.

D. Objecting to Content Included in Personnel File

NC General Statute § 126-25 provides guidance related to employees that object to material in their personnel file.

- (a) An employee, former employee, or applicant for employment who objects to material in the employee's file may place in their file a written statement relating to the material the employee considers to be inaccurate or misleading.
- (b) An employee, former employee, or applicant for employment who objects to material in the employee's file because they consider it inaccurate or misleading may seek the removal of such material from the file in accordance with a grievance procedure approved by the State Human Resources Commission. If the agency determines that material in the employee's file is inaccurate or misleading, the agency shall remove or amend the inaccurate material to ensure the file is accurate. Nothing in this subsection shall be construed to permit an employee to appeal the contents of a performance appraisal or written disciplinary action. ((1975, c. 257, s. 1; c. 667, s. 2; 1977, c. 866, s. 11; 1985, c. 638; 2013-382, s. 7.4; 2014-115, s. 55.3(c).)

State law requires that the University permit the public to have access to the following employment related information about each employee:

- name;
- age;
- date of original employment or appointment to state service;
- the terms of any contract by which the employee is employed whether written or oral, past and current, to the extent that the university has the written contract or a record of the oral contract in its possession;
- current position;
- title;
- current salary;
- date and amount of each increase or decrease in salary with the university;
- date and type of each promotion, demotion, transfer, suspension, separation, or other change in position classification with the university;
- date and general description of the reasons for each promotion with the university;
- date and type of each dismissal, suspension, or demotion for disciplinary reasons taken by the university. If the disciplinary action was a dismissal, a copy of the written notice

of the final decision of the Chancellor setting forth the specific acts or omissions that are the basis of the dismissal; and

- the office to which the employee is currently assigned.

To the extent allowed by applicable law (e.g., [Article 7 of Chapter 126](#) of the General Statutes of North Carolina), all other information contained in the personnel file is confidential and shall not be open for inspection and examination except to the following persons:

- (1) The employee, applicant for employment, former employee, or his or her properly authorized agent, who may examine his or her own personnel file in its entirety except for (i) letters of reference solicited prior to employment or (ii) information concerning a medical disability, mental or physical, that a prudent physician would not divulge to a patient. An employee's medical record may be disclosed to a licensed physician designated in writing by the employee;
- (2) The supervisor of the employee;
- (3) A potential state or local government supervisor, during the interview process, only with regard to the performance management documents;
- (4) Members of the General Assembly who may inspect and examine personnel records under the authority of G.S. 120-19;
- (5) A party by authority of a proper court order may inspect and examine a particular confidential portion of a State employee's personnel file; and
- (6) An official of an agency of the federal government, state government, or any political subdivision thereof. Such an official may inspect any personnel records when such inspection is deemed by the department head of the employee whose record is to be inspected or, in the case of an applicant for employment or a former employee, by the department head of the agency in which the record is maintained as necessary and essential to the pursuance of a proper function of said agency; provided, however, that such information shall not be divulged for purposes of assisting in a criminal prosecution, nor for purposes of assisting in a tax investigation; and
- (7) Any person or corporation to which the Chancellor determines release of such information is essential as allowed by [General Statute §126-24](#).

Evaluative materials or summaries thereof prepared by peer committees as part of a regular evaluation system are placed in the department/unit personnel file when signed by a representative of the committee, including official copies of Personnel Action Dossiers for tenure and promotion of tenured and probationary faculty and Portfolios for advancement in title of fixed-term faculty, as outlined in Part X of the ECU Faculty Manual. This includes documentation submitted by faculty members for consideration in the tenure, reappointment, promotion, and advancement in title processes. These documents shall reside in the department/unit personnel file.

No material obtained from an anonymous source shall be placed in the personnel file except for data from student opinion surveys. Data from student opinion surveys shall be submitted by the authorized surveying agent to the faculty member and the unit administrator. Administrators shall not keep secret files.

A faculty member who objects to material in the department/unit personnel file or other employment-related or personal information contained in the personnel file may place in the file a statement relating to the material the faculty member considers to be inaccurate or misleading. This concise statement shall be submitted to the custodian for inclusion as an attachment to the specific document. A faculty member who objects to material in the

personnel file because it is inaccurate or misleading may seek the removal of such material from the personnel file in accordance with Part XII of the *Faculty Manual*.

E. Access

Personnel records may be located at various locations across campus. The personnel offices of Academic Affairs and the Health Sciences divisions will maintain comprehensive lists of locations where files may be found.

Faculty members may obtain access to their departmental/unit personnel file by submitting advance notice of at least 4 calendar days to the unit administrator. Confidential documents, as specified in D.1 (above), will be removed. The faculty member may request the unit administrator's assistance in gathering files from various locations. The unit administrator must make arrangements to have office staff available to oversee the review process to ensure the integrity and safekeeping of the records and to assist in making copies of the file, if applicable. A faculty member may obtain copies of any materials contained in the personnel file subject only to restrictions provided by state law.

E. Disclosure of Confidential Information

Willful disclosure of confidential information or unauthorized access to a personnel file by any person violates state law and university regulations and may result in disciplinary action under university regulations. Any public official, employee, agent, University contractor, student worker, intern, or volunteer who knowingly and willfully permits these violations but ~~does not act to~~ **has not addressed it** ~~them~~ has neglected ~~his or her~~ **their** duties and may also be disciplined in accordance with university regulations.

Faculty Senate Agenda

April 26, 2022

Attachment 4.

FACULTY WELFARE COMMITTEE REPORT

Formal faculty advice on Use of University Property Interim Regulation

The Committee's [previous advice on this regulation](#) was received by the Chancellor with the comment that the proposed changes regarding amplified sound would be too restrictive for many events held on campus. Student Affairs leadership met with the Committee chair, Dr. Pamela Reis, and they discussed changes to that part of the advice that were presented to the full Committee and approved. The portion that was changed from [the original advice](#) appears below (as a clean version):

3.5.12 Amplified Sound

- 3.5.12.1 Amplified Sound, including recorded music, sound checks, microphones, or bull horns is not permitted within 25 feet of classrooms, research facilities, and the libraries.
- 3.5.12.2 All outdoor Amplified Sound event requests must be submitted to and approved by the Central Reservations Office (CRO) or the Chancellor's Office. All events must take place at Central Reservations locations on campus and must follow the CRO processes.

- 3.5.12.3 All outdoor events must comply with applicable local and state noise ordinances.
 - 3.5.12.4 CRO will reference the Approved University Priority Events list for outdoor Amplified Sound event requests. Any requests not included on the Approved University Priority Events list must be approved by the Vice Chancellor for Student Affairs or designee.
 - 3.5.12.5 Outdoor Amplified Sound events with any impacts to parking lots, vehicle traffic, and/or pedestrian / bicycle paths must be coordinated with Environmental Health and Campus Safety, including Parking and Transportation. Any detours or closures must be communicated prior to the event date to the University community.
 - 3.5.12.6 Outdoor Amplified Sound events must comply with the ECU Freedom of Expression regulation (<https://ecu.edu/prr/07/30/06>) which prohibits provoking immediate violence (“fighting words”) or damaging University property.
 - 3.5.12.7 Communication Plans:
 - 3.5.12.7.1 Approved outdoor Amplified Sound events must have their event posted on the 25 Live Large Events calendar.
 - 3.5.12.7.2 Planned outdoor Amplified Sound events from the Approved University Priority Events list must have a communication plan which includes messaging to the campus community regarding any detours or closures as well as the expected time and duration of the event including sound checks.
 - 3.5.12.7.3 This does not include Freedom of Expression activities.
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Faculty Senate Agenda
April 26, 2022
Attachment 5.

DISTANCE EDUCATION AND LEARNING TECHNOLOGY COMMITTEE REPORT

Formal faculty advice on Software and Data Collection Services Acquisition Interim Regulation

Chair Martínez charged the Committee with reviewing the Software and Data Collection Services Acquisition Interim Regulation. The Committee developed questions and invited Zach Loch, Chief Information Officer, and Stephanie Coleman, Vice Chancellor of Administration and Finance, to a meeting to share their feedback and get answers to their questions. Their concerns are below, with answers from Chief Information Officer Loch and Vice Chancellor Coleman appearing in italicized red text.

1. In terms of item 1.2.4 Institutional Data, there was concern about whether this definition of institutional data might conflict with copyright regulations already in effect at ECU, particularly around what counts as “faculty owned” data. Do faculty, in fact, own any of their own teaching and research data or is everything we do considered “institutional data”?
 - a. More specifically, where faculty research is related to teaching (e.g., scholarship of teaching and learning), how do we distinguish institutional data from data related to teacher research?
 - a. *Clarification from data stewards is needed to better understand the boundaries.*
 - b. What if an ECU faculty member is not the Primary Investigator on a research project? Does the data they contribute need to be stored on ECU-approved non-cloud-based services, or do we defer to the institutional policies of the PI?

- a. *We have some instances of non-university-approved file management software (Google Drive, Dropbox, etc.) for research in conjunction with other institutions. Faculty can still access the web versions of the software, but state auditors flagged the automatic syncing of cloud-based file management options as a security risk. Enterprise versions of the software have additional security settings that would address the concerns with automatic syncing.*
- c. Just as students come to ECU having used cloud-based collaboration tools like Google Drive/Docs and often want to continue using these tools, faculty collaborate with colleagues in a host of cloud-based spaces like Google Drive, iCloud, Dropbox, Box, etc. We do not believe that faculty should be prohibited from using these services when they are using them with non-sensitive data.
 - a. *ECU does allow faculty to use the web versions of these cloud-based file management tools, just not the automatic syncing installed version.*
- d. Similarly in some scenarios, students are asked to use pedagogically appropriate tools for class and those tools do not require sensitive data to be entered. In no way would it be possible to have all of these tools reviewed and/or to put agreements in place. Does the current policy prevent the use of these tools and, if so, could the policy be adjusted to be more supportive of innovative teaching and learning practices?
 - a. *This type of software use would still require a review to ensure there are no security issues or concerns (like FERPA, HIPAA, etc.). Some of these tools require students to register and provide information, which is potentially problematic and would need review by other offices on campus.*
- 2. In terms of item 1.2.8 Acquisition, should this be limited to only those products that involve protected data? As stated, it seems to be fairly broad. This links to 2.2 Approvals.
 - a. *Those products still require review, even if it does not involve sensitive data.*
- 3. In terms of 2.6 Administrators, we wondered if there were a link to the “University best practices” mentioned. It was unclear to us what those “best practices” are and how they came to be identified as such.
 - a) *ECU does have ITCS security best practice manuals. One is for all employees, one is for tech support, and one is for administrators. These are usually included in ITCS newsletters. ITCS is open to suggestions for better access to these manuals.*
- 4. In terms of 3.1 Responsibility, it was unclear how a unit head would ensure faculty and staff awareness and/or compliance. Is there a process in place or is it up to the administrator to determine?
 - a) *Unit heads are required to take IT security training when they first step into that role. ECU has data stewards and a data stewardship committee that discusses data access and other topics.*
 - 1. The Committee recommends a formalized process for educating units/department heads on these policies and security issues. A document outlining this process and appropriate contact information should be made public and readily accessible to all unit heads and faculty.
- 5. To align with practices at other large universities within the UNC System, the Committee suggests publishing a list of vetted software that faculty and staff can consult to confirm if software has already moved through the vetting process or is being proposed for adoption.

Policy	REG08.05.11
Title	Software and Data Collection Services Acquisition Regulation
Category	Information Technology
Sub-category	Security and Compliance
Authority	Chancellor
History	Approved to post as an interim PRR on June 25, 2018.
Contact	Chief Information Officer (252) 328-9000, Director of Materials Management (252) 328-6434
Related Policies	ECU Copyright Regulation Data Governance Regulation – Interim Social Media Regulation Family Education Rights and Privacy Act (FERPA or Buckley Amendment)

	Health Insurance Portability and Accountability Act (HIPAA) Privacy Policies Health Insurance Portability and Accountability Act (HIPAA) Security Policies Social Security Numbers (SSN) and Personal Identifying Information (PII) Regulation Delegation of Authority to Sign Contracts - Interim
Additional References	Cloud Guidelines ITCS Technology Assessment Request ITCS Technology Assessment Workflow Cloud Services Administrator Responsibilities Materials Management Guide to Purchasing FERPA Consent Form for Faculty IT Security Risk Acceptance Form

1. Introduction

1.1. Purpose

The purpose of this regulation is to seek good stewardship of the University’s resources by managing cost through standardizing where possible and ensuring flexibility to meet the academic mission. Other purposes are to ensure that resources are used as effectively and efficiently as possible, that data security standards are protecting University data, and that all acquisitions of software are properly vetted and approved, whether on-site, software as a service (SAAS or “cloud”), data collection services, or consulting agreements.

1.2. Definitions

1.2.1. Cloud Services

Cloud services include software or hardware services provided by third parties at remote locations that are not directly controlled by or associated with the University. Other terms that refer to similar services include but are not limited to cloud hosted services, hosted systems, online tools, software as a service, platform as a service, and infrastructure as a service. These include purchased software applications that are hosted at a data center external to ECU and content hosted by external service providers.

1.2.2. Covered Persons

All persons and entities employed by or performing work on behalf of the University, including but not limited to, staff, faculty, student workers, contractors, and volunteers.

1.2.3. Data Stewards

Data Stewards are designated University employees that ensure the Appropriate Use of Institutional Data within their designated areas of administrative responsibility. Data Stewards direct the management of Institutional Data in order to improve its usability, accessibility, and quality. They assist in the development, maintenance, and implementation of data management policies, processes and requirements. Data Stewards are appointed by and delegated authority from the Data Trustees and are responsible for managing defined segments of Institutional data.

1.2.4. Institutional Data

Institutional Data means any information, facts, statistics, data, or records in any medium now existing or existing in the future that are created, acquired, maintained, managed, used, or transmitted by Covered Persons in the course and scope of employment, volunteering, or otherwise on behalf or in furtherance of the mission of the University.

1.2.5. SAAS

Software as a service, sometimes referred to as "on-demand software" supplied by ISVs or "Application-Service-Providers," is a software delivery model in which software and associated data are centrally hosted on the cloud.

1.2.6. Data Collection Services

Data Collection Services is the systematic approach to gathering and measuring information from a variety of sources to get a complete and accurate picture of an area of interest. Data Collection Services enable a person or organization to answer relevant questions, evaluate outcomes and make predictions about future probabilities and trends.

1.2.7. Software

Software is a set of instructions or programs instructing a computer to do specific tasks. Scripts, applications, programs and a set of instructions are all terms often used to describe software.

1.2.8. Acquisition

The term 'acquisition' refers to all the stages from buying, introducing, applying, adopting, adapting, localizing, and developing through to distribution, whether the specific product is purchased or free.

1.3. Prohibition on Software and Cloud Services Use without Approval

The Chief Information Officer and/or their designee is the final approver of all software and cloud services. Data steward approval is required for institutional data storage and/or usage. No software or cloud solution may be used to process or store institutional data without these approvals.

1.4. Applicable Polices, Procedures, Regulations, Federal, State, Local Laws, and Contracts

Use of software and cloud computing services must be in compliance with all University policies and regulations, contracts, and federal, state, and local laws. All University and campus policies, procedures, and guidelines apply to any institutional data, whether the data is stored on University or non-University systems.

2. Requirements

2.1. Reviews

Prior to use, all software, cloud solutions, or data collection services must be reviewed by ITCS for compatibility with existing infrastructure and applications, duplication of existing services, security and

accessibility of the software or services, and risks associated with its use. Software, cloud solutions, or data collection services that use, process, or store University data regulated by federal or state laws or other applicable regulations, such as protected health information, educational records, or credit card information will be subject to more in-depth reviews. The ITCS review process will typically be initiated during the purchasing process. All departments/units and employees are responsible for ensuring that the review process is triggered, whether software or services are acquired via the Requisition/Purchase Order process, on a University ProCard, or downloaded from the web (in the case of “free” tools and services).

2.2. Approvals

Any use, processing, or storage of institutional data in software, cloud solutions, or data collection services is prohibited unless approved by the relevant data stewards and the Chief Information Officer or his/her designee. This applies to software that is locally installed as well as tools that are cloud-based. It applies to purchased tools as well as free software and services.

2.3. Contract Review and Approval

The Department of Materials Management will maintain a preferred contract template which has been vetted by the CIO and the Office of University Counsel for University use (“ECU Hosted Services Contract”). All contracts, terms of agreement, memorandums of understanding, and service level agreements must include the primary components of the ECU Hosted Services Contract. Any exceptions to this requirement (such as any modified wording that is requested by a vendor) must be approved by Materials Management. In some cases, based on the data type (e.g., protected health information), additional agreements (e.g., HIPAA Business Associate Agreements) and contract terms are required. In the case of software that is downloaded from the internet and requires the user to “click through” any agreement(s) at the time of download, the terms of the click through agreement(s) must be reviewed and approved by the official with the appropriate authority according to the *Delegation of Authority to Sign Contracts* regulation.

2.4. Risk Acceptance

In some instances, software, cloud solutions, or data collection services may pose risks that are inconsistent with best practices in technical and information security, or pose other risks which the appropriate data steward(s) or their representative committee(s) do not approve. In situations which the applicable data steward(s)/committee(s) do not initially approve the acquisition and use of a specific tool, the decision is final unless the associated risks are formally reviewed and accepted by the appropriate division Vice Chancellor and/or designee, and the Chief Information Officer. These situations require a signed [IT Security Risk Acceptance Form](#). In all cases, the Risk Acceptance requires the acknowledgement of the appropriate institutional data steward(s), and the written approval of the division Vice Chancellor and/or designee, and the Chief Information Officer.

2.5. Periodic Review

Software, cloud solutions, and data collection services are subject to periodic review by ITCS and/or the applicable data steward(s) during the contract and/or purchasing renewal to determine if there have been changes in the technology that impact data collection, processing, storage, interfaces or the use agreement/contract, and to review whether the vendor has met the contractual service level agreement. Software, cloud solutions, or data collection services that use, process, or store University data regulated by federal or state laws or other applicable regulations, such as protected health information, educational records, or credit card information will be subject to more in-depth reviews. Products/solutions that impact

sensitive or regulated data may need to be reviewed at more frequent intervals, at the discretion of the applicable data steward(s).

2.6. Administrators

Administrators of software or data collection services are required to follow University best practices as published by ITCS for administration and management of software or data collection service systems.

3. Compliance

3.1. Responsibility

Unit/Department heads are responsible for ensuring that their subordinates are aware of the requirement to comply with this Regulation. It is the employee/requestor's responsibility to take privacy and security into consideration when making decisions about when it is, and is not, acceptable to use software, cloud solutions, and data collection services. It is the responsibility of the employee using these services to ensure the use is consistent with all applicable policies, regulations, and rules. Failure to comply may result in disciplinary actions.

Faculty Senate Agenda April 26, 2022 Attachment 6.

DISTANCE EDUCATION AND LEARNING TECHNOLOGY COMMITTEE REPORT Formal faculty advice on the Computer Replacement/Retirement Program

Chair Martínez charged the Committee with reviewing the Computer Replacement/Retirement Program document issued by ITCS. The Committee developed questions and invited Zach Loch, Chief Information Officer, and Stephanie Coleman, Vice Chancellor of Administration and Finance, to a meeting to share their feedback and get answers to their questions. Their concerns are below, followed by answers from Chief Information Officer Loch and Vice Chancellor Coleman appearing in italicized red text.

- 1) In "2. Scope," the text refers to "faculty and non-faculty staff," but these are not the categories that ECU uses more broadly. Does this refer to EHRA teaching and non-teaching faculty and SHRA staff both? Just the former? Does this cover all employees with computers or just some groupings?
- 2) The Committee struggled to understand the logic of "2.1.2 New Employees, and had the following questions."
 - a) Why are depts/colleges charged with purchasing the first computer and then ITCS with replacements? What if the dept/college buys something non-standard that then ITCS will not replace? Having individual units purchase seems to negate the cost-saving suggestions elsewhere in the document regarding centralized purchasing. E.g., in "3. Standardization," it seems that if depts buy computers that are not close enough to standard, then they are not replaced, so again, why are depts in charge of this and paying for it when they might make the "wrong" choice and then have to pay replacements endlessly for that machine?

- b) Should this instead suggest that new positions should receive funding for a computer since later in the document it states the computers follow the positions? That being said, does a computer leave an area when the position is reallocated to another college? And if the college bought the first computer would it stay with the college? What if the computer came in a startup package?
- c) We also need to keep in mind that depts are not equally or equitably resourced, so shifting this purchasing burden to depts may mean that some faculty have less access to effective/new technology; this also means that their students are disadvantaged. A working computer should be the expectation for all faculty regardless of the financial health of their college or dept.
- d) In “2.1.3 Part time ...” the document references “a recycled computer”: where does this computer come from? What is a “recycled computer”? Are these maintained centrally when the computers seem to “belong” to the units that purchased the initial computer, or do they follow the position as it moves? Can the dept. keep that computer in perpetuity? How long are these machines maintained and is it the dept’s responsibility?
- 3) 3.1.1 begins “While standard configurations are no cost to the department, any make and model may be specified,” it is unclear what this means given other ways that cost is addressed in the document; this also seems to contradict 3.1.2, where Apple computers are singled out as not allowed for “non-faculty” (again, that designation is unclear). In terms of 3.1.2, it is unclear where the “extra cost” is funded for non-standard configurations or Apple products.
- 4) 3.1.3 specifies the “four standard ‘no cost to department’ computers” but it’s curious that monitors are not provided with computers. Where do the monitors come from? What does this mean for Apple iMacs, where the standard config involves an all-in-one computer and monitor combination? Does this refer to replacements where the CPU is replaced but not the monitor? How does one get a new monitor if one ages out or ceases to function properly? This seems to put monitors and CPUs on different schedule; does that create issues with warranties?
- 5) 3.1.3.1 indicates that depts “are responsible for out-of-warranty repairs.” Where depts do not have funds, what are faculty to do? Just not have a computer? This suggests that it’s more important for depts to pay for things than for student needs to be met. Faculty should have ready access to temporary machines given how much we rely on up-to-date machines for online/distance learning. This policy seems to create an undue burden on economically stressed units and then on students. Not all departments are resources equally and equitably and this will mean some units get computers and some don’t. Modern laptop computers are essentially unrepairable: battery glued in, RAM soldered in or part of the CPU, anti-tampering sensors. It is usually cheaper to get a new computer than do major repair.
- 6) 3.1.3.2 creates confusion about computers, “ownership,” and movement. If the faculty member has two computers, the second is part of the program until the first fails, at which point the first becomes part of the program but likely has specialized hardware and software so not covered. This seems unnecessarily complicated.
- 7) 4.1.1. indicates “the University provides” but earlier, depts or colleges have been responsible for the first computer. Again, this seems unnecessarily confusing when a more centralized process for the first and subsequent computers is more logical and equitable for faculty. One suggestion was to provide a fixed amount of money to the intended computer user and let them make their own purchases with guidance.
- 8) 4.1.2 suggests that computers are connected to position numbers, but positions are not “owned” by departments, so what happens to the computers assigned to the positions when a person leaves the position/university? Does a new person hired on that position receive an old machine at startup? Does the dept lose that machine? Where does it go, e.g., some centralized storage facility? How is it tracked? Or does it go to the college, where positions are typically “owned”?
- 9) 4.1.4 suggests that computers are placed when they are “end of life” but earlier in the document replacement seems to be related to a 5-year cycle. Is this end of life, end of warranty, or something else? Who makes the decisions about where retired computers go? Again, these processes seem to evidence a confused set of “ownership” and “provenance” on the machines.

- 10) 4.1.5 schedules replacements and notifications in terms of the fiscal year, but most faculty are on 9-month contract and are unemployed during the summer when the fiscal year begins. This process should be adjusted to accommodate faculty contract schedules so that there is no data loss or misplaced equipment. Spring break was suggested as good time to begin this process so that faculty have time to work with the replacement computer and to notice if any data was not transferred from the old machine before that machine is wiped.
- 11) In "6. Asset Management," it is unclear who the "Distributed IT technicians" are and where they are located (and funded). Are these positions funded by ITCS? Does every department have one? Why would the dept track this inventory if the computers are assigned to positions (which do not belong to the dept)? What happens when positions move out of the dept because of retirement or faculty taking different jobs?
- 12) The bulleted list in "7. Images and Standard Software" need to be explained and clarified as they can have multiple meaning, particularly "'least privilege' user logins." This item seems to raise the same questions as much of what's in our *Academic Computer Use* concerns where computer images may disallow certain software; as such, those issues should be addressed as part of managing the standard computer image.
- 13) We would suggest not naming as specific anti-virus product in "9. Information Security Tools" as those may change more regularly than policy documents are updated.
- 14) We suggest that "10. Governance" should include DELT/Faculty Senate specifically for considering major changes/updates to policies that impact faculty.

The Committee met with Zach Loch (title) and Stephanie Coleman, Vice Chancellor for Administration and Finance, and they provided the following answers:

It was clarified that this program applies to all employees who are funded with state funds.

As part of the computer refresh, if an individual gets a new computer, the old one is returned to ITCS. For vacated positions, the old machine is still used and can be held by the department. There is a process to receive a machine back after it has been returned and scrubbed. ECU spends 300-500K annually on replacement machines. There is a different process for new machines depending on if they are for faculty or staff. Clarification is needed to determine whether units are given funds for a new computer when they receive a new position, and that is a question they will explore.

Inventory management is crucial due to the large number of machines and the potential vulnerabilities. Older machines must be upgraded to current operating systems for security and the recent audit revealed a significant number of machines that were untraceable. While these machines are not as valuable as newer machines, attempts have been made to sell them.

It would be much more expensive to allow customization for replacement computers. The timeline for notification and collection of the refresh requests and unit supplements to the standard machines can be difficult to manage due to staffing issues. ITCS found that monitors and docking stations were going unused; monitors also have a longer shelf life. It was noted that some faculty have dual monitors in their set up and if no new monitors will come with new machines, units may run out. There is a small inventory of machines and monitors to be used in the interim (e.g., a machine breaks, in between refreshes). It was noted this could be communicated better to faculty and unit heads.

Concerning out of warranty repairs, ideally, ITCS would replace them according to the refresh schedule; if it falls out of warranty, it is up to the department. This policy came about because some users were using machines past their use of life and it then breaks typically because individuals were unable to get the upgraded machine they wanted.

The refresh schedule is supposed to begin July 1, but it typically begins at the beginning of the fall semester.

Image refers to the baseline for the computer which has the minimum software needed to save significant time. The “least privilege user log-in” refers to granting an individual no more access to a computer than one is required to have and is approved.

It was believed that in this instance, specifically naming Defender, given that this software is used for anti-virus, it is appropriate.

The inclusion of the DELTC and Faculty Senate representatives in IT Governance will be considered.

Computer Replacement/Retirement Program (retrieved from <https://ecu.teamdynamix.com/TDClient/1409/Portal/KB/ArticleDet?ID=67603> on 09/22/2021)

Tags [policy](#) [computers](#) [replacement](#) [faculty-staff](#)

1. Introduction

The computer replacement/retirement program provides faculty and non-faculty staff with one (1) primary computer replacement for devices that are five (5) years old or older. The device will utilize centrally-supported systems including computer patching, active directory, encryption, vulnerability scanning and mobile device management where applicable to ensure the University meets its goals related to computer standards, information security and cost management.

2. Scope

As part of our mission and vision, Information Technology and Computing Services (ITCS) recognizes that technology is an integral part of teaching, learning and administration at ECU. It is our intention to provide the appropriate technology for faculty and non-faculty staff through this program. Eligible departments funded for this program include:

- All central state funds – East (16065) and West (16066)

2.1.1. Auxiliary and Self Support Units

The computer replacement/retirement program excludes funding for non-state funded auxiliaries and self-support units.

2.1.2 New Employees

The hiring department is responsible for purchasing computers for new employees (if they choose to provide a new computer) or providing recycled computers to those employees. ITCS may assist and conduct the purchase for the new employee to get the best pricing for the University. New computers for new employees are not funded by the computer replacement/retirement program. Once the new computer has been provided to the employee by the hiring department; it will subsequently be eligible for replacement within this program.

2.1.3 Part Time, Temporary Faculty, Staff and Students

Part time, temporary faculty, staff and student employees are provided a computer at the expense of the hiring department. It is the hiring department's choice to issue a new computer or a recycled computer. The computer replacement/retirement program does not provide funding to replace computers for these employment types.

3. Standardization

The University currently supports specific makes and models of computers. Departments should consider their business continuity plans when determining the selection of device type. These devices are chosen to allow diversity in brand yet provide enough similarity that adequate support is maintained by ITCS. The standardization of devices decreases cost significantly through bulk purchasing discounts, vendor agreements and resource support. University-owned computers eligible under this program may be replaced with newer computers (based on funding availability) on a 5-year (or older) replacement cycle to minimize service costs and improve productivity and security. After an older computer is replaced, the device is retired following the University computer retirement (decommissioning) guidelines (Section 12).

3.1.1 While standard configurations are no cost to the department, any make and model may be specified. All computer replacement orders beyond the standard configuration require department approval and requires that the department subsidize the cost difference.

3.1.2 Non-faculty requests for Apple equipment require a business justification referencing the necessity of an Apple device to perform job functions. A personal preference for Apple equipment is not a justification.

3.1.3 **Four** standard “no cost to department” computers are specified by ITCS. The device configurations are reviewed by ITCS at least semi-annually. The configuration must be suitable to address the computing needs for office productivity, console application programming and general use. Options include the following:

Standard Devices

1. PC desktop w/o monitor | 5-year warranty
2. PC laptop w/ docking station | 5-year warranty
3. Apple-based desktop w/o monitor | 4-year warranty
4. Apple-based laptop w/ docking station or dongle | 4-year warranty

3.1.3.1 Departments are responsible for any out-of-warranty repairs (required repairs after warranty expiration). This also includes battery replacement after equipment warranty (noted above) has expired.

3.1.3.2 Faculty who have received grant startup funds for a computer shall be excluded from the computer replacement program (except for scenarios where the grant-funded computer is functioning as or in direct support of specialized scientific equipment or utilized by student (UG|GR) research assistants). The grant-funded computer received shall be labeled as the faculty’s primary device and the computer received from the university computer replacement program will be recorded as a secondary device. At the point the granted-funded (primary) computer’s reaches End of Life, the faculty member will be eligible for a computer replacement via the university computer replacement program.

Non-Standard Devices

1. iPads and tablets

3.1.5 The university computer replacement/retirement program does not provide or replace non-standard devices.

4. Distribution

4.1.1. The University provides either one (1) laptop OR one (1) desktop as a primary computer to faculty and non-faculty staff where routine computer use is required by the job description.

4.1.2. Primary computers are assigned to **University position numbers** to aid with facilitation of the computer replacement/retirement program.

4.1.3. Faculty and non-faculty staff who have a computer replaced under this program are required to return the previous primary computer before issuance of the new replacement.

4.1.4. University computers are replaced within the fiscal year they are determined to be end-of-life, provided funding is available.

4.1.5. Faculty and non-faculty staff who have a computer scheduled for replacement are contacted by ITCS at the start of each fiscal year. Device replacement begins fall semester and runs through spring semester.

4.1.6. Faculty and non-faculty staff secondary computers are not eligible for replacement under this program.

5. Special Needs

If additional computers, special peripherals and software are needed, funds are furnished through department or grant funds (as determined by the department). ITCS helps by obtaining quotes from vendors and configuring machines. These computers are not included in the computer replacement/retirement program.

6. Asset Management

All devices received through the computer replacement/retirement program are tracked through the **Central Asset Management System**. Distributed IT technicians are responsible for data entry of all delivered computers into the asset management system. Required information includes:

- Make and model
- Serial number
- Asset inventory number
- Purchase date
- Replacement cycle

- Position number

Distributed IT technicians must also validate at least annually that all computers are accounted for, either visually or through reporting tools.

- Primary user (employee machines)
- Position number (required)
- Physical location
- DOD wipe date, where applicable
- Disposition date, where applicable

The system tracks a device throughout its entire life cycle including initial purchase, current location, current owner, data disposition status and survey status. Departments receiving computers are considered device custodians and are responsible for maintaining an accurate inventory.

As part of each department's **Annual Inventory Assessment**, a computer inventory report is provided to ITCS noting any missing equipment. Each department is given ten (10) days to locate the property. If the department is still unable to locate the property after the 10-day period, the department notes the missing property on the **Missing Equipment Report** and files a police report with the ECU Police Department for investigation. The computer replacement/retirement program does not fund the replacement of missing/lost/stolen equipment.

7. Images & Standard Software

Computer images, at minimum, must comply with the [University Student and Employee Computer Use Regulation \(REG08.05.04\)](#) and include:

- Anti-virus (required on all devices, regardless of operating system)
- Patch management
- Password management (Active Directory)
- Encryption ([Mobile Computing - REG08.05.12](#))
- User-specific login credentials
- "Least privilege" user logins
- NO DEPLOYMENT of standard "factory" images installed by PC providers (Dell, HP, Lenovo, etc.)

ITCS assists with image creation and provides services to ensure adequate protection of our information assets including: Active Directory, password management, patch management, encryption and anti-virus.

8. Software Licensing

Departments are responsible for purchasing, maintaining and ensuring compliance with all software vendors. This includes adherence to the [Software and Data Collection Services Acquisition Regulation \(REG08.05.11\)](#) as well as acquiring all necessary approvals for software use. Several UNC system-wide and University-wide agreements currently provide licenses for essential software. All purchased computers must have appropriate licensing for the installed operating system. Contact ITCS for additional information or visit <https://download.ecu.edu> for available software downloads.

9. Information Security Tools

To protect University information assets, several technologies are available in conjunction with this program. Per [University Student and Employee Computer Use Regulation \(REG08.05.04\)](#), all computers will be equipped with anti-virus protection, meet minimum password standards, be physically secure, maintain security patches and be sufficiently protected for Level 1 and Level 2 data stored on internal memory.

In conjunction with ECU's [Information Security Regulation \(REG08.05.08\)](#), the computer replacement/retirement program requires Microsoft Defender Antivirus, University Central Active Directory services, physical locks, patch management and hard drive encryption wherever practical. Any exceptions must be documented and approved by the

10. Governance

The Chief Information Officer (CIO) or his/her designate coordinates and oversees the computer replacement/retirement program.

The computer replacement/retirement program is reviewed with campus constituents through various committees and other governance bodies.

Distributed IT technicians across the University are responsible for ensuring computer replacement/retirement standards and best practices are followed by employees in their respective areas and also report potential security violations.

11. Definitions

- 11.1 Desktop A personal computer small enough to fit in an individual workspace. Does not have to be capable of storing data.
- 11.2 Laptop A personal computer that is portable. Does not have to be capable of storing data. Includes touch screen and traditional screen tablets and convertible devices capable of running a desktop operating system (i.e., Microsoft Windows, Apple macOS)
- 11.3 End of Life A time period that describes the end of a computer's useful period. For laptops and desktops, this is generally five (5) years past the date of purchase.
- 11.4 Viable Computer A computer is deemed viable if it can be utilized by another department and can still be effectively supported by IT Desktop Technologies Support.
- 11.5 Obsolete Computer Computing hardware is considered obsolete under one or more of the following conditions:
- It no longer provides a "basic level of service."
 - It has exceeded its useful life.
 - It can no longer be effectively supported by the IT Desktop Technologies Support technicians.
 - It is no longer supported by the manufacturer.
 - It no longer runs a current operating systems (related to security and/or licensing).

12. Retirement (Decommissioning)

All departments are required to update the **Asset Management System** whenever a device is taken out of operation. Decommissioning of devices follows standard operating procedures for proper disposal. Computers from the replacement/retirement program are handled by ITCS and all other computers are handled by Materials Management (Surplus) SOP. Department inventories and automated tools are compared to order sheets to ensure computers are decommissioned as quickly as they are purchased.

Computers have a functional life both at the University and in specific business scenarios. The average life cycle of computers at ECU is listed in the **Hardware Life Cycle section** of this document. In general, computers are replaced (when funding is available) in specific locations when the hardware becomes a barrier to the end-user.

Note, for an employee to receive a computer from the replacement/retirement program, the current primary computer **must be returned** to the technician setting up the replacement computer. If an employee is unwilling to return the current primary computer, she/he is NOT eligible to receive the new replacement computer.

12.1 All retired ECU-owned (desktop and laptop) computers that fall under the Computer Refresh Program (i.e., replaced/retired) must be returned to ITCS and inventoried in the ITCS inventory system.

12.2 All inventoried computers are retained by ITCS and stored in a physically secure area for ten (10) business days. During this time frame, the former asset owner may contact ITCS to recover any data files missing from the new computer. After ten (10) business days, retained computers are re-imaged by ITCS and stored until either redistributed or resold.

12.3 University-purchased/licensed software is removed from the computer once the computer is wiped and reimaged and returned to the license pool for reuse. The computer is not to be donated or sold with University-purchased/licensed software to comply with current licensing agreements.

12.4 Repurposing

12.4.1 Computers are the property of the University and are provided as tools to support ECU's mission. Departments interested in pursuing a surplus item should contact the [Surplus Property Office](#). A computer being replaced is evaluated to determine if it is obsolete or if it is useful for re-purposing under the following scenario:

The computer being replaced is running a supported operating system, and the computer is in good condition (or reasonably repairable). ITCS will repurpose the PC (usually by formatting and reimaging the hard drive) and place it back into inventory for reuse.

13. Program Annual Review

The Chief Information Officer or his/her designate will perform an annual review of this policy and will communicate any changes or additions to the appropriate University stakeholders. The replacement/retirement program is updated as necessary to reflect changes in ECU policies, ECU's academic, administrative or technical environments or applicable laws and regulations.

13.1.1 The program may be augmented, but neither supplanted nor diminished by additional policies and standards.

13.1.2 Any changes to this program will be communicated in writing to stakeholders by the CIO including VC's, Deans, and Distributed IT staff.

Faculty Senate Agenda April 26, 2022 Attachment 7.

RESEARCH AND CREATIVE ACTIVITIES COMMITTEE REPORT

Formal faculty advice on Regulation on Reporting and Responding to Allegations of Research Misconduct

The Committee was charged with reviewing a revised version of this regulation (originally titled "Regulation on Research Conduct"), which appears below. The Committee has been made aware concerns that persist in the revised version and members have been meeting with several campus offices to gather more information. These meetings are ongoing, and more work needs to be done before the Committee's formal advice is finalized. The committee will clarify the process for this policy and the intersection with other policies. The full formal faculty advice will be presented at a meeting during the 2022-2023 academic year.

Policy	REG10.45.01
Title	Regulation on Responding to Allegations of Research Misconduct
Category	Research and Graduate Studies
Sub-category	Research Compliance
Authority	Chancellor
History	Effective July 13, 2012. This regulation supersedes and replaces the Interim Regulation on Research Conduct dated July 13, 2012.
Contact	Office of Research Integrity & Compliance Administration (252) 328-9473

Related Policies [UNC Policy Manual 500.7](#)

Additional [National Science Foundation Research Misconduct Regulation 45 CFR 689](#)

References [Public Health Service Research Misconduct Regulation 42 CFR 93](#)

1. Introduction

ECU observes the highest standards of professional conduct and intellectual integrity in all of its scientific and research activities. A climate of intellectual honesty mandates that all scholars have an obligation to conduct research in a manner reflecting these principles and each member of the University community has a responsibility to foster such an environment. This responsibility governs not only the production and dissemination of research and creative activities, but also all applications for funding, reports to funding agencies, teaching, and publication of teaching materials.

ECU's definition of research misconduct, and procedures for investigating and reporting allegations of misconduct, conform to the definitions and regulations of those federal funding agencies which have policies on this subject.

2. Purpose

This statement of policy and procedures is intended to carry out this institution's responsibilities under the Public Health Service (PHS) Policies on Research Misconduct, 42 CFR Part 93 as well as those of other federal sponsors.

3. Scope and Applicability

3.1 This regulation applies to any person paid by, under the control of, an agent of, or affiliated by contract or agreement with the institution at the time of the alleged misconduct. This includes scientists, trainees, technicians and other staff members, students, fellows, guest researchers, or collaborators at ECU. The regulation and associated procedures will normally be followed when an allegation of possible research misconduct is received by the Research Integrity Officer (RIO). Particular circumstances in an individual case may dictate variation from the usual procedures when deemed to be in the best interests of the University or required by relevant federal regulations or agency procedures. Any significant variation from this Policy and associated procedures must be approved in advance by the Vice Chancellor for Research, Engagement and Economic Development (REDE) who also serves as the Deciding Official.

3.2 This regulation applies to all scientific and research activities whether or not the activity is funded.

3.3 This regulation does not apply to authorship or collaboration disputes.

4. Policy Statement

4.1 All employees or individuals associated with ECU as defined in section 3.1 should report observed, suspected, or apparent research misconduct to the Research Integrity Officer. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may contact the Research Integrity Officer to discuss the suspected misconduct informally. If the circumstances described by the individual do not meet the definition of research misconduct, the Research Integrity Officer will refer the individual or allegation to other offices or officials with the responsibility for resolving the issue.

4.2 Allegations of Research Misconduct occurring more than six years prior to submission of the allegations shall not be reviewed under this Policy unless applicable federal regulations require review of such allegations, or the alleged Research Misconduct was not reasonably discoverable at an earlier time, or the Research Misconduct poses a current threat to the health and safety of employees, patients, or research subjects.

5. Definitions

5.1 Allegation means a disclosure of possible research misconduct through any means of communication. The disclosure may be a written or oral statement or other communication made to the RIO.

5.2 Conflict of Interest, as used in this Regulation, means the real or apparent interference of one person's interests with the interests of another person where potential bias may occur due to prior or existing personal or professional relationships.

5.3 Complainant means a person who makes an allegation of research misconduct. There may be more than one Complainant in a given case.

5.4 Evidence means any document, tangible item, or testimony offered or obtained during a research misconduct proceeding that tends to prove or disprove the existence of an alleged fact.

5.5 Research means a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. For the purpose of this Regulation, Research includes all basic, applied, and demonstration research in all academic disciplines to include the arts, basic sciences, liberal arts, applied sciences, social sciences, clinical sciences, the professions, and research involving human subjects or animals.

5.6 Research Misconduct as defined by the federal government means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. Fabrication is making up results and recording or reporting them; falsification is manipulating research materials, equipment or processes or changing or omitting data or results such that the research is not accurately represented in the research record; plagiarism is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

5.7 Respondent means a person or person(s) against whom allegations of research misconduct are made. There may be more than one Respondent in a given case.

5.8 Good faith as applied to a complainant or witness, means having a belief in the truth of one's allegation or testimony that a reasonable person in the same position could have based on the information known to the complainant or witness at the time. An allegation or cooperation with a research misconduct proceeding is not in good faith if made with knowing or reckless disregard for information that would negate the allegation or testimony. Good faith as applied to a committee member means cooperating with the research misconduct proceeding by carrying out the duties assigned impartially for the purpose of helping an institution meet its responsibilities under this definition. A committee member does not act in good faith if his or her other acts or omissions on the committee are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.

5.9 Inquiry means preliminary information gathering and preliminary fact-finding to determine whether an allegation or apparent instance of research misconduct has substance and warrants an investigation.

5.10 Investigation means the formal development of a factual record and the examination of that record leading to a decision not to make a finding of research misconduct or to a recommendation for a finding of research misconduct which may include a recommendation for other appropriate actions, including administrative actions.

5.11 Notice means a written communication served in person, sent by mail or its equivalent, to the last known street address, facsimile number, or e-mail address of the addressee.

5.12 Preponderance of the evidence means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.

5.13 Research Record means the record of data or results that embody the facts resulting from scientific inquiry, including but not limited to, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided to

a federal agency having jurisdiction and authority or an institutional official by a respondent in the course of the research misconduct proceeding. A research record also includes, but is not limited to, grant or contract applications, whether funded or unfunded; grant or contract progress and other reports, laboratory notebooks, notes, correspondence, videos, photographs, X-ray film, slides, biological materials, computer files and printouts, manuscripts and publications, equipment use logs, laboratory procurement records, animal facility records; human and animal subject protocols, consent forms, medical charts, and human subject research files.

5.14 Research Integrity Officer (RIO) is the institutional official responsible for assessing allegations of research misconduct to determine if they fall within the definition of research misconduct, are covered by law, regulation, or research sponsor policy, and warrant an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified. The RIO is also responsible for sequestering research records upon determining criteria for an inquiry are met; overseeing inquiries and investigations; and the other responsibilities outlined in this Regulation. This Regulation provides the RIO with individual authority to direct the sequestration of research records. The university's RIO is the Director of the Office of Research Integrity & Compliance.

5.15 Deciding Official (DO) means the institutional official who makes final determinations on allegations of research misconduct. The Deciding Official will not be the same individual as the Research Integrity Officer and should have no direct prior involvement in the institution's inquiry, investigation, or allegation assessment. A DO's appointment of an individual to assess allegations of research misconduct, or to serve on an inquiry or investigation committee, is not considered to be direct prior involvement. The DO for ECU is the Vice Chancellor for Research, Economic Development, and Engagement (REDE). In the event that the Vice Chancellor for REDE has a conflict of interest in a particular case, the Chancellor shall appoint a designee as the DO for that particular case.

5.16 Retaliation means any adverse action taken against an individual in response to a good faith allegation of research misconduct, or good faith cooperation with research misconduct proceedings of the University.

6. Responsibilities of the Research Integrity Officer

6.1 The RIO will be appointed by the Vice Chancellor for REDE and will have primary responsibility for implementing compliance with this Regulation. These responsibilities include the following as they relate to research misconduct proceedings:

6.1.1 Assess each allegation of research misconduct in accordance with Section 11.1.1 of this Regulation to determine whether it falls within the definition of research misconduct and warrants an inquiry;

6.1.2 Take interim action as necessary, and notify sponsors of special circumstances in accordance with Section 10.6.2 of this Regulation;

6.1.3 Sequester research records and evidence pertinent to the allegation of research misconduct in accordance with Section 11.3. of this Regulation and maintain sequestered records in a secure manner;

6.1.4 Provide confidentiality to those involved in the research misconduct proceeding as required by applicable law and University policy;

6.1.5 Notify the respondent and provide opportunities for him or her to review and respond to allegations, evidence, and committee reports in accordance with Sections 12.2 and 14.2.1 of this Regulation;

6.1.6 Inform respondents, complainants, and witnesses of the procedural steps in the research misconduct proceeding;

6.1.7 Ensure that the Deciding Official appoints the members and chair of the inquiry and investigation committees and there is expertise appropriate to carry out a thorough and authoritative evaluation of the evidence;

6.1.8 Determine whether each person involved in handling an allegation of research misconduct has an unresolved personal, professional, or financial conflict of interest and take appropriate action, including recusal, to ensure that no person with such conflict is involved in the research misconduct proceeding;

6.1.9 In cooperation with other institutional officials, take all reasonable and practical steps to protect or restore the positions and reputations of good faith complainants, witnesses, and committee members and counter potential or actual retaliation against them by respondents or other institutional members;

6.1.10 Keep the Deciding Official and others who need to know apprised of the progress of the review of the allegation of research misconduct;

6.1.11 Notify and make reports to federal agencies as required by applicable law or regulation;

6.1.12 Take appropriate action to notify other involved parties, such as law enforcement agencies, professional societies, and licensing boards of corrective actions;

6.1.13 Maintain records of the research misconduct proceeding and make them available to federal agencies in accordance with Section 14.5 of this Regulation; and

6.1.14 If the research misconduct allegation is made against a Respondent who is a student, notify the Office of Student Rights and Responsibilities (OSSR) prior to the investigation phase (if applicable) and inform the Respondent that such notification will be made.

7. Responsibilities of the Complainant

The Complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with the inquiry and investigation. As a matter of good practice, the complainant should be interviewed at the inquiry stage and be provided the transcript or recording of the interview for correction if needed.

8. Rights and Responsibilities of the Respondent

8.1 The Respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry and investigation. The Respondent is entitled to:

8.1.1 A good faith effort from the RIO to be notified in writing at the time of or before beginning an inquiry;

8.1.2 An opportunity to comment on the inquiry report and have his or her comments attached to the report;

8.1.3 Be notified of the outcome of the inquiry and receive a copy of the inquiry report that includes a copy of, or refers to any applicable regulation of a federal sponsor and this Regulation;

8.1.4 Be notified in writing of the allegations to be investigated within a reasonable time after the determination that an investigation is warranted, but before the investigation begins (usually within thirty (30) calendar days after a decision is made to begin an investigation).

8.1.5 Be notified in writing of any new allegations not addressed in the inquiry or in the initial notice of investigation;

8.1.6 Be interviewed during the investigation, have the opportunity to review and correct, if necessary, the recording or transcript, and have the corrected recording or transcript included in the record of the investigation;

8.1.7 Have any witness interviewed during the investigation who has been reasonably identified by the Respondent as having information on relevant aspects of the investigation, have the recording or transcript provided to the witness for correction, and have the corrected recording or transcript included in the record of investigation; and

8.1.8 Receive a copy of the draft investigation report and, concurrently, a copy of, or supervised access to the evidence on which the report is based, be notified that any comments must be submitted within thirty (30) calendar

days of the date on which the copy was received, and that the comments will be considered by the institution and addressed in the final report.

8.2 The Respondent should be given the opportunity to admit that research misconduct occurred and that he or she committed the research misconduct. With the advice of the RIO, the Deciding Official may terminate the institution's review of an allegation that has been admitted, provided the institution accepts the admission and any proposed settlement is approved by any federal agency having authority and jurisdiction.

9. Responsibilities of the Deciding Official

9.1 The DO will receive the inquiry report and after consulting with the RIO, decide whether an investigation is warranted. Any finding that an investigation is warranted must be made in writing by the DO and, where required by applicable law or regulation, must be provided to any federal agency with authority and jurisdiction, together with a copy of the inquiry report, within thirty (30) calendar days of the finding. If it is found that an investigation is not warranted, the DO and the RIO will ensure that detailed documentation of the inquiry is retained for at least seven (7) years after termination of the inquiry, so that any federal agency with authority and jurisdiction may assess the reasons why the institution decided not to conduct an investigation.

9.2 The DO will receive the investigation report and, after consulting with the RIO, decide the extent to which he or she accepts the findings of the investigation. If research misconduct is found, the DO will refer the matter to the appropriate Vice Chancellor to decide what, if any, institutional administrative actions are appropriate. The DO shall ensure that the final investigation report, the findings of the DO, and a description of any pending or completed administrative actions are provided to any federal agency with jurisdiction and authority as required by law or regulation.

10. General Policies and Principles

10.1 Responsibility to Report Misconduct

10.1.1 All individuals associated with ECU as defined in section 3.1 will report observed, suspected, or apparent research misconduct to the RIO. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may meet with or contact the RIO to discuss the suspected research misconduct informally, which may include discussing it hypothetically. If the circumstances described by the individual do not meet the definition of research misconduct, the RIO will refer the individual or allegation to other offices or officials with responsibility for resolving the issue.

10.1.2 Any individual affiliated with the University may have discussions and consultations about concerns of possible misconduct with the RIO and will be counseled about appropriate procedures for reporting allegations.

10.2 Cooperation with Research Misconduct Proceedings

All individuals associated with ECU as defined in section 3.1 will cooperate with the RIO and other university officials in the review of allegations and the conduct of inquiries and investigations. These individuals, including Respondents, have an obligation to provide evidence relevant to research misconduct allegations to the RIO or other university officials.

10.3 Confidentiality

The RIO shall limit disclosure of the identity of respondents and complainants to those who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding; and except as otherwise prescribed by law, limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding. The RIO should use written confidentiality agreements or other mechanisms to ensure that any person and/or entity receiving information about the case does not make any further disclosure of identifying information.

10.4 Protecting complainants, witnesses, and committee members

Individuals affiliated with ECU as defined in section 3.1 may not retaliate in any way against complainants, witnesses, or committee members. Any alleged or apparent retaliation against complainants, witnesses or committee members should immediately be reported to the RIO, who shall review the matter and make all reasonable and practical efforts to counter any potential or actual retaliation. This includes efforts to protect and restore the position and reputation of the person against whom the retaliation is directed.

10.5 Protecting the Respondent and Use of Legal Counsel

10.5.1 As requested, and as appropriate, the RIO and other institutional officials shall make all reasonable and practical efforts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct is made.

10.5.2 During the research misconduct proceeding, the RIO is responsible for ensuring that Respondents receive all the notices and opportunities required under this Regulation. Respondents may consult with legal counsel or a non-lawyer personal adviser (who is not a principal or witness in the case) to seek advice and may bring the personal advisor or legal counsel to interviews or meetings on the case. The role of the respondent's legal counsel is restricted to advising the respondent(s) and he or she may not act in a representative capacity or otherwise actively participate in interviews, meetings, or hearings.

10.5.3 The University shall provide legal counsel to assist the RIO, DO, inquiry committee, and investigation committee. The role of counsel is to advise and not to act in a representative capacity or otherwise actively participate in interviews, meetings, or hearings; provided, however, University counsel may be present at such interviews, meetings, or hearings, and must be present whenever respondent's legal counsel is present.

10.6 Interim Administrative Actions

10.6.1 Throughout the research misconduct proceeding, the RIO will review the situation to determine if there is any threat of harm to public health, animal health, sponsor funds, equipment, or the integrity of the sponsored research process. In the event of such a threat, the RIO will, in consultation with other institutional officials and any federal agency with jurisdiction and authority, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of equipment or sponsor funds, freezing or limiting access to fund accounts, reassignment of personnel or of the responsibility for the handling of equipment or sponsor funds, additional review of research data and results, or delaying publication.

10.6.2 The RIO shall, in consultation with the DO, at any time during a research misconduct proceeding, notify any federal agency with jurisdiction and authority immediately if he or she has reason to believe that any of the following conditions exist:

10.6.2.1 Health or safety of the public is at risk, including an immediate need to protect human or animal subjects;

10.6.2.2 Federal resources or interests are threatened;

10.6.2.3 Research activities should be suspended;

10.6.2.4 There is a reasonable indication of possible violations of civil or criminal law;

10.6.2.5 Federal action is required to protect the interests of those involved in the research misconduct proceeding;

10.6.2.6 The research misconduct proceeding may be made public prematurely and federal agency action may be necessary to safeguard evidence and protect the rights of those involved; or

10.6.2.7 The research community or public should be informed.

11. Conducting the Assessment and Inquiry

11.1 Assessment of Allegations

11.1.1 Upon receiving an allegation of research misconduct, the RIO will immediately assess the allegation to determine whether it is sufficiently credible and specific so that potential evidence of research misconduct may be identified and whether the allegation falls within the definition of research misconduct. An inquiry must be conducted if these criteria are met.

11.1.2 The assessment period should be brief, concluded within a reasonable time period as warranted by the nature of the allegations, typically within seven (7) to twenty-one (21) calendar days. In conducting the assessment, the RIO need not interview the complainant, respondent, or other witnesses, or gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified. The RIO shall, on or before the date on which the respondent is notified of the allegation, obtain custody of, inventory, copy as warranted, and sequester all research records and evidence needed to conduct the research misconduct proceeding, as provided in paragraph 13.2 of this section.

11.2 Initiation and Purpose of the Inquiry

If the RIO determines that the criteria for an inquiry are met, he or she will immediately initiate the inquiry process. The inquiry process begins with the first meeting of the inquiry committee or individual responsible for conducting the inquiry. The purpose of the inquiry is to conduct an initial review of the available evidence to determine whether to conduct an investigation. An inquiry does not require a full review of all the evidence related to the allegation.

11.3 Notice to Respondent; Sequestration of Research Records

The RIO must make a good faith effort to notify the respondent in writing before beginning the inquiry, if the respondent is known. If the inquiry subsequently identifies additional Respondents, they must be notified in writing as soon as practicable.

11.4 On or before the date on which the Respondent is notified, or the inquiry begins, whichever is earlier, the RIO must take all reasonable and practical steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence and sequester them in a secure manner, except that where the research records or evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. The RIO will provide a receipt of sequestered items to the respondent(s) or other individuals who have information relating to the inquiry. The RIO may consult with any federal agency with jurisdiction and authority for advice and assistance in this regard.

11.5 Appointment of the Inquiry Committee

The DO, in consultation with the RIO and other institutional officials as appropriate, will appoint an inquiry committee and chair, as soon after the RIO has determined that an allegation is sufficiently credible and specific. In some instances, a single individual may be appointed to conduct the inquiry. The individual conducting the inquiry or inquiry committee must consist of individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the inquiry and should include individuals with the appropriate scientific or other relevant expertise to evaluate the evidence and issues related to the allegation, interview the principals and key witnesses, and conduct the inquiry. The respondent will be notified in writing of the proposed committee membership and may object to a proposed member based upon a personal, professional, or financial conflict of interest. Any such objections must be submitted to the RIO no more than five (5) calendar days from the date of the notification. The RIO will make the final determination of whether a conflict exists.

11.6 Charge to the Committee and First Meeting

11.6.1 The RIO will prepare a charge for the inquiry committee that:

11.6.1.1 Sets forth the time for completion of the inquiry;

11.6.1.2 Describes the allegation(s) and any related issues identified during the allegation assessment;

11.6.1.3 States that the purpose of the inquiry is to conduct an initial review of the evidence, including the testimony of the respondent, complainant and key witnesses, to determine whether an investigation is warranted, not to determine whether research misconduct definitely occurred or who was or were responsible;

11.6.1.4 States that an investigation is warranted if the committee determines: (1) there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct; and, (2) the allegation(s) may have substance, based on the committee's review during the inquiry.

11.6.1.5 Informs the inquiry committee that they are responsible for preparing or directing the preparation of a written report of the inquiry that meets the requirements of this Regulation and applicable law or regulation.

11.6.2 At the committee's first meeting, the RIO will review the charge with the committee, discuss the allegations, any related issues, and the appropriate procedures for conducting the inquiry, assist the committee with organizing plans for the inquiry, and answer any questions raised by the committee. The RIO will be present or available throughout the inquiry to advise the committee as needed.

11.7. Inquiry Process

The inquiry committee may interview the complainant, the respondent, and key witnesses as well as examine relevant research records and materials. The inquiry committee will then evaluate the evidence, to include the testimony of any complainants, respondents and key witnesses obtained during the inquiry. After consultation with the RIO, the committee members will decide whether an investigation is warranted based on their preliminary information gathering and fact-finding. The scope of the inquiry is not required to and does not normally include deciding whether misconduct definitely occurred, determining definitely who committed the research misconduct or conducting exhaustive interviews and analyses. However, if a legally sufficient admission of research misconduct is made by the respondent, misconduct may be determined at the inquiry stage if all relevant issues are resolved. In that case, as required by applicable law or regulation, the institution shall promptly consult with any federal agency with jurisdiction and authority, if any, to determine the next steps that should be taken in accordance with Section 15.2.

11.8 Time for Completion

The inquiry, including preparation of the final inquiry report and the decision of the DO on whether an investigation is warranted, must be completed within sixty (60) calendar days of initiation of the inquiry, unless the RIO determines that circumstances clearly warrant a longer period. Initiation of the inquiry begins on the date of the first meeting of the inquiry committee where it receives its charge. If the RIO approves an extension, the inquiry record must include documentation of the reasons for exceeding the 60-calendar day period. The respondent will be notified in writing of the extension.

12. The Inquiry Report

12.1 Elements of the Inquiry Report

12.1.1 A written inquiry report must be prepared that includes the following information: (1) the name and position of the respondent; (2) a description of the allegations of research misconduct; (3) the identification of any sponsor support, including, for example, grant numbers, grant applications, contracts and publications; (4) the basis for recommending or not recommending that the allegations warrant an investigation; (5) any comments on the draft report by the respondent or complainant.

12.1.2 Institutional counsel should review the report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the inquiry committee. The inquiry report should include: the names and titles of the committee members and experts who conducted the inquiry; a summary of the inquiry process used; a list of the research records reviewed; summaries of any interviews; and whether any other actions should be taken if an investigation is not recommended.

12.2 Notification to the Respondent and Opportunity to Comment

12.2.1 The RIO shall notify the respondent whether the inquiry found an investigation to be warranted, include a copy of the draft inquiry report for comment(s) usually within ten (10) calendar days, and include a copy of or refer to this Regulation and any pertinent federal sponsor regulation

12.2.2 Any comments that are submitted by the respondent will be attached to the final inquiry report. Based on the comments, the inquiry committee may revise the draft report as appropriate and prepare it in final form. The committee will deliver the final report to the RIO.

Notification to the Complainant

The RIO may notify the complainant whether the inquiry found an investigation to be warranted.

12.3 Institutional Decision and Notification

12.3.1 Decision by Deciding Official

The RIO will transmit the final inquiry report and any comments to the DO, who will determine in writing whether an investigation is warranted. The inquiry is completed when the DO makes this determination.

12.3.2 Notification to Federal Agencies

Within thirty (30) calendar days of the DO's decision that an investigation is warranted, as required by applicable law or regulation, the RIO will provide any federal agency with authority and jurisdiction with the DO's written decision and a copy of the inquiry report. The RIO will also notify those institutional officials who need to know of the DO's decision. As required by applicable law or regulation, the RIO must provide the following information to such federal agency upon request: (1) the institutional policies and procedures under which the inquiry was conducted; (2) the research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents; and (3) the allegations to be considered in the investigation.

12.3.3 Documentation of Decision Not to Investigate

If the DO decides that an investigation is not warranted, the RIO shall secure and maintain for seven (7) years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment by federal agencies with authority and jurisdiction of the reasons why an investigation was not conducted. These documents must be provided to such agencies upon request.

13. Conducting the Investigation

13.1 Initiation and Purpose

13.1.1 The investigation must begin within thirty (30) calendar days after the determination by the DO that an investigation is warranted. For the purpose of this Regulation, the investigation begins when the investigation committee meets for the first time and is given its charge by the RIO.

13.1.2 The purpose of the investigation is to develop a factual record by exploring the allegations in detail and examining the evidence in depth, leading to recommended findings on whether research misconduct has been

committed, by whom, and to what extent. The investigation will also determine whether there are additional instances of possible research misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where the alleged research misconduct involves clinical trials, potential harm to human subjects, the general public or if it affects research that forms the basis for public policy, clinical practice, or public health practice.

13.1.3 The findings of the investigation must be set forth in an investigation report.

13.2 Notifying Respondent; Sequestration of Research Records

13.2.1 As required by applicable law or regulation, on or before the date on which the investigation begins, the RIO must: (1) notify any federal agency with jurisdiction and authority of the decision to begin the investigation and provide such federal agency a copy of the inquiry report; and (2) notify the respondent in writing of the allegations to be investigated. The RIO must also give the respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of the investigation.

13.2.2 The RIO will, prior to notifying respondent of the allegations, take all reasonable and practical steps to obtain custody of and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceeding that were not previously sequestered during the inquiry. The need for additional sequestration of records for the investigation may occur for any number of reasons, including the University's decision to investigate additional allegations not considered during the inquiry stage or the identification of records during the inquiry process that had not been previously secured. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

13.3. Appointment of the Investigation Committee

13.3.1 The DO, in consultation with the RIO and other institutional officials as appropriate, will appoint an investigation committee and committee chair. The investigation committee must consist of individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the investigation and should include individuals with the appropriate scientific or other relevant expertise to evaluate the evidence and issues related to the allegation, interview the respondent and complainant and conduct the investigation. Individuals appointed to the investigation committee may also have served on the inquiry committee. When necessary to secure the necessary expertise or to avoid conflicts of interest, the DO may select committee members from outside the University.

13.3.2 The respondent will be notified of the proposed committee membership and given an opportunity to object to a proposed member or members based upon a personal, professional, or financial conflict of interest. If so, the respondent must submit objections in writing to the RIO no more than five (5) calendar days from the date of the notification. The RIO will make the final determination of whether a conflict exists.

13.4 Charge to the Committee and First Meeting

13.4.1 The RIO will convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. The investigation committee will be provided with a copy of this Regulation and any applicable federal law or regulation governing the investigation. The RIO will be present or available throughout the investigation to advise the committee as needed.

13.4.2 The RIO will define the subject matter of the investigation in a written charge to the committee that:

13.4.2.1 Describes the allegations and related issues identified during the inquiry;

13.4.2.2 Identifies the respondent(s);

13.4.2.3 Defines research misconduct;

Informs the committee of the following:

13.4.2.4 it must conduct the investigation as prescribed in paragraph 7.5 of this section;

13.4.2.4.1 it must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, research misconduct occurred and, if so, the type and extent of it and who was responsible;

13.4.2.4.2 in order to determine that the respondent committed research misconduct it must find that a preponderance of the evidence establishes that: (1) research misconduct, as defined in this Regulation, occurred (respondent has the burden of proving by a preponderance of the evidence any affirmative defenses raised, including honest error or a difference of opinion); (2) the research misconduct is a significant departure from accepted practices of the relevant research community; and (3) the respondent committed the research misconduct intentionally, knowingly, or recklessly; and

13.4.2.2.4.3 it must prepare or direct the preparation of a written investigation report that meets the requirements of this Regulation and applicable law or regulation.

13.5. Investigation Process

The investigation committee must:

13.5.1 Use diligent efforts to ensure that the investigation is thorough and sufficiently documented, including examination of all research records and evidence relevant to reaching a decision on the merits of each allegation;

13.5.2 Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practical;

13.5.3 Interview each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of the investigation; and

13.5.4 Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continue the investigation to completion.

13.6 Time for Completion

The investigation is to be completed within one-hundred twenty (120) calendar days of beginning it, including conducting the investigation, preparing the report of findings, providing the draft report for comment and, as required by applicable law or regulation, sending the final report to any federal agency with jurisdiction and authority.

13.6.1 If the RIO determines that the investigation will not be completed within this time period, as required by applicable law or regulation, he/she will submit to any federal agency with jurisdiction and authority a written request for an extension, setting forth the reasons for the delay.

13.6.2 The RIO will ensure that periodic progress reports are filed with such agency, if the agency grants the request for an extension and directs the filing of such reports. If no federal agency is involved, any request for extension of time must be approved in writing by the DO and the respondent notified in writing of such approval.

14. The Investigation Report

14.1 Elements of the Investigation Report

The investigation committee and the RIO are responsible for preparing a written draft report of the investigation that:

14.1.1 Describes the nature of the allegation of research misconduct, including identification of the respondent;

14.1.2 Describes and documents any relevant external sponsor support, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing the sponsor support;

14.1.3 Describes the specific allegations of research misconduct considered in the investigation;

14.1.4 Includes the University policies and procedures under which the investigation was conducted;

14.1.5 Identifies and summarizes the research records and evidence reviewed and identifies any evidence taken into custody but not reviewed; and

14.1.6 Includes a statement of findings for each allegation of research misconduct identified during the investigation. Each statement of findings must: (1) identify whether the research misconduct was falsification, fabrication, or plagiarism, and whether it was committed intentionally, knowingly, or recklessly; (2) summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the respondent, including any effort by respondent to establish by a preponderance of the evidence that he or she did not engage in research misconduct because of honest error or a difference of opinion; (3) identify the specific sponsor support; (4) identify whether any publications need correction or retraction; (5) identify the person(s) responsible for the misconduct; and (6) list any current support or known applications or proposals for support that the respondent has pending with any federal agencies.

14.2 Comments on the Draft Report and Access to Evidence

14.2.1 Respondent

The RIO must give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to the evidence on which the report is based. The respondent will be allowed thirty (30) calendar days from the date he/she received the draft report to submit comments to the RIO. The respondent's comments must be included and considered in the final report.

14.2.2 Complainant

On a case-by-case basis, the RIO may provide the complainant a copy of the relevant portions of the draft investigation report for comment. The complainant will be allowed thirty (30) calendar days from the date he/she receives the draft report to submit comments to the RIO. The complainant's comments must be included and considered in the final report. The complainant shall execute in advance a written confidentiality agreement in a form approved by the Office of the University Attorney as a condition for access to the report.

14.2.3 Confidentiality

In distributing the draft report, or portions thereof, to the respondent or complainant, the RIO will inform the recipient of the confidentiality under which the draft report is made available and may establish reasonable conditions to ensure such confidentiality.

14.3 Decision by Deciding Official

14.3.1 The RIO will assist the investigation committee in finalizing the draft investigation report, and ensure that the respondent's and complainant's comments, if applicable, are included and considered. The final investigation report will be transmitted to the DO, who will determine in writing: (1) whether the institution accepts the investigation report, its findings, and the recommended institutional actions; and (2) the appropriate institutional actions in response to the accepted findings of research misconduct.

14.3.2 If the DO's determination varies from the findings of the investigation committee, the DO will, as part of his/her written determination, explain in detail the basis for rendering a decision different from the findings of the

investigation committee. Alternatively, the DO may return the report to the investigation committee with a request for further fact-finding or analysis.

14.3.3 When a final decision on the case has been reached, the RIO will normally notify both the respondent and the complainant in writing. If the finding of research misconduct requires informing ORI, the DO will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which relevant reports may have been published, collaborators of the respondent in the work, or other relevant parties should be notified of the outcome of the case.

14.3.4 The RIO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

14.4 Notice of Institutional Findings and Actions

In accordance with applicable law or regulation, unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation, submit the following to any federal agency with jurisdiction and authority: (1) a copy of the final investigation report with all attachments; (2) a statement of whether the institution accepts the findings of the investigation report; (3) a statement of whether the institution found research misconduct and, if so, who committed the research misconduct; and (4) a description of any pending or completed administrative actions against the respondent.

14.5 Maintaining Records for Review by Federal Agencies

In accordance with applicable law or regulation, the RIO must maintain and provide to any federal agency with jurisdiction and authority upon request records of research misconduct proceedings. Unless custody has been transferred to the federal agency or the federal agency has advised in writing that the records no longer need to be retained, records of research misconduct proceedings must be maintained in a secure manner for seven (7) years after completion of the proceeding or the completion of any federal agency proceeding involving the research misconduct allegation. The RIO is also responsible for providing any information, documentation, research records, evidence or clarification requested by the federal agency to carry out its review of an allegation of research misconduct or of the institution's handling of such an allegation.

15. Completion of Cases; Reporting Premature Closures to Federal Agencies

15.1 Generally, all inquiries and investigations will be carried through to completion and all significant issues will be pursued diligently.

15.2 Pursuant to applicable law or regulation, the RIO must notify any federal agency with jurisdiction and authority in advance if there are plans to close a case at the inquiry or investigation stage on the basis that respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except: (1) closing of a case at the inquiry stage on the basis that an investigation is not warranted; or (2) a finding of no misconduct at the investigation stage, which must be reported to the federal agency, as prescribed in this Regulation.

16. Institutional Administrative Actions

If, the DO determines that research misconduct is substantiated by the findings, he or she will refer the case to the appropriate Vice Chancellor to decide on the appropriate actions to be taken, after consultation with the RIO. Administrative actions may include:

16.1 Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;

16.2. Removal of the responsible person from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction or termination of employment;

16.3 Restitution of funds to the grantor agency as appropriate; and

16.4 Other action appropriate to the research misconduct, including, but not limited to, the imposition of sanctions, up to and including termination from employment.

17. Other Considerations

17.1 Termination, Resignation, or Withdrawal Prior to Completing Inquiry or Investigation

17.1.1 The termination of the respondent's institutional employment or other affiliation with the university, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the research misconduct proceeding or otherwise limit any of the University's responsibilities to investigate the alleged research misconduct.

17.1.2 If the respondent, without admitting to the misconduct, elects to resign his or her position after the University receives an allegation of research misconduct, the assessment of the allegation will proceed, as well as the inquiry and investigation, as appropriate based on the outcome of the preceding steps. If the respondent refuses to participate in the process after resignation, the RIO and any inquiry or investigation committee will use their best efforts to reach a conclusion concerning the allegations, noting in the report the respondent's failure to cooperate and its effect on the evidence.

17.1.3 If the respondent is a student and without admitting to the misconduct, elects to withdraw from the university before or after an allegation of research misconduct has been reported, it will not preclude or terminate the research misconduct proceeding or otherwise limit any of the University's responsibilities to investigate the alleged misconduct.

17.2 Restoration of the Respondent's Reputation

Following a final finding of no research misconduct, including concurrence of any federal agency with jurisdiction and authority, where required by law or regulation, the RIO must undertake reasonable and practical efforts to restore the respondent's reputation. Depending on the particular circumstances and the views of the respondent, the RIO should consider notifying those individuals aware of or involved in the investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of research misconduct was previously publicized, and expunging all reference to the research misconduct allegation from the respondent's personnel file. Any institutional actions to restore the respondent's reputation should first be approved by the DO.

17.3 Protection of the Complainant, Witnesses and Committee Members

During the research misconduct proceeding and upon its completion, regardless of whether the institution determines that research misconduct occurred, the RIO must undertake all reasonable and practical efforts to protect the position and reputation of, or to counter potential or actual retaliation against, any complainant who made allegations of research misconduct in good faith and of any witnesses and committee members who cooperate in good faith with the research misconduct proceeding. The DO will determine, after consulting with the RIO, and with the complainant, witnesses, or committee members, respectively, what steps, if any, are needed to restore their respective positions or reputations or to counter potential or actual retaliation against them. The RIO is responsible for implementing any steps the DO approves.

17.4 Allegations Not Made in Good Faith

If relevant, the DO will determine whether the complainant's allegations of research misconduct were made in good faith, or whether a witness or committee member acted in good faith. If, the DO determines that there was an absence of good faith, he/she will refer the matter to the appropriate Vice Chancellor to determine whether any administrative action should be taken against the person who failed to act in good faith.

Faculty Senate Agenda
April 26, 2022
Attachment 8.

GENERAL EDUCATION AND INSTRUCTIONAL EFFECTIVENESS COMMITTEE REPORT
General Education Learning Outcomes Enhancement Procedure

Procedure for the faculty in the departments and schools that deliver courses in a specific General Education Competency area (Fine Arts, Humanities, Natural Sciences, Social Sciences, Health Related Physical Activity, Mathematics or Written Communication) to recommend to the General Education and Instructional Effectiveness committee revisions to one or more of the General Education Program Learning Outcomes in their area. The revisions recommended will be based on information gained during the delivery or assessment of the area's General Education courses. The revisions aim to improve the implementation of the area's goals that are contained in the Competency Area Rational and the General Education Vision Statement.

- 1) **Committee formation-** The full-time faculty in the departments and schools with courses in a General Education area may initiate a request for revisions to their area outcomes by identifying faculty members to serve on a "General Education Outcomes Enhancement Committee" ("the committee"). The procedure for appointment to the committee is at the discretion of each department or school.

The committee shall contain at least one full-time faculty member from each department or school, and may contain a faculty member to represent each significant sub-area of the department or school (for example, the faculty in Theater and Dance may choose to have a representative from each). Determining which sub-areas will have members on the committee is at the discretion of the department or school.

Whether any changes to outcomes are recommended after the committee reviews the information obtained during the delivery or assessment of General Education courses is determined on a case-by-case basis. The existence of this procedure does not assume that when a committee is formed, changes must be made to learning outcomes.

- 2) **Committee votes to recommend or not recommend changes-** If the committee, by majority vote of its members, recommends revisions to learning outcomes, these recommendations will be forwarded to the faculty of each department and school represented on the committee (each department and school offering General Education courses in the area), through the department's or school's chair or director.
- 3) **Review of the committee's recommendations-** Upon meeting to review the committee's recommendation, faculty of each department and school involved may vote to recommend to the committee that it amend its recommendation.

- a. If the committee does not vote to accept the suggested amendment, its original recommendation is returned to the department or school for reconsideration.
 - b. If the committee amends its original recommendation, the amended recommendation is forwarded to all involved departments and schools for consideration. The process may be repeated until a majority of the faculty in each involved department and school votes in favor of the recommendation, or terminates due to lack of support for the recommendation by a majority of the voting faculty in all involved departments and schools.
- 4) **Recommendations returned to GEIEC-** If a recommendation for changes to the area learning outcomes is accepted by a majority vote of the full-time faculty members in each department and school, the committee chair will forward the committee's recommendation to the GEIEC, along with a document signed by each chair or director of each department or school involved, verifying the vote on the recommendation.
- a. In addition, the committee will forward to the GEIEC a document providing a justification of the recommended changes that provides support for the changes by citing information gained from the delivery or assessment of its General Education courses.
 - b. If a majority of the members of the GEIEC vote in favor of the recommendation, the recommendation will be forwarded to the Faculty Senate for its approval. If approved by the Faculty Senate, the recommendation will be forwarded to the chancellor for approval.

Faculty Senate Agenda
April 26, 2022
Attachment 9.

REVISED

COMMITTEE ON COMMITTEES REPORT

Second reading of proposed revision to the charges of 14 University Standing Academic Committees

Due to the impending changes to the reporting structure and the dissolution of the positions of the Vice Chancellor for Health Sciences and the Vice Chancellor for Research, Economic Development and Engagement, the charges of University Standing Academic Committees that contained representatives for those offices require revision. The Committee on Committees voted to approve language for those revisions.

Committees with charges that have both the Vice Chancellor for Health Sciences and the Vice Chancellor for Research, Economic Development and Engagement (or their designees) as ex-officio will be revised to read "3 Provost appointed representatives, 1 with academic or administrative expertise in Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development." The affected committees are Academic Awards, Educational Policies and Planning, Faculty Governance, Research and Creative Activities, Service-Learning, Unit Code Screening, and University Budget.

Committees with charges that have the Vice Chancellor for Health Sciences (or their designee) as ex-officio will be revised to read "2 Provost appointed representatives, 1 with academic or administrative expertise in Health Sciences disciplines." The affected committees are Distance Education and

Learning Technology, Faculty Welfare, General Education and Instructional Effectiveness, Teaching Grants, Undergraduate Curriculum, University Environment, and Writing Across the Curriculum.

Additionally, between the first and second reading of these charges, the following additional changes have been proposed:

- Removal of the restriction to one fixed-term faculty in the regular membership of University Budget Committee and University Environment Committee. The restrictions were put in place due to an inaccurate reading of a restriction in the By-Laws.
- Edits to the proposed Educational Policies and Planning Committee charge. The original proposal was:
"Ex-officio members (with vote): The Chancellor or an appointed representative; ~~the 3~~ Provost ~~or an~~ appointed representative, **s, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development;** ~~or an appointed representative, the Vice Chancellor for Research, Economic Development and Engagement or an appointed representative,~~ the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association."

And the revised version is:

"Ex-officio members (with vote): The Chancellor or an appointed representative; the Provost or an appointed representative; the **Associate Provost for Institutional Planning, Assessment and Research** ~~Vice Chancellor for Health Sciences~~ or an appointed representative; the **Dean of the Graduate School** ~~Vice Chancellor for Research, Economic Development and Engagement~~ or an appointed representative; the Chair of the Faculty **or an appointed representative**; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association. **The Chair of the Faculty should, to the extent possible, ensure faculty representation from both the east and west campuses.**"

The individual charge revisions appear as follows:

Additions in **bold** and deletions in ~~strikethrough~~.

East Carolina University Faculty Senate
ACADEMIC AWARDS COMMITTEE CHARGE
Faculty Senate Resolution #11-71, October 2011

1. Name: Academic Awards Committee
2. Membership:
8 elected faculty members.
Ex-officio members (with vote): The Chancellor or an appointed representative; ~~the 3~~ Provost ~~or an~~ appointed representative, **s, 1 with academic or administrative expertise in, the Vice Chancellor for Health Sciences disciplines and 1 with academic or administrative expertise in Research, Engagement and Economic Development;** ~~or an appointed representative, the Vice Chancellor for Research, Economic Development and Engagement or an appointed representative,~~ the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee recommends, when required, policies and procedures governing the granting of awards for meritorious teaching and advising, research, and service.
 - B. The committee recommends candidates for receipt of awards in the various categories including, but not limited to, the University Alumni Association Awards for Outstanding Teaching, Lifetime and Five-year Achievement University Research/Creative Activity Awards, Board of Governors Award for Excellence in Teaching, Board of Governors Distinguished Professor for Teaching Award, Max Ray Joyner Award for Excellence in Teaching Through Distance Education, and Scholarship of Engagement Award.
5. To Whom The Committee Reports:
The committee recommends to the Faculty Senate policies and procedures governing awards in the various categories. The committee recommends candidates for awards to the appropriate issuing body.
6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
The committee is empowered to recommend candidates for awards. The committee should consider the diversity of nominees and should seek and recommend qualified women and minority faculty.
8. Standard Meeting Time:
The committee meeting time is scheduled for the first Thursday of each month.

East Carolina University Faculty Senate
DISTANCE EDUCATION AND LEARNING TECHNOLOGY
COMMITTEE CHARGE

Faculty Senate Resolution #20-80, January 2021

-
- 1. Name: Distance Education and Learning Technology Committee
- 2. Membership:
9 elected faculty members.

Ex-officio members (with vote): The Chancellor or an appointed representative; the 2 Provost or an appointed representative, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines or an appointed representative; the Chair of the Faculty; one Faculty Senator selected by the Chair of the Faculty; one member of the Graduate Council selected by the Dean of the Graduate School; the Director of Digital Learning or an appointed representative; and one student member from the Student Government Association.

Ex-officio members (without vote): The Chief Information Officer or an appointed representative.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint subcommittees as needed.

3. Quorum: 5 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee reviews and recommends policies and procedures to enhance faculty teaching and student learning in distance education. The committee provides faculty advice on instructional methods and best practices to enhance teaching and student learning in distance education and the use of learning technologies.
 - B. The committee reviews policies from the Office of Continuing Studies relevant to the effectiveness of the University's distance education policies and procedures and recommends changes as necessary.
 - C. The committee ensures timely, informed faculty opinion on any technology action in any area that may affect significantly the University's academic mission. The committee recommends policy related to the academic use of technology. All information technology actions that affect more than one academic unit or that are initiated above the academic College or School department levels are recognized as actions that may affect significantly the University's academic mission.
 - D. The committee initiates, reviews, and makes recommendations on proposals to plan, implement, revise or eliminate technology initiatives, goals, standards, policies, procedures or actions that significantly impact the University's academic mission.
 - E. The committee prepares and makes available a format for proposals requesting permission to plan, implement, revise or eliminate an information technology initiative, goal, standards, policy, procedure or action.
 - F. The Committee reviews at least annually those sections within the *University Undergraduate Catalog* and *University Graduate Catalog* that corresponds to the Committee's charge and recommends changes as necessary.
 - G. The Committee reviews at least annually those policies within Part VI, Section III of the *ECU Faculty Manual* that corresponds to the Committee's charge and recommends changes as necessary.
 - H. The Committee reviews at least annually the Distance Education Modules and the Instructional Continuity and Contingency website.
 - I. Two appointed representatives serve as ex-officio members on the administrative Information Resources Coordinating Council (IRCC), one appointed representative serves on the administrative Copyright Committee and one appointed representative serves on the administrative IT Accessibility Committee. The Committee should have representation on any advisory or governance committee that evaluates or makes decisions regarding information technology that impacts the academic mission of more than one unit.
 - J. The chair serves as a liaison between the Faculty Senate and Chief Information Officer and/or other university leadership (e.g., college leadership, Provost) involved with planning or implementing technology that could impact the academic mission of more than one departmental unit.
5. To Whom The Committee Reports:

The committee reports to the Faculty Senate its recommendations of policies, procedures, and criteria cited in 4. above.

6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
The committee is empowered to advise the appropriate personnel as described in 4. above.
8. Standard Meeting Time:
The committee meeting time is scheduled for the fourth Wednesday of each month.

East Carolina University Faculty Senate
EDUCATIONAL POLICIES AND PLANNING COMMITTEE CHARGE

Faculty Senate Resolution #15-34, March 2015

1. Name: Educational Policies and Planning Committee
2. Membership:
8 elected tenured faculty members.
Ex-officio members (with vote): The Chancellor or an appointed representative; the Provost or an appointed representative; the **Associate Provost for Institutional Planning, Assessment and Research** Vice Chancellor for Health Sciences or an appointed representative; the **Dean of the Graduate School** Vice Chancellor for Research, Economic Development and Engagement or an appointed representative; the Chair of the Faculty **or an appointed representative**; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association. **The Chair of the Faculty Should, to the extent possible, ensure faculty representation from both the east and west campuses.**

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee considers the adequacy, balance, and excellence of all of the University's undergraduate and graduate programs relative to accepted academic standards. This consideration shall cover the undergraduate and graduate programs as problems or concerns arise.
 - B. The committee advises the Chancellor on the educational policies and organizations, goals, standards, and procedures of the University following such consideration, as outlined in Section 4.A., or as requested otherwise by the Chancellor or the Faculty Senate.
 - C. The committee reviews information concerning proposals for all new curricula, programs, and academic policies, or for revisions in all existing policies, prior to the implementation of such proposals in the long-range planning of academic programs in

the College of Arts and Sciences, the various professional schools, the Graduate School, and the Division of Continuing Studies. The Committee uses information regarding university academic standards and resources as the basis for its reviews. The committee reviews Seven Year Unit Program Evaluations (*ECU Faculty Manual, Part IV*, Section III) and unit responses to same, and provides written reports to the unit reviewed and Office of Academic Programs.

- D. The committee acts upon requests for permission to plan and establish all new degree programs and requests for permission to establish new minors. The committee shall use information regarding university academic standards and resources as the basis for its review.
- E. The committee advises the Chancellor of action to be taken if the University experiences financial exigency, or in the event that a major curtailment of an existing teaching, research, or public service program is considered (*ECU Faculty Manual, Part IX*, Section I. Tenure and Promotion Policies and Procedures).
- F. The Committee reviews at least annually those sections within the *University Undergraduate Catalog* and *University Graduate Catalog* that correspond to the Committee's charge and recommends changes as necessary.

- G. The chair or appointed representative serves as ex-officio member on the University Online Quality Council.

5. To Whom The Committee Reports:

The committee advises the Chancellor through their report to the Faculty Senate as described in 4.B. above. The committee reports to the Faculty Senate concerning requests it has received from the Chancellor. The committee reports to the Faculty Senate the action it has taken on requests for permission to plan and establish new degree programs and requests for permission to establish new minors.

6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.

7. Power Of The Committee To Act Without Faculty Senate Approval:

The committee is empowered to advise the Chancellor as described in 4.B above.

8. Standard Meeting Time:

The committee meeting time is scheduled for the second Friday of each month.

East Carolina University Faculty Senate
FACULTY GOVERNANCE COMMITTEE CHARGE

Faculty Senate Resolution #12-25, February 2012

Editorially revised November 2012 to correlate with ECU Faculty Manual

1. Name: Faculty Governance Committee

2. Membership:
8 elected tenured faculty members.

Ex-officio members (with vote): The Chancellor or an appointed representative; **the 3 Provost or an appointed representatives, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development;** ~~or an appointed representative, the Vice Chancellor for Research and Graduate Studies or an appointed representative,~~ the Chair of the Faculty; and one faculty senator selected by the Chair of the Faculty.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.

4. Committee Responsibilities:

- A. The committee considers matters relating to [Part II](#), Section II. Faculty Constitution and By-Laws, where there is no conflict with the functions of the Committee on Committees.
- B. The committee considers matters relating to [Part VIII](#), Section I. Personnel Policies and Procedures for the Faculty of ECU, [Part IV](#) Academic Units, Codes, and Seven Year Unit Program Evaluation, and other governance documents not specified in other committee charges.
- C. The committee considers policies and procedures related to initial faculty appointment, tenure, promotion in rank, merit, (see [Part IX](#), Section I. Tenure Policies and Regulations of ECU), and other such matters as may pertain to the general well-being of the faculty, e.g. sexual harassment policy.
- D. The committee advises the Chair of the Faculty regarding the contents of the Faculty Manual.
- E. The committee sets guidelines for, and considers matters relating to, unit organization and the development of unit codes.
- F. The committee shall review personnel policies and procedures ([Part VIII](#), Section I. and [Part IX](#), Section I.). This process shall occur every five years.

5. To Whom The Committee Reports:

The committee recommends to the Faculty Senate revisions to [Part II](#), Section II. Faculty Constitution and By-Laws, [Part VIII](#), Section I. Personnel Policies and Procedures for the Faculty of ECU, [Part IX](#), Section I. Tenure Policies and Regulations of ECU, and [Part IV](#) Academic Units, Codes, and Seven Year Unit Program Evaluation. The committee makes recommendations concerning unit organization to the Faculty Senate. The committee makes its recommendations on policies concerning initial faculty appointment, tenure, promotion, and merit to the Faculty Senate.

6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.

7. Power Of The Committee To Act Without Faculty Senate Approval:
The committee is empowered to advise the Chair of the Faculty regarding the contents of the *ECU Faculty Manual*.
8. Standard Meeting Time:
The committee meeting time is scheduled for the 2nd Wednesday of each month.

<p>East Carolina University Faculty Senate FACULTY WELFARE COMMITTEE CHARGE <i>Faculty Senate Resolution #18-40, May 2018</i></p>
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1. Name: Faculty Welfare Committee
2. Membership:
8 elected faculty members.
Ex-officio members (with vote): The Chancellor or an appointed representative; the 2 Provost or an appointed representatives, **1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines** or an appointed representative; the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.
3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee considers programs and policies relating to insurance, annuities, leaves of absence, and all other programs and policies that affect the general welfare of the faculty or of specific faculty members.
 - B. The committee reviews policies related to faculty salaries and fringe benefits and reports annually to the Faculty Senate on these topics.
 - C. The committee recommends new programs and policies related to faculty welfare and revisions to existing ones.
5. To Whom The Committee Reports:
The committee recommends new programs and policies related to faculty welfare, or revisions to existing ones, to the Faculty Senate.
6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
None

8. Standard Meeting Time:
The committee meeting time is scheduled for the second Thursday of each month.

East Carolina University Faculty Senate
**GENERAL EDUCATION AND INSTRUCTIONAL EFFECTIVENESS
COMMITTEE CHARGE**

Faculty Senate Resolution #20-60, November 2020

1. Name: General Education and Instructional Effectiveness
2. Membership: 8 elected faculty members. Ex-officio members (with vote): The Chancellor or an appointed representative; **the 2 Provost or an appointed representative, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines or an appointed representative;** the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association. The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.
3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee recommends policies to improve and advance faculty teaching and student learning.
 - B. The committee promotes teaching excellence and recommends means to identify faculty teaching success, including development of peer review instruments for teaching face-to-face and distance education courses. The committee assists units requesting aid in developing teaching evaluation instruments for personnel decisions. The committee recommends policies and programs to improve the physical environment in which teaching occurs. The committee provides a forum for faculty opinion concerning the design of new academic buildings and renovation of existing academic buildings.
 - C. The committee makes recommendations regarding proposed changes, including individual courses, in the general education and diversity curriculum. The committee makes recommendations to the Faculty Senate regarding proposed changes in the general education and diversity requirements.*
 - D. The committee periodically reviews existing General Education and Diversity course offerings and recommends, as appropriate, changes to course General Education and Diversity status in order to ensure that the Student Learning Outcomes for the General Education and Diversity curriculum are being met.
 - E. The committee reviews the annual report of the Director of the Writing Across the Curriculum Program and the Dean of The Honors College.
 - F. The committee reviews honors seminar proposals for general education credit, diversity credit, or both.
 - G. The chair or appointed representative serves as an ex-officio member of the University Athletics Committee and Honors College Faculty Advisory Committee.
 - H. The Committee reviews at least annually those sections within the University Undergraduate Catalog and University Graduate Catalog that correspond to the Committee's charge and recommends changes as necessary.
5. To Whom The Committee Reports:

The committee reports to the Faculty Senate its recommendations of policies, procedures, and criteria cited above. The committee recommends curricular changes in the general education and diversity curriculum to the Faculty Senate.
6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.

7. Power Of The Committee To Act Without Faculty Senate Approval:

None

8. Standard Meeting Time:

The committee meeting time is scheduled for the third Monday of each month.

East Carolina University Faculty Senate
RESEARCH/CREATIVE ACTIVITIES COMMITTEE CHARGE

Faculty Senate Resolution #12-97, November 2012

1. Name: Research/Creative Activities Committee

2. Membership:

14 elected faculty members.

Ex-officio members (with vote): The Chancellor or an appointed representative, **the 3 Provost or an appointed representative, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines or an appointed representative, 1 with academic or administrative expertise in Research, Engagement, and Economic Development the Vice Chancellor for Research, Economic Development and Engagement or an appointed representative;** the Chair of the Faculty and one faculty senator selected by the Chair of the Faculty.

The membership of the committee shall serve according to their disciplinary expertise. This would include six members from the College of Arts and Sciences, with at least two each from Humanities, Social Sciences, and the Sciences/Math, and eight members from the Professional Schools and other academic units, with no more than two from each professional school. Each member shall have demonstrated accomplishment in research, and/or creative activity.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 8 elected members exclusive of ex-officio.

4. Committee Responsibilities:

A. The committee considers matters related to the scholarly activity of the University, including at least the following:

1. Activities to improve and promote professional scholarly productivity of faculty members;
2. Procedures and policies governing research and/or creative activities;
3. Any proposed changes in existing policies affecting research and creative activities of faculty members of the University.

B. The committee recommends the funding of meritorious internal research/creative activity proposals for the research/creative activity awards program.

1. Provided that funding is expected to be available, the committee shall solicit proposals for research/creative activities from eligible faculty.
 2. The committee shall recommend the funding of meritorious internal research/creative activity proposals.
 3. Each year, the committee shall collect and review reports of research/creative activity from any award recipients from the previous year.
 4. Members of the committee are not permitted to submit proposals.
5. **To Whom The Committee Reports:**
The committee reports its recommendations from these considerations to either the Faculty Senate or the appropriately charged university standing committee.
- The committee reports its recommendations of research/creative activity grant proposals to be funded to the vice chancellor for research and graduate studies and reports the final list of funded proposals to the Faculty Senate. The committee makes recommendations concerning the policies and procedures governing research/creative activity grant proposals to the Faculty Senate.
6. **How Often The Committee Reports:**
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. **Power Of The Committee To Act Without Faculty Senate Approval:**
The committee is empowered to make recommendations regarding the funding of research proposals.
8. **Standard Meeting Time:**
The committee will establish a standard meeting schedule at its first meeting of the academic year.

East Carolina University Faculty Senate
SERVICE-LEARNING COMMITTEE CHARGE
Faculty Senate Resolution #18-40, May 2018

1. **Name:** Service-Learning Committee
2. **Membership:**
The committee membership, including ex-officio members, should encompass a wide variety of disciplinary expertise.

9 elected faculty members

Ex-officio members (with vote): The Chancellor or an appointed representative; the 3 Provost or an appointed representative, **1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development** or an appointed representative, the Vice Chancellor for Research, Economic Development and Engagement or an appointed representative; the Chair of the Faculty or an appointed representative; one Faculty Senator selected by the Chair of the Faculty; the one student member from the

Student Government Association; and one member from the Graduate and Professional Student Senate.

Ex-officio (without vote): The administrative leader of the Center for Leadership and Civic Engagement or an appointed representative.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 5 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee makes recommendations to the Faculty Senate regarding proposed changes in the service-learning requirements and regarding the service-learning designation for individual courses. The committee makes recommendations to the Faculty Senate regarding individual courses carrying service-learning designation and reports those recommendations to the Undergraduate Curriculum Committee and the Graduate Curriculum Committee.
 - B. The committee serves as a liaison between the Center for Leadership and Civic Engagement and the Faculty Senate, reviews the activities of the Center for Leadership and Civic Engagement and advises the administrative leadership of that center about service-learning.
 - C. The Committee reviews at least annually those sections within the *University Undergraduate Catalog* and *University Graduate Catalog* that correspond to the Committee's charge and recommends changes as necessary.
 - D. The committee promotes and advocates for service-learning across the curriculum, including learning outcomes and development of service-learning courses.
 - E. The committee reviews honors seminar proposals for service-learning credit.
 - F. The chair or appointed representative serves as an ex-officio member of the Honors College Faculty Advisory Committee.
5. To Whom The Committee Reports:

The committee reports to the Faculty Senate its recommendations of policies, procedures, and criteria cited in 4, above. The committee recommends curricular changes to the university's service-learning requirement to the Faculty Senate.
6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:

The committee is empowered to advise the Center for Leadership and Civic Engagement as described in 4.B. above.
8. Standard Meeting Time:

The committee meeting time is scheduled for the second Tuesday of each month.

East Carolina University Faculty Senate
UNDERGRADUATE CURRICULUM COMMITTEE CHARGE

Faculty Senate Resolution #19-77, December 2019

1. Name: Undergraduate Curriculum Committee
2. Membership:
8 elected faculty members.
Ex-officio members (with vote): The Chancellor or an appointed representative; the 2 Provost or an appointed representative, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines; or an appointed representative, the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee considers undergraduate courses (through 4000-level) and programs and has the responsibility of assuring the quality of course offerings regardless of mode of course delivery.
 - B. The committee recommends policies and procedures governing the acceptability of programs and courses.
 - C. The committee reviews and acts on proposals for new courses and course revisions. The committee ensures that proposals adhere to best practices in higher education and agreed upon academic standards.
 - D. The committee reviews and acts on proposals for new degree programs, certificates, and minors and on revisions to established degree programs, certificates, and minors. The committee ensures that proposals adhere to best practices in higher education and agreed upon standards.
 - E. The committee reviews and acts on revisions to the standards and requirements for admission to and retention in degree programs, certificates, and minors.
 - F. The committee considers other items that affect the curriculum of undergraduate programs.
 - G. The committee acts on recommendations from the Council for Educator Preparation regarding proposed changes in teacher education requirements.
 - H. The Committee reviews at least annually those sections within the *University Undergraduate Catalog* that corresponds to the Committee's charge and recommends changes as necessary.
 - I. The chair or appointed representative serves as a member on the Academic Program Development Collaborative Team, and as appropriate, any university-wide administrative committee that involves undergraduate curriculum.
5. To Whom The Committee Reports:
The committee makes its recommendations to the Faculty Senate. The committee reports on its review of requests to establish new degree programs and requests to establish new minors to the Educational Policies and Planning Committee.

6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
The committee is empowered to report on its review of requests to establish new degree programs and requests to establish new minors to the Educational Policies and Planning Committee.
8. Standard Meeting Time:
The committee meeting time is scheduled for the second and fourth Thursday of each month.

<p>East Carolina University Faculty Senate UNIT CODE SCREENING COMMITTEE CHARGE <i>Faculty Senate Resolution #14-78, December 2014</i></p>

1. Name: Unit Code Screening Committee
2. Membership:
8 elected faculty members.

Ex-officio members (with vote): The Chancellor or an appointed representative; **the 3 Provost or an appointed representatives, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development;** or an appointed representative, the Vice Chancellor for Research, Economic Development and Engagement or an appointment representative, the Chair of the Faculty; one faculty Senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee reviews academic unit codes and changes to existing academic unit codes to insure compliance with [Part IV](#) Academic Units, Codes, and Seven Year Unit Program Evaluation and [Part III](#), Section I. UNC Policy Manual and the UNC Code (UNC Board of Governors) of the *ECU Faculty Manual* and other appropriate documents.
 - B. The committee revises the "Guidelines for Writing and Revising a Unit Code of Operation" when necessary.
 - C. The committee coordinates the review of and recommends related policies and procedures for unit codes with the Faculty Governance Committee and/or other committees as

appropriate.

5. To Whom The Committee Reports:
The committee makes its recommendations to the Faculty Senate.
6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
None
8. Standard Meeting Time:
The committee meeting time is scheduled for the third Wednesday of each month.

East Carolina University Faculty Senate
UNIVERSITY BUDGET COMMITTEE CHARGE
Faculty Senate Resolution #20-59, November 2020

1. Name: University Budget Committee
2. Membership:
7 elected faculty members ~~(no more than one of whom may be fixed term).~~

Ex-officio members (with vote): The Chancellor or an appointed representative; the 3 Provost or an appointed representative, **1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines, 1 with academic or administrative expertise in Research, Engagement, and Economic Development;** or an appointed representative, the Vice Chancellor for Research, Economic Development and Engagement or an appointed representative, the Vice Chancellor for Administration and Finance or an appointed representative; the Vice Chancellor for Student Affairs or an appointed representative; the Chair of the Faculty; one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee serves as a communication link between the Faculty Senate and the Chancellor for budgetary matters. The committee informs the Faculty Senate about changes and proposed changes in the university budget.
 - B. The committee receives information and advises the Chancellor regarding budgetary and reallocation decisions.
 - C. The committee advises the Chancellor through the Faculty Senate on annual budget priorities and policy, biennial budget requests and priorities, tuition changes, and the relationship of budget decisions to the university's mission.

- D. One committee representative serves as an ex-officio member on the administrative Tuition and Fees Committee.
5. To Whom The Committee Reports:
The committee advises the Chancellor through their reports to the Faculty Senate concerning its recommendations to the Chancellor.
6. How Often The Committee Reports:
The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:
The committee is empowered to advise the Chancellor as described in section 4.A.above.
8. Standard Meeting Time:
The committee meets one Thursday each month, with specific days and times to be scheduled so as to avoid conflict with meetings of the ECU Board of Trustees or the UNC Board of Governors.

East Carolina University Faculty Senate
UNIVERSITY ENVIRONMENT COMMITTEE CHARGE

Faculty Senate Resolution #19-33, April 2019

1. Name: University Environment Committee

2. Membership:

7 elected faculty members ~~(no more than one of whom may be fixed term)~~. (5 from the Division of Academic Affairs and 2 from the Division of Health Sciences.)

Ex-officio members (with vote): The Chancellor or appointed representative; ~~the 2 Provost or appointed representatives, 1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines; or appointed representative,~~ the Vice Chancellor for Administration and Finance or appointed representative; the Vice Chancellor for Student Life or appointed representative; the Chair of the Faculty, one faculty senator selected by the Chair of the Faculty; and one student member from the Student Government Association.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as deemed necessary by the chair.

3. Quorum: 4 elected members exclusive of ex-officio.

4. Committee Responsibilities:

- A. The committee recommends policies to preserve and advance the general physical environment of the University, including traffic flow patterns, hardened sidewalk designs, speed limits, and parking facilities.
- B. The committee recommends policies for maintenance of culturally historic landscape features and ground covers possessing aesthetic, historic, and/or environmental value and to mitigate the loss of displaced habitat.
- C. The committee reviews effects of university projects upon water quality and quantity, runoff, and other physical impacts upon the community and provides recommendations when necessary.

- D. The committee advises and works in coordination with the Sustainability Manager to promote sustainability efforts on campus, which include energy and resource conservation, recycling, waste reduction, and integration of sustainability issues into the curriculum.
- E. The committee makes recommendations to promote appropriate management and use for education and research of ECU's major natural areas.
- F. The committee requests information as needed from Campus Operations, including Facilities Engineering and Architectural Services, and makes recommendations related to the following areas: University Master Plan, future land use, design and construction of new buildings, renovations of existing facilities, management and implementation of the utility infrastructure, and management of the University's repair and renovation program.
- G. The Committee serves as a communication link between Campus Operations and the Faculty Senate regarding issues outlined above.

5. To Whom The Committee Reports:

The committee reports to the Faculty Senate its recommended policies, procedures, and other procedural criteria.

6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.

7. Power Of The Committee To Act Without Faculty Senate Approval:

The committee is empowered to advise the appropriate personnel as described in 4.C. above.

8. Standard Meeting Time:

The committee meeting time is scheduled for the fourth Thursday of each month.

East Carolina University Faculty Senate
WRITING ACROSS THE CURRICULUM COMMITTEE CHARGE
Faculty Senate Resolution #18-40, May 2018

1. Name: Writing Across the Curriculum Committee

2. Membership:

8 elected faculty members with a variety of disciplinary areas and colleges/schools.

Ex-officio members (with vote): The Chancellor or an appointed representative; the 2 Provost or an appointed representatives, **1 with academic or administrative expertise in the Vice Chancellor for Health Sciences disciplines;** or an appointed representative; the Chair of the Faculty; one Faculty Senator selected by the Chair of the Faculty; the Director of the University Writing Program; and one student member from the Student Government Association.

Ex-officio (without vote): The Director of Composition or an appointed representative.

The chair of the committee may invite resource persons as necessary to realize the committee charge. The chair of the committee may appoint such subcommittees as he or she deems necessary.

3. Quorum: 4 elected members exclusive of ex-officio.
4. Committee Responsibilities:
 - A. The committee promotes the University Writing Program and recommends policies and guidelines governing the development and offering of courses and seminars that are officially to be designated as writing-intensive courses.
 - B. The committee reviews and approves proposals for writing-intensive courses, makes recommendations to the Faculty Senate regarding proposals carrying the writing intensive designation, and reports those recommendations to the University Curriculum Committee.
 - C. The committee periodically reviews existing writing-intensive course offerings and recommends, as appropriate, changes to course writing-intensive status in order to ensure that standards for writing-intensive credit are being met.
 - D. The committee reviews the activities of the University Writing Program, advises the administrative leadership in that program, and serves as a liaison between the University Writing Program and the Faculty Senate.
 - E. The committee reviews honors seminar proposals for writing intensive credit.
 - F. The chair or appointed representative serves as an ex-officio member of the Honors College Faculty Advisory Committee.
5. To Whom The Committee Reports:

The committee reports to the Faculty Senate recommendations of policies, procedures, and criteria governing the development and offering of WI courses. The committee recommends curricular changes to the University's writing-intensive requirement to the Faculty Senate.
6. How Often The Committee Reports:

The committee reports to the Faculty Senate at least once a year and at other times as necessary.
7. Power Of The Committee To Act Without Faculty Senate Approval:

The committee is empowered to advise the office of the University Writing Program as described in 4.D. above.
8. Standard Meeting Time:

The committee meeting time is scheduled for the second Monday of each month.