

**EMORY UNIVERSITY
SCHOOL OF MEDICINE**

**MEDICAL IMAGING
PROGRAM**

STUDENT HANDBOOK

2021-2022

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INTRODUCTION

The Medical Imaging Program *Student Handbook* is a reference for students and others seeking information concerning the formal administrative policies, rules and regulations of Emory University, the School of Medicine, and the Medical Imaging Program. In addition, this *Student Handbook* contains procedural policies for areas such as admissions, academic and professional standards, progress and promotion, financial aid, student organizations, student health, disability insurance, academic and personal counseling, and student health. A directory for Medical School administrative personnel, Radiology personnel, Medical Imaging Program personnel, and a listing of all Clinical Education Settings are included.

It is the responsibility of each student enrolled in the Emory University School of Medicine (EUSOM) to read and abide by the regulations and policies within this handbook and within Emory University Publications. A revised copy of this handbook is made available to each student annually. Addendums to this handbook may be published as necessary.

Regional Accreditation: Emory University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, master, education specialist, doctorate and professional degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Emory.

Programmatic Accreditation: The Medical Imaging Program is also accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Contact the JRCERT at 20 N. Wacker Drive, Suite 2850, Chicago, Illinois 60606-3182 or call 312-704-5300 for questions about the Medical Imaging Program accreditation.

Mission Statements

EMORY UNIVERSITY SCHOOL OF MEDICINE

The Emory University School of Medicine is a leading institution with the highest standards in education, biomedical research, and patient care.

We are committed to recruiting and developing a diverse group of students and innovative leaders in biomedical science, public health, medical education, and clinical care.

We foster a culture that integrates leading edge basic, translational, and clinical research to further the ability to deliver quality health care, to predict illness and treat the sick, and to promote health of our patients and community.

This mission encompasses the following objectives:

- Provide outstanding educational programs for medical and graduate students and for training health care professionals

- Develop outstanding clinicians and investigators who are lifelong learners, who will provide the highest quality compassionate care, and who will serve the needs of their community and the world in the best traditions of our profession
- Conduct innovative and collaborative research and integrate this knowledge into the practice of medicine
- Advance the early detection, treatment, and prevention of disease
- Ensure the highest ethical and professional standards in all of our endeavors

MEDICAL IMAGING PROGRAM

The Emory University Medical Imaging Program seeks to develop leaders in medical imaging who will provide the highest quality compassionate care within a patient and family centered environment.

We are committed to recruiting and developing a diverse group of students who will serve the needs of their community as medical imaging professionals.

Specifically, the mission of the program is to produce well-educated, culturally, and clinically competent, highly motivated medical imaging professionals who will safely perform quality diagnostic imaging procedures. Program graduates will also possess either advanced imaging skills in a specialty modality, or leadership skills in education or management.

Program Goals and Outcomes

1. Students will communicate effectively.
 - a. Students will utilize effective oral communication skills.
 - b. Students will utilize effective written communication skills.
2. Students will possess the knowledge and skills of an entry level radiographer.
 - a. Students will be able to position the patient for routine radiographic procedures.
 - b. Students will apply appropriate radiation safety principles.
3. Students will develop problem solving and critical thinking skills.
 - a. Students will be able to evaluate radiographic images.
 - b. Students will be able to modify standard procedures to accommodate patient or environmental conditions.
4. Students will demonstrate professional growth.
 - a. Students will locate, interpret and convey research related to professional practice.
 - b. Students will demonstrate leadership skills.

Program Effectiveness Data

1. Ninety percent (90%) of graduates will pass the national certification examination on the first attempt.
2. The program will maintain a program completion rate and graduation rate of 70%.
3. The program will have a job placement rate of 75% within twelve months of graduation.

4. Graduates will have an average score of 8.0 on each section of the national certification examination.
5. Graduates will have an average ARRT scaled score of ≥ 83 .
6. The program will receive an overall score of ≥ 4.0 on the Post-Graduate Program Evaluation.
7. The program will receive an average score of ≥ 4.0 on each item on the Post-Graduate Program Evaluation.
8. Program graduates will receive an average overall score of ≥ 3.75 on the Employer Questionnaire.
9. Program graduates will receive an average score of ≥ 3.75 on each item on the Employer Questionnaire.

PART I: PROFESSIONAL CONDUCT

Section 1: Expectations

Emory University is an institution dedicated to providing educational opportunities for its students, transmitting and advancing knowledge, and providing a wide range of services to students and to the general community. To accomplish these objectives and responsibilities requires that the University be free from violence, threats and intimidation; protective of free inquiry and dissent; respectful of the rights of others; open to change; supportive of democratic and lawful procedure; and dedicated to intellectual integrity and a rational approach to the resolution of human problems.

The tradition of the university as a sanctuary of academic freedom and center of informed discussion is an honored one, to be guarded vigilantly. The basic significance of that sanctuary lies in the protection of intellectual freedoms: the rights of professors to teach; of scholars to engage in the advancement of knowledge; of students to learn and express their views.

Health professionals are privileged to serve in important and time-honored roles as caregivers for other humans. These roles include physical and emotional dimensions that demand the highest degree of ethical behavior.

Professional behavior includes, but is not in any way limited to *honesty, maintaining confidentiality, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, concern for the welfare of patients, and responsibility to duty:*

- **Honesty** – Being truthful in communication with all others, while in the healthcare arena or in the community at large.
- **Maintenance of Patient Confidentiality** – Restricting discussion of patient care to those areas where conversations cannot be overheard by others outside of the care team; refraining from disclosing patient identity to those not connected to the care of the patient; maintaining appropriate security for all paper and electronic patient records, whether in the patient care or research realms.
- **Trustworthiness** – Being dependable; following through on responsibilities in a timely manner.
- **Professional Communication and Demeanor** – Being thoughtful and kind when interacting with patients, their families, other members of the healthcare team, and all others; maintaining civility in

all relationships; striving to maintain composure under pressures of fatigue, professional stress or personal problems; maintaining a neat and clean appearance and dress in attire that is reasonable and accepted as professional to the circumstances; refraining from intoxication; abstaining from the illegal use of drugs (both prescription and illicit drugs).

- **Respect for the rights of others** – Dealing with all others, whether in a professional or non-professional setting, in a considerate manner and with a spirit of cooperation; respecting the rights of patients and their families to be informed and share in patient care decisions; respecting patients' modesty and privacy.

- **Personal accountability** – Participating responsibly in patient care to the best of one's ability and with appropriate supervision; undertaking clinical duties and persevering until they are complete; notifying the responsible person if one is unable to perform clinical tasks effectively; complying with University Policies and Procedures in an honest and forthright manner.

- **Concern for the welfare of patients** – Treating patients and their families with respect and dignity both in their presence and in discussions with others; avoiding the use of foul language, offensive gestures or inappropriate remarks; discerning accurately when supervision or advice is needed and seeking these out before acting; recognizing when one's ability to function effectively is compromised and asking for relief or help; never administering care, in person or over the phone while under the influence of alcohol or other drugs (prescription or illegal); not engaging in romantic, sexual, or other nonprofessional relationships with a patient, even upon the apparent request of a patient; advocating for the best care of the patient, in context of that patient's beliefs and desires.

- **Responsibility to duty**– Effectively undertaking duties with alacrity [eagerness, enthusiasm and promptness are synonyms] and persevering until complete, or notifying a responsible person of a problem; being punctual for class, clinic and other duties; timely notification of program faculty and clinical staff of absences or an inability to carry out assigned duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; and being available to faculty or staff personnel when on clinical duty.

***EUSOM Standards of Dress and Appearance**

Students are expected to convey a professional demeanor, not only in their behavior but also in their dress and appearance. A professional image conveys credibility, trust, respect, and confidence to one's colleagues and patients. In all educational settings—classroom, laboratory, clinical environment—students are expected to be clean, well groomed, and dressed in a manner appropriate to their responsibilities and the standards of their assigned clinical sites. When patient-student contact is part of the educational experience (including interactions in the clinic, in the hospital, and with standardized patients), students are expected to dress professionally and wear a clean white coat unless otherwise instructed by EUSOM faculty. When patients are invited into the **classroom** as part of the Foundations curriculum, medical students should wear respectful and professional attire; white coats are not necessary. Medical students are expected to wear their EUSOM identification badges, ideally placed at the collar or top of the shirt/dress or at the breast pocket of a lab coat, at all times in clinical and academic settings. Of note, each healthcare facility in which students rotate may have their own standards which need to be observed, however the EUSOM will default to the most conservative and restrictive standard that may apply.

All students are required to be clean and maintain appropriate personal hygiene with regard to their body, hair, and nails. Hair and nails need to be clean, neat, and of a reasonable length so as to not interfere with the student's and/or patient's safety or ability to perform their duties.

Patients vary in sensitivity to and in expectations regarding the appearance of their health care providers. A reasonable rule of thumb is to lean towards being conservative – for example, choose attire that most people will find appropriate.

Professional dress for clinical duty is outlined below:

Hair Maintenance

Hair should be neat, clean, and of a natural human color. Unless head coverings are required for religious or cultural reasons, hats or other head coverings should be avoided.

Clothing

Students should wear business attire that is clean and in good repair. In general, clothes should be of a length, fit and style that are appropriate for the clinical environment. Shorts and blue jeans are not appropriate professional dress. Shoes must be clean and in good repair.

Scrubs

Scrub suits should be worn in specific patient care areas only. They are the property of the hospital and are not to be defaced, altered, or removed from the hospital. Scrubs are NOT to be worn in the School of Medicine Building (including ExCEL) unless otherwise specified. Stained or soiled scrub suits must be changed as soon as possible; they are a source of potential contamination. All Personal Protective Equipment (e.g., masks, hats, booties) must be removed upon leaving OR's/procedural/patient room areas.

Body Piercing and Tattoos

Body art and body piercing, which may be acceptable in some social situations, should not be worn or displayed by students in professional settings. Tattoos should be covered to the extent possible. Piercings, other than ear piercings, should be covered or removed in professional settings.

Nametags/Badges

Students should wear their nametag/badge at all times in the clinical environment. Nametags/badges as previously mentioned, should be above the waist, near eyelevel.

The above provide guidelines that represent minimum standards for dress and appearance to ensure that students present a positive and professional image to patients. You will receive feedback about your grooming and attire from faculty, clinical staff, and peers when your appearance does not meet expectations for professional and clinical environments. If a faculty member or clinical staff member feels that the dress is inappropriate for the setting, they may also ask you to change prior to continuing in that environment.

***Use of Social Media**

As described above, behavior of students in the academic setting and beyond must be in keeping with the ideals of the institution and the profession of medicine. The following paragraphs indicate the current standards for behavior that relate to the use of social media.

Each student is responsible for his or her postings on the Internet and in all varieties of social media. In all communications, students are expected to be courteous, respectful, and considerate of others. Inappropriate postings on the Internet or social media will be considered lapses in the standards of professionalism expected of Emory School of Medicine students. Students responsible for such postings are subject to the Conduct Code process in the same manner as for any other unprofessional behavior that occurs outside the academic setting. Students who do not follow these expectations may face disciplinary actions including dismissal from the School of Medicine.

Students within the School of Medicine are urged to consider the following before posting any comments, videos, pictures, or essays to the Internet or a social media site:

- There is no such thing as an “anonymous” post. Furthermore, any posts or comments submitted for others to read should be posted with full identification of the writer. Where your connection to Emory is apparent, make it clear that you are speaking for yourself and not on behalf of Emory. A disclaimer, such as, "The views expressed on this [blog; website] are my own and do not reflect the views of my University or the School of Medicine" are required.
- Internet activities may be permanently linked to the author, such that all future employment may be hampered by inappropriate behavior on the Internet.
- Making postings “private” does not preclude others copying and pasting comments on public websites. “Private” postings that become public are still subject to sanctions described in the School of Medicine Conduct Code.
- Do not share information in a way that may violate any laws or regulations (i.e. HIPAA). Disclosing information about patients without written permission of the patient and the School of Medicine, including photographs or potentially identifiable information is strictly prohibited. This rule also applies to deceased patients.
- For Emory’s protection as well as your own, it is critical that you show proper respect for the laws governing intellectual property, copyright and fair use of copyrighted material owned by others, including Emory’s own copyrights and brands. Curricular materials developed by Emory faculty and staff or faculty/staff of other medical schools or educational institutions should not be distributed or redistributed. When in doubt, students should seek guidance regarding appropriate use of such materials.
- Do not share confidential or proprietary information that may compromise Emory’s research efforts, business practices or security.

In addition to the above, the [Social Media Guidelines for Medical Students and Physicians](#), created by the American Medical Student Association, should be followed.

In all situations, including on social media sites, members of the medical profession should always represent him/herself in a manner that reflects values of professionalism, accountability, integrity, honor, acceptance of diversity, and commitment to ethical behavior.

For purposes of these guidelines, “social media” includes Internet and mobile-based applications that are built on user-generated shared content. Social networks including, but not limited to, blogging, microblogging (e.g., Twitter), networking sites (e.g., Facebook, LinkedIn), podcasts and video sites (e.g., Flickr, YouTube) – offer opportunities for communication, information/experience sharing, collaborative learning, professional interactions and outreach.

Guidelines for social networking

- **Be professional.** As medical students and physicians, we should represent our profession well. Adhere to rules of ethical and professional conduct at all times.
- **Be responsible.** Carefully consider content and exercise good judgment as anything you post can have immediate and/or long-term consequences and carry the potential for significant public impact and viral spread of content. Therefore, all statements must be true and not misleading. Make sure that you differentiate opinions from facts.
- **Maintain separation.** Avoid interacting with current or past patients through social media, and avoid requests to give medical advice through social media.
- **Be transparent/use disclaimers.** Disclose yourself and provide an appropriate disclaimer that distinguishes your views from those of the clinic, hospital system and/or University with which you are associated (while at the same time, being careful not to violate any social media policy to which you may be subject by such organizations). Without specific direction from the appropriate personnel, you may not present yourself as an official representative or spokesperson for said organizations. Also, be sure to reveal any conflicts of interest and be honest about your credentials as a medical student or physician (resident or otherwise).
- **Be respectful.** Do not use defamatory, vulgar, libelous and potentially inflammatory language and do not display language or photographs that imply disrespect for any individual or group because of age, race, national origin, gender, sexual orientation, ethnicity, marital status, genetic information, military status, or any other protected characterization or group.
- **Follow copyright laws.** Comply with copyright laws. Make sure you have the right to use material before publishing.
- **Protect client/patient information.** Do not discuss confidential information and follow standards of patient privacy and confidentiality and regulations outlined in Health

Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g). Remember you could personally face a HIPAA violation if there are enough details in the post for patients to recognize themselves.

- **Avoid political endorsements.** Political endorsements of candidates should be avoided outside your own personal social media accounts, even there comments should be carefully considered.
- **Comply with all legal restrictions and obligations.** Remember use of social networking sites or weblogs can carry legal and professional ramifications. Comments made in an unprofessional manner can be used in legal, professional, or other disciplinary proceedings (i.e., hearings before a State Medical Licensing Board).
- **Be aware of risks to privacy and security.** Read the site's Terms of Use and Privacy Policy. Be cognizant of continuous changes in these sites and closely monitor the privacy settings of the social network accounts to optimize your privacy and security.

*Adapted from the Social Media Guidelines for the American Medical Student Association (AMSA).

Section 2: Emory School of Medicine Conduct Code

Given the goals of the University as a place of academic freedom, and the School of Medicine as a site of training for highly ethical healthcare providers, a system is necessary to provide the proper balance between the academic freedoms allowed a member of the University and his or her responsibility as a future healthcare professional. For this purpose, and in accordance with the Bylaws of the University, the President of the University has defined the interests of the University community to be promoted and protected by such a system and has delegated to the Executive Associate Dean for Medical Education and Student Affairs for the School of Medicine the responsibility of designing and maintaining a conduct code for Emory School of Medicine students.

This Code may be reviewed annually and changes require the approval of the Executive Associate Dean for Medical Education and Student Affairs and approval of the Senior Vice President and Dean for Campus Life. Provisions of this Code may be revised, supplemented, or amended at any time by action of the appropriate University authorities.

From the time an individual accepts an offer of admission to a program of the School of Medicine until the day of completion of that degree program and graduation from Emory University, he or she is considered a student of the School of Medicine and is governed by the principles set forth within this Conduct Code.

The Emory University School of Medicine Conduct Code pertains to misconduct of medical students enrolled in the School of Medicine outside of an academic setting. Academic and professional discipline of students is not covered by this Code but rather falls within the

jurisdiction of either the School of Medicine Honor Code or the Progress and Promotions Committee.

Basic Expectations/Inherent Authority

The primary purpose for the imposition of non-academic discipline in the School of Medicine setting is to protect and preserve the quality of the educational environment in the campus community. This purpose entails several basic expectations:

1. That the School of Medicine and the University at large assumes high standards of courtesy, integrity, and responsibility in all of its members;
2. That each student is responsible for his/her conduct and that continuation as a student is conditional upon compliance with the requirements of student conduct expressed or implied in this Code.

The School of Medicine reserves the right to take necessary and appropriate action to protect the safety and well-being of the campus community and the patients we serve. The Executive Associate Dean for Medical Education and Student Affairs is charged with the welfare of all medical and health professions programs students. Accordingly, in emergency situations, this individual has full authority to deal with student conduct according to the exigencies of the emergency and for its duration.

The School of Medicine is not designed or equipped to rehabilitate students who do not abide by this Code. It may be necessary to remove those students from the campus and to sever the institution's relationship with them as provided in this Code.

The Senior Vice President and Dean for Campus Life is delegated responsibility pertaining to all student organizations and student government and, in conjunction with the Executive Associate Dean for Medical Education and Student Affairs, has the responsibility and authority to discipline such organizations whose members are students within the School of Medicine.

Confidentiality

The details of Conduct or Progress and Promotions meetings are confidential and will not be released outside the University without the student's specific written permission except as provided by applicable law. If a student is found to have violated the Conduct Code, the resulting sanctions can be included in any performance assessment or letter of recommendation requested by the student or an outside entity. Conduct Code violations and sanctions may also be reported to other agencies, such as the military, the federal government, licensing boards, and others if requested by the agency and accompanied by a signed release from the student.

Violations of the Law and This Code

Students may be accountable both to civil authorities and to the University for acts that constitute violations of law and of this Code. Those accused of violations of this Code are subject to the disciplinary proceedings outlined in this Code while criminal, civil, or other internal proceedings

regarding the same conduct are pending. Accused students may not challenge the disciplinary proceedings outlined in this Code on the grounds that criminal charges, civil actions, or other internal proceedings regarding the same incident are pending, may be initiated, or have been terminated, dismissed, reduced, or not yet adjudicated. The University will refer matters to federal, state, and local authorities for prosecution when appropriate.

Prohibited Conduct

Each student may be subject to this Code whether misconduct occurs on University premises, at University or School of Medicine sponsored activities, or at any location off-campus when such conduct is brought to the attention of the University or the School of Medicine.

It is neither possible nor necessary to specify every instance of misconduct that could result in disciplinary action against a student. Violations of the Standards of Professional Conduct as described in Section I of this Student Handbook may also constitute “Prohibited Conduct” that is subject to this Code of Conduct. The following list includes, but is not limited to, conduct that may subject a student to disciplinary action:

1. Attempting, assisting, or encouraging any conduct as described below.
2. Causing physical harm to any person or causing reasonable apprehension of such harm.
3. Disorderly or indecent behavior including, but not limited to, destroying or damaging University property or the property of others.
4. Engaging in conduct directed at a specific person or persons that seriously alarms or intimidates such person or persons and that serves no legitimate purpose. Such conduct may include: explicit or implicit threats, including gestures that place a person in reasonable fear of unwelcome physical contact, harm, or death; following a person about in a public place or to or from his or her residence; making remarks in a public place to a specific person that are by common usage lewd, obscene, expose a person to public hatred, or that can reasonably be expected to have a tendency to cause acts of violence by the person to whom the remark is addressed; or communicating anonymously by voice or graphic means or making a telephone call anonymously whether or not a conversation ensues.
5. Violating the University’s [Sex and Gender-Based Harassment and Discrimination](#).
6. Violating the University’s [Equal Opportunity and Discriminatory Harassment](#).
7. Violating the University’s [Anti-Hazing Policy](#).
8. Initiating or causing any false report, warning, or threat of fire, explosion, or other emergency.
9. Misrepresenting information or furnishing false information to the University or its representatives.
10. Forgery, alteration, misrepresentation, counterfeiting, or misuse of any University or other document, instrument of identification, or access device.
11. Providing alcoholic beverages to an individual under 21 years of age or to one who is noticeably intoxicated, or possession or use of alcoholic beverages by an individual less than 21 years of age.
12. Unauthorized possession of an open container of an alcoholic beverage.

13. Appearing in a public place manifestly under the influence of alcohol or a controlled or other intoxicating substance, particularly when there is danger to self, others, or property or there is unreasonable annoyance to person(s) in the vicinity.
14. Unauthorized distribution, possession, or use of any controlled substance or distribution, possession, or use of any illegal drug.
15. Unauthorized use, possession, or storage of any weapon.
16. Unauthorized use or possession of fireworks or incendiary, dangerous, or noxious devices or materials.
17. Intentionally or recklessly misusing or damaging fire or other safety equipment.
18. Theft or misuse of property or services.
19. Substantially interfering with the freedom of expression of others.
20. Interfering with normal University or School of Medicine functions, University-sponsored activities, or any function or activity on University premises including but not limited to studying, teaching, public speaking, research, University or School of Medicine administration, or fire, police, or emergency services.
21. Disregarding or failing to comply with the directive of a hearing body or University official including a campus police officer acting in the performance of his or her duties.
22. Disregarding or failing to comply with the directive of an officer of the law acting in the performance of his or her duties.
23. Disrupting University or other computer systems; unauthorized alteration, disclosure, gaining or providing unauthorized access; or destruction of University or other computer system or material; improper access to University or other computer files and systems; or violation of copyright or proprietary material restrictions connected with University or other computer systems, programs, or materials.
24. The display or distribution of lewd, offensive, threatening or inappropriate material via paper or electronic means. Such material includes pictures, videos, or written content that portray oneself or others in a manner that brings dishonor to the profession of medicine.
25. Violating any government laws or ordinances, or of any University or School of Medicine rules, regulations, or policies including but not limited to the “Standards of Professionalism” set forth above. Such rules, regulations, or policies shall include but are not limited to the regulations and policies contained in the Campus Life Undergraduate Code of Conduct, Information Technology Division (ITD) materials, Policy Statement on Discriminatory Harassment, Sexual Assault Policy Statement, School of Medicine Medical Student Handbook; regulations relating to entry (opening and closing hours) and use of University facilities; traffic and parking regulations; regulations and policies on the sale, consumption or misuse of alcoholic beverages; and on the misuse of identification cards.
26. Failure to report any arrests, criminal charges, positive results of drug tests or Criminal Background Checks (CBCs) that occur from the time of acceptance until graduation.
27. Recording any other person without the consent of the person(s) being recorded.
28. Inappropriate use of social media.

Conduct Procedures

Anyone wishing to report an alleged incident of misconduct under this Code may make such a report to the Executive Associate Dean for Medical Education and Student Affairs or to any Assistant or Associate Dean for Medical Education and Student Affairs. Reports generated by the Emory Police will be forwarded to the Dean for Campus Life or his/her designee and to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean for Medical Education and Student Affairs will make a determination as to whether or not an action should be taken in response to a report. If it is determined that further action should be taken, the Executive Associate Dean for Medical Education and Student Affairs will notify the student in writing that he or she must make an appointment for a preliminary meeting within five days of the date on the notice for the purpose of reviewing the report. Failure of the student to schedule or attend this preliminary meeting will automatically result in formal charges as described below.

Following this preliminary meeting, an investigator (faculty member) will be appointed by the Executive Associate Dean for Medical Education and Student Affairs to conduct an investigation to determine if the report has merit. The investigator may recommend the matter should proceed to formal charges or be disposed of administratively by agreement of the parties involved on a basis acceptable to the Executive Associate Dean for Medical Education and Student Affairs.

If the matter is not so resolved, the Executive Associate Dean for Medical Education and Student Affairs will then meet again with the student and present the student with a letter stating the formal charges and a copy of all documents relevant to the case.

If a student admits to having violated the Code of Conduct as charged, the student shall have the following options as to how sanctions will be determined:

1. The student may waive his or her right to a hearing and have the Executive Associate Dean for Medical Education and Student Affairs determine the appropriate sanction.
2. The student may choose a hearing with an ad hoc conduct committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to determine the appropriate sanctions.

This selection shall be made in writing within five days of the student's request for a hearing and be recorded by the Executive Associate Dean for Medical Education and Student Affairs.

If the student does not admit to having violated the Code of Conduct as charged, the charges will be referred for a hearing and a copy of all documents relevant to the case will be forwarded to the appropriate hearing body and the student involved.

If an accused student fails to respond to any notification in writing concerning the conduct process, his or her case will be automatically referred to a hearing with an ad hoc conduct committee.

The School of Medicine reserves the right to place a “hold” on the diploma, degree certification, or official transcripts of a student who has been charged with a conduct violation under the Code even though he or she may have completed all academic requirements. The diploma, degree certification, or official transcripts may be withheld until the conduct charges have been resolved and/or sanctions completed.

School of Medicine Conduct Committee

The School of Medicine Conduct Committee is an ad hoc committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to hear non-academic medical or health professions programs student conduct cases. The Conduct Committee is composed of:

1. A Chair appointed by the Executive Associate Dean for Medical Education and Student Affairs, who shall be a faculty member but not a voting member of the Council and an alternate;
2. Two voting faculty members and one alternate;
3. One voting School of Medicine administrator (Dean, Director, Associate or Assistant Dean) and one alternate;
4. Three voting student members (medical students or academic health students, determined by the school enrollment status of the student accused of misconduct) and one alternate.

The ad hoc Conduct Committee must have a minimum of five members present in order to convene, two of who must be faculty.

Hearing Procedures

The Executive Associate Dean for Medical Education and Student Affairs may require any student, faculty, or staff member of the School of Medicine to attend and/or testify at any hearing or meeting regarding a conduct matter that is covered under this Code.

Whenever a hearing is to be held regarding an alleged incident of misconduct under this Code, the accused student and the complainant, if any, shall be given at least seven (7) calendar days’ written notice of the charges alleged against the accused student and of the date, time, and place of the hearing.

The ad hoc Conduct Committee shall conduct the hearing. The Committee may require witnesses to testify at the hearing who are students, faculty, or staff of the School of Medicine and who are available to attend. Rules of evidence that apply in courts of law shall not apply in such hearings. The hearing shall be closed to everyone except the hearing body, appropriate staff, the accused student, and the complainant, advisors to the accused student and the complainant.

Witnesses will be present at the hearing only during the actual time of their testimony.

An advisor of his or her choice may assist the accused student and the complainant. The advisor must be a member of the Emory University School of Medicine faculty or staff or a student

currently enrolled in the School of Medicine. The Chair of the ad hoc Conduct Committee will consider exceptions. The advisor may not be an attorney.

Both parties and/or their advisors are allowed to:

1. Be present at the hearing until such time as the hearing body retires to deliberate the decision. However, if either the student or the advisor or the complainant fails to appear at the hearing, the hearing may be held in their absence.
2. Present tangible and documentary evidence and evidence by witness or by signed witness statements of witnesses who do not attend the hearing including the signed written statements of the complainant or the accused. If witnesses fail to appear, the hearing shall be held in their absence.
3. It is the responsibility of the accused student and of the complainant to notify any additional witnesses not called by the hearing body. Additional witnesses must have the prior approval of the Chair of the hearing body. All witnesses should be notified of the date, time, and place of the hearing.
4. Question all witnesses who give evidence at the hearing directly or through written questions presented through the Chair.

The Chair of the ad hoc Conduct Committee shall have final decision on what evidence may be presented and the tone of questioning. The Chair may decide to stop questions at any time.

Hearing Decisions

The decisions of the ad hoc Conduct Committee as to both violation and sanctions are in all cases advisory to the Executive Associate Dean for Medical Education and Student Affairs. The ad hoc Conduct Committee shall deliberate and decide whether the accused student has violated this Code. The hearing body may decide that the student is in violation of a less serious offense than that originally charged. A determination that a student has violated the School of Medicine Conduct Code requires a simple majority vote. In the case of a tie, the Chair shall cast the deciding vote.

If the finding of a violation is determined, the hearing body shall be provided with the record of previous disciplinary proceedings in which the student was found in violation. On the basis of the hearing and the student's previous record, a decision will be made regarding sanctions by a simple majority vote. In the case of a tie, the Chair shall cast the deciding vote.

A written decision will be issued from the hearing committee to the student within seven (7) days of the date of the hearing. The accused shall receive written notice of the outcome of the hearing which includes: (1) a statement of charges; (2) a summary of the facts in the case; (3) the decision; (4) a brief statement of the hearing body's reasoning; and, if a violation is found, (5) sanction(s). The accused student will also receive information on the rights of appeal. The Executive Associate Dean for Medical Education and Student Affairs shall review all decisions of the Conduct Committee. The Dean of the School of Medicine shall also review any decision resulting in a sanction of suspension or expulsion. The Executive Associate Dean for Medical

Education and Student Affairs and the Dean shall make a final decision regarding the recommendations of the Hearing Committee.

Sanctions

The following sanctions, singularly or in combination, may be imposed upon any student found to have violated the School of Medicine Conduct Code:

1. **Warning:** A notice in writing to the student that the student has violated institutional regulations and must cease and not repeat the inappropriate action.
2. **Probation:** A written reprimand for violation of specific regulations. Probation is for a designated period of time and includes the probability of more severe disciplinary sanctions if the student is found to be violating any institutional regulation(s) during the probationary period.
3. **Restitution:** Compensation for loss, damage, or injury. This may take the form of service, monetary compensation, or material replacement.
4. **Discretionary Sanctions:** Work assignments or service to the School of Medicine, the University or the community.
5. **Suspension:** Separation of the student from the School of Medicine for a definite period of time, after which the student may be eligible to return. Conditions for readmission may be specified.
6. **Expulsion:** Permanent separation of the student from the School of Medicine.

Conduct sanctions (5) Suspension and (6) Expulsion shall be entered permanently on a student's record. Sanction (2) Probation shall be entered on a student's record for the term of the probation. Any sanction may include mandatory referral to university-based resources for medical or mental health evaluation and treatment if necessary. An evaluation supporting the student's reentry to medical school may be needed before reentry into any course work or clinical rotations.

Appeal

The accused student may appeal decisions rendered by the ad hoc Conduct Committee to the Dean of the School of Medicine. To initiate an appeal, the accused student must submit a signed, written statement of the specific reason(s) to the Dean within seven (7) days of receipt of the hearing decision.

The Dean will review the process and the decision to determine:

1. Whether or not the hearing was conducted in accordance with the procedures outlined in the Conduct Code;
2. Whether or not the interpretation of the code was appropriate;
3. Whether or not the sanction(s) imposed were appropriate.
4. After reviewing the documents pertaining to the case, the Dean will issue a written review of the hearing decision with a reasonable period of time from the receipt of the request for review.

The Dean will either:

1. Affirm the hearing decision;
2. Affirm the findings of the hearing decision but recommend a different sanction; OR
3. Remand the case to the Executive Associate Dean for Medical Education and Student Affairs to assign a new ad hoc School of Medicine Conduct Appeal Board to conduct a new hearing.

School of Medicine Conduct Appeal Board

The Appeal Board will be established at the time the Dean remands a case to the Executive Associate Dean for Medical Education and Student Affairs for conducting a new hearing.

The Board shall be composed of:

1. One voting administrator appointed by the Executive Associate Dean for Medical Education and Student Affairs;
2. Up to three voting faculty members appointed by the Dean.
3. One voting medical or academic health student, depending on the status of the accused, appointed by the Dean.

The Appeal Board shall follow the same guidelines as the initial hearing, reviewing the case independently, and make a final recommendation to the Dean. The Executive Associate Dean for Medical Education and Student Affairs shall provide the recommendation of the School of Medicine Conduct Appeal Board to the Dean whose decision shall be final.

Notification and Retention of Records

The Executive Associate Dean for Medical Education and Student Affairs shall forward notification of all final action to the Dean. The Executive Associate Dean for Medical Education and Student Affairs shall maintain files on all medical and academic health students' conduct reports, records, and hearing proceedings according to procedures established by that office.

PART II. POLICIES

Section 1: Emory University Policies

See <http://policies.emory.edu/policies-list.html>. The following University policies are also included in Appendix A of this document:

[*Policy 1.3 Equal Opportunity and Discriminatory Harassment](#)

[*Policy 2.90 Travel and Expense Policy](#)

[*Policy 5.1 Information Technology Conditions of Use](#)

[*Policy 5.14 Smart Device Security Policy](#)

[*Policy 8.2 Sex and Gender-Based Harassment and Discrimination Policy](#)

[*Policy 8.7 Mandatory Student Insurance](#)

[*Policy 8.8 Alcohol and Drug Abuse Policy](#)

[*Policy 8.9 Student Vehicle Use Policy](#)

[*Policy 8.12 University Recognized Student Organizations](#)

[*Policy 8.14 Respect for Open Expression Policy](#)

[*Policy 10.12 Student Complaints](#)

Section 2: School of Medicine Policies

***Consensual Teacher-Student Relationships**

The relationship between teacher and student is the foundation of the academic mission of the University. This relationship vests considerable trust in the teacher, who, in turn, bears the responsibility to serve as mentor, educator, and impartial evaluator. In discharging this responsibility, teachers are accountable for behaving at the highest professional level, recognizing the dignity and worth of each person, and protecting the integrity of the student-teacher relationship.

Teacher-student relationships carry risks of conflict of interest, breach of trust, abuse of power, and breach of professional ethics. For these reasons, teachers must not engage in any consensual sexual relationships with a student while the teacher is in a position of supervisory academic authority with respect to the student. Nor may a teacher assert any supervisory academic authority with respect to a student who was the subject of a previous consensual sexual relationship. This prohibition extends to consensual sexual relationships between a graduate or professional student and an undergraduate when the graduate or professional student has some supervisory academic responsibility for the undergraduate, to consensual sexual relationships between department Chairs and students in that department, to consensual sexual relationships between graduate advisors, Program Directors, and all others (each of whom is considered a teacher) who have supervisory academic responsibility for a student and that student.

When a teacher-student consensual sexual relationship exists, has previously existed, or develops, the teacher must decline to participate in any evaluative or supervisory academic activity with respect to the student. Furthermore, it is the responsibility of the student to inform the appropriate dean when such a relationship exists, or has existed, so that he/she will not be placed in any such situation. The appropriate dean to inform includes the Associate Dean for Medical Education and Student Affairs, Director of Admissions and/or Assistant Dean for Medical Education and Student Affairs for students in the Foundations Phase, and the Associate or Assistant Dean for Clinical Education for students in the Application, Discovery, and Translation Phases.

The deans, department chairs, and other administrators should respond to reports of prohibited sexual relationships by inquiring further and, if such reports appear to be accurate, initiating appropriate disciplinary action or remedial measures against the teacher involved. Egregious breach of this policy is adequate cause for termination under paragraph 12.2 of the Emory University Faculty Handbook Statement of Principles Governing Faculty Relationships.

Non-consensual sexual relationships are prohibited by the Equal Opportunity and Discriminatory Harassment policy (1.3).

***Criminal Background Checks and Drug Testing**

Criminal background checks will be performed on all students enrolling in the Medical Imaging Program. Drug screening will be performed only as required by clinical sites. The program recommends that each student self-report any criminal activity that may impact eligibility for clinical attendance or certification by the American Registry of Radiologic Technologists. Each student is required to pay a \$100 Clinical Administration Fee upon matriculation to cover the cost of the background check.

Students will also be required to submit to a background check and a drug screen at their own expense (\$50.00) prior to clinical rotation at Children's Healthcare of Atlanta (CHOA). Failure to pass their requirements will prevent the student from attending the rotation. All attendance policies will apply.

Policy: Adverse Finding on Criminal Background Check

Effective: October 30, 2010

Rationale:

When a criminal background check (CBC) is performed after acceptance and prior to matriculation into a health professions program, the programs must consider the threshold at which revocation of an offer of admission might occur. In the event that the CBC reveals a finding of concern, careful deliberation of the nature of the incident and its potential impact on the student's education, access to professional certification and licensing, the institution and the public must be given.

Policy:

A positive finding on a criminal background check may result in the revocation of an offer of admission. Findings including but not limited to felony conviction or a nolo contendere plea to a felony charge, multiple misdemeanor convictions, drug or substance abuse convictions, crimes against persons or any crimes (including misdemeanors) involving acts of violence are examples generally inconsistent with admissions to a health profession program.

Procedure:

1. The program director will review all criminal background checks with any positive findings.
2. The program director will make a preliminary determination as to matriculation.
3. If the preliminary determination is that the findings of the criminal background check may be inconsistent with continuation in the program, Emory University's Office of the General Counsel will be consulted and final determination made by the program director.

4. If preliminary determination is that the findings of the criminal background check do not warrant revocation of the admissions offer, the program director will counsel the student regarding the possible consequence of his or her background check related to access to hospital rotations, licensure and/or future employment.
5. The student will be asked to sign a statement indicating understanding of the above.
6. If the review by the Office of the General Counsel and the program director indicate that revocation of the admissions offer is warranted, the student will be notified by certified mail within 5 days of the decision.
7. The student may appeal the revocation decision, in writing, to the Executive Associate Dean of Medical Education and Student Affairs within 5 business days of receipt of the notification letter. The decision of the Executive Associate Dean is final.

***Entering Student Health and Immunization Requirements**

For the protection of the health of our students and because of the risks of exposure to infectious diseases to which medical students are subjected in the course of clinical work, certain tests and immunizations are required of all students prior to matriculation.

Entering students are required to provide documentation of all [required immunizations](#) using the [Emory University Student Health and Counseling Services \(EUSHS\) Immunization Form](#). This form must be signed by a healthcare provider and returned to EUSHS prior to matriculation.

A physical examination is also required prior to matriculation to the School of Medicine and must be recorded on the School of Medicine Physical Examination Form. This form must also be signed by a healthcare provider and returned to EUSHS prior to matriculation.

Students will not be allowed to register or participate in any clinical activities until both forms are on file with EUSHS. An updated medical history and physical examination are required for re-enrollment after more than one year of attendance lapses. For re-admission after withdrawal for medical reasons, medical clearance by designated University health officials is required.

Registration and attendance at classes are considered as agreement to comply with the Rules and Regulations of the University as published in the Bulletin and MD Handbook and other official publications of the University and as amended or revised during the student's continued enrollment.

Immunization Requirements 2021-2022

Documentation for the following immunizations and tests is required prior to matriculation for all entering students:

- **COVID-19** - All students must be vaccinated against COVID-19. Student Health Services will maintain a list of acceptable COVID-19 vaccines on its website.
- **Tetanus/Diphtheria/Pertussis**– primary series of 3 doses of Diphtheria and Tetanus Toxoid (DT or TD), in addition to at least one adult Td or Tdap booster within the past 10 years.

- **Measles/Mumps/Rubella (MMR)** – 2 doses of a combined MMR -OR- two (2) doses of Measles, two (2) doses of Mumps, and one (1) dose of Rubella –OR- laboratory evidence of immunity to each disease.
- **Varicella (Chickenpox)** – positive Varicella antibody titer -OR- 2 doses of the Varicella vaccine given at least 1 month apart.
- **Hepatitis B** – 2 or 3 dose series, followed by a post-vaccine quantitative antibody titer.
- **Tuberculosis Screening** – one PPD/Mantoux skin test or interferon gamma release assay (Quantiferon or T spot) must be completed within 6 months and at least 2 weeks prior to matriculation. Upon matriculation, incoming students who had PPD testing (with a negative result) will be required to obtain a SECOND PPD, to be administered during the first semester of medical school and at the expense of the School of Medicine. Thereafter, students will receive a TB exposure questionnaire to determine if additional testing for latent TB is required. Students who develop new latent TB infection while enrolled full-time in the School of Medicine will be referred for care by a physician affiliated with Emory University Student Health Services and will receive their treatment at the expense of the School of Medicine.

TB Screening notes:

- Entering students with a positive PPD (current or previous) are required to have a negative chest x-ray.
- Students who have received BCG vaccination in the past and have a positive PPD reaction, should have both a chest x-ray and a blood test (QuantiFERON Gold or T-spot) performed to complete the evaluation for latent TB. Students with BCG vaccination may have only a blood test for TB screening (a PPD test is not required).

Exceptions

Emory Student Health Services is aware that some students have a strong personal objection to vaccination with one or more of the required vaccines. In the case of a medical contraindication, EUSHS requires the student to submit a letter of explanation, signed by both the student and the student's healthcare provider, along with other immunization records to EUSHS through the Student Patient Portal. To see more details about medical contraindication or declination processes, please visit our immunization page and scroll to the last section.

***Industry Relations**

The primary missions of the School of Medicine are to provide outstanding educational programs for medical and graduate students and trainees; to provide the highest standard of clinical care for patients; to develop outstanding, knowledgeable physicians and scientists who serve the community and the world; and to conduct innovative and collaborative research and integrate this knowledge into the practice of medicine. The School of Medicine is committed to ensuring that its faculty, staff, students, and trainees strive for the highest degree of ethical and professional standards in carrying out its missions. As part of this commitment, the School supports principled relationships with industry in which its faculty, staff, students, and trainees

collaborate with industry on advances in science and medicine that enhance Emory's missions and are beneficial to the public.

Industry has a long history of collaboration with academic medicine that has contributed to our educational, clinical, service, and research missions. These partnerships have often benefitted individual and public health through the development of new drugs, devices, equipment, computer technology, therapies, and services. For example, industry provides grants to Emory University to fund clinical trials and other research conducted by faculty; and faculty consult with industry to advise on research directions and health needs.

The primary intent of this policy is to support faculty, staff, students, and trainees in effectively engaging in relationships with outside entities. The individual, the School and University can work together to enhance the beneficial outcomes of personal external relationships and to prevent situations that might create actual or perceived conflicts of interest and might harm the public, the institution, or the individual. [View the entire policy.](#)

Emory SOM students:

- May not accept gifts from industry, on or off the Emory campus (pens, pads, cash, food and drink, entertainment, books, software, etc.). Travel expenses are also considered a gift, and therefore prohibited.
- May not accept donations of medications.
- Must not disclose information regarding clinical trials of medical devices or drugs to any outside entity.
- Must not provide advice or training to industry regarding selling, marketing, or promoting of a company's products.
- May not receive remuneration for listening to sales talks or attending industry-sponsored education and training.
- May be part of interactions between industry representatives and faculty that concern research being done by the faculty member and industry, as long as the meeting does not include sales, marketing, or promotion.
- Must cooperate with inquiries from Emory administrative offices regarding compliance with these policies.
- Submit proposals for personal, external professional relationships with industry and other entities to the Dean for review and approval prior to engaging or receiving compensation for the activities.

Additional regulations in this policy include:

- Commercial Exhibits are prohibited in School of Medicine Buildings.
- Any book or educational material that is recommended by a faculty member who has a financial interest in the book or material must be approved by a committee formed by the faculty member's chair.
- Faculty presentations to School of Medicine students and residents should disclose all their personal, professional financial relationships with industry in each presentation.

Any violation of this policy by a student will be considered unprofessional behavior and will subject the student to actions by the appropriate Progress and Promotions Committee or by an ad hoc Conduct Committee appointed by the Executive Associate Dean for Medical Education and Student Affairs.

***Involuntary Withdrawal and Readmission**

Emory University considers the safety and welfare of its students, faculty, staff and patients a top priority. When a student engages in behavior that violates Emory's rules of conduct, the behavior will be addressed as a disciplinary matter under the applicable Student Conduct Code. The Student Conduct Code defines prohibited conduct and outlines a process for conducting disciplinary proceedings.

This Involuntary Withdrawal Policy and Procedure is not a disciplinary code, policy or process. It is not intended to apply to situations in which a student engages in behavior that violates the University's rules of conduct. It is intended to apply when a student's observed conduct, actions and/or statements indicate a direct threat to the student's own health and/or safety, or a direct threat to the health and/or safety of others. There may be situations in which both this Involuntary Withdrawal Policy and the Student Conduct Code may apply. In all cases, the Dean of the School of Medicine shall have final authority regarding the decision, enactment, enforcement and management of the involuntary withdrawal of a student.

Policy Details Criteria

A student may be withdrawn involuntarily from Emory if the University determines that the student represents a direct threat to the health and safety of himself/herself or others by (1) engaging or threatening to engage in behavior which poses a high probability of substantial harm to himself/herself or others; or (2) engaging or threatening to engage in behavior which would cause significant property damage, would directly and substantially impede the lawful activities of others, or would interfere with the educational process and the orderly operation of the University; or (3) is unable to fulfill his/her role as a student of the healthcare profession.

Procedure

When the Executive Associate Dean for Medical Education and Student Affairs (EAD) or his/her designee, based on a student's conduct, actions or statements, has reasonable cause to believe that the student meets one or more of the criteria for involuntary withdrawal, he or she may initiate an assessment of the student's ability to safely participate in the University's program.

The EAD initiates this assessment by first meeting with the student to (1) review available information concerning the behavior and/or incidents which have caused concern, (2) provide the student with a copy of this Involuntary Withdrawal Policy and Procedure and discuss its contents with the student, (3) provide the student an opportunity to explain his/her behavior, and (4) discuss options available to the student, including counseling, voluntary withdrawal and evaluation for involuntary withdrawal. If the student agrees to withdraw voluntarily from the

University and waives any right to any further procedures available under this policy, the student will be given a grade of W for all courses, will be advised in writing of any conditions that must be satisfied prior to re-enrollment, and may be referred for appropriate mental health or other health services. If the student refuses to withdraw voluntarily from the University, and the EAD continues to have reasonable cause to believe the student meets one or more of the criteria for involuntary withdrawal, the EAD may require the student to be evaluated by an appropriate mental health or other healthcare professional.

Evaluation

The EAD may refer the student for a mandatory evaluation by an appropriate mental health professional or other appropriate professional. The professional may be selected by the University, so long as there is no cost to the student for the evaluation. A written copy of the involuntary referral shall be provided to the student.

The evaluation must be completed within five school days after the date the referral letter is provided to the student. Prior to the evaluation, the student will be required to sign a written authorization authorizing the exchange of relevant information among the mental health professional(s) (or other professional) and the University. Upon completion of the evaluation, copies of the evaluation report will be provided to the EAD and the student.

The professional making the evaluation shall make an individualized and objective assessment of the student's ability safely to participate in Emory's program, based on a reasonable professional judgment relying on the most current professional knowledge and/or the best available objective evidence. This assessment shall include a determination of the nature, duration and severity of the risk posed by the student to the health or safety of himself/herself or others, the probability that the potentially threatening injury will actually occur, and whether reasonable modifications of policies, practices or procedures will sufficiently mitigate the risk. The professional will, with appropriate authorization, share his/ her recommendation with the EAD, who will take this recommendation into consideration in determining whether the student should be involuntarily withdrawn from Emory. A copy of the professional's recommendation will be provided to the student, unless, in the opinion of the professional, it would be damaging to the student to do so.

If the evaluation results in a determination that the student's continued attendance presents no significant risk to the health or safety of the student, patients, or others, and no significant threat to property, to the lawful activities of others, or to the educational processes and orderly operations of the University, no further action shall be taken to withdraw the student from the University.

If the evaluation results in a determination that the continued attendance of the student presents a significant risk to the health or safety of the student, patients, or others, such that there is a high probability of substantial harm, or a significant threat to property, to the lawful activities of others, or to the educational processes and orderly operations of the University, the student may be involuntarily withdrawn from the University. In such an event, the student shall be informed in writing by the EAD of the involuntary withdrawal, of his/her right to an informal hearing, of his/her right to appeal the decision of the hearing officer to the Dean of the School of Medicine,

and of any conditions necessary for re-enrollment. In most cases, a student who is involuntarily withdrawn will be given a grade of W in all courses in which the student is currently enrolled.

Informal Hearing

A student who has been involuntarily withdrawn may request an informal hearing before a hearing officer appointed by the EAD by submitting a written request to be heard within two business days from receipt of the notice of involuntary withdrawal. A hearing will be set as soon as possible. The student shall remain involuntarily suspended pending completion of the hearing.

The hearing shall be informal and non-adversarial. During the hearing, the student may present relevant information and may be advised by an Emory faculty or staff member or a health professional of his/her choice. The role of the advisor is limited to providing advice to the student.

At the conclusion of the hearing, the hearing officer shall decide whether to uphold the involuntary withdrawal or whether to re-consider, and the student shall be provided written notice of the hearing officer's decision as soon as possible.

Appeal to the Dean

The student may appeal the hearing officer's decision to the Dean, who shall review all information presented and make a final decision as to whether or not to uphold the involuntary withdrawal.

Emergency Suspension

The University may take emergency action to suspend a student pending a final decision on whether the student will be involuntarily withdrawn, in situations in which (a) there is imminent danger of serious physical harm to the student or others, (b) there is imminent danger of significant property damage, (c) the student is unable or unwilling to meet with the EAD, (d) the student refuses to complete the mandatory evaluation, or (e) the EAD determines such other exceptional circumstances exist that suspension is warranted. In the event emergency action is taken to suspend the student on an interim basis, the student shall be given notice of the emergency suspension and an initial opportunity to address the circumstances on which the emergency suspension is based.

Conditions for Re-Enrollment

Because this Involuntary Withdrawal Policy applies to cases in which there is a concern about the safety of the student or others, the Dean or his/her designee may require a student who has been involuntarily withdrawn under this Policy to be re-evaluated before he/she is readmitted in order to assure that he/ she presents no direct threat to himself/ herself or others.

***Maintaining Academic Eligibility for Financial Aid**

An underlying requirement for all federal, state and institutional financial aid is the need for students to meet minimum academic standards. Students who do not meet these standards may lose their eligibility for financial aid (including loans) even if they meet all other requirements of the aid programs. Some students could lose their eligibility for financial aid even if their academic program allows them to continue with their studies. These minimum academic standards are part of the Financial Aid Satisfactory Academic Progress Policy. *Please note that the Financial Aid Satisfactory Academic Progress Policy is distinct from the Satisfactory Academic Progress that governs progress and promotions.*

Financial Aid Satisfactory Academic Progress Policy

Federal regulations require that students receiving financial assistance maintain satisfactory academic progress. The Office of Financial Aid is required to monitor a student aid recipient's academic progress. Aid recipients must meet certain quantitative and qualitative measures and complete their programs within a maximum time frame. All students who receive financial aid, whether from federal, state or Emory-funded sources, must be enrolled degree candidates in good standing to retain financial aid awards.

Scope

This policy applies to those students receiving Title IV federal aid, state aid and university- and school-funded aid.

Students may receive financial aid for a limited amount of time, depending on the standard length of their specific academic program. The general guideline is 150% of the required time to complete the program with full-time status. For example, a student in a four-year program must complete it within six years. Students attending part-time can have their time limit extended proportionately.

Students who do not meet this requirement will be suspended from financial aid eligibility.

Completion of Course Requirements

Students must complete with passing grades at least 75% of the credit hours for which they registered, paid fees for, and completed each academic year (fall through summer semesters). Students who fail to meet this 75% standard due to unsatisfactory or failing grades will be placed on financial aid probation. Any students on financial aid probation must complete 75% of all enrolled courses during the next academic year (fall through summer semesters), or they will be suspended from financial aid eligibility.

As soon as incomplete grades are changed to earned grades, the students' financial aid probationary or suspension status may be lifted if the grades meet academic program standards.

Progress and Promotion

Each academic program has a Progress and Promotions Committee that meets regularly to review the academic progress of each student. If a Progress and Promotions Committee determines a student is not meeting the requirements leading to completion of the degree, that

student will be placed on financial aid probation for one academic year.

Since the Committees are charged with evaluating students on character, professionalism, attitude and abilities in addition to academic achievement, the Committees may determine that a student is not making satisfactory progress even if the student is meeting the conditions above. In the event a student is determined to not be meeting the program standards by the Progress and Promotions Committee, the Committee's decision will prevail.

If a Progress and Promotions Committee deems that a student on financial aid probation is not meeting the program's degree requirements at the end of the probationary year, the student's financial aid eligibility will be suspended.

Appeals of Financial Aid Suspension

A student whose financial aid has been suspended may appeal by indicating in writing why he/she did not achieve minimum academic standards and what he/she will do to achieve these goals in the future. The letter should be directed to the Associate Director of Financial Aid, Scholarships and Student Affairs in the School of Medicine. Each appeal will be considered on its own merit, and individual cases will not be considered as precedent.

The Associate Director of Financial Aid, Scholarships and Student Affairs will meet with the Financial Aid Appeals Committee within one week of receiving the appeal letter. The Financial Aid Appeals Committee will consist of staff in the Office of Medical Education and Student Affairs. A majority of the Committee members present will make a decision on the merits of the appeal. The student will be advised of the Committee's decision in writing within one week of the appeal's consideration.

A student whose appeal is denied by the Financial Aid Appeals Committee may appeal that decision by writing a new appeal letter to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean will make a decision within two weeks of receiving the appeal letter and advise the Associate Director of Financial Aid of that decision. The Associate Director of Financial Aid will notify the student in writing within one week of receiving the Executive Associate Dean's decision.

Reinstatement

A student shall be reinstated for financial aid eligibility at such time as he or she successfully completes sufficient hours; has achieved an acceptable grade as set forth in this policy; or has met the conditions imposed on him/her by the Progress and Promotions Committee.

It is the student's responsibility to prompt the Associate Director of Financial Aid at the time of meeting the requirements for reinstatement.

Enforcement

The Associate Director of Financial Aid, Scholarships and Student Affairs shall have primary responsibility for enforcing this policy. The Office of the Registrar, the academic programs and other offices that maintain student information relevant to enforcement of the policy shall provide appropriate information to the Associate Director of Financial Aid when necessary.

Private student loans with less favorable repayment terms may be available to cover living expenses for students who do not meet the terms of the Financial Aid Satisfactory Academic Progress.

***Mandatory Health Insurance**

Student Health insurance coverage for sickness, accidents and hospitalization is required of all Emory students. [See Emory Mandatory Student Insurance Policy 8.7](#). All new and continuing degree-seeking and international Emory University students are required to have health insurance. Coverage must be continuous from the date of matriculation until the date of graduation and must meet University minimum coverage requirements.

The Emory University Student Health Insurance Plan (EUSHIP) provides care for enrolled Emory students. View an overview of the [Emory University Student Health Insurance Plan](#).

All students are automatically enrolled and charged for the Emory University Student Health Insurance Plan. The charge will appear on students' tuition statements.

Students who have health insurance coverage through another carrier must complete an online waiver in [OPUS](#) confirming they have health insurance coverage that is comparable and meets Emory University waiver criteria. The Health Insurance Waiver site opens every spring (April or May) prior to matriculation. After the online waiver has been completed and approved through the online audit process, the charge for the Emory University Student Health Insurance Plan will reverse on the student's university account.

Incoming students must **complete the waiver by the August date** as those students start in the fall term. Beginning with students' second year, the waiver process **must be completed annually** for EACH year they are enrolled at Emory.

Maintaining health insurance coverage is a requirement for continued enrollment. Students are responsible for informing themselves of the current policy.

As a result of national healthcare reform, students may be eligible to remain on a parent's insurance plan until age 26. Contact your insurance carrier if you have questions about current federal or state law.

***Personal Recordings**

Students are not permitted to record (either via audio or video) any Emory School of Medicine educational event without the prior expressed authorization of the faculty member. Furthermore, audio or video recording of meetings, phone calls, conversations, patients, or of any content involving others is prohibited unless prior consent of all parties involved is obtained. Violation of this rule may be deemed a violation of the Student Conduct Code, and improper use of any curricular material, including recordings, may constitute infringement of intellectual property rights.

***Research Studies Involving School of Medicine Students as Subjects**

All research studies that include Emory School of Medicine medical students as subjects (i.e. any study that requires human subject protections as defined in [HHS 45CFR46](#)) must be approved by the School of Medicine. This policy includes: all studies performed by Emory University School of Medicine students on other students, studies by Emory University School of Medicine faculty members, studies performed by students or faculty members from all other LCME-accredited medical schools, or all others. Internal approval of a study does not replace the judgment of the Emory Institutional Review Board (IRB) and consent may be contingent on obtaining the appropriate IRB approval. All requests to conduct studies using Emory University School of Medicine medical students as subjects should be directed to the Associate Dean of Medical Education, Dr. Erica Brownfield.

***Separation of Roles**

Faculty and house staff members' professional or personal roles, should not conflict with their roles as teachers and evaluators of students. Faculty and house staff members who have a professional, personal, or familial relationship to a student, including providing health services or psychiatric/psychological counseling, should not have any involvement in the academic assessment of that student.

All faculty and house staff members are required to recuse themselves of assessing a student with whom they have such a conflict. For any student assessment they complete, faculty and house staff must attest that no conflict exists.

Students must notify the Executive Associate Dean of Medical Education of any potential conflicts of interest in order to allow for changes in a resident or faculty teaching assignment. Students will be reassigned to a different faculty or house staff member for coursework and subsequent assessment. Any information provided to the Executive Associate Dean regarding potential conflicts will be treated as confidential.

***Student Agreements, Consents, and Releases**

Student Agreements

All medical students must enter into an agreement with Emory University and the Emory School of Medicine to follow all policies and regulations and to abide by the standards of the Conduct Code and Honor Code. All policies and regulations included in these agreements can be found in the Student Handbook.

Students must also agree to use the systems and software required by the school for evaluation and communication.

All student agreements will be signed upon matriculation.

Student Consents and Releases

Students must release certain information, including specific protected health information (PHI), to the Emory School of Medicine and allow the School of Medicine to provide this information to Emory facilities and to any outside institution that requests verification of immunization status prior to participation in any required, elective or voluntary clinical experience related to medical training at Emory School of Medicine.

Students must allow the Emory School of Medicine to release information to other departments of the University, such as Student Health Services and the Office of Financial Aid, in order to verify or certify services, scholarship eligibility, or other items necessary for the continuation of enrollment and to meet all state and federal health and safety requirements.

All students must also give their consent to be photographed and recorded. Many of the clinical and professional skills assessments require that faculty and students view recordings of their assessments together.

If a student should refuse to provide or revoke any of these consents or releases, the student should understand that such action might affect the student's ability to meet the requirements for the degree and eligibility to graduate.

These consents and releases must be provided by the student upon matriculation and will remain in effect throughout the student's enrollment or until such time as consent is revoked, in writing, by the student.

***Student Mistreatment**

The School of Medicine strives for an environment that is respectful of all community members and does not tolerate mistreatment of students. Emory students are protected by two University Policies as stated in the following two paragraphs.

[The University Equal Opportunity and Discriminatory Harassment Policy \(Policy 1.3\)](#) is incorporated into this Policy. Per Policy 1.3, Emory encourages anyone who has knowledge of discrimination on campus to report alleged violations of Policy 1.3 to the Department of Equity and Inclusion. Emory faculty, administrators and supervisors are required to immediately report any complaints they receive or incidents of discrimination or discriminatory harassment they witness, to their immediate report or to the Department of Equity and Inclusion.

Per the Emory University [Sex and Gender-Based Harassment and Discrimination Policy \(Policy 8.2\)](#) every university employee who is informed about an allegation of sexual misconduct involving any student is required to notify the Department of Title IX.

In conjunction with the two University Policies listed above, the School of Medicine Student Mistreatment Policy addresses additional types of behavior that will not be tolerated. Mistreatment of medical students includes, but is not limited to, students:

- Being treated in a manner that a reasonable person would find belittling, humiliating insulting or disrespectful under the circumstances
- Being sexually harassed
- Being denied opportunities for training or rewards, or receiving lower evaluations or grades based on the basis of any prohibited consideration, including race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran’s status, or any factor that is a prohibited consideration under applicable law (referred to as “prohibited considerations”).
- Being maliciously and intentionally left out of communications to the detriment of a student
- Being subjected (directly or indirectly) to offensive sexist, racist, or ethnically offensive remarks or names
- Being required to perform inappropriate personal services (i.e. babysitting, shopping)
- Being threatened with physical harm (e.g. hit, slapped, kicked)

Reporting Mistreatment

Student mistreatment is contrary to the values, respect, civility, and community as set forth in the University's Statement of Ethical Principles. Medical students who experience mistreatment themselves or observe other students experiencing possible mistreatment are expected and encouraged to follow the following reporting process.

The initial step is for students to discuss the incident of mistreatment with their **Program Director** in a confidential but not anonymous manner. The Program Director has the experience to understand the context of the alleged offense and the training to guide the student to the next most appropriate action steps for resolution.

Students may choose to seek resolution through several other pathways. Any or all of the following persons may be contacted in seeking guidance to resolve an incident of experienced or observed mistreatment:

1. A different faculty member
2. One of the Deans of the School of Medicine
3. The Executive Associate Dean for Medical Education and Student Affairs

The faculty members and Deans are trained to respond to complaints related to student mistreatment. The faculty members and Deans will report any alleged mistreatment to appropriate School and/or University officials as per the policies that apply to the report.

After discussing the mistreatment with the Program Director, a faculty member, or a dean, subsequent actions by the student may include any or all of the following:

Direct Communication with the Person Alleged to have Mistreated the Student

If the student feels comfortable speaking directly with the alleged offending person to address concerns and obtain an appropriate resolution, the student may do so.

File an Internal Complaint (within the School of Medicine)

A student who believes he or she has been mistreated may file a written complaint (via email or hard-copy) with the Executive Associate Dean for Medical Education and Student Affairs. The complaint should include the name(s) of those accused of mistreatment, the names of any witnesses of the alleged mistreatment, the nature of the alleged action(s), the date and times of the alleged action(s), and any adverse consequences experienced by the student.

If the mistreatment includes alleged sexual misconduct by a student, a report will be submitted to the Department of Title IX. If the mistreatment is alleged to be of a discriminatory nature and by a staff member, a faculty member, or others in the educational environment, the report will be submitted to the Department of Equity and Inclusion (DEI) for review.

If the alleged mistreatment is not sexual or discriminatory harassment, the Executive Associate Dean for Medical Education and Student Affairs will investigate the alleged mistreatment and make a report to the Dean of the School of Medicine, when possible, within 30 days of the filing of the complaint. The Dean or his or her designee will be responsible for deciding upon and imposing disciplinary action(s).

File an External Complaint

If a student believes he or she has been subjected to unlawful discrimination, harassment, or retaliation as described in Emory University Policy 1.3, the student may file a complaint with the Equal Employment Opportunity Commission.

Prohibition of Retaliation

The School of Medicine prohibits retaliation against a student who, in good faith, complains about or participates in an investigation of student mistreatment. Any student who feels he or she has been retaliated against or threatened with retaliation should report the allegation immediately to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean for Medical Education and Student Affairs will investigate the alleged retaliation and make a report to the Dean of the School of Medicine, when possible, within 30 days of the filing of the complaint. The Dean, or his or her designee, will be responsible for deciding upon and imposing disciplinary action(s).

While mistreatment issues may be written in student evaluations of residents or faculty and evaluations of courses or clerkships, students should **NOT** rely on those mechanisms as the primary or sole means to report mistreatment. The reporting mechanisms described above have been established to produce a timely and effective resolution to any mistreatment concerns.

Section 3: Program and Departmental Policies

***Bulletin Board Notices**

Check the bulletin board located in the Student Commons Area occasionally. Schedule changes, continuing education notices, job opportunities, and other pertinent information will be posted.

***Cell Phone Policy**

All students must turn cell phones off during all educational activities (Class, lab, clinical assignments). These devices are disruptive to the educational activities and should only be activated during breaks. **Students may have cell phone with them in the clinical education setting; however, the phone should be turned off or to a silent mode. Cell phones should NEVER ring or be answered when a student is participating in clinical or class activities.** Violation of this policy will result in disciplinary action.

***Conduct Requirements: Department of Radiology and Imaging Sciences**

While working in the Department or any assigned area the student must conduct himself in a manner consistent with the ideals of the Program of Radiologic Technology. The student should:

1. conform in every way to the general policies of the Department of Radiology.

Policy #HR 201

Imaging Services

Section:

Department of Radiology and Imaging Sciences

Policy Section:

Human Resources

Policy Statement:

Department of Radiology and Imaging Sciences employees will display understanding, courtesy, tact and cooperation towards all patients, patient's family, visitors, physicians, and fellow employees at all times.

Scope/Procedure:

1. The Department of Radiology and Imaging Sciences is responsible for all employees under its direction and shall insure that each employee provides prompt and efficient service in a courteous, professional manner.
2. It is the responsibility of each employee to exhibit a friendly, helpful attitude to provide the best possible service to our patients, patient's family and guests. This professional behavior shall not be limited to the employee's work area, but shall extend to the entire hospital.

3. Department leadership shall communicate to each employee the department's standard and expectations with regard to:
 - A. Proper introduction.
 - B. Responsiveness to requests for information or assistance.
 - C. Telephone courtesy.
 - D. Personal appearance and neatness of work area.
 - E. Mutual respect and cooperation should be exhibited by each employee to everyone with whom they come into contact, e.g., patients, patient's family, management co-workers, medical staff and visitors.
 4. All employees must meet the behavior and guest relations requirements or may receive disciplinary action to include suspension and/or termination.
2. conscientiously observe the ethical directives specific to the Department of Radiology and Imaging Sciences. The student is not to render interpretation of radiographs or reveal radiographic findings to patients, friends or relatives.

The following inappropriate behaviors will not be tolerated and may constitute disciplinary action or dismissal from the program:

1. Failure to complete clinical education satisfactorily.
2. Inability to maintain satisfactory grades and/or cutting classes.
3. Insubordination.
4. Alcohol or drug abuse while on duty or affecting duty.
5. Failure to develop those qualities considered essential to the ethical practice of radiography.

***Confidential Information**

Confidential information learned about a patient in the exercise of your duty must be regarded as a sacred trust and may never be divulged. By your work and professional relationships with the patients, you will learn many things about their illness, treatment and even their personal lives. This **INFORMATION SHOULD NOT BE DISCUSSED WITH ANYONE** either inside or outside the hospital. Students will be required to attend HIPAA training and sign a confidentiality agreement that will be maintained in the student's file throughout their tenure in the program.

***Inclement Weather Policy (ABBREVIATED)**

Delayed Openings: In cases of delayed openings, the entire University will be open and operating at a specific time to be announced by 5:30 a.m. on local radio and television stations. If it is not possible to specify an opening time, but it is expected that the University will open at some point during the day, an announcement to this effect will be made.

University Closing: In the case of delayed opening or closing, the University Provost will contact the Director of the University News and Information Office, who will contact the local

media. The University News and Information Office will contact the following stations: Radio: WSTR, WZXI, WSB AM and FM, WCNN, WGST, WFOX, WYAY, and WAOK. Television: WAGA, WXIA, WSB, and WGNX. The Provost will also contact others in an officially established phone chain who will, in turn, contact other offices in the University. **You can call 404-727-1234 to confirm the hours of university operation.** In cases of inclement weather, an e-mail notice will be sent to all students. Please check your university e-mail to confirm the cancellation of class or clinical assignments.

***Outside Employment of Students**

The schedule of studies in the School of Medicine, Medical Imaging Program requires the full-time commitment of the student. The administration, therefore, views with disfavor outside employment that may interfere with the quality of academic performance. It is recommended that students discuss their situation with the program director before accepting outside employment. **It is also recommended that students never accept a position that requires more than twenty (20) hours of work per week.**

***Personal Relationships**

ADMINISTRATION: The student is expected to demonstrate loyalty and generous cooperation, so that the Emory Healthcare system may fulfill the obligation of adequate patient care.

PHYSICIANS: To the radiologist the student owes loyalty and obedience in all matters pertaining to the department of which they are the directors. He/she also owes him/her the respect and courtesy due a member of the medical profession. Specifically:

- a. Always address him/her by the title "Doctor";
- b. Willingly conform to his/her directives; and
- c. Graciously accept his/her corrections.

To all other physicians using the clinical facilities, he/she owes the same respect and prompt, cheerful service.

FACULTY AND STAFF: To the department faculty and staff falls the responsibility of seeing that order and conformity prevail in the department; therefore, the student should readily attend their assignments and directions.

PATIENTS: The students should endeavor to instill within themselves the highest ideals of charity toward the sick. Moreover, they should:

- a. Treat the patients with a warm and friendly approach, but with reserve.
- b. Clothe them and perform all examinations with due regard to modesty. The patient should always have an x-ray gown and be properly covered.
- c. Explain all procedures, answer the patient's questions and have the courtesy to give them the feeling of personal contact.

- d. Carefully watch the aged, unconscious, mentally ill, and children.
- e. Anticipate patients' needs and handle them with due regard to their condition.

***Personal Visitors**

Personal visitors are not permitted during class or clinical hours. If you wish to have anyone visit the department, permission must be obtained. This policy applies to all clinical assignments.

***Professional Society Membership**

Professional society membership allows the student the opportunity to become aware of trends in the profession, to make professional contacts, to become aware of new imaging techniques, and to make new friends. The Atlanta Society of Radiologic Technologists is the local professional organization. The Atlanta Society holds quarterly scientific meetings and your attendance is encouraged. Program faculty members also recommend that you join the Georgia Society and the American Society of Radiologic Technologists, in addition to the Atlanta Society.

***Snacking and Smoking Areas**

Smoking is no longer permitted on the Emory campus. Gum is never chewed when there might be patient contact. Food is never eaten where there might be patient contact. All food must be restricted to the lounge area in each clinical department.

Technical Standards for the Bachelor of Medical Science, Medical Imaging Program

Essential abilities and characteristics required for completion of the Bachelor of Medical Science, Medical Imaging Program (“Program”) consist of certain minimum physical and cognitive abilities and sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation are able to complete the entire course of study and participate fully in all aspects of medical training, with or without reasonable accommodation.

The following abilities and characteristics are defined as technical standards, which, in conjunction with academic standards established by the faculty, are requirements for admission, promotion, and graduation.

The Program has an ethical responsibility for the safety of patients with whom students and graduates will come in contact. Although students learn and work under the supervision of the faculty, students interact with patients throughout their education. Patient safety and well-being are therefore major factors in establishing requirements involving the physical, cognitive, and emotional abilities of candidates for admission, promotion, and graduation. Students must have the physical and emotional stamina and capacity to function in a competent manner in the hospital, classroom, and laboratory settings, including settings that may involve heavy workloads, long hours, and stressful situations. Individuals whose performance is impaired by abuse of alcohol or other substances are not suitable candidates for admission, promotion, or graduation.

Students enrolled in the Program are required to possess the following physical, mental, and emotional skills, with or without reasonable accommodation:

- I. **Observation:** The student must be able to:
 - a. Participate actively in demonstrations and experiences in the classroom, laboratory, and clinical environments;
 - b. Observe patients accurately and completely, both at a distance and close at hand, and assess findings;
 - c. Observe and appreciate nonverbal communications when performing an assessment and performing imaging exams and duties;
 - d. Obtain a medical history;
 - e. Visually monitor patients in low levels of light;
 - f. Distinguish between shades of gray or colors on medical images; and
 - g. Hear sufficiently to provide safe and efficient patient care and effectively communicate with healthcare personnel.

- II. **Communication:** The student must be able to:
 - a. Communicate effectively and efficiently with a degree of sensitivity and cultural appropriateness with students, faculty, patients, their families, and members of the healthcare team;
 - b. Establish good rapport with patients, interpret non-verbal aspects of communication, and convey or exchange information at a level allowing development of a health history;
 - c. Process and communicate information regarding the patient's status with accuracy in a timely manner to members of the healthcare team;
 - d. Record information accurately and clearly; and
 - e. Read and interpret patient charts and requisitions for medical imaging examinations.

- III. **Motor Function:** The student must have sufficient strength, motor coordination, and manual dexterity to:
 - a. Execute movements required to provide for the general care and treatment to patients in all healthcare settings;
 - b. Move, adjust, and manipulate a variety of medical imaging equipment, including the physical transportation of mobile radiographic machines, in order to arrange and align the equipment with respect to the patient and the image receptor according to established procedure and standards of speed and accuracy;
 - c. Transport, move, lift, and transfer patients from a wheelchair or stretcher to an exam table or to a patient's bed;

- d. Provide physical and emotional support to the patient during the radiographic procedures; and
- e. Respond to situations requiring first aid and provide emergency care to the patient in the absence of or until the physician arrives.

IV. **Intellectual-Conceptual, Integrative, and Quantitative Abilities:** The student must have sufficient cognitive (mental) abilities and effective learning techniques to assimilate the detailed and complex information presented in the curriculum. The student must be able to:

- a. Learn through a variety of modalities including, but not limited to, classroom instruction; small group, team and collaborative activities; individual study; preparation and presentation of reports; and use of computer technology;
- b. Self-organize his/her time, independently manage multifaceted demands and schedules;
- c. Memorize, measure, calculate, reason, analyze, synthesize, and transmit information across modalities;
- d. Comprehend three-dimensional relationships and understand the spatial relationships of structures;
- e. Calculate and select proper technical exposure factors according to the individual needs of the patient and the requirements of the procedure's standards of speed and accuracy; and
- f. Review and evaluate the recorded medical images for the purpose of identifying proper patient positioning, accurate procedural sequencing, proper radiographic exposure, and other appropriate and pertinent technical qualities.

V. **Behavioral and Social Attributes:** The student must possess the emotional health and maturity required for full utilization of his or her intellectual abilities, the exercise of good judgment, maintenance of patient confidentiality, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients, faculty, staff, and students. The student must be able to:

- a. Work effectively, respectfully, and professionally as part of a healthcare team;
- b. Interact with patients, their families, and healthcare personnel in a courteous, professional, and respectful manner;
- c. Tolerate taxing workloads, function effectively under stress, and display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of patients;
- d. Contribute to collaborative, constructive learning environments; accept constructive feedback from others, and take personal responsibility for making appropriate positive changes; and

- e. Display the personal qualities of compassion, integrity, concern of others, interest, motivation, and interpersonal skills.

The Program is sensitive to the needs of individuals with disabilities and will not discriminate against qualified individuals with disabilities who apply for admission or who are enrolled in the Program. Although these standards serve to delineate the necessary physical, mental, and emotional abilities of all applicants and students, they are not intended to deter anyone for whom reasonable accommodation will allow the fulfillment of the complete curriculum. Any applicant or student with questions regarding these technical standards are encouraged to contact the Department of Accessibility Services (“DAS”) (<http://accessibility.emory.edu/index.html>) immediately to begin to address what types of accommodation may be considered for development to achieve these standards. Admission to the Program is conditional on the applicant having the ability to satisfy these technical standards, with or without reasonable accommodation, and results from a process that examines and values all of the skills, attitudes, and attributes of each applicant on a case-by-case basis. It is the responsibility of a student who seeks a reasonable accommodation(s) to contact DAS.

The Director of the Program welcomes questions or inquiries regarding these technical standards and their application to the unique circumstance of each applicant or student.

** Developed in compliance with Section 504 of the Rehabilitation Act of 1973, the American with Disabilities Act of 1990, and the ADA Amendments Act of 2008.*

***Telephone Etiquette**

Good telephone habits can give people the feeling that they are receiving our interest, that we are serving them and that we are friendly, helpful and considerate. Let these principles be your guide in using the department phones:

1. Answer promptly with the standard greeting:
“Thank you for calling the “clinical setting”, Department of Radiology and Imaging Sciences. This is “your name”. How may I help you?”
2. Transfer calls tactfully;
3. Give accurate and careful answers; and
4. Hang the receiver up carefully.

Because of limited telephone facilities and the need for the telephone in connection with proper care of patients, **personal calls are not permitted while in clinical rotations, except in emergency situations.**

You can be reached in case of an emergency by giving outside callers the following contact information:

Program Office

(404) 712-5005

med.imaging.program@emoryhealthcare.org

Ted Brzinski	(404) 712-1229 ted.brzinski@emory.edu
Kimberly Cross	(404) 712-0294 kgreen6@emory.edu
Ajeenah Bullock	(404) 712-1673 ajeenah.bullock@emory.edu
Jacki Harmon	(404) 712-8761 jacki.harmon@emory.edu
Lamiis Khalifa	(404) 712-1228 lkhalif@emory.edu
Sean Strickler	(404) 712-2167 sean.strickler@emory.edu
Kimberly Reese	(404) 712-1160 kimberly.c.reese@emory.edu

Telephone dialing instructions:

To reach the Emory Operator:

Dial "0"

On-campus calls:

Dial 7, 8 or 2 plus the last four digits.

Off-campus calls:

Dial "9" and the local number.

PART III: ADMINISTRATION

Section 1: Dean and Executive Associate Dean

Dean

Vikas P. Sukhatme, MD, ScD
James B Williams School of Medicine
100 Woodruff Circle, Suite 423
Atlanta, GA 30322
(404) 727-5631

Executive Associate Dean

The Executive Associate Dean for Medical Education and Student Affairs is responsible for oversight and coordination of educational programs within the School of Medicine. These programs include Continuing Medical Education (CME), Graduate Medical Education (GME), Undergraduate Medical Education (UME), and Health Professions Education. The Medical Imaging Program is one of five Health Professions programs in the School of Medicine.

J. William Eley, MD, MPH

Executive Associate Dean, Medical Education and Student Affairs
School of Medicine
100 Woodruff Circle, Suite 453
Atlanta, GA 30322
jeley@emory.edu
404-712-9979 office
404-310-6022 cell

Section 2: Office of Medical Education and Student Affairs (OMESA)

[Office of Medical Education and Student Affairs](#)

James B. Williams School of Medicine
Third Floor, Room P375
100 Woodruff Circle, Atlanta, GA 30322
Main Line – (404) 727-5655

***OMESA Administration Deans**

Douglas Ander, MD

Assistant Dean, Medical Education
dander@emory.edu
404-251-8828

Marilane Bond, EdD, MBA

Associate Dean, UME, GME, CME, Allied
Health
mbond@emory.edu
404-712-9644

Erica Brownfield, MD

Assistant Dean, Medical Education
ebrownf@emory.edu
404-727-3400

Gordon Churchward, PhD

Assistant Dean, Medical Education and
Student Affairs
gordon.churchward@emory.edu
404-712-9943

Joel Felner, MD

Associate Dean, Clinical Education
jfelner@emory.edu
404-778-1372

Ira Schwartz, MD

Associate Dean, Student Affairs
Director of Admissions
ischwar@emory.edu
404-727-5660

Hugh Stoddard, MD

Assistant Dean, Medical Education
hugh.stoddard@emory.edu
404-727-8451

***Emory Center for Experiential Learning (ExCEL)**

The Emory Center for Experiential Learning (ExCEL) is located in the James P. Williams School of Medicine Building and includes both the Simulation Center and the Clinical Skills Center. The Center is a state-of-the-art facility encompassing over 10,000 square foot of educational space. ExCEL includes spaces for low-tech task trainers, sophisticated human patient simulators, and virtual reality equipment for surgical techniques.

Simulation rooms have the capacity for direct and remote observation and recording. Much of the equipment will be mobile allowing integration of experiential learning into the classroom and small group learning.

The Clinical Skills (OSCE) Center is used for standardized patient education, clinical skills education, physical diagnosis and other educational experiences. It contains four suites each of which contain a central debrief room with projection capability and 4 examination rooms equipped with examination table and standard clinic equipment.

ExCEL is a resource for the entire School of Medicine. Currently, it is used by many of the school's educational programs, residencies, fellowships, and faculty programs.

TBD

Director, ExCEL Simulation Center

Reginald Adams

Senior Program Associate, ExCELSimulation Center

reginald.adams@emory.edu

404-727-8955

Alison Dean

BLS/ACLS Technology Specialist

ExCEL Simulation Center

alison.e.dean@emory.edu

404-727-2231

***Student Affairs and Enrollment Services**

Student Affairs processes student enrollment and class registration and provides resources to support and promote students during their development at Emory School of Medicine. Some of the specific functions of this office include:

- Class registration in the Emory PeopleSoft/OPUS system
- Upload final grades for MD students and process grade changes in OPUS

- Process changes to enrollment status for student leaves, dual degree study, and withdrawals in OPUS
- Organize and implement informational class meetings, including Residency Days, for students in their clinical years
- Support EmoryDOCS, which includes: organize and plan student Career Advising resources, activities, and class meetings, maintain and update the EmoryDOCS website
- Assign space for classrooms, conferences, and other meetings in the School of Medicine building space using 25Live
- Arrange access to the School of Medicine Building after hours for after-hours events and for students with ID prox cards
- Enrollment verification and letters of good standing
- Request exclusion of jury duty during medical school rigors on behalf of students
- Initiate emergency loan requests
- Facilitate, monitor and ensure compliance of students' annual vaccination and healthcare training requirements (PPD, flu shot, OSHA, HIPAA)
- Generate Intent to Graduate letters
- Degree verifications for state medical board/residency programs
- Notary Public services
- Monitor and facilitate the sign up for USMLE Step 1 board examination
- Assign student lockers in the student lounge, in the anatomy locker rooms, and in the basement for use by bicyclists
- Lost and found for the School of Medicine building
- Provides services to students on all campuses and has staff members on both the main Emory and Grady campuses.

Mary Kaye Garcia, Registrar & Associate Director

Student Affairs

Emory University School of Medicine

marykaye.garcia@emory.edu

404-712-9921

Emory Campus

- **Kim Hemingway**
Assistant Director of Registration and Student Affairs
kimberly.m.hemingway@emory.edu
404-712-9930
- **Shikina Harrison, MS**
Program Coordinator
Career Counseling and Student Affairs
shikina.harrison@emory.edu
404-727-4335

***Financial Aid**

TBD

Associate Director

Financial Aid, Scholarships and Student Affairs
404-727-5683

The goal of Financial Aid staff is to help students find the necessary resources to cover their educational and living expenses and provide counseling to minimize and manage personal expenses while enrolled. It reviews applications for financial assistance to determine eligibility for federal and University funds and certifies loan applications. In addition, Financial Aid staff offer education loan indebtedness counseling for all students.

For additional financial aid information see:

<https://med.emory.edu/education/financial-aid/index.html>

***Registrar**

Mary Kaye Garcia, Registrar

Associate Director, Student Affairs
Emory University School of Medicine
marykaye.garcia@emory.edu
404-712-9921

The School of Medicine Registrar works closely with the University Registrar and maintains the permanent records and academic documents of all active and former Doctor of Medicine students.

The Registrar is also responsible for:

- Processing requests from students and alumni to view permanent student records
- Maintaining the School of Medicine course catalog and making the necessary annual updates
- Updating the MD program course descriptions and other pertinent information in Oasis
- Managing the registration of all students in their classes each term
- Verifying the accuracy of student grades in the Emory PeopleSoft/OPUS system
- Providing GPA reports for consideration of induction into AOA (MD program) and final honors for graduation
- Managing student enrollment changes
- Monitoring satisfactory progress and advancement to the next phase of the curriculum for MD students
- Ensuring degree candidates have met all graduation requirements

- Certifying graduates with the University, AAMC, and the NBME
- Submitting graduate list of honors students to the University registrar for notation on transcript
- Data reporting on student demographics, enrollment, and academic progress

Section 3: Department and Program Personnel

***Department Chair**

Carolyn Meltzer, M.D.
 William P. Timmie Professor and Chair
 Radiology and Imaging Sciences
 Executive Associate Dean, Faculty Advancement, Leadership and Inclusion

***Program Faculty and Staff**

Ted Brzinski, M.E.S., R.T.(R) Instructor	Program Director
Kimberly Cross, M.S.R.S., R.T.(R)(CT) Instructor	Clinical Coordinator Assistant Program Director
Ajeenah Bullock, M.S.R.S., R.T.(R)(CT) Instructor	Radiography Instructor
Jacki Harmon, M.S.R.S., R.T.(R) Senior Associate	Radiography Instructor
Lamiis Khalifa, M.S.R.S., R.T.(R)(MR) Senior Associate	Radiography Instructor
Sean Strickler, M.S.R.S., R.T.(R)(MR), MRSO Associate	MRI Instructor
Kimberly Reese, M.Ed.	Academic Program Associate
Brenda Burroughs, M.H.A.	Sr. Office Assistant

***Students (Class of 2022):**

Aisha Ahmed
Eboney Daniels-Burbridge
Hannah King
Sina Saljooghi

Brandi Carr
Janine Gonzales
Nicki Meyers

***Students (Class of 2023):**

Peyton Allison
Enya Barnes
Dru Blakeney
Margo Delaney
Nick Harris

Aungelic Hughes
Anna Parrish
Fuoad Saliou-Sulley
Savannah Sanderson
Katie Sperano

PART IV: STUDENT RESOURCES

Section 1: Access, Disability Services and Resources

Emory University provides all persons an equal opportunity to participate in and benefit from programs and services afforded to others. Students requiring accommodations are referred to the [Department of Accessibility Services \(DAS\)](#). The DAS office offers a wide variety of services to students with documented disabilities.

As the administrative office responsible for managing access needs, providing ADA accommodations, ensuring compliance with local, state, and federal civil rights regulations pertaining to disability law, and serving as a critical resource for the enterprise, it is DAS's role to embody Emory's commitment to its mission "in work and deed."

DAS assists eligible students and faculty/staff in obtaining a variety of services (i.e., alternative testing, note taking, interpreting, advocacy, mobility/transportation, etc.) and ensures that all matters of equal access, reasonable accommodation, and compliance are properly addressed.

Eligible students and faculty/staff must register and request services —contact DAS at Emory University or Emory's Oxford College. Confidentiality is honored and maintained.

In compliance with the Americans with Disabilities Act, Emory University School of Medicine is committed to making reasonable accommodations to assist students with documented disabilities to fulfill their educational objectives.

Students with disabilities who wish to request accommodations under the ADA must follow the University's procedures for verification of ADA eligibility by submitting supporting documentation to the Department of Accessibility Services (DAS). Once DAS verifies an

individual's ADA eligibility, the student will work with the medical school's Assistant Director of Medical Education, Sherice Allen-Henry, to coordinate their accommodations while matriculating. Further information about documentation requirements and the eligibility process can be found [DAS's website](#).

Once a student's ADA eligibility has been verified, there is no need to repeat the registration process unless the student's situation or needs change. Students must request an updated accommodation letter each term to share with Mrs. Allen-Henry. If an adjustment to an accommodation is needed, it is the student's responsibility to reach out to DAS. Accommodations are only determined by DAS.

Any confidential records and documentation submitted by the student to DAS to support determination of ADA eligibility will be retained and kept confidential in the DAS office. Once an accommodation letter has been generated, it is the student's responsibility to share this letter with the Assistant Director. This is an official notice of the individual's ADA eligibility and guidelines related to reasonable accommodations appropriate for the individual's needs.

It is the responsibility of the student to request needed accommodations. Once a request is made, the student will meet with Mrs. Allen-Henry to assist in the implementation of necessary accommodations. Unless a request is made, and the student authorizes release of the information regarding the need for accommodations to appropriate others (faculty, staff, etc.), the medical school will not proceed with arranging accommodations. No retroactive consideration will be given to students who fail to request or to complete the approval process.

Notification to faculty and others about a student's need for accommodations will contain a statement of the student's ADA eligibility as well as guidelines for necessary accommodations. No information about the student's diagnosis, condition or history will be available in any way to course instructors or others from whom a student might request an accommodation.

The Assistant Director of Medical Education will maintain a folder containing all accommodation letters for each student. Such material will be retained separately from the student's academic file, and access to such material will be limited and appropriate confidentiality will be maintained. The school will not release details related to accommodations that were provided (for example to residency programs, etc.).

Students will be apprised of ADA eligibility within the timeframe that is established by DAS. If a request for eligibility verification is made at the start of an academic period, accommodations cannot be implemented until the student's registration is finalized with DAS. Because of the number of verifications being processed at the beginning of the academic period, students are urged to submit their request for eligibility verification and accommodations as far in advance as possible. Advance preparation will ensure the smoothest availability of needed accommodations.

Requesting Accommodations and Determining Initial Eligibility

Students who need accommodations to participate fully in Emory's programs must file a formal request for accommodations with DAS. This includes students who may develop an impairment due to an illness, accident, or surgery. DAS may be contacted about potential accommodations for a temporary disability. The best time to do so is immediately after registering for classes each semester or term or following the development of an impairment. This allows DAS to adequately coordinate services and provide instructors with reasonable notice.

Students new to Emory or the accommodations process must follow DAS policies and procedures for determining initial eligibility. Determination of eligibility for DAS services and accommodations is not part of the admission process. Returning students will skip this step.

Fill out Emory's [student registration form](#) and submit it along with the appropriate medical/disability documentation.

A DAS staff member will review the application materials and determine appropriate accommodations specific to the individual's disabilities. Accommodations are developed for students on an individual basis and, depending on the course content and format, may vary by semester or term.

If a student is determined to be eligible for reasonable accommodations, a DAS staff member will meet with the student to discuss approved accommodations. Otherwise, DAS may assist the student in identifying voluntary and readily achievable means for meeting his or her needs.

Students have the primary responsibility of advocating for themselves during the accommodation process. They should not rely on their parents, faculty members, or others to do so for them.

Implementing Accommodations

After registering with DAS and receiving approved accommodations, the student will request an accommodation notification letter. Students who are already registered with DAS must request accommodation letters each term.

It is each student's responsibility to contact the Assistant Director of Medical Education, Mrs. Sherice Allen-Henry, to provide a copy of the official notification letter and to schedule a meeting to discuss EUSOM's policy for the administration of accommodations.

A copy of the official notification letter must also be submitted to individual faculty members, clerkship directors and coordinators responsible for teaching and/or administering an assessment of the student in which an accommodation is requested.

Section 2: Frequently Called Numbers

Medical Education/Student Affairs Office	727-5655
Office of Multicultural Affairs	727-0016
Counseling and Psychological Services	727-7450
Counseling, Psychiatric Student Health Services	727-7551
Office of Financial Aid	727-6039
Library Services (Health Sciences)	727-5820
Parking, Emory Office	727-7275
Student Accounts	727-6095
Student Health Services	727-7551
University Registrar	727-6042
University Campus Life Office	727-4407

Section 3: General Diagnostic Clinical Education Settings

Emory University Hospital 1364 Clifton Road, N.E., Atlanta, GA 30322	404-727-7021 404-712-7036 (Radiology)
Emory University Orthopedic and Spine Hospital 1455 Montreal Road, Tucker, GA 30084	404-251-3000 404-251-3094 (Radiology)
Emory University Hospital Midtown 550 Peachtree Street, N.E., Atlanta, GA 30365	404-686-4411 404-686-2326 (Radiology)
Emory University Hospital Midtown (Medical Office Tower) 8 th Floor, 550 Peachtree Street, N.E., Atlanta, GA 30365	404-686-3194 (Radiology)
Emory Johns Creek Hospital 6325 Hospital Parkway, Johns Creek, GA 30097	678-474-7000 678-474-7150 (Radiology)
Emory St. Joseph's Hospital 5665 Peachtree Dunwoody Rd., Atlanta, GA 30342	678-843-7001
Egleston Children's Hospital 1405 Clifton Road, N.E., Atlanta, GA 30322	404-325-6000 404-325-6555 (Radiology)
The Emory Clinic at WCI 1365 Clifton Road, N.E., Atlanta, GA 30322	404-321-0111 404-778-3596 (Radiology)
The Executive Park Sports/ Spine Center 59 Executive Park South, Atlanta, GA	404-778-6261 (Radiology)

Section 4: Infection Control Protocols

See the Medical Imaging Program [Clinical Handbook](#) or [Part VI, Section 4 of the Medical Student Handbook](#).

Section 5: Parking and Transportation

Emory Campus Parking

Parking on the Emory Campus **requires the display of a valid permit**. Only permits issued by Emory Transportation and Parking Services are valid. Permits are the property of Emory University. Permits are non-transferrable and are for use by the permit holder.

Any permit purchased requires submission of vehicle information for all vehicles which will be used with the permit. Vehicle information includes the make, model, color, style, and state issued license plate number. Failure to maintain current vehicle information with Parking Services will result in a fine.

Permits can be requested in person at the Parking Office or online at <https://myaccount.parking.emory.edu/Account/Portal>.

- Acceptance of a permit indicates acknowledgement and agreement to abide by the Transportation and Parking Services Rules and Regulations.
- Parking privileges be suspended or revoked for violation of the Rules and Regulations.
- Permit ownership is nontransferable.
- Falsifying information in order to obtain a permit is a violation of parking regulations.
- There is a replacement cost of a lost or stolen permit which is nonrefundable.
- All vehicles that belong to the immediate family of a student, whether registered with Emory or not, will be considered the responsibility of that individual. Any parking violations charged against that vehicle will be the responsibility of the individual.
- Permit owners are responsible for maintaining current vehicle information with Parking Services.
- Unregistered vehicles with outstanding citations will be identified through the vehicle plate information obtained from the U.S. state registration system. An additional fine will be applied if a vehicle is not registered with Parking Services.
- Individuals with outstanding fines will not be allowed to purchase new permits until the fines are paid in full. Outstanding fines can also result in loss of parking access, immobilization of vehicle, or the vehicle being towed.
- Cars are not to be parked in the loading dock areas unless a special tag is given and are subject to towing and fines.

Emory Parking Permit Costs*

View information about annual and other parking permit costs at <https://transportation.emory.edu/student-parking>.

Parking at Affiliated Hospitals

- **Emory Midtown** – No charge for parking. Arrangements for Medical Imaging students are made by Kimberly Reese.
- **Other Emory Hospitals and Clinical Locations** – Parking information will be provided by the Clinical Coordinator or faculty.
- **CHOA** – Emory students use Emory parking office arrangements.

Shuttle Services

- Emory Transportation Services offer shuttles on campus, for commuters, between major affiliated hospitals and other routes such as Georgia Tech, Oxford and shopping facilities. In addition, late-night service and SafeRide are available.
- **Cliff routes & schedules can be found on the Emory Website**
<http://transportation.emory.edu/shuttles/index.html>.
- **Contact Information:** Contact a Transportation Services representative or visit the Transportation Services Offices in the Clairmont Campus Parking Deck (1945 Starvine Way, Atlanta, 30322). Office Hours: Mon-Fri, 7:30 am - 4:30 pm
- To report shuttle delays or problems, call 404-727-1829 or email shuttles@emory.edu.

Section 6: Safety and Security

Emory University School of Medicine is enriched by the legacy and energy of Atlanta, but the location also means that urban crime or violence are possible.

Every effort is made by the Emory University School of Medicine and Emory University to provide a safe and secure environment for our students at all sites (campuses, healthcare facilities, etc.). Emory maintains its own police department that manages law enforcement, fire safety and emergency medical services as well as advising schools and individuals on public safety matters. The Emory University School of Medicine is made aware of all public safety matters and acts on them accordingly. Grady and the VA have their own security departments and we work in conjunction with them to maintain a safe environment for all students.

The James P. Williams School of Medicine building provides 24-hour study space for School of Medicine students and a security guard is on duty after hours. The entire building can be accessed outside of business hours only by using an Emory ID card. The security guard checks student ID cards to limit after hours use to registered School of Medicine students only.

We encourage students to request a security escort to or from the parking decks. Each campus also provides motorist assistance. Contact information for security escorts at each site:

- Emory Main Campus – [404-727-7555](tel:404-727-7555)
- Emory Midtown – [404-686-2597](tel:404-686-2597)
- Grady – [404-616-4025](tel:404-616-4025)
- Veterans Hospital – [404-728-7641](tel:404-728-7641) or [404-321-6111](tel:404-321-6111) (ext. 4911)
- Children’s Healthcare of Atlanta – Egleston – Call the Emory Main Campus escort if your car is parked on Emory’s campus or call [404-785-6142](tel:404-785-6142) if your car is parked in the ED parking at Egleston
- Children’s Healthcare of Atlanta – Hughes Spalding – Call Grady Escort above

Emergency "blue light" phones located throughout campus link callers directly to the Emory Police Department in order to report emergencies and request security escorts.

Although parking decks have restricted access, the possibility still exists for break-ins. Please remove all valuables from your vehicle and either store them in locked storage spaces provided at each site or leave them at home.

Emory University Office of Critical Event Preparedness and Response (CEPAR) coordinates campus-wide activities related to unusual events. CEPAR uses Emory website bulletins, cell phone text messages, emails and other means to notify community members about precautions and plans.

Emory University-affiliated Hospitals Public Safety Departments

Officers are on duty twenty-four hours each day. Students are encouraged to notify the Public Safety Departments concerning any activity which may compromise an individual student's safety and/or the safety of any other students, physicians, residents, hospital employees, patients, or visitors.

- Emory University Hospital – [404-712-5598](tel:404-712-5598)
- Emory University Midtown Hospital – [404-686-2597](tel:404-686-2597)
- Grady Hospital – [404-616-4024](tel:404-616-4024)
- Veterans Hospital - [404-321-6111](tel:404-321-6111) (ext. 4911) or [404-728-7641](tel:404-728-7641)

Other important numbers to have include the following:

- Emory Police Department – [404-727-6111](tel:404-727-6111)
- DeKalb County Police – emergency 911 number

Section 7: School of Medicine Information Technology Services (SOMITS)

The School of Medicine’s Information Technology Services Department collaborates with OMESA in the delivery of student support services. Information Technology Services’ primary objective is to manage and maintain technology utilized for the delivery of the School of

Medicine's curriculum.

For help with Emory University School of Medicine's IT Resources: Student Computing, Equipment Checkout, Public Printing, SOM Computer Labs, Mobile Video Conferencing, Audio / Visual Assistance, Classroom Podiums, Classroom Audio / Visual Training, and SOM Event Consultation contact:

Phone: 404-727-6648

Web: <https://emory.sharepoint.com/sites/SOMITS>

Email: meded-help@emory.edu

Hours: Monday - Friday, 8 am - 5 pm.*Excludes Emory Observed Holidays

Tom Quinn

Director, SOMITS (Operations)

tdquinn@emory.edu

404-727-9805

Jon Hamilton

Manager, Audio Visual

jon.hamilton@emory.edu

404-712-1563

Jess Bowling

IT Manager, Curricular Support

jbowlin@emory.edu

404-712-8824

Noah Paris

Academic Technology Specialist II

nparis@emory.edu

404-727-4106

Section 8: Student Health

The health and well-being of Emory students is a top priority and essential to student success. While we encourage self-care, health promotion and prevention, medical students are not exempt from having physical and/or mental illness.

All students are expected to take responsibility for maintaining personal wellness by utilizing the multiple resources at Emory outlined below and notifying the dean's office when personal health becomes a concern.

The mission of Emory University Student Health Services and Counseling and Psychological Services (CAPS) is to empower students to take responsibility for their health and to complement the academic mission of the university by providing unified medical, counseling and health promotion services that result in a healthy campus culture. Student Health Services and CAPS are committed to providing caring professional clinical services to a diverse student body and to reducing the stigma associated with seeking mental health services. Emory University Student Health Services is very proud to be fully accredited by the Accreditation Association for Ambulatory Healthcare, Inc. (AAAHC). The Emory Counseling and Psychological Services' (CAPS) Psychologist Training Program is fully accredited by the American Psychological Association (APA).

Student Health Services (SHS)

Emory University Student Health Services is located in the 1525 Clifton Road Building on the Emory Campus and provides comprehensive outpatient medical care for enrolled students. Services available are outpatient primary medical care, physical examinations, confidential HIV testing, STI testing, dermatology, contraception, IUD insertion and colposcopy, psychiatry, PrEP, transgender care, preventive medicine, sports medicine, allergy injections, immunizations, PPD tuberculin skin tests, referrals to specialists, health education, international travel information and immunizations, nutrition counseling, and alcohol, tobacco and substance abuse counseling.

An after-hours medical call center is available for telephone consultation with provider backup when the office is closed and can be contacted by calling 404-727-7551, option 0.

Professional fees for primary care visits to Emory Student Health Services during regular hours are covered by Emory tuition. Other services, such as laboratory tests, x-rays, immunizations and allergy injections are not covered by tuition and must be paid for by the student or their insurance. Charges incurred at EUSHS are covered 100% by the Aetna Student Health Insurance Policy. The Emory Student Health Services (EUSHS) is a member of over 43 national PPO networks, including most major insurance carriers. The EUSHS will provide the necessary paperwork to submit for reimbursement. Most other insurance carriers will be billed directly. Students will be responsible for any outstanding charges that are not covered by insurance. Payment options are available by calling the front office at 404-727-7551 and discussing with the billing office.

The Student Health Student [“Patient Portal”](#) is a 24-hour Internet communication tool for Emory students. By using this system, Emory students are able to communicate online with Student Health Services in a private, confidential and secure manner that meets federal HIPAA/FERPA privacy standards. Your Patient Portal can be used to schedule appointments, request prescription refills, view recent billing statements and request medical records releases.

Appointments

The Emory University Student Health Services (EUSHS) operates on an APPOINTMENT ONLY system, including same day/urgent care appointments. Appointments are scheduled by calling (404) 727-7551 (press 1) during office hours, or you can schedule your own appointment through the on-line appointment system ([Student Patient Portal](#)). You will be scheduled as follows:

For routine care, appointments are scheduled up to two weeks in advance.

For urgent conditions, an appointment or urgent consultation can be arranged for the same day.

For most acute, but not urgent needs, you may get an appointment in 24-48 hours. The only patient visits that will be handled on a work-in basis will be urgent care.

Due to the impact of COVID, we have added Telemedicine visits for those living in Georgia. We have COVID and non-COVID related in person appointments available. If you develop symptoms of COVID, send a message in the patient portal to the “COVID Assessment Provider” and a provider will call you to develop next steps. Student Health has the availability of point of care COVID-19 PCR testing which result in 30 minutes for those experiencing symptoms of COVID-19 or have a significant exposure. For non-COVID related appointments, call the front office at 404-727-7551 or access an appointment through the patient portal as they are made available.

Student Health Services will continue to provide, via our HIPAA-compliant Zoom platform telehealth, options for psychiatry and primary care for those students in Georgia. In addition, TimelyMD (a.k.a. TimelyCare) which is a third party telehealth company is also available to supplement access to care, especially for those who are not currently in Georgia or during after-hours and weekends.

If you cannot keep your appointment, please call and cancel at least two (2) hours before the scheduled appointment time or 24 hours in advance before specialty clinics. *Charges do apply for not showing up ([No Show](#)) for a scheduled appointment.*

Emory University Student Health Services: 404-727-7551 Sharon Rabinovitz, MD, Executive Director

[Student Health Immunization Nurse:](#) Send a message on the patient portal to “Immunization Compliance” or email to immunizations-shs@emory.edu.

Student Counseling and Psychological Services (CAPS)

The Emory University Student Counseling & Psychological Services (CAPS) is located in the 1462 Clifton Road Building, Suite 235. CAPS provides free, confidential individual, group, and couples counseling for enrolled undergraduate, graduate and professional students at Emory University. CAPS staff also provides consultations to students, faculty, or staff who are concerned about an Emory student. In addition, CAPS provides outreach and educational workshops on a variety of topics. Telemental health visits are available for those living in Georgia as an option for care.

Services are provided by competent, caring psychologists, social workers, and psychology and social work trainees. Services at CAPS are covered by the Mental Health & Counseling Fee. CAPS also provides referrals to other agencies on campus, low-cost services in the community, or private practitioners in the community when necessary and/or requested.

An Emory student interested in arranging an appointment can call (404) 727-7450 or come to CAPS between 8:30 am and 5:00 pm, Monday through Friday. Same day crisis triage appointments are available between 8:30 am and 3:30 pm. Psychiatric services are available at Student Health Services at 1525 Clifton Road, phone (404) 727-7551.

Telemental health visits through CAPS are available for those living in Georgia as an option for care. Emory University has also contracted with a 3rd party vendor, TimelyMD (timely.md/emory), to provide 24/7 mental health support. This support includes scheduled counseling visits (12/year) and 24/7 access to emotional support with their TalkNow program. TalkNow is also available to international students. CAPS also offers consultation, support/discussion groups (e.g., International support group, Black graduate student support), and various types of helpful workshops (e.g., stress & mindfulness programming) via our HIPAA-compliant Zoom platform that are available to all students, regardless of where they are located.

Learn more information about [CAPS services](#).

Other after hours' resources include:

- [TimelyMD's TalkNow services](#):
- Crisis Text Line – free, 24/7, confidential text message service for those in crisis – text HOME to 741741 or text STEVE to 741741 (to reach a person of color) crisistextline.org
- Suicide Prevention Lifeline: (800) 273-8255
- Transgender Crisis Hotline: (877) 656-8860
- LGBTQ+ Hotline: (866) 488-7386
- Graduate Student Helpline: (800) 472-3457
- Veterans Helpline: (800) 838-2838
- SAMHSA Disaster Distress Helpline: (800) 985-5990
- Georgia Crisis & Access Line (GCAL) at 1-800-715-4225, available 24/7

In case of an emergency the Police should be called by dialing 911.

The Respect Program

The Emory University Respect Program's mission is to engage the Emory community to prevent and respond to sexual assault and relationship violence. To learn more about the program please contact the Respect Advocate at 404.727.1514. Assistance is always available on the Respect Hotline at 470-270-5360 or visit: [RESPECT Program website](#).

Section 9: Student Insurance

Disability

All students enrolled full-time in the Emory University School of Medicine are provided with group long-term disability insurance coverage. For the 2021-2022 academic year this coverage is provided by The Guardian Insurance Co., Inc. A summary of the plan and an electronic copy of the benefit booklet is distributed to students annually. Additional information concerning the plan is available by calling the plan administrator, Ms. Susan Gelber of InsMed Insurance Agency, Inc., [1-800-214-7039](tel:1-800-214-7039). Seniors will be given 30 days after graduation to extend the policy if desired. Ms. Gelber, is also available by phone to discuss the options available to

graduating seniors.

Liability

Students are covered by professional medical liability insurance any time they are enrolled in a clinical course for credit, observing or assisting in the provision of care under the supervision of Emory faculty, or under the supervision of faculty at other institutions as part of their Emory educational program.

This would include:

- activities that are an official component of the curriculum, including required and elective courses
- clinical activities that students may participate in, at the invitation of faculty, but which are not required as part of that faculty member's SOM clinical duties
- volunteer clinical activities supervised by Emory faculty

At all times, students must be under supervision of faculty in performing clinical service, and the performance of such services must be within the scope of the supervisor's training and certification.

Students who provide medical services outside the scope of the School of Medicine curriculum or with non-Emory faculty physicians are NOT covered by University liability insurance. Students are advised not to engage in such activities unless other liability coverage is provided for them.

Mandatory Health Insurance

See earlier discussion in this Handbook and Emory's [Mandatory Student Insurance Policy 8.7](#) in Appendix A.

Section 10: Student Life

Campus Life

Emory University's [Division of Campus Life](#) cultivates a welcoming and dynamic community that is committed to developing skills necessary for lifelong success and positive transformation in the world.

In addition to the over 500 organizations officially recognized by the Emory Student Government Association, Campus Life provides numerous resources to assist you with social and intellectual advancement, including public safety, spiritual and religious life, recreation and wellness, mail services, and bookstores.

Housing

Emory's graduate housing is available at Campus Crossings Briarcliff (operated by Campus Apartments). [View a complete listing of all nearby housing.](#)

Student Government

The students of Emory University School of Medicine are governed by the Graduate Student Government Association (GSGA) and all student organization charters must be approved by the GSGA. For more information about Emory University Student Organizations and Divisional Councils, please visit their website at <https://emory.campuslabs.com/engage/organization/student-government-association>.

The Medical Student Senate (MSS) approves all applications for medical student groups seeking charter with the SGA. For more information about chartering a student organization, please visit the [Medical Student Senate website](#).

Medical Imaging Program Class Officers

Each medical imaging program class will elect officers annually.

Section 11: Use of School of Medicine Building

Reserving Space

All student activities in the School of Medicine that require the reservation of space must submit a request for approval to Ms. Shikina Harrison in Student Affairs. Once approval has been given the student leader can proceed with the following steps:

1. Use [25Live](#) with your University User ID and Password.
2. Login with your Emory NetID and password and request the space. If you do not have access to 25Live, notify Ms. Harrison to request access. If time is a concern, let Ms. Harrison know the request has been placed in the system.
3. Ms. Harrison can assist you in getting a diagram of the set-up for your event to the Staging Department in Campus Services. This is needed only if changes must be made to the space; Campus Services will need it in order to set up and return the space to its original order.
4. All users of space in the School of Medicine must abide by the Use of School of Medicine Buildings policy. Failure to do so would prevent confirmed reservations in the future.

Students must use the on-line request procedures. Student Affairs staff can advise student leaders on their staging (tables and chairs) requests or needs for custodial or Campus Services in conjunction with their events.

Section 12: Woodruff Health Sciences Center Library

The [Woodruff Health Sciences Center Library \(WHSC Library\)](#) supports medical education, biomedical research, and clinical care through a wide range of services and programs.

We offer services such as:

- Personalized consultation and customizable group training for research, knowledge management, and evidence-based projects
- Instruction on how to use different databases and information resources for problem solving, biomedical imaging, and access to data sets.
- Assistance with publication analysis and research impact reporting, and expert support for systematic reviews

Main Campus Library

1462 Clifton Road, Atlanta, GA 30322

[Location & Directions](#)

Call the Information Desk: 404-727-8727

- Please use the [Ask A Librarian](#) form to submit questions or requests. Questions are usually answered within one business day.
- [Schedule](#) a Research Consultation with an Informationist.
- [Book](#) a Study Room appointment.

Hours of Operation

Please note: Hours and policies may change; please check the WHSC Library's website for any updates.

- Monday through Thursday: 7:30 AM - 11:00 PM
- Friday: 7:30 AM - 9:00 PM
- Saturday: 9:00 AM - 7:00 PM
- Sunday: 9:00 AM - 11:00 PM

How to Use Library Resources & Services

Always start at [Woodruff Health Sciences Center Library](#). Identify yourself with your network ID and password when prompted.

Looking for a book or journal?

Search our online library catalog, [discoverE](#), to locate print and electronic collections of books and journals.

Course Reserves

- Instructors make materials such as links to full-text articles, e-books, streaming media, and physical books available via [Course Reserves](#).
- Students access their course materials directly through [Canvas](#) by clicking on the Library Course Reserves link within a course.

Frequently Used Links

PubMed	Bookmark this link for quick access to Emory's full-text articles:
Other Databases	CINAHL , Embase , Scopus , and Web of Science . (For more info, visit A-Z Databases .)
eJournals	Searchable A-Z List of Emory's eJournals
eBook Collections	AccessMedicine , AccessEmergency Medicine , AccessSurgery , ClinicalKey
Current Awareness	Visually explore Emory libraries' journal collections. Fill "My Bookshelf" with favorite titles and alerts for new content with BrowZine .
eTools	For access to EndNote, SPSS, and others, please visit Emory's Software Express .
Clinical Resources	AccessMedicine , ClinicalKey , Cochrane Library , and DynaMed and other point-of-care and patient care support resources

Remember: When searching Emory databases, look for the "Find it at Emory" button. Click to view full-text availability and other options. If full text or print is unavailable, click on "[Request via ILLiad](#)."

Other Resources

- Go to the WHSC Library's [Medical Students' Resources](#) or the [Services for Students](#).
- Need materials not available at Emory? Request via [Interlibrary Loan](#).
- Any other questions, suggestions, or concerns? Please send to [Ask a Librarian](#).

PART V. ACADEMIC POLICIES

Section 1: Academic Integrity

*Classroom Etiquette

In order to maintain an environment conducive to learning and to promote order, the following is a summary of proper classroom etiquette that must be followed by all students. Any behavior that creates discomfort in your classmates is inappropriate as it interferes with their right to participate fully in the learning process. Furthermore, many of the behaviors presented may be viewed as disrespectful by the instructor.

Punctuality

At the scheduled start time of a class, students are expected to be seated and ready to learn. Late arrival is annoying and disruptive. If a student is late, they should enter the room quietly and sit in the back of the room.

Questioning

Questions enhance the learning process and provide opportunity for clarification of concepts. Questions benefit the entire class when they are relevant to the materials being presented. Students should follow the guidelines below when asking questions:

- If a student has a question, they should raise their hand and wait for recognition by the instructor.
- Questions should be asked in a respectful manner. Challenging or argumentative tones do not promote scholarly discussion and adversely affect the learning process.
- Students should not ask questions of another student or have whispered conversations while the instructor is speaking. This type of behavior is rude and distracting.

Computer Use

Computer use during class is acceptable as long as it is directly related to the subject matter being learned. Off-task use of computers (checking e-mail; surfing the net; working on assignments for other classes, etc.) is unacceptable, disrespectful, and will result in the student's loss of computer privileges for the remainder of the semester.

Mutual Respect

Students should follow the guidelines listed below to assist in the maintenance of an open and cooperative learning environment.

- Be considerate of the feelings of others.
- Use appropriate language. Profanity or demeaning language is not acceptable.
- Respect the opinions of others (both students and faculty members) in the class, even if you disagree with them.
- Share ideas and opinions. Sharing ideas and opinions in a respectful way is healthy; however, telling other students how to behave or what to believe or do is inappropriate.
- When debating an issue, challenge the issue, not the other individual.
- Do not exhibit disruptive behavior in class. Examples of unacceptable behavior include, but are not limited to, the following:
 - Expressions of boredom (Heavy sighing, exaggerated yawning, etc.)
 - Sleeping
 - Talking inappropriately
 - Arguing

- Off-task computer usage
- Students exhibiting disruptive behavior may be asked to leave the class.

Participation/Assignments/Testing

Students are expected to be prepared for class each day. Reading and homework assignments should be completed **prior to class**.

Calculators should be brought to class every day in certain courses. Students will be notified at the beginning of the semester if this is a requirement. Students should not ask to borrow the instructor's calculator or to use their phone as a calculator.

Students are expected to submit quality work by the assigned deadlines. Student grades will reflect the quality and timeliness of assignments.

Students are expected to exhibit honesty in all academic matters.

Each in-class exam or quiz has a specific time limit. If a student completes the test prior to the time limit, they should either sit quietly or leave the room quietly. Students should not leave and re-enter the room as this is distracting to those still testing.

Grades

Each student's grade on an assignment or test is private. It is inappropriate to ask another student about their grades. If a student wishes to share this information, they will do so voluntarily.

Student grades reflect performance. Students who have questions about an assignment grade should meet with the course instructor after class to discuss the situation.

***Academic Health Professions Student Honor Council and Code**

Preamble

The students, faculty, and administration of the Emory University School of Medicine join together in support of this Honor Code for the purposes of (a) providing an atmosphere of mutual trust, concern, and respect; (b) fostering honorable and ethical behavior; and (c) cultivating lifelong professional conduct.

To promote this purpose, matters regarding academic misconduct shall fall under the jurisdiction of the Honor Code. Matters outside of those that fall within the jurisdiction of the Honor Code, such as violations of the Student Conduct Code, will be handled in accordance with the applicable policy.

Students who matriculate in the Emory University School of Medicine must agree to abide by and uphold the Honor Code.

Statement of the Academic Health Programs Honor Code

Any action indicating lack of integrity and/or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, but are not limited to, engaging in or attempting to engage in cheating, plagiarism, sabotage, falsifying or manipulating data, misrepresenting attendance, or knowingly passing off work of another as one's own.

Definitions and Policies

- **Cheating.** Cheating includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration, provision or utilization of un-authorized aids, or impermissible collaboration.
- **Plagiarism.** Plagiarism is the act of incorporating into one's own work, the work or expression of another without appropriately and adequately indicating the source.
- **Sabotage.** Sabotage is defined as intentional and malicious actions that impair another student's academic performance.
- **Falsifying or manipulating data.** Falsifying or manipulating data is the act of creating, enhancing, or otherwise changing actual results in academic, clinical, or research matters.

Acts observed that appear to be in violation of the Honor Code must be reported to the Honor Council as detailed below. Failure on the part of a student to report such apparent violation will itself be considered a violation of the Honor Code.

Students are expected to abide by the terms of the Honor Code and a lack of knowledge of the actions prohibited by the Honor Code is not a valid defense and does not excuse a violation of the Honor Code.

To uphold this Honor Code and its purpose, an instructor may ask students to sign the following pledge at the end of all final examinations, quizzes, and other important projects:

“On my honor, I have neither given nor received any aid on this (examination, quiz, or paper), nor am I aware of anyone who did.”

The absence of this pledge does not exempt the student or the assignment from abiding by this Honor Code.

Each student upon entering the School of Medicine must sign a matriculation pledge stating that the student has read, understands, and is aware of the student's responsibilities under the Honor Code.

The Academic Health Student Council on Honor

The Academic Health (AH) Professions Student Honor Council (hereafter referred to as the

Honor Council) will have jurisdiction over the supervision of the Honor Code as it applies to students in the Academic Health Professions Programs.

Membership

The Honor Council will consist of one elected Student Representative and one Faculty Representative from each AH program. In addition, there will be two Alternate Student Representatives from each AH program, and one Alternate Faculty Representative appointed by the AH Program Directors (hereafter referred to as the PDs). The Honor Council is led by a Chair, Vice Chair, and Secretary who are elected by the student membership from among the Student Representatives on the Honor Council.

Student Representatives and Alternates

By September 30th of each year, a Student Representative and two Alternate Student Representatives will be selected by each program to serve for a one-year term. In order to be eligible to serve as a Student Representative or Alternate Student Representative, a student must remain in good standing and cannot have previously been found to be in violation of the Honor Code.

Should a vacancy occur, and a Student Representative be unable to serve on the Honor Council, the respective AH program will choose one of the Alternate Student Representatives to fill that role. Should the respective AH program be unable to find someone to serve in the role of Student Representative, Alternate Student Representatives from other programs will serve on a rotational basis until the respective AH program can identify a new Student Representative.

Faculty Representatives and Alternates

To establish a pool of two faculty members from each AH program, the following process will be utilized:

- Directors of the AH programs will submit names of faculty representatives to the Liaison (see below) by Sept. 30th.
- Each AH PDs will submit the names of one Faculty Representative and one Alternate Faculty Representatives who will serve a two-year term.
- AH PDs are responsible for submitting names to the Honor Council Liaison of alternate faculty representatives as needed to fill vacancies.
- Faculty representatives are limited to participate for no more than three consecutive terms.
- Vacancies will be filled by appointments by the Directors of the AH programs.

Honor Council Liaison

An Assistant or Associate Dean in the School of Medicine will function as an ad hoc advisor to

the Honor Council indefinitely in order to provide guidance and continuity in the day to day operations of the Honor Council. The Honor Council Liaison (hereafter called the HC Liaison) will only be notified that an alleged violation of the Honor Council has occurred if the Honor Council requests assistance to ensure the investigation and hearing are conducted according to policies. The Assistant or Associate Dean will not be directly involved in investigations and/or hearings but will serve primarily in an administrative role facilitating contact between faculty advisors, students, and Honor Council members. The HC Liaison will:

- Work with the Program Directors to ensure Faculty and Student Representatives are selected by September 30th.
- Coordinate and lead the two training sessions described below.
- Provide guidance, as needed, to the Student Leadership, Investigators, and the Student and Faculty Representatives during the process of an investigation and hearing.
- Be notified that an accusation has been made only if the Student Leadership requests assistance to ensure the investigation and hearing are conducted according to policies.
- The HC Liaison will only be given the name of the student who is alleged to have violated the Honor Code if a hearing is deemed warranted.

Training

The HC Liaison will coordinate a formal training session for all new Faculty and Student Representatives in the fall.

The session will be conducted by an official representative of the Office of Undergraduate Education Honor Council.

A second training session will follow to review in detail the investigation and hearing process.

All members of the Honor Council are required to complete the training prior to participating in an investigation or hearing. If an Honor Council member cannot attend either session, they must coordinate with the HC Liaison to find a date in which to make-up the training.

Leadership of the Honor Council

The Chair, Vice-Chair and Secretary will be chosen from the Student Representatives of the Honor Council who are currently enrolled in AH programs of at least two years in length. The Honor Council Liaison will ask if any of the Student Representatives would like to volunteer to fill each position. If there are multiple Student Representatives who volunteer to fill a position, the Honor Council Liaison will coordinate an election where the positions will be voted on by the members of the Honor Council by majority vote. Any person who volunteers or is elected to fill one of the positions must ultimately be confirmed by a majority vote of the Honor Council.

- The positions of Chair, Vice Chair, and Secretary must be filled by students from three different Academic Health Programs.
- In the event the Chair is from the same program as a student accused of violating the Honor Code, the Vice Chair will lead the process.

Procedures for Reporting and Investigating Honor Code Violations

1. If an individual believes that a violation of the Honor Code has or may have occurred, that individual must report the violation as soon as possible to a member of the Honor Council. Failure to report the violation will itself constitute a violation of the Honor Code.
2. Once an allegation has been made, the individual making that allegation must draft, sign, and submit a brief statement to the Honor Council Secretary.
3. Upon notification of a possible violation of the Honor Code, the following will occur:
4. The Honor Council Secretary will inform the Honor Council Chair that a possible violation of the Honor Code has been reported.
5. The Honor Council Secretary will then appoint two investigators from available student representatives. The investigators will be responsible for gathering information about the case. The investigators will be from two different AH programs and will not be from the same program as the student accused of violating the Honor Code.
6. The Honor Council Chair will inform the Honor Council Faculty Representatives, the HC Liaison, and the Executive Associate Dean for Medical Education and Student Affairs (hereafter called the EAD) that the Honor Council has received a complaint of an alleged violation of the Honor Code and an investigation will be conducted. The name of the student and details of the incident will remain known only to the Chair, the Secretary, the investigators, and any individuals the Chair may deem necessary.
7. The student named in the allegation will be informed of the investigation prior to its onset by HC Secretary and an investigation will proceed.
8. After the investigators finish gathering information concerning the alleged violation, the investigators will submit that information to the Honor Council Chair, who along with the two investigators, will determine whether sufficient evidence exists to warrant a formal hearing by a majority vote.

Prior to the Hearing

9. If the Chair and investigators determine that sufficient evidence exists to warrant a formal hearing, the Secretary of the Honor Council will notify the student accused of violating the Honor Code of that decision in writing and provide the date, time, and place of the Hearing; the

nature of the violation with which the student is charged; the evidence of the violation, including the name of the individual making the allegation. Upon notification of the hearing, the student will be provided with a list of available faculty by the HC Liaison, with whom to consult, at the student's discretion or select a consulting member of the school of medicine themselves with the guidance of the HC Liaison.

10. The hearing will take place no more than 21 days after the determination is made to move forward with a hearing. In rare instances, the Honor Council, at their sole discretion, may extend that time period if the Honor Council feels that the circumstances dictate such an extension.

11. Any student who is alleged to have violated the Honor Code will be permitted to continue academic endeavors until a final decision is made.

12. The student who is alleged to have violated the Honor Code may review the evidence of a violation and gather evidence prior to the hearing.

13. For each hearing, the hearing panel will consist of eight members: five Student Representatives, the Chair (or Vice-Chair should the student alleged to have violated the Honor Code be from the same program as the Chair) and two Faculty Representatives. The five Student Representative are randomly selected by the Chair from the Student Representatives, then from Alternate Student Representatives, if needed, and will include a student from each AH program including that of the student alleged to have violated the Honor Code. If any Student or Faculty Representative is unable to serve for any reason, including conflict of interest, then the Chair will select an alternate Student or Faculty Representative. The Alternate Student Representatives who investigated a case will present pertinent information at the Hearing but will not be allowed to vote in the proceedings or be present during deliberations.

14. The Honor Council Secretary to inform the Honor Council members chosen to be on the hearing panel of the alleged violation (date, person involved, and nature of the accusation). The Chair (or Vice-Chair) will preside over the hearing and participate in the discussion and deliberation of the case but will not have a vote.

The Hearing

The Chair (or Vice-Chair) will preside over the hearing and participate in the discussion and deliberation of the case but will not have a vote.

Order of Proceeding

1. Call to order
2. Reading of Parts I and II of the Honor Code (Preamble and Statement of the Honor Code).
3. Statement of the alleged Honor Code violation

4. Presentation of evidence: The Investigators and the student alleged to have violated the Honor Code may present testimony and other evidence as appropriate and relevant to the case. The Chair and members of the Honor Council, and the student alleged to have violated the Honor Code, may ask questions of witnesses.

5. The chair will determine whether the hearing board can properly weigh or take into consideration any evidence offered by a party or witness based upon relevance. Rules of evidence applicable to criminal or civil court proceedings will not apply.

6. Discussion and deliberation by the Council is held in a private executive session. After all admissible evidence has been reviewed, the hearing panel shall deliberate to decide the case.

Rules Governing Proceedings

1. All hearings will be conducted in closed-door session and will remain confidential. Participants in the hearing will be limited to the following:

7. Chair (or Vice-Chair) of the Honor Council.

8. The seven selected Honor Council Representatives (2 Faculty, 5 Students, not including the Chair).

9. The Secretary or, if needed, a temporary Secretary appointed by the permanent Secretary.

10. The student alleged to have violated the Honor Code.

11. The two investigators assigned to the case.

12. Relevant witnesses who may be present only while testifying.

13. The faculty advisor selected by the accused. This individual is not permitted to testify, ask questions, or to make statements of any nature.

The Secretary or his/her appointee will take minutes of the hearing and make them available to the Honor Council.

Decisions and Penalties

For a student to be found responsible of an Honor Code violation, the unanimous vote of the seven voting members of the Honor Council is required [the Chair (or Vice-Chair) is not eligible to vote]. For all cases, the standard that shall be used to determine whether a violation was committed is “preponderance of the evidence”, i.e., it is more likely than not that a violation of the Honor Code occurred.

If a student is found to have violated the Honor Code, the hearing panel will make a recommendation to the EAD for a sanction. The hearing panel will make the decision on the sanction by majority vote of the voting members of the Honor Council. In case of a tie, the Chair (or Vice-Chair) will cast a vote.

The HC Liaison and EAD will be informed of the decision of the hearing panel and recommendation for sanction, where applicable, promptly following the decision of the hearing panel.

The HC Liaison or EAD will only notify the Program Director of the student alleged to have violated the Honor Code of the outcome of the hearing if the student is found responsible for a violation of the Honor Code and a sanction is recommended.

Recommended for sanctions for violations of the Honor Code.

The standard sanction for violation of the Honor Code is (a) a mandatory leave of absence from Emory University School of Medicine for at least one academic term (semester); and (b) a grade of “Incomplete” for all courses in which the student is enrolled at the time of the infraction.

The Honor Council may recommend to the EAD a penalty more severe than a mandatory leave of absence (e.g., permanent expulsion) or may recommend a less severe penalty (e.g., disciplinary probation for Honor Code violation), dependent upon the circumstances of the case.

Upon receipt of a mandatory leave of absence, the student cannot advance to the next term until he/she has completed the term in which the “Incomplete” grades were given.

A student on a mandatory leave of absence may enroll on graduate resident status.

Decision of the Executive Associate Dean of the School of Medicine

The final decision on responsibility and the sanction rests with the EAD. The decision of the EAD will be effective immediately, unless there is an appeal to the dean. The appeal, including the basis for the appeal, must be submitted by the student in writing to the Dean within one week after the student is notified by the EAD of the decision. If a student files an appeal, the EAD will appoint an ad hoc committee consisting of three faculty members from the School of Medicine. The EAD will provide the committee with the information reviewed by the hearing panel, the minutes of the hearing, and the student’s appeal. The committee will then make a recommendation to the Dean that the decision of the appeal committee be affirmed or remanded to a new hearing panel. The Dean will then review that recommendation and make the final decision in the matter.

Amendments to the Honor Code

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be reviewed by Emory School of Medicine General

Counsel and approved by the EAD before becoming effective. If an amendment is approved while a case is under active review that amendment will not apply to that case. Any new amendment, once approved, will become effective as soon as all academic health professions' students have been notified of the change via mail or email.

Section 2: Registration

All students must register on the dates indicated in the Academic Calendar. Registration information may be obtained from the program office. **Students who do not complete registration on registration day are charged a late fee of \$150.00.** Class registration for any term is not complete until the student is in compliance with all published procedures and until outstanding financial responsibilities to the University have been met. Students with a hold on their account preventing registration will be contacted to clear the hold before class registration can proceed. After the last date in the Academic Calendar for changing courses, registration may be allowed only by joint consent of the director, the Registrar and faculty concerned. After 8 calendar days have lapsed from the date classes begin, registration is not permitted.

Tuition and fees are due and payable prior to the first day of class each semester. Payment plans are available during the fall and spring semesters. For information contact [Student Accounts](#).

Section 3: Cancellation and Withdrawal

Registration may be canceled during the first week of classes. See the Academic Calendar for the precise date each semester. Cancellation of registration means that no deficiencies will be noted on the student's transcript.

After the first week of classes, a student who wishes to leave the University must go through a withdrawal procedure. Honorable dismissal requires that this procedure be followed. Withdrawal forms may be secured at the Office of Medical Education and Student Affairs.

A student's continued enrollment at Emory University is a privilege based not only on a satisfactory scholastic status, but also upon good emotional health. If, in the opinion of the Dean of a student's school, the student demonstrates evidence of an emotional disorder, the student may be referred by the Dean to the University Student Health Service for psychiatric evaluation. Refusal to obtain a psychiatric evaluation, when properly requested to do so, or determination by the University Health Service that withdrawal would be in the best interest of the student and the University shall be cause for involuntary withdrawal of the student from the University by the Dean.

Withdrawal in such cases shall normally incur no academic penalty for the term in which the student is enrolled; and tuition refund, if any, shall be based on the schedule established for voluntary withdrawal. The Dean shall inform the student in writing of the effective date of the

involuntary withdrawal, and shall explain in writing the procedure for application for readmission to Emory University.

Application for readmission after withdrawal for psychiatric reasons will require evaluation by the University psychiatrist. A person seeking readmission may choose to submit a written report from his/her own psychiatrist at the individual's own expense. In no case shall readmission be granted after psychiatric withdrawal without the approval of the University Health Service.

Section 4: Class and Examination Attendance

Attendance at all scheduled classes is expected, but specific requirements are at the discretion of individual course directors. **Daily attendance on clinical clerkships is mandatory. Attendance is also mandatory for all tests, final examinations, and certification examinations.** Students are responsible for being present at the beginning of all examinations. Exams will begin **ON TIME**; students who arrive after an examination has begun may be refused admission to the examining room, thus jeopardizing their course grade. Requests for rescheduling or delaying examinations will not be considered except in cases of documented medical or family emergency. Deferred examinations must be taken at the time specified by the major professor of the course. Failure to take a deferred examination will result automatically in the grade of "F".

Section 5: Reporting of Absences

Students must report absence from examinations or from daily clinical clerkship duties and reasons thereof, as soon as possible to the Program Office and to the faculty member responsible for the course or clerkship. When it is known in advance that attendance will not be possible, notification should be made before the day of absence. If the faculty member cannot be reached, the Program office should be asked to notify them.

When absence due to illness extends beyond 48 hours, a signed physician's report will be required (from Student Health Services or from the student's personal attending physician). This is done primarily for the student's protection against any accusation of neglect or indifference, as well as to ensure students, in the case of illness, seek proper health care.

Section 6: Religious Observances

The Emory School of Medicine recognizes and respects the importance of individual religious beliefs and practices. While the School of Medicine calendar includes only religious observances recognized as U.S. federal holidays, the school seeks to accommodate student religious needs reasonably and within the requirements of the academic schedule. There shall be no adverse or prejudicial effect resulting to any student requesting excused absences for religious observances. Students assigned to patient care educational activities may request assignments that allow the student to meet their religious needs; on occasion, students may be asked to attend patient care activities that cannot be reasonably re-scheduled, such as on-call time with a care team. Required

academic work missed as part of an excused absence must be made up to the satisfaction of the supervising faculty member. **Individualized requests should be directed to course instructors at least 15 days in advance of any conflict.**

Section 7: Grading System

A student's continued enrollment in the Medical Imaging Program is dependent upon satisfactory scholastic achievement. The criteria used in determining whether a student's scholastic standing is satisfactory are described in this section.

Grading Scale:

The following system of grading is used except for courses where special permission has been granted to use Satisfactory (S) and Unsatisfactory (U):

Quality Points	Letter Grade	Numerical Grade
4.0	A	90 - 100
3.0	B	80 - 89
2.0	C	75 - 79
1.0	D	70 - 74
0.0	F	< 70
0.0	I	Incomplete
0.0	IF	Incomplete Fail (Work not completed within allotted time)
0.0	W	Withdrawal
0.0	WF	Withdrawal Fail (Average < 70 at time of withdrawal)

To compute a grade-point average (GPA), first identify the classes or semester to include in the calculation. Then, for each course, multiply the quality points earned times the number of credit hours attempted *on a letter grade basis*. Lastly, divide that total by sum of the credit hours attempted. Courses with a grade of S, U, W, or WU are not used in calculating the grade point average. Courses with a grade of IF or WF are counted as F when calculating the grade point average.

Tentative Grades:

When assigned work is not satisfactorily completed during a prescribed period, a grade of "I" (Incomplete) may be given if the instructor so desires. If the work is not subsequently completed within one year or a time period prescribed by the course instructor, a final grade of "F" or "U" will be entered on the record. The grade of "I" may be changed to a "W" in special

circumstances of extended illness or injury.

Grade Appeals:

Students are encouraged to discuss evaluations and final grades with the course director. If a student wishes to appeal a final grade or evaluation, this must be **presented in writing** to the Program Director, within **14 days** of receiving the grade. The appeal may be based on the process that leads to the final grade/evaluation and/or questions of factual content of the evaluation process. The Program Director will then review the basis for the appeal of the final evaluation and/or grade. The Program Director may review the final grade or evaluation in terms of 1) the process that led to the final grade/evaluation, and/or 2) questions of factual content that led to the final grade/evaluation.

Upon review, the Program Director may find that there is no basis, based on process or factual content, for a change of final grade or evaluation. Alternatively, the Program Director may recommend that the course director consider any of the following: 1) for questions regarding factual content, the Program Director may recommend that the course director submit the questions and answers to a group of faculty in the field for review; 2) for questions regarding process or factual content, the Program Director may suggest additional assessment of student performance and subsequent reconsideration of the evaluation/grade; or 3) the Program Director may suggest a change of grade/evaluation. The course director will then consider the recommendation made by the Program Director and submit a written response to the Program Director and a re-considered final grade/evaluation. After review by the Program Director and submission of the re-considered grade/evaluation, the student may appeal any decision to the Program Grade Appeal Committee. The student may further appeal the Program Grade Appeal Committee decision to the Executive Associate Dean of the Medical School. The decision by the Executive Associate Dean of the Medical School shall be final.

Section 8: Requirements for Continued Enrollment

A student's continued enrollment at Emory University is subject to the decision of the program's Progress and Promotions Committee that satisfactory academic progress is being made, that rules of the program and University are being complied with, and that the best interests of the school and other students are being served. The Progress and Promotions Committee may, at their discretion and irrespective of grades, declare probationary status for any student who, in their opinion, is not properly utilizing time and talents or not adhering to program and university policies.

Academic Standing and Academic Dismissal:

Students earning a grade of "D" in any medical imaging course will be required to retake the course in which the "D" was earned. Achievement of a grade of "C" will be required when the course is repeated; however, the initial grade of "D" will remain on the student's official

transcript. Repeating a course means the student will have to interrupt the program of full-time study and graduation will be delayed for one year. During the intervening year, individualized plans of study will be developed jointly by the student and the Program Director.

Achievement of two or more grades of “D” in medical imaging courses will automatically result in exclusion from the program.

Achievement of one grade of “F” or “IF” in any medical imaging course will automatically result in exclusion from the program.

Students experiencing academic, clinical or personal difficulty may withdraw from a course. Withdrawals will only be granted prior to mid-term and a grade of W (withdrawal without penalty) or WF (withdrawal failing) will be assigned as appropriate. Withdrawing from a course means the student will have to interrupt the program of full-time study and graduation will be delayed for one year. During the intervening year, individualized plans of study will be developed jointly by the student and the Program Director.

Grade Point Average Requirement:

A 2.0 average must be maintained in **each semester** to remain in good academic standing and to continue in the program. A cumulative GPA of at least 2.0 (didactic and clinical) is required for graduation.

Readmission Policy:

Students requesting to return to the program after a leave of absence must request readmission, in writing, to the Program Director. A student returning to the program after a leave of absence of one year or less must follow the following policies and procedures:

- 1) The student must enroll as a part-time student in the semester prior to their re-enrollment as a full-time student. In this semester the student will enroll in Independent Study. This will allow the student the opportunity to become reacquainted with the clinical and classroom environments.
- 2) The student must take written exams covering major content areas (both general radiography and minor track) taught in previously taken courses. The student must make a grade of 75 or better on each exam.
- 3) The student must take skills tests covering all competency procedures learned in previous semesters. This includes:
 - a) Simulation on all previous procedures. (Minimum score of 80)
 - b) Completion of performance objectives. (Minimum score of 75)

- c) Completion of clinical quizzes. (Minimum score of 75)
- d) Completion of one prerequisite exam followed by competency evaluation for all competency examinations previously completed (both routine and final competency exams). (Minimum score of 80-routine competency exams; 90- final competency exams).

Students absent from the program for a period of greater than one year must re-enroll at the beginning of the course of study. Class size is limited by the accreditation agency and clinical capacity. Readmission will be considered only if there are positions available.

Section 9: Exclusion

Achievement of two or more grades of “D” in medical imaging courses will automatically result in exclusion from the program.

Achievement of one grade of “F” or “IF” in any medical imaging course will automatically result in exclusion from the program.

A student who is excluded under these rules will not be eligible to attend for the next regular semester. The Program’s Progress and Promotion Committee and Admission Committee will act upon a petition for readmission for any subsequent semester.

Section 10: Satisfactory Academic Progress

A student is considered to be making satisfactory academic progress as long as a G.P.A. of 2.0 or better for completed courses is earned. All students will be able to review grades via Canvas throughout each semester. Students who are at risk of failing will receive counseling at the mid-point and end of each semester to review their status in each course.

Section 11: Transfer of Credit Policy

Students enrolling in the Medical Imaging Program must transfer a [minimum of 30 semester \(45 quarter\) hours of core curriculum coursework](#) into the university system. Core curriculum courses taken to satisfy admission and graduation requirements must be taken at a regionally accredited institution (COC: SACS equivalent). Graduates of foreign institutions must present transcripts of at least one full academic year (preferably in the sciences and in English) from an accredited college or university in the United States or Canada. Only courses with a grade of "C" or higher are eligible for transfer.

Students already enrolled in a medical imaging program who wish to transfer into the Emory University Program will be evaluated on an individual basis. Only students who are currently enrolled in a degree granting, JRCERT accredited program are able to transfer. Only courses

with a grade of "C" or higher are eligible for transfer. Transfer students may require a longer time to complete the course of study.

Section 12: Application for Degree

Formal application for degree must be made to the Director of the Office of Medical Education and Student Affairs. An on-line application will be available for that purpose at the beginning of the semester in which the degree is to be conferred (see Academic Calendar). A candidate for a degree must be present at commencement unless excused.

Section 13: Graduation Requirements

The following requirements must be satisfied to earn the B.M.Sc. degree:

1. Students must meet a minimum residency requirement of three semesters. A minimum of 46 semester hours must be completed at Emory University.
2. Students must complete all courses in the Emory University Bachelor of Medical Science degree program in Medical Imaging with a minimum cumulative G.P.A. of 2.0.
3. Students must meet all clinical competency and exam repetition requirements.
3. Students must have satisfactorily completed (grade of C or better) a minimum of 30 semester hours (45 quarter hours) of [specified undergraduate core curriculum courses](#).
4. Students must satisfactorily complete of a minimum of **128 semester hours** of undergraduate credit.

Section 14: Official Transcripts

Students are kept informed whenever any question is raised regarding the quality of their academic performance or their professional conduct. Program faculty members report course grades to the University Registrar for permanent records. At the end of each semester, students can login to the Emory Home Page (www.emory.edu) and access the OPUS system to obtain their course grades, accumulated hours of credit, and grade point average.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their federal education records. Detailed information pertaining to FERPA and other regulations regarding student records and directions for requesting transcripts may be found on the [Registrar's website](#).

Section 15: Letters of Reference

Without exception, all requests for letters of reference or for completion of forms relating to academic performance and/or personal qualities require written authorization from the student (or graduate) for release of such information. This also applies to requests for information from

faculty or administrative officers. Students have the right of access to letters or statements giving such information unless, in the authorization for release, the student waives this right and agrees that the information to be sent is to be held confidential. Confidential references are often requested by agencies or institutions to which students apply for aid or for a position.

Section 16: Student Files

The official record of each Emory student is maintained in the Office of the Registrar. To assist in evaluating the progress of students in obtaining their education, additional records are kept in the Program Office and the Office of Medical Education and Student Affairs under the direction of the Executive Associate Dean for Medical Education/Student Affairs. It is the policy of Emory University School of Medicine that these records are kept secure and are not available to anyone other than faculty members and administrators of the school who have an appropriate need to review a student's attendance or progress. A student may be granted permission by the Program Director to review the contents of his/her record. While students are enrolled in the School of Medicine, the student folder may contain the following:

- . official transcripts
- . admissions application
- SAT and/ or ACT scores
- . letter of acceptance
- . unofficial transcript
- . clerkship evaluation forms
- . immunization records
- . documents of external or internal awards
- . military documents including reimbursement forms
- . letters concerning probation, deceleration, leave of absence
- . failure to be promoted, or disciplinary actions

Notes concerning health problems are not made a part of a student's permanent record unless said health problems influence academic or clinical performance. No information concerning performance will be released to external requests without the signed permission of the student or graduate.

PART VI: FINANCIAL INFORMATION

Information concerning financial aid and scholarships is available through the University Financial Aid Office. In addition, the Associate Director of Financial Aid and Student Affairs, located on the third floor of the School of Medicine Building, is available to meet with students in the School of Medicine, Medical Imaging Program regarding individual financial concerns, including emergency loans.

Section 1: Academic Charges

Tuition and Fees:

Tuition	\$5,900.00	(\$492/semester hour)
Immunization Fee	\$125.00	(\$375.00/year)
Health & Wellness Fee	\$94.00	(\$282.00/year)
Technology Fee	\$75.00	(\$225/year)
Athletic Fee	\$198.00	(\$59 in summer semester)
Activity Fee	\$112.00	(\$0 in summer semester)
Total per semester	\$6,504.00	

Section 2: Deferred Payment/ The Emory Payment Plan (EPP)

The Emory Payment Plan is available to qualified students who wish to divide tuition fees into scheduled payments. **A handling fee is charged by the University for participation in the Emory Payment Plan.** Instructions are given for deduction of loans and for University-administered scholarships in listing the amount due, which is to be paid in four installments each semester according to the following schedule:

	<u>FALL</u>	<u>SPRING</u>	<u>SUMMER</u>
First Payment:	Registration	Registration	Registration
Second Payment:	September 25	February 25	June 25
Third Payment:	October 25	March 25	July 25
Fourth Payment:	November 25	April 25	

For more information, visit <http://studentfinancials.emory.edu/emory-payment-plan.aspx>.

Section 3: Policy Statement on Refunds

Tuition refunds are partial. A student may cancel registration during the first week of the semester in which case only the deposit is forfeited (or twenty-five dollars if no deposit was required). After the first week of class, a student may voluntarily withdraw, and the tuition forfeiture increases progressively. Please refer to the [Withdrawal Deadlines Schedule](#) posted on the Student Financial Services webpage for the most current refund policy for complete withdrawals.

No refund is given after the fifth week of any semester. No refund is given if students drop only part of their coursework after the last day specified for approved schedule changes. **No refund is given to a student who is dismissed.**

Refunds for first-time Emory University students who are federal aid recipients (Title IV) will be prorated in accordance with the Higher Education Amendments of 1992 and any related regulations.

Readmission of students following withdrawal for medical reasons requires medical clearance by designated University health officials.

A student who withdraws may not continue to live in University housing or participate in student activities.

Tuition refunds will apply as follows:

Tuition refunds will apply as follows:

Withdrawal during: Charge Credit

First 5 class days	0%	100%
Second 5 class days	20%	80%
Third 5 class days	40%	60%
Fourth 5 class days	60%	40%
Fifth 5 class days	80%	20%

Section 4: Meals

Meals are available on campus at Cox Hall Foodcourt, Dobbs Common Table or Asbury Court and at near-by restaurants. Meal plans are available at considerable savings. For information email dining@emory.edu, call 404-727-4015 or visit <http://dining.emory.edu/dining-plan/students/index.html>.

Section 5: Books

The [Emory University Bookstore](#) (B&N at Emory) is located at 1390 Oxford Road. All medical imaging textbooks can be purchased through the bookstore.

Section 6: Professional Society Scholarships

GEORGIA SOCIETY OF RADIOLOGIC TECHNOLOGISTS SCHOLARSHIP FUND: The state professional society sponsors a small number (1-4) of \$500 scholarships annually. Applications for this scholarship will be distributed late in the fall semester. **Applicant must be a member of the society.**

ATLANTA SOCIETY OF RADIOLOGIC TECHNOLOGISTS SCHOLARSHIP FUND: The local professional society sponsors a \$500 scholarship annually. Applications for this scholarship will be distributed late in the fall semester. **Applicant must be a member of the society.**

AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS SCHOLARSHIP FUND: The national professional society sponsors the Jerman-Cahoon Student Scholarships and the Royce Osborn Minority Student Scholarship annually. Applications for this scholarship will be distributed in the fall semester. The deadline for the application is February 1. **Applicant must be a member of the society.**

PART VII: CURRICULUM

Section 1: Course Sequence 2021-2022

* Courses in “BOLD” are taken by all students.

SEMESTER	NUMBER	TITLE	CREDIT HOURS
FALL 2021	MI 201	INTRODUCTION TO MEDICAL IMAGING	2
	MI 203	MEDICAL TERMINOLOGY	1
	MI 211a	PATIENT CARE	3
	MI 221a	ANATOMY & PHYSIOLOGY	3
	MI 213a	MEDICAL IMAGING PROCEDURES	2
	MI 261a	CLINICAL CLERKSHIP	2
	MI 327	COMPUTER APPLICATIONS IN MEDICAL IMAGING	1
			14 hours
SPRING 2022	MI 321a	PHYSICAL PRINCIPLES OF IMAGING	3
	MI 211b	PATIENT CARE	3
	MI 221b	ANATOMY & PHYSIOLOGY	3
	MI 213b	MEDICAL IMAGING PROCEDURES	3
	MI 261b	CLINICAL CLERKSHIP	4
			16 hours
SUMMER 2022	MI 321b	PHYSICAL PRINCIPLES OF IMAGING	3
	MI 323	MEDICAL IMAGING SAFETY	2
	MI 325a	PRINCIPLES OF RADIOGRAPHIC TECHNIQUE	3
	MI 213c	MEDICAL IMAGING PROCEDURES	3
	MI 361a	CLINICAL INTERNSHIP	4
			15 hours
FALL 2022	MI 221c	ANATOMY & PHYSIOLOGY	3
	MI 325b	PRINCIPLES OF RADIOGRAPHIC TECHNIQUE	3
	MI 213d	MEDICAL IMAGING PROCEDURES	3

	MI 390r	MEDICAL IMAGING SEMINAR	1
	MI 361b	CLINICAL INTERNSHIP	4
			14 hours
SPRING 2023	MI 211c	PATIENT CARE	3
	MI 213e	MEDICAL IMAGING PROCEDURES	2
	MI 329	IMAGE PROCESSING TECHNIQUE	2
	MI 390r	MEDICAL IMAGING SEMINAR	1
	MI 361c	CLINICAL INTERNSHIP	4
	MI 421	IMAGING EQUIPMENT	3
			15 hours
SUMMER 2023	MI 411	PHARMACOLOGY	2
	MI 301	SURVEY OF MEDICAL AND SURGICAL DISEASES	3
	MI 461a	CLINICAL PRACTICUM	4
(ADM. MINOR)	MI 430	PRINCIPLES OF MANAGEMENT	3
	MI 431	BUSINESS COMMUNICATION	3
	MI 463a	MANAGEMENT PRACTICUM	2
(ED. MINOR)	MI 440	INTRODUCTION TO MEDICAL IMAGING EDUCATION	3
	MI 441	METHODS AND MATERIALS OF TEACHING	3
(CT MINOR)	MI 450	CT PHYSICS AND INSTRUMENTATION	3
	MI 451a	CT PROCEDURES	2
	MI 465a	CT PRACTICUM	2
(MRI MINOR)	MI 453a	MRI PHYSICS AND INSTRUMENTATION	2
	MI 455a	MRI PROCEDURES	2
	MI 467a	MRI PRACTICUM	2
			15-17 hours
FALL 2023	MI 423	BASIC RADIATION BIOLOGY	2
	MI 425	QUALITY CONTROL	2
	MI 497r	DIRECTED STUDY	2
	MI 461b	CLINICAL PRACTICUM	4
(ADM. MINOR)	MI 433	ORGANIZATIONAL BEHAVIOR	3
	MI 435	HOSPITAL ORGANIZATION AND PERSONNEL MANAGEMENT	3
	MI 463b	MANAGEMENT PRACTICUM	2
(ED. MINOR)	MI 443r	PRACTICE TEACHING (CLINICAL)	3
	MI 445r	PRACTICE TEACHING (DIDACTIC)	2
(CT MINOR)	MI 451b	CT PROCEDURES	2

	MI 465b	CT PRACTICUM	3
(MRI MINOR)	MI 453b	MRI PHYSICS AND INSTRUMENTATION	2
	MI 455b	MRI PROCEDURES	2
	MI 467b	MRI PRACTICUM	3
			15-18 hours
SPRING 2024	MI 427	EVALUATION & MEASUREMENT	3
	MI 496r	INDEPENDENT STUDY	2
	MI 461c	CLINICAL PRACTICUM	4
(ADM. MINOR)	MI 437	HEALTHCARE FINANCE	3
	MI 439	MARKETING	3
	MI 463c	MANAGEMENT PRACTICUM	2
(ED. MINOR)	MI 447	ADMINISTRATION OF MEDICAL IMAGING PROGRAMS	3
	MI 443r	PRACTICE TEACHING (CLINICAL)	2
	MI 445r	PRACTICE TEACHING (DIDACTIC)	3
(CT MINOR)	MR 451c	CT PROCEDURES	2
	MR 465c	CT PRACTICUM	4
(MRI MINOR)	MI 453c	MRI PHYSICS AND INSTRUMENTATION	2
	MI 455c	MRI PROCEDURES	2
	MI 467c	MRI PRACTICUM	4
			15-17 hours

Section 2: Course Descriptions (General Track):

MI 201: Introduction to Medical Imaging

Fall. Credit, two hours. This course introduces the student to the principles and practices of medical imaging. The function of radiographer and their relationship with the health care team is stressed. The student is also oriented to the hospital environment and health care systems.

MI 203: Medical Terminology

Fall. Credit, one hour. This course introduces the student to medical terminology. Emphasis is placed on terminology pertinent to diagnostic radiology.

MI 211a, b, c: Patient Care I, II, and III

Fall, Spring, and Spring. Credit, nine hours. Prerequisites: MI 211a prior to MI 211b prior to MI 211c. Basic patient care needs and interpersonal relationships with patients, peers, physicians, and other members of the health care team are stressed. Basic principles of radiographing the pediatric patient and geriatric patient are included. Confidentiality and medico-legal considerations including professional liability, patient records, and professional guidelines are introduced. MI 211c focuses on advanced patient care concepts including cardiac monitoring and

venipuncture.

MI 213a, b, c, d, e: Medical Imaging Procedures I, II, III, IV, and V

Fall, Spring, Summer, Fall, and Spring. Credit, thirteen hours total. Prerequisites: MI 213a prior to MI 213b prior to MI 213c prior to MI 213d prior to MI 213e. Lecture, on-line, and laboratory course emphasizing routine and specialized procedures used in diagnostic radiology.

MI 221a, b, c: Anatomy and Physiology I, II, and III

Fall, Spring, and Fall. Credit, nine hours total. Prerequisite: MI 221a prior to MI 221b prior to MI 221c. Human anatomy, emphasizing the body tissues and systems, is included. Emphasis is placed on the skeletal system and other systems closely associated with imaging. Cross-sectional anatomy is the focus of MI 221c. Emphasis is placed on radiographic anatomy in all courses.

MI 261 a, b: Clinical Clerkship

Fall and Spring. Credit, six hours total. Prerequisites: MI 261a prior to MI 261b. A series of courses designed for persons entering the field of Medical Imaging to become familiar with the practical application of theories, principles, morals and ethics of Medical Imaging and the medical field. The students will go from observation to participation in general diagnostic exams.

MI 301: Survey of Medical and Surgical Diseases

Summer. Credit, three hours. Prerequisites: MI 203, MI 221 a-c. An overview of common diseases intended to orient the technologist to the nature of a patient's disease is presented. Emphasis is placed on the radiographic appearance of common pathologies. The effects of pathology on radiographic quality and diagnostic radiologic procedures will be considered.

MI 321a, b: Physical Principles of Imaging I and II

Spring and Summer. Credit, six hours total. Prerequisites: MI 321a prior to MI 321b. Fundamentals of radiologic physics and its application to diagnostic radiology are covered. These courses include both the rudiments of basic physics and elementary principles of electricity and magnetism required for understanding x-ray production and interaction.

MI 323: Medical Imaging Safety

Summer. Credit, two hours. Radiation protection, personnel monitoring, radiation shielding, and patient protection are introduced in this course. Emphasis is placed on protection mechanisms utilized in diagnostic radiology. Safety issues related to CT and MRI are also presented.

MI 325a, b: Principles of Radiographic Technique I and II

Summer and Fall. Credit, six hours total. Prerequisites: MI 325a prior to MI 325b. Technical factors regulating the four radiographic qualities of receptor exposure, contrast, spatial resolution, and distortion are emphasized. Students acquire the skills necessary to adapt technical factors in order to produce diagnostic radiographs in the digital imaging environment.

MI 327: Computer Applications in Medical Imaging

Fall. Credit, one hour. This course introduces the student to the use of computers in radiology.

MI 329: Image Processing Technique

Summer. Credit, two hours. Current trends in the processing, analysis, manipulation, and display of digital radiographic images. Capture of image data from CR and DR detectors is discussed. Pre- and post- image processing operations are presented. The calculation and evaluation of exposure indicators is explained. The practical application of radiographic techniques, technique myths, and image evaluation in digital imaging are discussed. Digital image artifacts are also explained.

MI 361a, b, c: Clinical Internship

Summer, Fall and Spring. Credit, twelve hours total. Prerequisites: MI 361a prior to MI 361b prior to MI 361c. A series of courses designed for persons entering the field of Medical Imaging to become familiar with the practical application of theories, principles, morals and ethics of Medical Imaging and the medical field. Students begin to master basic skills in the operation of a radiographic room and in radiographic positioning. Students work independently under indirect supervision after successful competency evaluation. Students will also experience a variety of advanced imaging modalities.

MI 390r: Medical Imaging Seminar

Fall and Spring. Credit, two hours total. These courses will explore a current topic in the radiologic sciences. Discussion of journal and textbook readings pertinent to the assigned topic will be required.

MI 411: Pharmacology

Summer. Credit, two hours. Prerequisites: MI 221a, b, MI 211a-c. This course is designed to provide basic concepts of pharmacology. The theory and practice of basic techniques of venipuncture and the administration of diagnostic contrast agents and/or intravenous medications is included. The appropriate delivery of patient care during procedures requiring contrast administration is emphasized.

MI 421: Imaging Equipment

Spring. Credit, three hours. Prerequisites: MI 321a, b, MI 325a, b. This course introduces the student to the different types of imaging systems. The basic principles of digital imaging, CT, MRI, interventional radiology and mammography equipment are presented.

MI 423: Radiation Biology

Fall. Credit, two hours. Prerequisites: MI 321a, b, and MI 323. This course involves the study of organisms following absorption of energy from ionizing radiation. Interactions of radiation in matter, short and long-term biological effects, and cell survival kinetics are emphasized.

MI 425: Quality Control

Fall. Credit, two hours. Prerequisites: MI 321a, b and MI 329. This course focuses on external factors affecting the quality of an image. Emphasis is placed on healthcare and imaging accrediting bodies, radiographic equipment evaluation, and repeat analysis. It includes didactic and lab components.

MI 427: Evaluation and Measurement

Spring. Credit, three hours. Prerequisites: All prior courses. This course utilizes various methods to determine achievement of cognitive competencies. Preparation for the ARRT national certifying examination is emphasized.

MI 461a, b, c: Clinical Practicum

Summer, Fall, and Spring. Credit, twelve hours total. Prerequisites: MI 461 a prior to 461b prior to MI 461c. A series of advanced clinical education courses designed for persons entering the field of Medical Imaging to practice independently all general radiography examinations after successful competency evaluation. These courses prepare students to enter the workforce as a general diagnostic radiographer with exceptional work ethic.

MI 496r: Independent Study

Spring. Credit, two hours. Prerequisites: All prior courses. This course involves the completion of a research paper and project on a selected medical imaging topic. The findings must then be presented to the class in a formal presentation.

MI 497r: Directed Study

Fall. Credit, two hours. This course involves preliminary preparation for the national certifying examination, as well as, the completion of a proposal and project plan on a pertinent topic in radiology.

Course Descriptions (Administration Track)**MI 430: Principles of Management**

Summer. Credit, three hours. This course will explore management theory and practice and their impact on the development and performance of organizations. Through a critical assessment of the classical and alternative approaches to the discipline, the student will learn the essentials of leadership of contemporary organizations in a global environment. Related topics such as human resource management, organizational development and change, and their effect on productivity and performance will be examined.

MI 431: Business Communication

Summer. Credit, three hours. This course is designed for the professional whose activities require communicative abilities in a variety of interpersonal group situations. This course will help students develop an understanding of the communication process and will allow students to critically evaluate their skills. Methods of effective oral and written presentation will be

introduced.

MI 433: Organizational Behavior

Fall. Credit, three hours. This course will examine the theories and practice of organizational behavior. Individual and group behaviors in organization will be addressed. Organizational dynamics and the development of work environment that fosters successful team building will be studied. Case studies will also be used to enhance students' experiences.

MI 435: Hospital Organization and Personnel Management

Fall. Credit, three hours. This course will explore health care systems and contemporary problems and issues in health care administration. Functional and structural aspects of the hospital organization will also be discussed- authority, responsibility and role relationship of the governing board, administration and medical staff. The internal and external forces affecting the administrative process will be included.

MI 437: Healthcare Finance.

Spring. Credit, three hours. Decision-making processes as they relate to effective management of financial resources will be discussed. Students will acquire knowledge in interpreting health care institution financial reports and techniques of financial planning and control. Emerging trends in the system and the changing roles of government, and other private providers will be discussed.

MI 439: Principles of Marketing

Spring. Credit, three hours. This course provides students with an understanding of modern marketing practice, philosophy, marketing decisions, market segmentation, product positioning, buyer psychology and behavior and new product development. Marketing represents both a key function and philosophy that provides a foundation for the successful operation of all business and non-profit organizations today. Marketing executives perform the essential tasks of planning the firm's competitive market position, product distribution and advertising strategies.

MI 463a, b, c: Management Practicum I, II, and III

Summer, Fall, and Spring. Credit, six hours total. The practicum will involve an individually designed learning experience. It will be a field-based experience designed to reinforce didactic content and to help the student make a successful role transition into a health care setting as a supervisor, manager or administrator. The student will be assigned to radiology departments for administrative practical experience. The courses are designed to help the student identify a systematic approach to: work flow analysis, organization, department budget, planning, record systems, job evaluations, quality assurance and other problem solving tasks.

Course Descriptions (Education Track)

MI 431: Business Communication

Summer. Credit, three hours. This course is designed for the professional whose activities

require communicative abilities in a variety of interpersonal group situations. This course will help students develop an understanding of the communication process and will allow students to critically evaluate their skills. Methods of effective oral and written presentation will be introduced.

MI 435: Hospital Organization and Personnel Management

Fall. Credit, three hours. This course will explore health care systems and contemporary problems and issues in health care administration. Functional and structural aspects of the hospital organization will also be discussed- authority, responsibility and role relationship of the governing board, administration and medical staff. The internal and external forces affecting the administrative process will be included.

MI 440: Introduction to Medical Imaging Education

Summer. Credit, three hours. This course provides an overview of radiologic science education. Professional organizations and accreditation requirements influencing the curriculum will be identified. The student will be introduced to effective lesson preparation and utilization of selected multimedia materials.

MI 441: Methods and Materials of Teaching Medical Imaging

Summer. Credit, three hours. This course involves the development of instructional materials for specific units in the radiography curriculum. Objectives, lesson plans, visual aids and evaluation instruments will be developed. Emphasis will be placed on the organization and presentation of educational materials.

MI 443r: Practice Teaching (Clinical)

Fall and Spring. Credit, five hours total. These courses prepare the student for teaching in the clinical setting. Concepts related to clinical objectives, instructional methodologies, scheduling, and competency evaluation are introduced. Students will be assigned to work with students in the clinical education settings.

MI 445r: Practice Teaching (Didactic)

Fall and Spring. Credit, five hours total. These courses prepare the student for teaching basic radiologic science didactic material. The student will prepare lesson plans, present course material, and evaluate student progress in selected subject areas.

MI 447: Administration of Medical Imaging Programs

Spring. Credit, three hours. This course will explore contemporary problems and issues in radiologic science program administration. Functional and structural aspects of the program organization will also be discussed This course also involves the design of a radiologic science program according to the Joint Review Committee on Education in Radiologic Technology *Standards* or comparable guides for other imaging disciplines. Emphasis is placed on the determination program compliance with the JRCERT *Standards*.

Course Descriptions (Computed Tomography Track)

MI 450: CT Physics and Instrumentation

Summer. Credit, three hours. Physics topics covered include the characteristics of radiation, CT beam attenuation, linear attenuation coefficients, tissue characteristics, and Hounsfield number application. Data acquisition and manipulation techniques and image reconstruction algorithms will be explained. CT systems and operations will be fully explained.

MI 451a, b, c: CT Procedures I, II, and III

Summer, Fall, and Spring. Credit, six hours total. CT protocols will be taught for differentiation of specific structures and pathology. Patient history, education and preparation, contrast media type, amount and administration route, patient positioning and orientation, scan parameters, image display and common pathology will be covered. These courses complement Clinical Practicum I, II, and III.

MI 465a, b, c: CT Practicum I, II, and III

Summer, Fall, and Spring. Credit, nine hours total. These courses involve the application of didactic information in the clinical setting. The student will observe, assist, and perform basic patient care and clinical procedures under direct supervision. The student will be required to complete specific repetitions in accordance with the ARRT requirements.

Course Descriptions (Magnetic Resonance Imaging Track)

MI 453a, b, c: MRI Physics and Instrumentation I, II, and III

Summer, Fall, and Spring. Credit, six hours total. These courses introduce the student to the concepts related to production of the MR image. MR basics, image weighting and contrast, encoding, parameters, pulse sequences, flow phenomena, artifacts, vascular and cardiac imaging, contrast agents, and functional MRI will be covered in these courses.

MI 455a, b, c: MRI Procedures I, II, and III

Summer, Fall, and Spring. Credit, six hours total. MRI protocols will be taught for differentiation of specific structures and pathology. MRI safety, instrumentation and equipment, patient care and preparation, contrast media type, amount and administration route, patient positioning and orientation, scan parameters, filming and common pathology will be covered. These courses complement Clinical Practicum I, II, and III.

MI 467a, b, c: MRI Practicum I, II, and III

Summer, Fall, and Spring. Credit, nine hours total. These courses involve the application of didactic information in the clinical setting. The student will observe, assist, and perform basic patient care and clinical procedures under direct supervision. The student will be required to complete specific repetitions in accordance with the ARRT requirements.

Section 3: Class Schedules

Class schedules are subject to change. These are sample class schedules to illustrate the class and clinical distribution.

CLASS: *Sophomore*

SEMESTER: *Fall 2021*

	MON	TUES	WED	THURS	FRI
8:30 am - 10:30 am	MI 211a <i>EUH Annex N122</i> (Harmon)	(Orientation activities per schedule)	MI 211a <i>EUH Annex N122</i> (Harmon)	(Orientation activities per schedule)	MI 213a <i>EUH Annex N122/123</i> (Bullock/Harmon)
10:30 am - 10:45 am	Break		Break		{9:00 a.m. – Noon}
10:45 am – 12:45 pm	MI 221a <i>EUH Annex N122</i> (Khalifa)		MI 221a <i>EUH Annex N122</i> (Khalifa)		
12:45 pm - 1:30 pm	Lunch		Lunch		
1:30 pm - 3:00 pm	MI 201 <i>SOM A170</i> (Brzinski)		MI 201 <i>SOM A170</i> (Brzinski)		

NUMBER	TITLE	CREDIT HOURS
MI 201	INTRODUCTION TO MEDICAL IMAGING	2
MI 203*	MEDICAL TERMINOLOGY	1
MI 211a	PATIENT CARE	3
MI 221a	ANATOMY & PHYSIOLOGY	3
MI 213a	MEDICAL IMAGING PROCEDURES	2
MI 261a**	CLINICAL CLERKSHIP	2
MI 327*	COMPUTER APPLICATIONS IN MEDICAL IMAGING	1

* MI 203 and MI 327 are on-line courses.

** MI 261a will be scheduled the last two weeks of the semester.

Semester Schedule:

Orientation	August 23 rd – 24 th
Classes Meet:	August 25 th - November 19 th
Labor Day Holiday:	September 6 th
Fall Break:	October 11 th – 12 th
Final Exam Week:	November 22 nd – 26 th
Clinical Clerkship:	November 29 th – December 3 rd (8 hours/day)
	December 6 th – 9 th (8 hours/day)
	December 10 th (clinical meeting)

**EMORY UNIVERSITY
MEDICAL IMAGING PROGRAM
CLASS SCHEDULE**

CLASS: *Sophomore*

SEMESTER: *Spring 2022*

	MON	TUES	WED	THURS	FRI
9:00 – 10:30	MI 221b (<i>EUH Annex: N122</i>) Khalifa	MI 261b (See clinical schedule)	MI 221b* (<i>EUH Annex: N122</i>) Khalifa	MI 261b (See clinical schedule)	MI 213b (9:00 am- 12:00 pm) (<i>EUH Annex: N122</i>) Strickler & Bullock
10:30 – 10:45	Break		Break		
10:45 – 12:15	MI 321a (<i>EUH Annex: N122</i>) Strickler		MI 321a* (<i>EUH Annex: N122</i>) Strickler		
12:15 – 1:00	Lunch		Lunch		
1:00 – 2:30	MI 211b (<i>EUH Annex: N122</i>) Khalifa & Bullock		MI 211b* (<i>EUH Annex: N122</i>) Khalifa & Bullock		

- Class schedules will rotate throughout the semester on Wednesdays. See individual course syllabi for the weekly schedule.

NUMBER	TITLE	CREDIT HOURS
MI 211b	PATIENT CARE	3
MI 213b	MEDICAL IMAGING PROCEDURES	3
MI 221b	ANATOMY & PHYSIOLOGY	3
MI 321a	PHYSICAL PRINCIPLES OF IMAGING	3
MI 261b	CLINICAL CLERKSHIP	4

Semester Schedule:

Classes Begin:	January 4, 2022
Spring Break:	March 7-11, 2022
Classes End:	April 22, 2022
Final Exams:	April 25-29, 2022

**EMORY UNIVERSITY
MEDICAL IMAGING PROGRAM
CLASS SCHEDULE**

CLASS: *Junior*

SEMESTER: *Summer 2022*

	MON	TUES	WED	THURS	FRI
8:30 - 10:00	<i>Site Specific: Refer to clinical schedule</i>	MI 321b (Strickler)	<i>Site Specific: Refer to clinical schedule</i>	MI 321b (Strickler)	MI 213c (9:00 am – 12:00 pm) (Strickler/ Bullock)
10:00-10:15		Break		Break	
10:15-11:15		MI 323 (Khalifa)		MI 323 (Khalifa)	
11:15-12:00		Lunch		Lunch	
12:00– 1:30		MI 325a (Brzinski/ Bullock)		MI 325a (Brzinski/ Bullock)	
1:30 – 3:30		<i>Image Critique*</i>		MI 213c (Sims) (Strickler/ Bullock)	

All Classes will be held in the Program Classroom (EUH Annex Room N122)

*One critique per student; scheduled with individual faculty members.

NUMBER	TITLE	CREDIT HOURS
MI 213c	MEDICAL IMAGING PROCEDURES	3
MI 321b	PHYSICAL PRINCIPLES OF IMAGING	3
MI 323	MEDICAL IMAGING SAFETY	2
MI 325a	PRINCIPLES OF RADIOGRAPHIC TECHNIQUE	3
MI 361a	CLINICAL INTERNSHIP	4

Classes Begin:	Wednesday, May 18th
Holidays:	Monday, May 30th; Monday, July 4th
Classes End:	Friday, July 29th
Final Exam Week:	August 1st - August 5th
Semester Ends:	Friday, August 5th

PART VIII: ACADEMIC CALENDAR 2021-2022

FALL SEMESTER 2021

August 25 Wednesday	Classes begin.	March 7-11 Monday-Friday	Spring Break.
September 1 Wednesday	Last day to cancel registration with full refund. Last day for approved schedule changes. Last day to drop courses without incurring a “W” or “WF.”	March 21 Monday	Pre-registration for Fall
September 6 Monday	Labor Day Holiday	April 22 Friday	Classes end.
September 10 Friday	Last day to file application for degree to be granted at the end of the semester.	April 25-29 Monday-Friday	Exam period.
October 11-12 Monday-Tuesday	Fall Break	May 9 Monday	Term ends. Commencement
October 25 Monday	Pre-registration for Spring begins	SUMMER SEMESTER 2022	
November 25-26 Thursday-Friday	Thanksgiving Recess	May 16 Monday	Registration for full Summer semester.
December 3 Friday	Classes end.	May 18 Wednesday	Classes begin.
December 6-10 Monday-Friday	Exam period.	May 30 Monday	Memorial Day Holiday (Observed)
December 18 Saturday	Fall Semester ends.	July 1 Friday	Last day to file application for degree to be granted at the end of the semester.
SPRING SEMESTER 2022		July 4 Monday	Independence Day Holiday
January 4 Tuesday	Classes begin.	July 29 Friday	Classes end.
January 17 Monday	MLK Holiday.	August 1-5 Monday-Friday	Exam period.
January 17 Monday	Last day to cancel registration with full refund. Last day for approved schedule changes. Last day to drop courses without incurring a “W” or “WF.”	August 5 Friday	Summer semester ends.
February 4 Friday	Last day to file application for degree to be granted at the end of the semester. Summer pre-registration begins.		

PART IX: ACCREDITATION

Section 1: Regional Accreditation

Emory University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award degrees at the associate, bachelors, masters, and doctoral levels. This organization can be contacted at the following address:

Commission on Colleges: Southern Association of Colleges and Schools
1866 Southern Lane
Decatur, GA 30033-4907
(404) 679-4501

Section 2: Programmatic Accreditation

The Medical Imaging Program is also accredited by the Joint Review Committee on Education in Radiologic Technology. The following pages contain a copy of the "Standards for an Accredited Educational Program in Radiologic Sciences" as published by the Joint Review Committee on Education in Radiologic Technology.

Section 3: Allegations of Non-compliance with JRCERT *Standards*

Students are introduced to the Joint Review Committee on Education in Radiologic Technology *Standards* during program orientation when the Medical Imaging Program *Student Handbook* is reviewed. The JRCERT *Standards* are further reviewed during MI 201: Introduction to Medical Imaging in the first semester of enrollment. Students have the right to submit allegations against a JRCERT-accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or general welfare of the students.

If a student wishes to lodge a complaint, they should follow the indicated steps.

- 1) The allegation of non-compliance should be presented **in writing** to the Program Director.
- 2) The Program Director will review the allegation and, upon review, may find there is no basis for the allegation of non-compliance. Alternatively, the Program Director may recommend that modifications to program policies and /or procedures be instituted. The decision of the Program Director will be rendered within 2 weeks of receipt of the initial complaint.
- 3) After submission of the findings to the student, the student may appeal the findings to the Executive Associate Dean of the Medical School.
- 4) The decision by the Executive Associate Dean of the Medical School shall be rendered within 30 days of receipt of the complaint.

If the student is unable to resolve the complaint with the program/institution or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT:

**Chief Executive Officer
JRCERT
20 N. Wacker Drive
Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
E-mail: mail@jrcert.org**

The process for reporting allegations of non-compliance with the JRCERT *Standards* can be found at the following web address:

<https://www.jrcert.org/students/process-for-reporting-allegations/report-an-allegation/>

The JRCERT should be contacted only after the internal grievance procedure has been completed. If a student complaint is lodged with the JRCERT, the program will cooperate fully with the JRCERT to insure the timely investigation and resolution of any area of alleged non-compliance.

Section 4: JRCERT Standards

Standards for an Accredited Educational Program in Radiography

Effective January 1, 2021

Adopted April 2020 by:

The Joint Review Committee on Education in Radiologic Technology

“The Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiography** are designed to promote academic excellence, patient safety, and quality healthcare. The **Standards** require a program to articulate its purposes; to demonstrate that it has adequate human, physical, and financial resources effectively organized for the accomplishment of its purposes; to document its effectiveness in accomplishing these purposes; and to provide assurance that it can continue to meet accreditation standards.

The JRCERT is recognized by both the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The JRCERT **Standards** incorporate many of the regulations required by the USDE for accrediting organizations to assure the quality of education offered by higher education programs. Accountability for performance and transparency are also reflected in the **Standards** as they are key factors for CHEA recognition.

The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process not only helps to maintain program quality but stimulates program improvement through outcomes assessment.

There are six (6) standards. Each standard is titled and includes a narrative statement supported by specific objectives.”

Standard One: Accountability, Fair Practices, and Public Information

The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Objectives:

- 1.1 The sponsoring institution and program provide students, faculty, and the public with policies, procedures, and relevant information. Policies and procedures must be fair, equitably applied, and readily available.
- 1.2 The sponsoring institution and program have faculty recruitment and employment practices that are nondiscriminatory.
- 1.3 The sponsoring institution and program have student recruitment and admission practices that are nondiscriminatory and consistent with published policies.
- 1.4 The program assures the confidentiality of student educational records.
- 1.5 The program assures that students and faculty are made aware of the JRCERT **Standards for an Accredited Educational Program in Radiography** and the avenue to pursue allegations of noncompliance with the **Standards**.
- 1.6 The program publishes program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.
- 1.7 The sponsoring institution and program comply with the requirements to achieve and maintain JRCERT accreditation.

Standard Two: Institutional Commitment and Resources

The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Objectives:

- 2.1 The sponsoring institution provides appropriate administrative support and demonstrates a sound financial commitment to the program.
- 2.2 The sponsoring institution provides the program with the physical resources needed to support the achievement of the program's mission.
- 2.3 The sponsoring institution provides student resources.

- 2.4 The sponsoring institution and program maintain compliance with United States Department of Education (USDE) Title IV financial aid policies and procedures, if the JRCERT serves as gatekeeper.

Standard Three: Faculty and Staff

The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Objectives:

- 3.1 The sponsoring institution provides an adequate number of faculty to meet all educational, accreditation, and administrative requirements.
- 3.2 The sponsoring institution and program assure that all faculty and staff possess the academic and professional qualifications appropriate for their assignments.
- 3.3 The sponsoring institution and program assure the responsibilities of faculty and clinical staff are delineated and performed.
- 3.4 The sponsoring institution and program assure program faculty performance is evaluated and results are shared regularly to assure responsibilities are performed.
- 3.5 The sponsoring institution and/or program provide faculty with opportunities for continued professional development.

Standard Four: Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Objectives:

- 4.1 The program has a mission statement that defines its purpose.
- 4.2 The program provides a well-structured curriculum that prepares students to practice in the professional discipline.
- 4.3 All clinical settings must be recognized by the JRCERT.
- 4.4 The program provides timely, equitable, and educationally valid clinical experiences for all students.
- 4.5 The program provides learning opportunities in advanced imaging and/or therapeutic technologies.
- 4.6 The program assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

- 4.7 The program measures didactic, laboratory, and clinical courses in clock hours and/or credit hours through the use of a consistent formula.
- 4.8 The program provides timely and supportive academic and clinical advisement to students enrolled in the program.
- 4.9 The program has procedures for maintaining the integrity of distance education courses.

Standard Five: Health and Safety

The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

Objectives:

- 5.1 The program assures the radiation safety of students through the implementation of published policies and procedures.
- 5.2 The program assures each energized laboratory is in compliance with applicable state and/or federal radiation safety laws.
- 5.3 The program assures that students employ proper safety practices.
- 5.4 The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.
- 5.5 The sponsoring institution and/or program have policies and procedures that safeguard the health and safety of students.

Standard Six: Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement

The extent of a program's effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.

Objectives:

- 6.1 The program maintains the following program effectiveness data:
 - five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
 - five-year average job placement rate of not less than 75 percent within twelve months of graduation, and
 - annual program completion rate.

- 6.2 The program analyzes and shares its program effectiveness data to facilitate ongoing program improvement.
- 6.3 The program has a systematic assessment plan that facilitates ongoing program improvement.
- 6.4 The program analyzes and shares student learning outcome data to facilitate ongoing program improvement.
- 6.5 The program periodically reevaluates its assessment process to assure continuous program improvement.

APPENDIX A

EMORY UNIVERSITY POLICIES

The following University policies are included in this Appendix:

- *Policy 1.3 Equal Opportunity and Discriminatory Harassment
- *Policy 2.90 Travel and Expense Policy
- *Policy 5.1 Information Technology Conditions of Use
- *Policy 5.14 Smart Device Security Policy
- *Policy 8.2 Sex and Gender-Based Harrassment and Discrimination Policy
- *Policy 8.7 Mandatory Student Insurance
- *Policy 8.8 Alcohol and Drug Abuse Policy
- *Policy 8.9 Student Vehicle Use Policy
- *Policy 8.12 University Recognized Student Organizations
- *Policy 8.14 Respect for Open Expression Policy
- *Policy 10.12 Student Complaints

University policies can also be found at <http://policies.emory.edu/policies-list.html>.



Policy 1.3

Equal Opportunity and Discriminatory Harassment Policy

Responsible Official:	University President
Administering Division/Department:	Department of Equity and Inclusion (formerly Equal Opportunity Programs or EOP)
Effective Date:	April 13, 2007
Last Revision Date:	May 27, 2020

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

EMORY UNIVERSITY NONDISCRIMINATION STATEMENT

Emory University is an inquiry-driven, ethically engaged, and diverse community dedicated to the ideals of free academic discourse in teaching, scholarship, and community service. Emory University abides by the values of academic freedom and is built on the assumption that contention among different views is positive and necessary for the expansion of knowledge, both for the University itself and as a training ground for society at large. Emory is committed to the widest possible scope for the free circulation of ideas.

The University is committed to maintaining an environment that is free of unlawful harassment and discrimination. Pursuant to the University's commitment to a fair and open campus environment and in accordance with federal law, Emory cannot and will not tolerate discrimination against or harassment of any individual or group based upon race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law. Emory University welcomes and promotes an open and genuinely diverse environment.

This policy is a republishing of the Emory University Equal Opportunity and Discriminatory Harassment Policy, which previously was published at: <http://www.emory.edu/EEO/equalopportunitydiscriminatoryharassment.htm>



This policy also supersedes and retires Policy 8.6, Grievance Procedures – Employee and Student Complaints of Discrimination, and unifies the grievance process. The effective date represents only the date that this version was published on policies.emory.edu and does not reflect the original effective date of this policy.

Applicability

This Policy shall apply to persons who are employees and students of Emory University, vendors, contractors, guests, patrons, and other third parties participating in any Emory-sponsored event or program, whether on or off campus, and to such persons in other situations in which the respondent is acting as a member of the Emory community.

Complaints Against Students

Students are bound by the principles outlined in this policy. However, complaints against students (when acting in the capacity as a student) shall be resolved under the Conduct Code provided by that student's school or college unless the student's school or college conduct code provides otherwise. Investigation of complaints against students who are acting in the capacity of an employee shall be conducted by the Director of Department of Equity and Inclusion (DEI) and/or the Title IX Coordinator, or his or her designee, who shall report his or her findings and recommendations to the Senior Vice President and Dean for Campus Life and the Dean of the school or college in which the student is enrolled.

Sexual Harassment Complaints Against Students

Sexual Misconduct is a form of gender discrimination prohibited by Title IX of the Education Amendments of 1972. Title IX specifically prohibits sexual harassment and sexual misconduct in the educational setting. Emory University has adopted a separate Sexual Misconduct Policy, University Policy 8.2 that applies to student-on-student allegations or allegations in which the respondent is a student. Policy 8.2 explains how to report allegations of sexual misconduct, and sets forth detailed procedures designed to provide a fair process for parties when students are involved in allegations of sexual misconduct.

Policy Details

1.3.1. EQUAL OPPORTUNITY POLICY

1.3.2. DISCRIMINATORY HARASSMENT POLICY

1.3.3. INVESTIGATION AND RESOLUTION PROCESSES

1.3.4. COMPLAINTS AGAINST VENDORS, CONTRACTORS AND THIRD PARTIES

1.3.5 DEFINITIONS

1.3.6 ADDITIONAL UNIVERSITY RESOURCES

1.3.1. EQUAL OPPORTUNITY POLICY

Emory University is dedicated to providing equal opportunities to all individuals regardless of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, and veteran's status. Emory University does not discriminate in admissions, educational programs, or employment on the basis of any factor stated above or prohibited under applicable law. Students, faculty, and staff are assured of participation in University programs and in the use of facilities without such discrimination. Emory University complies with all applicable equal employment opportunity laws and regulations, and follows the principles



outlined above in all aspects of employment including recruitment, hiring, promotions, transfers, discipline, terminations, wage and salary administration, benefits, and training.

1.3.2. DISCRIMINATORY HARASSMENT POLICY

In keeping with its commitment to maintaining an environment that is free of unlawful discrimination and with its legal obligations, Emory maintains a policy prohibiting unlawful harassment. Discriminatory harassment of any kind, whether it is sexual harassment or harassment on the basis of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law, by any member of the faculty, staff, administration, student body, a vendor, a contractor, guest or patron on campus, is prohibited at Emory.

At the same time, Emory recognizes the centrality of academic freedom and the University's determination to protect the full and frank discussion of ideas. (See Policy 8.14.) Thus, discriminatory harassment does not refer to the use of materials for scholarly purposes appropriate to the academic context, such as class discussions, academic conferences, or meetings. Additionally, discriminatory harassment does not refer to participation in lawful protests, public forums, or campus publications established for the purpose of freely expressing opinions or ideas in the university community.

A. Discriminatory Harassment of a Sexual Nature

Sexual harassment includes unwelcome conduct, based on sex or gender stereotypes, when;

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or student status or;
- Submission to or rejection of such conduct is used as the basis for employment or academic decisions affecting such individual or;
- Such conduct is so severe and/or pervasive it has the purpose or effect of unreasonably interfering with a person's university employment, academic performance or participation in university programs or activities, or creates a working, learning, program or activity environment that a reasonable person would find intimidating, hostile or offensive.

Depending upon the severity and/or pervasiveness of the conduct, sexual harassment may include, for example, subjecting a person to egregious, unwelcome sexual attention, physical or verbal advances, sexual flirtations or propositions, vulgar talk or jokes, degrading graphic materials or verbal comments of a sexual nature about an individual or his or her appearance, or the display of sexually suggestive objects outside a scholarly context and purpose.

Sexual harassment includes sexual misconduct, sexual violence, sexual assault, intimate partner violence, stalking, and gender-based bullying. Prohibited sexual harassment in the working or learning environment includes an attempt to coerce an unwilling person into a sexual relationship; to punish a refusal to comply with a sexual based request; to condition a benefit on submitting to sexual advances, and to make direct or implied threats that submission to sexual advances will be a condition of employment or academic opportunity. Sexual harassment may also occur in the form of unwelcome, sexually suggestive cartoons, pictures, email, text, tweets, video or other graphic materials that may contribute to a hostile working or learning environment.

The alleged harasser may be a member of the faculty, staff, administration, student body, a vendor, a contractor, a guest or patron on campus.

B. Discriminatory Harassment of a Non-Sexual Nature

Emory's policy prohibits discriminatory harassment of a non-sexual nature, which includes verbal, physical, or graphic conduct that denigrates or shows hostility or aversion toward an individual or group on the basis of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law, and that is so severe and/or pervasive it:



- Has the purpose or effect of creating an intimidating, hostile, or offensive employment, educational, or living environment; or
- Has the purpose or effect of unreasonably interfering with an individual's work performance or a student's academic performance.

Depending upon its severity and/or pervasiveness, the prohibited behavior may include conduct or material (physical, oral, written, graphic, electronic messages or media posted or circulated in the community) involving epithets, slurs, negative stereotyping, threatening, intimidating, or hostile acts, that serve no scholarly purpose appropriate to the academic context and gratuitously denigrates or shows hostility or aversion toward an individual or group because of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor protected by applicable law.

The alleged harasser may be a member of the faculty, staff, administration, student body, a vendor, a contractor, a guest or patron on campus.

C. Reporting to Department of Equity and Inclusion (formerly Equal Opportunity Programs or EOP)

Emory encourages anyone who has knowledge of discrimination on campus to report alleged violations of this policy. Because discriminatory harassment interferes with the University's educational mission and may be unlawful, anyone who becomes aware of discrimination or discriminatory harassment committed by a member of the faculty, staff, administration, student body, a vendor, a contractor, guest or patron on campus, is encouraged to report the harassment to the Director of the Department of Equity and Inclusion (DEI).

Emory faculty, administrators and supervisors are required to immediately report any employment complaints they receive or incidents of discrimination or discriminatory harassment they witness, to their immediate supervisor or to the Department of Equity and Inclusion.

Contact Information:

Maurice Middleton
Senior Director
Department of Equity and Inclusion
Office of Diversity, Equity, and Inclusion
Emory University
201 Dowman Drive
Administration Bldg, Ste 305
Atlanta, GA 30322
MS: 1000-001-1AX
(404) 727-6198(404) 712-9108 fax
maurice.middleton2@emory.edu

OR

Carol E. Henderson, Ph.D.
Vice Provost
Office of Diversity, Equity, and Inclusion
Chief Diversity Officer
Advisor to the President
Emory University
201 Dowman Drive
Administration Bldg, Ste 305
Atlanta, GA 30322
MS: 1000-001-1AX
(404) 727-3127
(404) 712-9108 fax
carol.e.henderson@emory.edu



D. Prohibition Against Retaliation

Retaliation against an individual who, in good faith, complains about or participates in an investigation or a hearing relating to an allegation of discrimination or harassment is prohibited. Any individual who feels retaliated against, or has been threatened with retaliation, should report that allegation immediately to the Department of Equity and Inclusion (DEI).

E. False Accusations

Anyone who knowingly makes a false or bad faith accusation of discrimination, harassment, or retaliation will be subject to appropriate sanctions. However, failure to prove a claim of discrimination, harassment, or retaliation does not, in and of itself, constitute proof of a knowingly false accusation.

1.3.3. INVESTIGATION AND RESOLUTION PROCESSES

Individuals who believe that they have experienced or have information about acts of discrimination or discriminatory harassment may seek resolution through one of the methods discussed below. The University's response to the alleged discrimination will depend upon the severity and pervasiveness of the alleged conduct, which may be determined by the existence of prior incidents of harassment or discrimination. Depending upon the severity of the offense, however, a single violation of this Policy may be sufficient to support a violation.

The University will take seriously every allegation or report of discrimination or harassment received. Emory University's response is intended to ensure that all parties involved receive fair treatment, and that allegations are handled in a prompt, thorough and equitable manner.

A. Direct Communication with the Alleged Harasser

If the aggrieved person feels comfortable speaking directly with the alleged offending person to address concerns and obtain an appropriate resolution, he or she is encouraged to do so. While this method of resolution may be successful in solving the immediate problem, unless information is provided through the reporting channels covered in this policy, Emory may remain unaware of the issue and be unable to take any additional steps that might be necessary to address broader concerns. Individuals who choose not to address the alleged harasser directly, or who have not obtained a satisfactory resolution following such a discussion, are encouraged to utilize one of the other methods outlined below for addressing their concerns.

B. Filing an internal complaint with the Emory University Department of Equity and Inclusion

If a member of the Emory University community believes that he or she has been the victim of discrimination or discriminatory harassment or has information about discrimination/harassment in the university community, he or she may promptly report, without fear of reprisal, the facts of the incident and the name(s) of the individual(s) involved to the Department of Equity and Inclusion, located in Suite 305 of the Administration Building, or call the Department of Equity and Inclusion at (404) 727-9867. This report initiates a complaint.

Alternatively, a member of the university community may report the situation to his or her immediate supervisor, department head, or Dean, who will immediately notify DEI of the report. This report initiates a complaint. Supervisors must immediately report any complaints they receive or incidents of alleged harassment or discrimination they witness to the Department of Equity and Inclusion. However, if the complaint relates to a member of the Department of Equity and Inclusion, the complaint should be directed to the Supervisor of the Director of the Department of Equity and Inclusion, who shall appoint an appropriate investigator.

The Department of Equity and Inclusion (or an alternate investigator, where appropriate) will promptly, fairly and thoroughly investigate all timely claims of harassment and discrimination, regardless of whether such complaints are reduced to writing. All complaints of discrimination and harassment will be treated in the strictest confidence possible under the particular circumstances.

All complaints of discrimination or harassment should be filed as soon after the alleged offending conduct as possible, but in no event more than 180 calendar days after the most recent conduct alleged to constitute discrimination or harassment.



Emory will not retaliate or take any adverse action against anyone for truthfully reporting conduct that he or she believes to be in violation of this Policy, or for participating in good faith in an investigation of alleged discrimination or harassment, or for participating in any proceeding or hearing relating to such complaints.

Upon receipt of a complaint, the Director of the Department of Equity and Inclusion (or an appropriate alternate investigator) will assign an investigator who will, within forty-five (45) work days, investigate the circumstances of the allegations. However, if additional time is needed to conduct a thorough investigation, DEI may, at its discretion, extend the time for completing the investigation as reasonably necessary. In this case, DEI will notify the complainant and the respondent of the extension.

The investigation will include interviews with the complaining party, the respondent, and any material witnesses identified, as well as a review of any documents or other evidence. The complaining party and the respondent will be kept apprised of the conduct of the investigation and will be given the opportunity to provide any additional relevant information to the investigator, including the names of additional witnesses to contact and/or additional documents to review before the investigation is closed. At any time before the conclusion of the investigation, the Dean or equivalent division head of the unit of the University to which the respondent is assigned may take interim emergency action (not involving reduction of compensation) until the conclusion of the investigation.

The final written determination will state only whether, based on DEI's investigation, there was a violation of this Policy. The complainant and respondent will be promptly notified of the final determination. The Department of Equity and Inclusion shall have no independent authority to impose sanctions.

If DEI finds that there has been a violation of this policy and if the Dean or division head seeks advice as to the appropriate penalty, DEI may provide a recommendation as to the appropriate sanction. The Dean or division head will then be responsible for deciding upon and imposing disciplinary action as soon as reasonably possible, but within no more than one month after receiving the final determination and advice of DEI. The Dean or deciding official shall notify DEI of the penalty imposed, if any.

Sanctions imposed on those individuals who have been found to be in violation of the University's Equal Opportunity Policy or its Discriminatory Harassment Policy shall be commensurate with the severity and/or frequency of the conduct, and shall be adequate and sufficient to prevent such conduct in the future. The sanctions may include, but are not limited to, an apology to the victim; a verbal or written reprimand; a requirement to attend remedial training; appropriate workplace restrictions; denial of a merit pay increase or other benefit; denial of promotion; or reassignment, suspension or separation from the University. Staff members who receive disciplinary penalties under this policy may consult Human Resources for information about the Grievance process, which may be used to challenge alleged violations, misinterpretations, or inequitable application of policies or procedures.

C. Issues Specific to Faculty

If at any time during the investigation, a bona fide question arises out of a conflict between the principles of academic freedom and the requirements of this Policy, the respondent or Director of the Department of Equity and Inclusion may request that the Provost or his/her designee appoint a Faculty Review Panel to review the evidence and to provide advice to DEI as to whether there was a violation of Policy. If the Provost agrees that the situation involves a bona fide conflict between the principles of academic freedom and the requirements of this Policy, the Provost shall appoint a Faculty Review Panel. The convening, investigation and recommendation of the Faculty Review Panel will be concurrent with the investigation of DEI. The Faculty Review Panel will consist of a group of 5 to 7 faculty members, 3 of whom are from the respondent's school, who will be chosen by the Provost from among a pool of eligible faculty members who are elected by University faculty. Once selected by the Provost, the Faculty Review Panel may question the respondent, the complainant, and any other witness necessary to adequately address the issue. The Faculty Review Panel may also review the DEI investigatory file and any other documentary evidence needed. The procedures shall be kept as confidential as possible so as to respect the rights of all involved parties. At the conclusion of its review, the Faculty Review Panel shall provide a recommendation to DEI as to whether it believes that there was a violation of the Discriminatory Harassment Policy. DEI shall include the recommendation of the Faculty Review Panel in submitting the final report to the Dean. The Dean shall make the final decision as to what, if any, sanctions may be appropriate under the circumstances.

Following a determination of sanctions, faculty may avail themselves of avenues of appeal as listed in the Statement of Principles Governing Faculty Relationships. Specifically, a faculty member shall be entitled to a hearing of the Faculty Hearing Committee when the sanction imposed by the Dean for violation of this Policy is the suspension, transfer, or termination of his/her employment.



D. Filing an External Complaint

An individual who believes that he or she has been subjected to unlawful discrimination, harassment, or retaliation has the right to file a complaint with an appropriate local, state, or federal agency, such as the Department of Education Office of Civil Rights (OCR) <http://www2.ed.gov/about/offices/list/ocr/index.html> or the Equal Employment Opportunity Commission (EEOC) <http://www.eeoc.gov/>, within applicable time limits. In addition, any person who is dissatisfied with Emory's internal procedures utilized for handling complaints, or who is dissatisfied with the result of the investigation or the sanctions imposed, may seek redress through the EEOC, to the extent allowed by law. The complainant should be aware that filing a complaint with the University's Department of Equity and Inclusion or other University resource does not extend or postpone the deadline for filing with external agencies. In the event that a complaint is filed with an external agency or court, the University reserves the right to determine, at its discretion, whether the University's internal complaint resolution procedure should be discontinued or continued separately.

1.3.4. COMPLAINTS AGAINST VENDORS, CONTRACTORS AND THIRD PARTIES

Emory's commitment to providing members of its community with a working and learning environment that is free of discriminatory harassment includes freedom from inappropriate conduct by vendors, contractors, and third parties. If a member of the University community believes he or she has been subjected to harassing conduct by a vendor, contractor, or third party, he or she should report such conduct to the Department of Equity and Inclusion, to his or her immediate supervisor or Dean, or to a higher University official. Such complaints should be forwarded to the Department of Equity and Inclusion immediately. DEI will work with the complaining party to investigate the complaint, and the University will take prompt corrective action if inappropriate conduct is found to have occurred.

1.3.5 DEFINITIONS

See definitions section below.

1.3.6 ADDITIONAL UNIVERSITY RESOURCES

All Emergencies (any campus/location) 9-1-1

Emory Police Department 404.727.6111 or 404.727.8005

Emory Police Department TIPS line 404.727.8477/TIPS

The Respect Program, Office of Student Health (Sexual Assault/Relationship Violence Response) 404-727-1514

Faculty Staff Assistance Program

1762 Clifton Road NE, Suite 1100, Atlanta, GA 30322, 404.727.4328

Emory University Human Resources

Employee Relations Department

1599 Clifton Road, NE

Atlanta, GA 30322

404.727.7625

Campus Life Offices 404.727.4364

Student Health 404.727.7551

Emory Trust Line 1.888.550.8850 (for non-emergencies)

DeKalb Rape Crisis Center 404.377.1428

Definitions

Allegation - A statement by a complainant that an act of harassment or discrimination has occurred.



Coercion - Coercion is unreasonable pressure for sexual activity. Coercive behavior differs from seductive behavior based on the type of pressure someone uses to get consent from another. When a person makes clear that the person does not want sex, wants to stop, or that going past a certain point of sexual interaction is unwanted, continued pressure beyond that point can be coercive.

Complainant - The person making an allegation or complaint of discrimination.

Complaint - A formal notification, either orally or in writing, of the belief that discrimination or violation of this Policy has occurred.

Consent - Consent is clear, unambiguous, and voluntary agreement between participants to engage in specific sexual activity. Consent is active, not passive, and is given by clear actions or words. Consent may not be inferred from silence, passivity, or lack of active resistance alone. A current or previous dating or sexual relationship is not sufficient to constitute consent, and consent to one form of sexual activity does not imply consent to other forms of sexual activity. Being intoxicated does not diminish one's responsibility to obtain consent. In some situations, an individual may be deemed incapable of consenting to sexual activity because of circumstances or the behavior of another, or due to their age. Examples of such situations include, but are not limited to, incompetence, impairment from alcohol and/or other drugs, fear, unconsciousness, intimidation, coercion, confinement, isolation, or mental or physical impairment.

Force - The use of physical violence and/or imposing on someone physically to gain sexual access. Force also includes threats, intimidation (implied threats) and coercion that overcomes resistance or produces consent. There is no requirement that a person has to resist the sexual advance or request, but resistance is a clear demonstration of non-consent. The presence of force is not demonstrated by the absence of resistance. Sexual activity that is forced is by definition non-consensual, but non-consensual sexual activity is not by definition forced.

Incapacitation - Incapacity can result from mental disability, sleep, involuntary physical restraint, or from intentional or unintentional taking of alcohol and/or other drugs. An incapacitated person does not have the ability to give knowing consent. Sexual activity with a person who one should know to be – or based on the circumstances should reasonably have known to be – mentally or physically incapacitated, constitutes a violation of this policy. The perspective of a reasonable person will be the basis for determining whether one should have known about the impact of the use of alcohol and/or drugs on another's ability to give consent.

Intimate Partner Violence (IPV) - Physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples, whether cohabitating or not, and does not require sexual intimacy. IPV can vary in frequency and severity, can occur on a continuum, and can include acts of physical violence, sexual violence, threats of physical or sexual violence, or psychological or emotional violence. Psychological or emotional violence is a broad term that results in trauma to a victim caused by acts, threats of acts, or coercive tactics, and can include acts of humiliation, intimidation, isolation, stalking, and harassment.

Non-Consensual Sexual Contact - Any intentional sexual touching by a person upon a person, that is without consent and/or by force. This includes, but is not limited to, intentional contact with the breasts, buttocks, groin, or genitals, or touching another with any of these body parts, or making another touch oneself or themselves with or on any of these body parts; any intentional bodily contact in a sexual manner, though not involving contact with/of/by breasts, buttocks, groin, genitals, mouth or other orifice, with any object.

Non-Consensual Sexual Intercourse - Any sexual intercourse, however slight, by a person upon a person, that is without consent and/or by force. Intercourse includes, but is not limited to, vaginal penetration by a penis, object, tongue or finger; anal penetration by a penis, object, tongue, or finger; and oral copulation (mouth to genital contact or genital to mouth contact), no matter how slight the penetration or contact.

Respondent - Refers to the person against whom the allegation or complaint of discrimination or harassment is made. Under this policy, respondents include employees and students of Emory University, vendors, contractors, guests, patrons, and other third parties participating in any Emory-sponsored event or program, whether on or off campus, and to such persons in other situations in which a person is acting as a member of the Emory community.

Sexual Exploitation - Occurs when a person takes non-consensual or abusive sexual advantage of another for his/her own advantage or benefit, or to benefit or advantage anyone other than the one being exploited. Examples of sexual exploitation include, but are not limited to the following:

- invasion of sexual privacy;
- prostituting another person;
- non-consensual video or audio-taping of sexual activity;



- going beyond the boundaries of consent;
- observing unsuspecting individuals who are partly undressed, naked, or engaged in sexual acts;
- knowingly transmitting a sexually transmitted infection or HIV to another person;
- exposing one’s breasts, buttocks, groin, or genitals, in non-consensual circumstances; inducing another to expose their breasts, buttocks, groin, or genitals;
- sexually-based stalking and/or bullying may constitute a form of sexual exploitation, as well as a form of sexual harassment, as discussed above.

Sexual Harassment - Unwelcome conduct, based on sex or on gender stereotypes, which is so severe or pervasive that it unreasonably interferes with a person’s university employment, academic performance or participation in university programs or activities or creates a working, learning, program or activity environment that a reasonable person would find intimidating, hostile or offensive. Sexual harassment may include, for example, an attempt to coerce an unwilling person into a sexual relationship; to repeatedly subject a person to egregious, unwelcome sexual attention or advances; to punish a refusal to comply with a sexual based request; to condition a benefit on submitting to sexual advances; sexual violence or sexual assault; intimate partner violence; stalking, or gender-based bullying.

Sexual Misconduct - Sexual misconduct encompasses sexual harassment, non-consensual sexual contact (or attempts to commit same), non-consensual sexual intercourse (or attempts to commit same), and sexual exploitation. Sexual misconduct can occur between strangers or acquaintances, including people involved in an intimate or sexual relationship. Sexual misconduct can be committed by persons of any gender or sex, and it can occur between people of the same or different sex.

Stalking - Behavior where a person follows, places under surveillance, or contacts another person without the consent of the other person for the purpose of harassing and intimidating the other person. The term “contact” means to make or attempt to make any communication, including, but not limited to: communication in person, by telephone, by mail, by broadcast, by computer or computer network, or by any other electronic device. “Harassing and intimidating” refers to communication directed at a person that causes emotional distress because of a reasonable fear for the person’s safety or safety of others, and which serves no legitimate purpose. It does not require that an overt threat of death or bodily injury be made.

Related Links

- Current Version of This Policy: <http://policies.emory.edu/1.3>
- Sexual Misconduct Policy (<http://policies.emory.edu/8.2>)
- Respect for Open Expression Policy (<http://policies.emory.edu/8.14>)

Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Department of Equity and Inclusion	404-727-9867	maurice.middleton2@emory.edu
File A Complaint	Department of Equity and Inclusion	404-727-9867	maurice.middleton2@emory.edu

Revision History

- Version Published on: May 27, 2020 (*Contact information update, update with office name change*)
- Version Published on: Aug 27, 2018 (*Contact information update, update details numbering*)
- Version Published on: Jun 02, 2015 (*Updated contact*)
- Version Published on: Aug 28, 2014 (*Update with office name change*)
- Version Published on: Jan 16, 2014 (*Rewrite of policy*)
- Version Published on: Jan 18, 2012 (*Contact information update*)



- Version Published on: [Jan 09, 2012](#)
- Version Published on: [Apr 13, 2007](#) (*revised to include gender identity and expression*)
- Version Published on: [Apr 02, 2007](#) (*Original Publication*)



Policy 2.90

Emory University Travel and Expense Policy

The following policies have been consolidated into Policy 2.90:

- 2.100 Personal Meals
- 2.101 Telephone Usage While Traveling
- 2.102 Non-Employee and Non-Resident Alien Travel
- 2.103 Family Member Travel
- 2.104 Travel-Non-Reimbursable or Payable Items
- 2.105 Sponsored Programs Travel
- 2.106 Business Meals
- 2.107 Business Expenses
- 2.111 Receipt Requirements
- 2.122 Preferred Payment Method
- 2.292 Travel
- 2.90 Travel- General
- 2.91 Travel Payment Options
- 2.95 Air and Rail Travel
- 2.96 International SOS
- 2.97 Lodging
- 2.98 Ground Transportation
- 2.99 Personal Vehicles

Responsible Official: Vice President for Finance/Chief Finance Officer

Administering Division/Department: Procurement Services

Effective Date: September 01, 2017

Last Revision Date: October 01, 2019

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)



Overview

Emory University has a fiduciary responsibility to ensure that its resources are used prudently and that individuals traveling on behalf of the University, do not incur inappropriate or excessive expenses, and that all appropriate pre-trip safety and insurance precautions are followed for Emory-related travel. The purpose of this document is to provide general travel guidelines.

The objective of the travel policies is to:

- Provide guidelines that maximize value while containing costs
- Define allowable expenses
- Ensure that travelers are reimbursed for, or payment made for, allowable expenses in a timely manner
- Ensure compliance with applicable IRS and other third party regulations
- Ensure compliance with applicable State, Federal or Sponsored accounts.

Non-compliance with IRS rules and regulations may subject the University and the individual to financial penalties. The IRS requires employers to establish and administer an "accountable plan." Under an accountable plan, individuals can be reimbursed for, or payment made for, incurred expenses, without negative tax consequences, when the following conditions are satisfied:

- Advances and/or reimbursements or payments are made for business expenses only
- A traveler adequately accounts to Emory for business expenses within a reasonable period of time
- A traveler returns any excess reimbursement, payment or allowance within a reasonable time

Applicability

The Travel Policies apply to faculty, staff, students and non-employees traveling on behalf of the University and seeking reimbursement or payment for travel-related expenses from Emory University funds, regardless of the funding source.

The University is not obligated to reimburse for or pay for expenses not authorized under the Travel Policy, nor if travel policies are not followed.

Schools and units are not allowed to supersede University travel policies without express written consent of the CFO or EVP-BA, unless dictated otherwise by sponsoring program.

Exceptions to the policies must be approved in advance by submitting details and business reason to the AVP of Procurement and will be evaluated on a case-by-case basis. Final pre-approval for one-time exceptions will be granted by the AVP of Procurement, and for ongoing exceptions by the CFO. Any pre-approval for an exception must be in writing and accompany the Expense Report.

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General Travel Policy

Traveler Responsibility

Individuals traveling on behalf of the University should exercise good judgment when incurring travel expenses. Travelers are responsible for ensuring that incurred expenses and related reimbursement or payment requests comply with all applicable policies and authorizations, and are supported by valid receipts and other documentation as required. Electronic submission by the traveler (or delegated proxy for the traveler) as well as electronic approval(s) on the Expense Report affirms that these responsibilities have been met.

In an effort to keep travel expenditures low as well as reduce air emissions in compliance with Emory's Climate Action Plan, before committing to a trip, a traveler must use their best judgement as to whether or not the trip is necessary. Evaluate if the trip could be replaced by teleconferencing, webinars or video conferencing instead. If applicable, evaluate if it is necessary for multiple staff and faculty members to attend or just one member instead.

Schools and Operating Division Responsibility

The heads of each school or unit (e.g., Provost, Deans, CBOs, and Vice Presidents) are responsible for ensuring awareness of and compliance with all University travel policies.

Higher Level Approver Responsibility

Higher Level Approvers are assigned by the guidelines set forth by the Finance Division and CFO. In conjunction with departmental financial administrators, the Higher Level Approver must ensure that:

- The traveler is aware of the Emory Travel Policy in advance of the travel;
- Travel expenses were incurred while conducting authorized University business;
- Travel expenses were necessary, reasonable and consistent with University policies and the stated business purpose;
- An expense report includes the required documentation; and
- Travel expenses meet any and all Sponsored Program guidelines, if applicable.

Executive Level Responsibility

The following executives may not delegate approval authority:

APPROVES TRAVEL/ EXPENSE REPORTS	TRAVELER
Chair of the Board of Trustees	President
President	Provost, Executive Vice Presidents, and direct reports of the President
Executive Vice Presidents	Direct Reports of Executive Vice Presidents



International SOS

Emory University contracts with International SOS (ISOS) to provide security and medical evacuation services, and a variety of online health, safety, and security resources for the University community traveling abroad on University business or sponsored activities only (7 days personal travel before or after the meeting is included). All Emory faculty, staff, students and family members traveling with a University Traveler are also covered by ISOS. Note: ISOS is not health insurance.

- 1) Prior to making travel plans, travelers must confirm through Emory's ISOS website that the country to which they are traveling to does not currently have restricted coverage due to political unrest, medical restrictions, or other reasons. Emory may prohibit travelers on Emory funded or Emory sponsored travel from going to certain countries.
- 2) Prior to departing, travelers must set up their profile within Emory's ISOS travel record by uploading contact and emergency information, passport/visa information, medical history, and trip itineraries. For tracking purposes, itineraries are automatically uploaded if booking through an Emory travel provider. If travel arrangements are not made using an Emory travel provider, travelers must input their itinerary manually. Additional side trips and supplemental information should be included.
- 3) Travelers should consult ISOS for in-country information, required immunizations, travel warnings and safety tips and other important travel information and follow any advice given.

Prior to departing, travelers must ascertain how Emory's worker's compensation insurance (Occupational Injury Management, 404-686-8587) and their personal medical coverage (Human Resources Benefits Department, 404-727-7613) will respond if an incident occurs in the country or countries they plan to visit.

When renting a car internationally, travelers should accept the loss damage waiver (LDW) and supplemental liability coverage.

For guidance about special health requirements/considerations/quarantines, please contact Emory Travel Well Center at 404-686-5885.

Telephone Usage

Travelers will not be reimbursed for calls or texts made on personal cellular phones while traveling. Monthly service fees for personal cellular phones are not reimbursable unless pre-approved by the department. Subject to department approval, travelers not using cell phones (personal or Emory-provided) will be reimbursed for necessary and reasonable personal telephone calls allowing them to stay in contact with family and business calls.

Payment Options and Reimbursement Timelines

When available, travelers should use the University's Corporate Card to pay for reimbursable or payable travel expenses. In the absence of a University Corporate Card, travelers should use a personal credit card. Properly approved and documented reimbursement or payment requests should be submitted via an Expense Report to Payment Services within 10 days after concluding the business activity. See Travel Expense Reporting, Reimbursement, and Payment for details and additional payment options.

Travel Reimbursement and Payment Audits

Travel Expense Reports are included in the audit testing performed by the University's independent accountants in connection with Uniform Guidance and with the annual general purpose financial statement audit. Findings are discussed with the CFO, Executive Vice President, Finance and Administration, and the Chair of the Trustee Committee on Audit and Compliance. The Office of Internal Audit reviews Travel Expense Reports in connection with school and department audits.

Air and Rail Travel



Air Travel

Air travel shall be arranged by using Emory's air travel providers (with the exception of incoming guests/visitors). Use of Emory's travel agencies for air travel provides a balance between overall cost-effectiveness and the traveler's need for reliable services and support and ensures that we are able to take full advantage of our corporate emergency travel services for the benefit of our faculty and staff.

Beginning in September 2019, Emory allows the booking of certain types of low cost, basic economy fares. These are fare classes such as no-seat assigned discount fares or consolidator fares. These fares have a higher risk of travel disruption which could infringe on the traveler's business matters and cause additional expenses. Travelers are responsible to research the airline ticket restriction prior to booking these tickets because rules differ from airline to airline and can be changed at any time.

Simple, single destination domestic trips should be arranged through Emory's online travel providers. Complex, multi-destination, or international trips should be arranged via telephone directly with Emory's agent-assisted travel providers.

- 1) Continuous flight time (non-stop) less than six hours:

Emory University will reimburse for only Coach/Economy Class tickets when continuous flight time (non-stop) is less than four hours. Upgraded/premium economy such as Economy Comfort+ is allowable on flights of 4+ hours of continuous flight time. No reimbursement will be made for any Business/First Class fares.

Sponsored travel may have additional restrictions. Consult with your RAS representative to review the exceptions of your particular award.

Requests for airfare upgrade exceptions should be submitted prior to booking airfare in writing using the following form: https://finance.emory.edu/home/travel/Airfare_Upgrade.pdf. This approved form must be included with the Expense Report.

- 2) Continuous flight time (non-stop) six hours and greater:

When continuous flight time (non-stop) is six hours and greater, Emory University will reimburse for Coach/Economy Class, all upgraded seating fees such as Premium Economy, Economy Comfort+, aisle seats, exit row seats, upgrades, upgradable fares as well as Business tickets.

First class tickets are not allowable without granted exception. Exception for first class tickets are allowed by exception only when business class seats are unavailable on the route. Direct point-to-point travel is required.

Sponsored travel may have additional restrictions. Consult with your RAS representative to review the exceptions of your particular award. For sponsored travel, first class fares are permissible if allowed by the sponsoring body.

Requests for airfare upgrade exceptions should be submitted prior to booking airfare in writing using the following form: https://finance.emory.edu/home/travel/Airfare_Upgrade.pdf. This approved form must be included with the Expense Report.

- 3) Travelers who elect to fly in Business/First Class for continuous flights that are less than six hours without a properly approved Airfare Upgrade Exception Form (see Section 1 above) will only be reimbursed for, or payment made for, the least expensive coach fare available based on a 21-day advance purchase estimation for that same route. If documentation is not provided reflecting that cost estimate, Payment Services will not reimburse or pay.
- 4) Tickets or upgrades purchased with frequent flyer miles are not reimbursable.
- 5) Travel on charter or private planes is not reimbursable or payable, unless a specific exception exists as pre-approved by President, one of the three Executive Vice Presidents, University CFO, Senior Vice President, or a Dean.



- 6) Senior Administrators traveling to the same destination should weigh the following guidelines against the business needs of the parties and the practicalities of the situation:
 1. No more than three department chairs should fly together.
 2. No more than five faculty and staff from the same department should fly together.
 3. The Chair of the Board and the President should fly separately.
 4. No more than two cabinet members or deans should fly together.
 5. A senior administrator should not fly with more than two direct reports.
- 7) When already paid for by Emory, a non-refundable ticket for a cancelled trip can be applied to a future trip when taken by the same traveler on the same airline, subject to a change or cancellation fee. The traveler must notify Emory's approved agency or airline in advance if he or she must cancel the trip. If the original airfare was directly billed to a department or charged to the Corporate Card, the value of an unused ticket must be applied towards a future business trip to mitigate any financial loss to the funding source. It cannot be applied towards a personal trip. In most cases, the traveler has a year in which to apply the unused ticket to future Emory business travel only.
- 8) When already paid for by Emory, a refundable ticket for a cancelled trip must be returned to the travel agency or airline for a refund. The traveler must notify the agency or airline in advance if he or she must cancel the trip.
- 9) Immunizations and travel visas necessary for Emory travel will be reimbursable, including expedition fees if dictated by business purpose and timing. Passport application and renewal fees are not typically reimbursable except in very rare exceptions granted by the traveler's chief business officer.

Rail Travel

Airline travel may be faster and less expensive than travel by rail and should be used when appropriate. Rail Travel is allowed but approval will need to be accompanied by a comparison of a flight purchased at least 21 days in advance of travel date to show cost savings.

Rail travel may be used without prior approval for travel between the following locations (or their interim destinations as applicable) along the Amtrak Northeast Corridor:

- Washington D.C. to Philadelphia
 - Philadelphia to New York City
 - New York City to Boston
- 1) First Class rail travel is only reimbursable up to the cost of a coach class ticket. Exceptions require written pre-approval by the President, one of the three Executive Vice Presidents, a Senior Vice President, the CFO or the AVP for Procurement; said approval must be included with the Expense Report.
 - 2) Roomette (a small private compartment for one on a sleeping car) accommodations may be used for overnight travel, pending required approvals outlined in this policy.

Lodging

- 1) The cost of lodging should be kept to a minimum by requesting standard (non-Club, non-Suite) accommodations, whenever possible. Exceptions to this policy must be approved by the AVP of Procurement. Travelers should use Emory's travel agency for hotel booking whenever practicable. If staying at a conference hotel, the traveler should book the pre-negotiated conference rate or if sold out of that rate, the next lowest rate available. The University does not allow schools and units to limit reimbursement of hotel and food expenses.
- 2) Allowable lodging expenses may include:
 - A single-occupancy room rate
 - In-room business telephone calls
 - Reasonable calls home
 - Internet access
 - Luggage storage and tips for service



- A list of non-reimbursable or payable expenses can be found in the section Non-Reimbursable or Payable Items.
- 3) Travelers who elect to stay at a private residence may be reimbursed up to a maximum of \$100 for extending a token gift or meal as a gesture of appreciation to the host. Original receipt will be accepted as proof of purchase. If a meal is provided to the host, employee reimbursement eligibility must follow the Personal Meals Policy. The host's reimbursable meal costs cannot exceed \$100 per person.

Ground Transportation

Driver's License

Individuals renting cars while traveling on behalf of the University are responsible for having valid driver's licenses.

Rental Cars

- 1) The size of the rental car should be consistent with the number of travelers. Full size is acceptable for individual travelers, while minivan and SUV class are acceptable for 3 or more people traveling together.
- 2) Allowable rental costs include daily rental fees, local and state taxes, GPS rental, concession fees, gas and drop-off fees.
- 3) Travelers should book through the University's assigned travel agencies to ensure appropriate insurance coverage.
- 4) As long as the car is rented for use while conducting University business in the U.S., U.S. territories, Puerto Rico and Canada, travelers should decline the loss damage waiver (LDW/CDW) option, supplemental liability coverage, personal accident insurance (PAI) and other insurance options. These options are not reimbursable or payable expenses. In all other locations (outside the U.S., US territories, Puerto Rico, and Canada), Emory travelers should accept the rental insurance.
- 5) When traveling outside the U.S. on University business, the purchase of liability and physical damage coverage is required and is reimbursable or payable.
- 6) Travelers must refuel the car prior to returning it to avoid excessive refueling fees. Fueling fees are not reimbursable. Advanced fuel purchase via rental agency is reimbursable. However, travelers should only elect this option if auto travel is expected to consume the large majority of the fuel tank.

Emory Shared Cars

The general use of Emory's shared car program is considered a personal expense. However, when using a shared car for University business purposes and with departmental approval, reimbursement or payment will be allowed.

Department-approved reimbursement or payment for shared car use will be based on the lesser of the two calculations: mileage driven multiplied by the current IRS rate, or hourly rate for use of the shared car. However, the cost of the shared car program membership will not be reimbursed or paid for.

Personal Vehicles

Faculty/staff may elect to use personal cars for business purposes if it is less expensive than other options, (e.g., airfare, rental cars, taxis), if it saves time, or if the traveler is transporting items that might incur a high shipping rate. It is the personal responsibility of the driver to determine that the personal vehicle driven carries adequate insurance coverage for the driver's protection and for the protection of any passengers. When driving a personal vehicle for business purposes, the vehicle owner's insurance policy will be responsible for damage to the vehicle and primary over any other collectible insurance.

Drivers are reimbursed for actual miles traveled as indicated by supporting documentation such as Google Maps or MapQuest printout. The mileage reimbursement rate is determined yearly by the IRS, which includes the total cost to operate a vehicle and the cost of gasoline.

Personal Commuting Expense, which is considered to be the mileage between your home and your main or regular place of work, is not reimbursable and must be deducted, round trip, from personal vehicle mileage reimbursement.



PERSONAL CAR USE	REIMBURSABLE?
Commuting between home and usual place of business	No. The driver should always deduct this mileage when calculating amount for any authorized mileage reimbursements below.
Between buildings on campus	No
Between Emory campuses	Yes. Total miles claimed for the day cannot include your normal daily commute.
To/From Airport	Yes. Total miles claimed for the day cannot include your normal daily commute.
Local travel for authorized activities (i.e. training class in downtown Atlanta)	Yes. Total miles claimed for the day cannot include your normal daily commute.
Non-local travel for authorized activities * (i.e. business trip to Birmingham, AL)	Yes. Total miles claimed for the day cannot include your normal daily commute.

** Travelers who choose to use their own vehicles when air travel plus rental car is less expensive will be reimbursed an amount not to exceed the lowest air fare to the destination. A coach class, 21-day advance purchase ticket will be used for calculation.*

Total miles to be reimbursed cannot include your normal daily commute, round-trip, and should be subtracted from the calculation. (However, for non-regularly-scheduled workdays such as Saturdays, Sundays and holidays, mileage calculation can originate/end at home and does not require deduction of round-trip daily commute mileage.)

Example #1:

Home to Airport = 50 miles round trip
 Minus Home to "Normally Assigned Work Location" = 20 miles round trip
 Difference and reimbursable mileage to employee = 30 miles

Example #2:

Home to Airport = 12 miles round trip
 Minus Home to "Normally Assigned Work Location" = 20 miles round trip
 Difference is (-8 miles), therefore nothing is reimbursable to employee.

Additional allowable expenses include turnpike tolls, bridge tolls and reasonable parking fees.

Family Member Travel

Overview

In general, Emory does not pay for or reimburse or pay for travel expenses, or any other expenses, for the spouse or other family member (including domestic partner) of an Emory employee. This policy outlines the limited circumstances in which such approval may be granted and the process for obtaining such approval.

Pre-Approval

With the exception of the President, reimbursement or payment of the travel expenses of a Family Member must normally be pre-approved by the President, appropriate Executive Vice President, a Senior Vice President, the CFO,



Dean, or the AVP for Procurement on the Request for Family Member Travel Form. "Family Member" includes the spouse, domestic partner or any other immediate dependents. A clear explanation of how the Family Member's presence will significantly contribute to the event and benefit Emory, as well as the Family Member's specific activities, must be included. Such situations, in which it is a true benefit to Emory to have a Family Member accompany an Eligible Employee, are rare but may include fundraising or development events. In addition, there may be rare circumstances in which reimbursement or payment of travel expenses is granted post-travel in the discretion of the President, appropriate Executive Vice President, a Senior Vice President, the CFO or the AVP for Procurement.

Reimbursement or Payment Requests

The approved Request for Family Member Travel Form must accompany all reimbursement or payment requests that include expenses for the Eligible Employee's Family Member.

Tax Consequences

The travel expenses of an Eligible Employee's Family Member may be paid for or reimbursed by Emory, and are not included in the employee's taxable income, provided the employee can establish that the presence of his or her Family Member serves a "bona fide business purpose," as defined in the Treasury Regulations. A Family Member's presence is considered to serve a bona fide business purpose if the individual has a significant role in the proceedings or makes an important contribution to the success of the event.

If attendance of an Eligible Employee's Family Member is desirable but does not serve a bona fide business purpose to Emory, any such reimbursement or payment for such Family Member's travel expenses will be a taxable payment processed through payroll. When a Family Member attends a meeting or conference as a companion and has no truly significant role or performs only incidental duties, for example, the IRS has held that the attendance does not constitute a bona fide business purpose and such reimbursement or payment would be taxable to the employee.

The CFO will make the final Emory determination as to whether a reimbursement or payment is treated as a taxable payment. Meeting the standard of a "bona fide business purpose" is rare, and if this standard is not met and the reimbursement or payment is determined to be taxable, such payment will not be eligible for a "gross up" for tax purposes.

Personal Meals

Personal meals are defined as meal expenses incurred when traveling on business and should only be considered for the days and hours of the actual business trip.

- 1) Travelers can expense their personal meals according to actual and reasonable costs accompanied by required documentation. The University does not allow schools and units to limit reimbursement of hotel and food expenses. International travelers may claim actual costs or a daily per diem, using the per diem rate set by the United States State Department. See per diem guidelines. Domestic travelers may only claim per diem if their trip exceeds 7 days / 6 nights.
- 2) The cost of meals varies substantially from city to city and within cities, and expenses may vary widely based on several factors relating to the purpose of a trip. This guideline represents the average amount considered adequate for meal expenses and is not intended to be considered a fixed amount if expenses are less. In rare cases, when this maximum limit is significantly exceeded, written justification may be required to be included in the expense report at the discretion of the Chief Business Officer or his or her designee.
- 3) Mixing meal expense methods (per diem or actuals) for the same trip is not allowed. If a traveler claims per diem, he/she should not under any circumstances use the Emory corporate card to pay for meals. When using per diem, travelers should use personal funds to pay for meal expenses.
- 4) Alcoholic beverages, as identified by required documentation of meals, must be accounted for separately from meal expenses on the Expense Report, and will be charged to a separate account code.
- 5) Any missing required receipts for meals require that the "missing receipt" box be checked within the expense report, unless a daily per diem will be claimed for the entire trip in lieu of receipts.
- 6) When multiple employees are involved, the highest ranking employee of the hosting organization should incur the expense and submit it for reimbursement.



- 7) When personal funds are used for individual meals, each separate expense and receipt must be listed individually on the expense report with the merchant name, date and proper receipt attached. No bundling or totaling of individual meals into one lump sum for the day or trip is allowed, with the exception of expense reports for international travel when the per diem is not being used.

Per Diem

Domestic travelers on trips greater than 7 days / 6 nights are allowed to use a per-diem or direct reimbursement via receipts, at traveler's choice. The traveler cannot mix per-diem and direct meal & incidental reimbursements on the same trip.

No domestic per diem will be reimbursed for trips less than 7 days/6 nights, except in the case of guests visiting Emory from more than 50 miles away (See guest policy below) or in the case that a sponsored award requires the use of domestic per diem (written document from the agency will be required with the expense report).

Per diem may be employed, in lieu of actual expenses, in the case of international business travel or domestic travel in excess of 7 days / 6 nights. Travelers should not use corporate card for per diem meals. With rare exception, travelers should not elect to use per diem during international conference travel.

Reimbursement on a per diem basis is the payment of a flat sum to cover meal and incidental expenses each day in lieu of actual costs. Meals & Incidental Expenses make up the per diem rate. You should familiarize yourself with these elements prior to a trip:

- Meals – Expenses for breakfast, lunch, and dinner and related tips and taxes (specifically excluded are entertainment expenses, and any expenses incurred for other persons).
- Incidental Expenses Covered Under the Per Diem Include: Fees and tips given to porters, baggage carriers, bellhops, hotel maids, stewards, or stewardesses and others on ships and carriers, and hotel servants in foreign countries. (If a per-diem is being used, these expenses cannot be reimbursed as they are covered by the per diem rate and therefore are included)
- Expenses for Transportation between places of lodging or business and places where meals are taken if suitable meals cannot be obtained at the lodging site. These expenses are covered under incidentals and cannot be reimbursed separately.

With international per diem, the traveler is not required to provide receipts for meals and incidentals. The lump sum "meals and incidentals" rate is paid without receipts.

Maximum per diem rates are established based on the federal fiscal year (October 1 – September 30) and vary by country and city. Be sure to use the correct rate schedule for the dates of travel. Those rates can be found here: http://aoprals.state.gov/web920/per_diem.asp

NOTE: Any location not listed for per diem under a country takes the "Other" rate administered and published for that country. An unlisted suburb of a listed location takes the "Other" rate, not that of the location of which it is a suburb.

If an employee is claiming per diem while traveling but entertains individuals on behalf of the University during that trip, they may submit that business meal receipt along with an expense report for reimbursement provided they reduce the daily per diem amount for that meal by the pre-determined % allocation (see above). This applies when hosting an event for individuals outside of the university, and or when hosting a group business meal with non-Emory employees present (e.g. a donor dinner or an admissions reception).

Calculating Travel Per Diem

The applicable per diem rate for each day of travel shall be determined by the travel status and location of the employee at 12:00am. For example, if a traveler is in Lima, Peru at 12 midnight, the per diem rate for that day should be that of Lima, Peru. If a traveler starts his/her day in Tokyo, Japan, but is in Singapore at midnight, the Singapore rate should be used.

Per Diem for Guests

Domestic Per Diem is an acceptable method of reimbursement for guests visiting the University. It should be applied as follows:



Domestic per diem can be employed for guests coming to Emory University, from out of state or a distance greater than 50 miles from campus. It is not applicable for local (within 50 miles) guests. These guests would be reimbursed directly for actual expenses.

The allowable Per Diem rate would be linked to the current Meals & Incidental Expense rate (no lodging) for zip code 30322, found at www.gsa.gov/portal/content/104877

Participants must follow all other per diem policies, including reducing the per diem for meals provided on-site. Lodging costs, if appropriate and allowable, must be paid through direct reimbursement.

Business Meals and Expenses

Business Meals

It is the responsibility of the individual seeking reimbursement or payment to act in a prudent and reasonable manner with business/group meals while conducting business on behalf of the University.

Responsibility of Higher Level Approvers

Higher Level Approver must ensure that:

- the traveler is aware of the Emory Travel Policy in advance of the travel;
- travel expenses were incurred while conducting authorized University business;
- travel expenses were necessary, reasonable and consistent with University policies and the stated business purpose;
- an expense report includes the required documentation; and
- travel expenses meet any and all Sponsored Program guidelines, if applicable.

Business Meals Taken with Other Employees

Meals with other Emory employees are generally not reimbursable. Meals with Emory colleagues should be considered a personal expense unless one of the following is true:

- a) a non-Emory employee is also present and business is being conducted;
- b) the meal is in honor of an Emory employee's beginning or ending of employment at Emory or other significant Emory or professional achievement;
- c) business being conducted among Emory employees is such that it cannot be done in the office or another time. (An explanation of the reason why the meeting could not take place in the office must accompany the reimbursement/expense request); or
- d) rare or atypical instances where, with approval of a supervisor, employees may work during normal meal breaks with other employees, e.g., working lunches.

If under ten (10) attendees, provide a list of attendees' names, their titles, affiliation and the business purpose on the request for reimbursement or charge to an Emory account.

If ten (10) attendees or more, provide the total count of attendees and the business purpose on the request for reimbursement or charge to an Emory account.

When multiple employees are involved, the highest-ranking employee of the hosting organization should incur the expense and submit it for reimbursement.

The preferred method of payment for meals is the Emory Corporate Card. If the corporate card is used, receipts under \$75 are not required. If personal funds are used and the total cost of the business meal is \$25 or greater, a summary receipt and itemized receipt is required as proper receipt documentation.

If personal funds are used and the total cost of the business meal is less than \$25, a summary receipt will suffice as the proper documentation.



Business Expenses

Faculty, Staff, and Student Responsibility

It is the responsibility of the individual to act in good faith and in the spirit of the policy. Individuals should be familiar with which items are considered reimbursable or payable and which items would be considered personal expenses.

Responsibility of Higher Level Approvers

Higher Level Approver must ensure that:

- the individual is aware of the Business Expenses – Non-Reimbursable and Unallowable Charges Policy;
- expenses were necessary, reasonable and consistent with University policies and the business purpose is clearly documented;
- the expense report includes the required documentation; and
- expenses meet any and all Sponsored Program guidelines, if applicable.

Request for exceptions to policy must follow the Exceptions to University Procurement, Payments and Travel Policy process.

Business Expenses - Non-Reimbursable and Unallowable Charges

In addition to the non-reimbursable, unallowable items listed in the Travel Policies (Policy 2.104), faculty, staff, students and non-employees will not be reimbursed nor will payment be made for the following items;

- Academic Regalia
- Home Cable Television
- Home Landline Phone Service
- Personal Memberships for Car Share Services
- Monthly Campus Parking Fees for Hang Tags at Regular Workplace
- Home Office Furnishings

Sponsored Programs Travel

Sponsored Programs Travel

Sponsored programs often have travel requirements that differ from the Emory University Travel Policy. In particular, federally funded sponsored programs are subject to certain Federal Laws; the guidelines set forth in the Uniform Guidance, Travel Costs; specific agency restrictions as well as Emory Travel Policies. The terms and conditions of the individual agreement should be reviewed prior to incurring and processing any travel cost.

When there is a conflict between University policy and award requirements, the sponsoring agency policy applies. Sponsored program travel has a high audit profile and can be examined by both internal, external and sponsor auditors.

Sponsored travel must be justified, well documented and in compliance with the sponsor requirements. Charges for travel under a sponsored program must be reasonable, necessary, allocable, allowable and appropriate to and specifically benefit the intent and purpose of the award. Travel cost must be incurred within the period of the award or any written pre-authorized extension.

- 1) Because each award has unique requirements, it is impossible to provide a comprehensive list of sponsor restrictions. The following list only highlights some common concerns, requirements and University procedures:

Prepaid travel costs (e.g., airfare and registration) may not be charged to a sponsored program when the actual travel or training will occur after the termination date of the award.

- 2) Travel Advances are not authorized on a sponsored account. Travel advances should be funded from an unrestricted account and then reimbursed when the trip is over and the expenses moved to the appropriate sponsored programs.



- 3) First Class fares cannot be charged to sponsored programs. Business Class or Coach Upgradable fares are allowable on sponsored funds, if allowable per the sponsoring agency. Confirm allowability with your RAS administrator prior to booking travel.
- 4) Federal awards require air travelers to use U. S. Flag Carriers regardless of cost savings under the Fly America Act except when:
 - a. A U.S. carrier does not provide service to a destination; however, a U.S. carrier must be used for any leg of travel, when available.
 - b. Use of a U.S. carrier would delay travel time by 24 hours or more; would require a layover of six hours or more; or would extend the total travel time by six hours or more.
 - c. Travel by a foreign carrier would eliminate two or more aircraft changes en route.
 - d. For short distance travel, regardless of origin and destination, a foreign carrier is only permissible if the travel time on the foreign carrier is three hours or less and service by a U.S. carrier would double the travel time.
 - e. Documentation supporting a justification for any exception to the federal requirements must be provided with the expense report.
- 5) Some awards may:
 - a. Prohibit foreign travel;
 - b. Require pre-authorization for each trip;
 - c. Restrict the number of trips that can be taken;
 - d. Restrict the number of travelers on an authorized trip;
 - e. Set a maximum dollar value per trip,
 - f. Limit travel to a specific destination or purpose, or
 - g. Specify maximum meal, mileage or other cost rates (e.g. State of Georgia).
- 6) Charges for alcohol or for items that could be considered personal (calls home or laundry, etc.) or entertainment are not allowable, unless the sponsored agreement specifically awards such expenses (written documentation is required). A list of non-reimbursable or payable expenses can be found in the section non-reimbursable or payable items.
- 7) Charges for individuals not specifically working on the project or covered by the intent of the award are not allowable.
- 8) Tokens of appreciation to an individual in lieu of lodging cannot be charged to sponsored programs unless allowable by the sponsoring agency.

Please contact your RAS representative for questions concerning travel requirements and restrictions on a specific sponsored agreement.

Travel Expense Reporting, Reimbursement, and Payment

Expense Reporting, Reimbursement, and Payment

Travelers are required to submit a completed Expense Report for all expenses related to a business trip.

- 1) Requests for reimbursement of personal funds used will only be considered after completion of the trip.
- 2) Any extenuating (or unusual) expenses must be explained in the Expense Report.
- 3) Accounting standards generally require that expenditures be reported during the fiscal year in which the expense was incurred. To facilitate timely reimbursement or payment and cost center reporting in the proper period, completed and approved Expense Reports should be submitted to Payment Services within 10 days after concluding the business trip.
- 4) Corporate Card holders who pre-pay airfare, registration, hotel deposits, etc., with the corporate card should submit an Expense Report (prior to the trip within 10 days of the booking) to avoid late fees.
- 5) Expenses incurred by a group of individuals traveling together may be incurred by one person. Such expenses should be incurred by the most senior employee from the sponsoring or funding unit. A list of all travelers should be attached to the Expense Report.
- 6) Reimbursement requests made during a current fiscal year resulting from travel expenses incurred in a previous fiscal year should not be submitted to Payment Services absent extenuating circumstances. With the exception of travel that occurs during the fiscal year changeover, extenuating circumstances which



prevent submission at some point within the same fiscal year are expected to be rare. Circumstances that may justify an exception include:

- Extended personal illness
- Death in the family
- Unanticipated extended leave of absence
- Travel outside the country for an extended period of time if documentation cannot be readily sent to Emory
- Extenuating circumstances must be provided in writing and included in the Expense Report.

Non-Reimbursable or Payable Items

This list is not intended to be comprehensive. If an item is not listed and you are unsure if it is reimbursable, contact Procurement and Payment Services. Travelers will not be reimbursed for nor payment made for the following expenses:

Any Expense for goods or services considered a personal expense, including:

- Airline lounge passes/club memberships (except where allowable for travel, see Lodging)
- Airport security programs
- Annual fees for personal credit cards
- Barber, toiletry or clothing items
- Any clothing or personal apparel, purchased or rented
- Expenses related to vacation or personal days taken before, during, or after a business trip
- Health club, exercise room fees, spas, saunas, massages
- Insurance for personal car
- Insurance for rental car during personal use (i.e. extended a business trip for leisure)
- Items confiscated from airport security
- Laundry charges (for trips less than five days)
- Movies (in-flight or in-room)
- Medical care while traveling
- Personal gifts
- Personal property insurance
- Personal reading materials (e.g. magazines, newspapers)
- Personal telephone calls (non-cell phone) in excess of reasonable calls home
- Shoe shines

Any expenses related to the personal negligence of the traveler, including:

- Airline change fees resulting from personal negligence or personal change reason
- Corporate card delinquency fees or finance charges
- Loss or theft of airline tickets (loss or theft of electronic airline tickets due to hacking is permissible)
- Loss or theft of personal funds or property
- "No show" charges for hotels or rental cars
- Parking tickets, traffic violations, or personal auto repair

Fines or Fees, including:

- Parking tickets, traffic violations, or auto repair
- Traffic tickets, towing, booting, and fitness fees
- Traveler's check fees

Loss or damage expenses for personal property, including:

- Items confiscated by airport security
- Lost baggage
- Loss or theft of airline tickets
- Loss or theft of personal funds or property

Entertainment and recreational expenses, such as fees for social or non-mandatory activities at conferences, inordinately expensive meals and lodging, videos or movies charged to hotel/motel bills, including:



- Alcoholic beverages purchased in a non-business capacity
- Club memberships for business or pleasure
- Golf fees/ski lift tickets, etc.
- Sporting events
- Theatre

Vehicle expenses (e.g. other than rental, mileage, parking and tolls), including:

- Locksmith
- Repairs to personal vehicles
- Towing and booting charges
- Vehicle maintenance

Travel expenses (including child care) related to family members or companions, including:

- Babysitting
- Day care
- Pet care

Any other expense that is not allowed by a sponsored project

Travel Advances

A "Travel Advance" is the payment of funds to an individual to be used in the future during an authorized trip, project or event. Payment Services reserves the right to approve or reject all requests for a Travel Advance.

- 1) Travel Advances can be issued to Emory faculty and staff only. Students and non-employees are not eligible.
- 2) Travel Advances require a Higher Level approval before being issued. However, Payment Services reserves the right to accept or reject a Travel Advance request.
- 3) Travel Advances will be issued only when other payment options are not feasible. Travel Advances cannot be requested for airline tickets. Travel Advances are not issued for expenses that can be charged to the Corporate Card or personal credit cards, e.g., train tickets, conference registration fees, hotel deposits, meals and other ground transportation.
- 4) Travel Advances for international travel can be used for other expenses. A budget for the anticipated expenses is required.
- 5) Travel Advance requests must include a detailed breakdown of the anticipated expense and an explanation as to why other payment options cannot be used.
- 6) The minimum amount for a Travel Advance is \$50.00. Advances must be requested no earlier than 20 business days and no later than 5 business days before departure.
- 7) In accordance with IRS regulations, all advances should be accounted for on an Expense Report and any unused funds are to be remitted to Payment Services within 10 days of the conclusion of the business activity. Absent special circumstances described in item 10) as noted below, remittance should be no later than 30 days after concluding the business activity.
- 8) All current Travel Advances must be accounted for and excess funds returned to Payment Services before approval will be granted for additional advances or travel reimbursement.
- 9) Travel Advances will not be issued to individuals whose Corporate Cards have been cancelled due to misuse.
- 10) Special circumstances that may require an extended period of time for submitting advance related documentation include:
 1. Extended personal illness
 2. Death in the family
 3. Unanticipated leave of absence
 4. Travel outside the country for an extended period of time and documentation cannot be readily sent to Emory.
 5. Special circumstances must be documented on the Expense Report.
- 11) Failure to account for a Travel Advance and to return any excess funds within four months (120 days) will result in the following actions being taken:



- Unreconciled advances to faculty and staff will be treated as taxable income and included on a W-2 form (subject to withholding of employment taxes) or on Form 1042-S (subject to section 1441 withholding). Once reported as taxable income, it cannot be reversed.
- Denial of further advances
- Disciplinary and collection action that may be warranted.

Non-Employees and Non-Resident Aliens

The University will pay or reimburse for travel costs of non-employees, (e.g., guests, job applicants, lecturers, consultants) for travel related to authorized university business by the non-employee and in accordance with Emory travel policies. This does not include employee family members. See guidance concerning family members). Exceptions to the policy must be submitted through the department's Dean's office and pre-approved by the AVP for Procurement or CFO. Written pre-approval must accompany the Expense Report.

- 1) Non-employees are subject to the same travel policy rules that apply to faculty, staff, and students (with the exception of the Travel Agency mandate. Airfare does not need to be booked through Emory travel agencies). When a non-employee is unable to provide original receipts, Payment Services will report the payment as income, in accordance with IRS regulations.
- 2) Reimbursement to non-resident aliens must be made in accordance with IRS regulations. Emory's Non-Resident Alien Tax Office (in the University Controller's Office) approves Expense Reports for Non-resident Aliens prior to submission to Payment Services.

Travel Payment Options

Air Travel Providers

It is required, unless an exception is approved in advance of travel, that a traveler will use Emory's Air Travel Providers to purchase plane tickets. Tickets purchased through the Emory travel agencies can be billed directly to the department budget, charged to a Corporate Card, or charged to a personal credit card. Use of the corporate card as the preferred method to purchase airline tickets is highly encouraged (see Air and Rail Travel).

Corporate Cards

Please refer to Policy 2.119 - Use of the Visa Corporate Card for the full Corporate Card policy.

Personal Funds

When not using the Corporate Card, personal funds may be used, and reimbursement requested for legitimate business expenses. However, reimbursement for the use of personal funds cannot occur until after the travel takes place. It is the sole responsibility of the traveler to complete an Expense Report to request reimbursement in a timely manner. It is also the responsibility of the traveler to pay personal credit cards in a timely fashion in accordance with their cardholder terms. Emory will not reimburse travelers for late fees on personal credit cards.

Other

In rare situations when the Corporate Card and personal funds cannot be used, travelers may request Payment Services to issue a check or a foreign draft (payment in foreign currency).



Expense Type	Visa Corp Card	Personal Card	Cash
Airfare	Itinerary w/amount showing agencies used	Itinerary w/amount showing agencies used	Itinerary w/amount showing agencies used
Auto Rental	Rental agreement with return receipt	Rental agreement with return receipt	Rental agreement with return receipt
Lodging	Itemized folio	Itemized folio w/\$0 balance or copy of personal credit card statement and hotel folio with amounts matching	Itemized folio w/\$0 balance, must show that cash was tendered
Gas for Rental Car	If less than \$75; no receipt. If \$75 or greater, receipt	Itemized receipt for all amounts	Itemized receipt for all amounts
Mileage on Personal Auto	Under \$25 roundtrips or Emory to/from Oxford, no Google Maps or Mapquest. Over \$25 roundtrip, Google Maps or Mapquest	Under \$25 roundtrips or Emory to/from Oxford, no Google Maps or Mapquest. Over \$25 roundtrip, Google Maps or Mapquest.	Under \$25 roundtrips or Emory to/from Oxford, no Google Maps or Mapquest. Over \$25 roundtrip, Google Maps or Mapquest.
Taxi/Parking/Shuttle	If less than \$75, no receipt. If \$75 or greater, receipt	Itemized receipt for all amounts.	Itemized receipt for all amounts
Meal - Individual	If less than \$75, no receipt. If \$75 or greater, itemized receipt	Under \$25, summary receipt. \$25 or greater, summary and itemized receipt	Under \$25, summary receipt. \$25 or greater, summary and itemized receipt
Meal - International Per Diem	Print out one effective rate per location for applicable dates of travel from State Dept website	Print out one effective rate per location for applicable dates of travel from State Dept website	Print out one effective rate per location for applicable dates of travel from State Dept website
Meal – Domestic Per Diem (optional for trips in excess of 7 days)	Print out one effective rate per location for applicable dates of travel from State Dept website	Print out one effective rate per location for applicable dates of travel from State Dept website	Print out one effective rate per location for applicable dates of travel from State Dept website
Meal - Business/Group	If less than \$75, no receipt. If \$75 or greater, itemized receipt	Under \$25, summary receipt. \$25 and greater, summary and itemized receipt	Under \$25, summary receipt. \$25 and greater, summary and itemized receipt
Meal - Alcohol	If less than \$75, no receipt. If \$75 or greater, receipt	Under \$25, summary receipt. \$25 and greater, summary and itemized receipt	Under \$25, summary receipt. \$25 and greater, summary and itemized receipt
Registration Fees	If less than \$75, no receipt. If \$75 or greater, receipt	Itemized receipt for all amounts	Itemized receipt for all amounts
Entertainment	If less than \$75, no receipt. If \$75 or greater, receipt	Itemized receipt for all amounts	Itemized receipt for all amounts
Travel - Other	If less than \$75, no receipt. If \$75 or greater, receipt	Itemized receipt for all amounts	Itemized receipt for all amounts. Miscellaneous cash tips (e.g. bellman, porter, valet) should be recorded under this category. The merchant name should be "cash tips" and the "no-receipt" box should be checked.



Receipt Requirements

Acceptable receipts must contain the following: transaction date, name of merchant, item purchased or service provided, amount, form of payment and indication that the amount was paid by the person requesting reimbursement.

When personal funds are used, each separate expense and receipt must be listed individually on the expense report with the merchant name, date and proper receipt attached. No bundling or totaling of individual expenses into one lump sum for the day or trip.

If a traveler is seeking non-duplicative reimbursement from more than one party, the original receipts should be kept by the party covering the majority of the expenses. Detailed information/additional explanation must accompany Expense Report on external party reimbursement. A copy of the expense report to the additional entity should be included with contact information. Under no circumstances should a discrete expense be reimbursed or paid for by more than one party.

Long Term Travelers

Long-term travelers are not exempt from the expense reporting and documentation requirements for Corporate Card purchases. Arrangements should be made (i.e. scanning, photographing and emailing receipt images, mailing, etc.) to ensure that a copy of the receipt is provided to the Cardholders Proxy to meet policy deadlines.

If a long-term traveler is concerned about his or her ability to provide receipt documentation in a timely manner, it is the responsibility of the cardholder to make arrangements in advance of the trip with the appropriate school or unit business officer.

Domestic, long-term travelers (trip longer than 7 consecutive days) may elect a per-diem for daily expenses. See applicable policies for per-diem use and expense submissions.

Foreign Currency Conversion

- 1) Expenses on Emory corporate card
 - a. Expenses on an Emory corporate card require no additional documentation, as the expenses will import into My Wallet already converted to \$USD.
- 2) Expenses on a personal credit card
 - a. Expenses on a personal credit card require a copy of the personal credit card statement which shows the converted purchase amount in \$USD to back-up the amounts on the Expense Report. The statement can be printed online in real time and does not have to be an end of cycle statement.
- 3) Expenses paid in cash

Whichever method for calculating conversion rate is used, the methodology for calculating the final conversion rate should be clear from the documentation that is uploaded. If it is not clear to the approvers, the expense report may not be approved.

Expenses in cash require either the original exchange receipt or upload of an O and A rate from <http://www.oanda.com/currency/converter/> (or another comparable exchange rate site).

For trips up to 7 days: Use O and A rate from the date of arrival in-country. Documentation should be an upload of the website, printed to PDF, showing the rate on the date is required.

Between 7-28 days: One rate should be uploaded for every 7 days in-country (e.g. for a 10 day trip, two rates would be uploaded, one from day 1 and one from day 8; expenses should be converted according to the rate at the beginning of that expense's week.

Over 28 days: One rate should be uploaded for the beginning, middle and end of the trip (e.g. three rates); expenses should be according to the average rate over the length of the trip. Please ensure that the methodology of calculation is clear.

Lost or Missing Receipts

Please consult the receipt chart above for a list of required documentation and categories for which lost and missing receipts will be reimbursed.



Missing or lost receipts for airfare, lodging or rental car must be obtained from the vendor; these expenses will not be reimbursed without documentation.

For required receipts over \$75, missing or lost receipts can be indicated by checking the "no receipt" box in Compass in the Expense Detail – an explanation of why the receipt is missing should be provided in the box. Depending on the amount of the expense, the Business Office or Central AP may request that the vendor be contacted to obtain a copy of the receipt.

By checking this box, the submitter is certifying that the information is truthful, that the receipt was lost or not obtained, and that the expenses have not nor will not be submitted again to Emory University or any other organization for reimbursement or tax purposes.

For charges on personal credit cards, it is expected that the traveler will provide a scanned copy of the personal card transaction. For checks, a copy of the cancelled check (or proof that the check was cashed) will suffice.

Emory, in order to maintain its standing with the IRS, reserves the right to request further information and make the final determination on whether or not the reason and documentation is sufficient for reimbursement.

Miscellaneous Cash Tips

Miscellaneous cash tips (e.g. bellman, porter, valet) do not require a receipt. Daily cash tips should be recorded under the Travel-Other category. Daily miscellaneous cash tips should be combined in one expense line per day and given the merchant name "cash tips".

The "no receipt" box should be checked.

Definitions

n/a

Related Links

- Current Version of This Policy: <http://policies.emory.edu/2.90>

Contact Information

Subject	Contact	Phone	Email
Procurement and Payment Services	Customer Care	404-727-5400	actspay@emory.edu

Revision History

- Version Published on: [Sep 27, 2018](#) (*Consolidated travel content*)
- Version Published on: [Aug 31, 2018](#)
- Version Published on: [Aug 20, 2014](#) (*Added "Travel" to the title*)
- Version Published on: [Aug 20, 2014](#) (*Changed a position title*)
- Version Published on: [Apr 08, 2013](#)
- Version Published on: [Feb 13, 2013](#)
- Version Published on: [Apr 01, 2010](#) (*Original Publication*)



Policy 5.1

Information Technology Conditions of Use

Responsible Official:	Enterprise CIO and Sr. Vice Provost for Library Services and Digital Scholarship
Administering Division/Department:	LITS: Library & IT Services
Effective Date:	March 31, 2007
Last Revision Date:	July 07, 2017

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

Computers, networks, and software applications are powerful tools that can facilitate Emory's core missions in teaching, learning, research, and service. Access and utilization of these tools is a privilege to which all University faculty, staff, students, and authorized guests are entitled. This policy documents the responsibilities that accompany this privilege. Campuses, schools, colleges, departments, and other administrative units have considerable latitude in developing complementary information technology conditions of use policies, as long as they are consistent with this enterprise policy and any other applicable policies of the University. Such policies may be more restrictive than the enterprise policy, but must not be more permissive.

Applicability

This policy applies to Emory faculty, staff, students, and retirees who have been issued computer accounts such as an Emory NetID and to visitors and guests who have been issued sponsored computer accounts. This policy applies to all Emory information technology resources, whether they are accessed from campus or from a remote location. This policy also applies to anyone who has been granted access to or connects any device to the Emory network or Emory IT resources.



Policy Details

General Principles:

- Emory's information technology (IT) resources are provided for uses consistent with the University's missions of teaching, learning, research, and service or for related administrative support.
- The use of Emory's IT resources must be consistent with other University policies, government regulations and laws.
- IT resources are not to be used for private financial gain or for supporting non-Emory related businesses.
- Users of Emory IT resources are expected to read and abide by all relevant IT policies and standards and to complete any prescribed IT security training.

Information Security Requirements:

- Users of Emory's IT resources may not:
 - Share their passwords or other access credentials;
 - Attempt to hack, bypass, or violate security controls or conduct unauthorized testing of IT resources for security vulnerabilities;
 - Access, modify, or share sensitive data or information obtained from any of Emory's systems without appropriate authorization;
 - Use access credentials issued to other individuals or attempt to impersonate another individual in order to access IT resources.
- Users of Emory IT resources must:
 - Implement reasonable and appropriate safeguards to protect sensitive or critical information that they create or maintain;
 - Dispose of sensitive information in a secure manner (e.g. shredding, physical destruction, disk wiping)
 - Report any IT security incidents or security policy violations;
 - Cooperate with authorized IT security investigations;
 - Cooperate with authorized requests to discontinue activities that threaten the confidentiality, integrity, or availability of IT resources.
 - Return all institutional data and IT resources to Emory upon termination of employment and securely delete all institutional data from personally owned devices/media.

Conduct:

- Users of Emory's IT resources may not use those resources for any unethical or illegal purpose, including but not limited to the following:
 - Violating copyrights or license agreements for any type of intellectual property (e.g. software, music, audio/video recordings, photographs, illustrations, documents, media files, e-journals, e-books, databases) (see <http://web.library.emory.edu/research-learning/scholcomm-datamgmt/index.html> for more information on University guidelines for copyright and fair use);
 - Harassing other members of the Emory community;
 - Destroying or stealing equipment, software, or data belonging to others;
 - Intentionally damaging or destroying the confidentiality or integrity of IT resources or disrupting their availability;
 - Viewing or distributing content, to the extent that doing so violates any applicable Emory policy and/or state and/or federal law, regulation, or policy;
 - Monitoring or disrupting the communications of others.



Personal Usage:

- Limited and reasonable personal use of Emory's IT resources is acceptable and allowed, as long as it does not:
 - Interfere with the fulfillment of an employee's responsibilities;
 - Adversely impact or conflict with any activities that support Emory's mission or operations;
 - Result in any measurable cost to Emory;
 - Violate any other applicable University policies.

Network Protection and Monitoring:

- Authorized Emory staff may without notice:
 - Monitor, inspect, or copy network communications, IT resources, and the data they contain. Use of the Emory network and/or IT resources constitutes consent to such monitoring;
 - Assess IT resources connected to the Emory network for security vulnerabilities;
 - Take emergency protective actions such as restricting user access rights or access to IT resources or the network;
 - Block potentially malicious network communications;
 - Block the viewing, downloading, or distribution of any content to the extent that doing so is required by federal or state law, regulation, or policy, or is required to carry out Emory's mission or operations.

Sanctions:

- Failure to comply with this policy may have legal consequences and may result in:
 - Suspension or termination of access;
 - Disciplinary actions (up to and including termination of employment) in accordance with applicable university policy.

Definitions

Related Links

- Current Version of This Policy: <http://policies.emory.edu/5.1>
- Connecting to the Emory Data Network (<http://policies.emory.edu/5.4>)
- Emory Network IDs (NetIDs) and Passwords (<http://policies.emory.edu/5.5>)
- Peer-to-Peer File Sharing (<http://policies.emory.edu/5.7>)
- Disk Encryption Policy (<http://policies.emory.edu/5.12>)
- Automatic Forwarding of Email from the EmoryExchange Environment (<http://policies.emory.edu/5.13>)
- Copyright, Publishing and Fair Use (<http://web.library.emory.edu/research-learning/scholcomm-datamgmt/index.html>)

Contact Information



Subject	Contact	Phone	Email
Clarification of Policy	Brad Sanford	404-727-2630	brad.sanford@emory.edu

Revision History

- Version Published on: [Jul 07, 2017](#) (*Incorporation of changes requested by OGC*)
- Version Published on: [Mar 13, 2016](#) (*Updated web links*)
- Version Published on: [Mar 15, 2011](#) (*Major Revision / Re-write*)
- Version Published on: [Mar 29, 2007](#) (*Original Publication*)



Policy 5.14

Smart Device Security Policy

Responsible Official:	Enterprise CIO and Sr. Vice Provost for Library Services and Digital Scholarship
Administering Division/Department:	LITS: Library & IT Services
Effective Date:	January 01, 2012
Last Revision Date:	July 20, 2017

Policy Sections:

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Overview

This policy explains Emory's official position on the security requirements of smart devices that access Emory Exchange e-mail, and/or store sensitive Emory data. Emory maintains a centrally managed service that supports the synchronization of data between smart devices and the Emory Exchange messaging and calendaring system: Exchange ActiveSync (EAS).

Applicability

This policy applies to any smart device, either Emory owned or privately owned, that accesses Emory Exchange e-mail, and/or stores sensitive Emory data.

Policy Details



To improve the security of Emory data stored on smart devices, Emory requires the following security settings (when supported) on all smart devices storing sensitive Emory data and/or using the EAS service:

- A non-trivial numeric device passcode with a minimum required length of four characters. Passcodes consisting of additional character sets or greater lengths are allowed.
- An inactivity timeout to automatically lock the device after a maximum of fifteen minutes
- Data storage encryption (when supported by the device)
- Automatic data wiping after ten failed passcode entry attempts
- Enable the ability to remotely wipe data from lost/stolen devices
- Prohibit users from modifying or disabling security safeguards

These requirements will be enforced by Emory's IT infrastructure where feasible (e.g. EAS servers). Any device that is not capable of meeting these requirements is prohibited from being used to store Emory data classified as confidential or restricted (student records, patient records, financial records, etc.).

ActiveSync Devices

Emory Exchange users with devices that are capable of performing ActiveSync connections to retrieve messaging and calendaring information must use Emory's Exchange ActiveSync Server (EAS). Smart devices capable of enforcing the necessary security configuration settings via EAS are required.

For a list of mobile ActiveSync clients and their support for these requirements:
http://it.emory.edu/security/smart_device/

IMAP and Other Protocols

Many smart devices have the ability to retrieve email using IMAP and other mail protocols or services. While this allows for email access, it does not provide access to other components such as the calendar, nor does it enforce security policies. Individuals may use IMAP to access email from a smart device, but the device must also be configured to conform to the requirements of this policy in order to protect the email contents from disclosure.

Lost or Stolen Devices

Users are required to immediately report lost or stolen smart devices to the Emory Service Desk so that a remote wipe of the device may be initiated. Users must also immediately change their Emory password to protect against unauthorized access to other Emory IT resources.

The wiping of a smart device will result in the loss of ALL data on the device, including contacts, pictures, notes, applications, text messages, etc. Smart device users should always maintain a current backup of their device(s) so that data may be easily restored in the event that a device must be wiped.

Decommissioned Devices

Smart devices that will no longer be used must be wiped and reset to factory defaults before disposal. This may be done through ActiveSync, or via the device's built-in reset utility.

Sanctions:

- Failure to comply with this policy may have legal consequences and may result in:
 - Suspension or termination of access;
 - Disciplinary actions (up to and including termination of employment) in accordance with applicable university policy.



Definitions

Smart device – A mobile computing device such as smartphone or tablet.

Exchange ActiveSync (EAS) – A protocol developed by the Microsoft Corporation that allows for the synchronization of e-mail, calendars, tasks, and contacts between a Microsoft Exchange e-mail server and a mobile device. EAS is supported on most non-BlackBerry smart devices.

IMAP – (Internet Message Access Protocol) A commonly used protocol that defines how messages are retrieved from an e-mail server. IMAP does not support synchronizing calendaring, contacts, or tasks.

Related Links

- Current Version of This Policy: <http://policies.emory.edu/5.14>
- Mobile Device Setup Information for Android and IOS (<http://it.emory.edu/office365>)
- List of mobile ActiveSync clients and their support for these requirements (http://it.emory.edu/security/smart_device)

Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Brad Sanford	404-727-2630	brad.sanford@emory.edu

Revision History

- Version Published on: [Jul 20, 2017](#) (*Updated sanctions language*)
- Version Published on: [Mar 17, 2016](#) (*Updated to remove BES*)
- Version Published on: [Jan 06, 2012](#) (*Original Publication*)

Policy 8.2

Sex and Gender-Based Harassment and Discrimination Policy

Responsible Official: Office of the Provost

**Administering Division/Department:
Department of Title IX**

Effective Date: August 14, 2020

Last Revision Date: June 30, 2021

Policy Sections:

- I. Overview
- II. Applicability
- III. Definitions
- IV. Policy Details
- V. Related Links
- VI. Contact Information
- VII. Revision History

Overview

I. POLICY STATEMENT

It is the responsibility of every member of the University Community to foster an environment free of Sexual and Gender-Based Harassment and Discrimination. All members of the University Community are encouraged to take reasonable and prudent actions to prevent or stop such behavior.

Emory University (“Emory” or the “University”) is committed to maintaining an environment that is free of unlawful harassment and discrimination. Pursuant to Emory’s commitment to a fair and open campus environment and in accordance with federal law, Emory cannot and will not tolerate discrimination against or harassment of any individual or group based upon race, color, religion, sex, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression,

veteran's status, or any factor that is a prohibited consideration under applicable law. Emory welcomes and promotes an open and genuinely diverse environment.

Title IX of the Educational Amendments of 1972 ("Title IX") protects people from sex discrimination in educational programs and activities at institutions that receive federal financial assistance. Emory fosters a safe learning and working environment that supports academic and professional growth of students, staff, and faculty. Accordingly, Emory does not tolerate Prohibited Conduct in its community and will take prompt action when it occurs.

The University adopts this Policy with a commitment to: (1) a safe and non-discriminatory educational and workplace environment; (2) eliminating, preventing, and addressing the effects of Prohibited Conduct; (3) fostering an environment where all individuals are well-informed and supported in reporting Prohibited Conduct; (4) providing a prompt, fair and impartial process for all parties; and (5) identifying the procedures by which violations of this Policy will be evaluated. Employees, Students, or Third Parties who violate this Policy may face, as appropriate, disciplinary action up to and including termination, expulsion, or other actions. Prohibited Conduct may also constitute crimes that violate federal and state law.

The Policy sets forth how the University will proceed once it is made aware of possible Prohibited Conduct. The Policy is in keeping with our institutional values and is intended to meet our obligations under Title IX ; Title VII of the Civil Rights Act of 1964 ("Title VII"); and the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act ("Clery Act"), as amended by the Violence Against Women Reauthorization Act of 2013 ("VAWA"), with respect to its application to gender- and sex-based misconduct; and other applicable law and regulations. The Policy:

- Specifies Prohibited Conduct;
- Defines important concepts, like affirmative consent, that have a bearing on what is considered acceptable, and Prohibited Conduct;
- Describes available reporting options, including sources of confidential reporting;
- Discusses supportive and protective measures that may be available to support and assist Employees, Students, and Third Parties affected by Sexual and Gender-Based Harassment and Discrimination;
- Explains the investigation, hearing, and sanctioning processes for matters in which Students, Employees, and Third Parties are accused of misconduct; and
- Contains a comprehensive list of on and off-campus resources available to Employees, Students and Third Parties affected by Sexual and Gender-Based Harassment and Discrimination, including phone numbers, addresses, and websites.

Under this Policy, retaliation is prohibited against someone who has filed a Formal Complaint (a Complainant), has been the subject of a Formal Complaint (a Respondent), or any other individual who engages with the University in connection with a Formal Complaint. The University will take steps to prevent retaliation and will also take strong responsive action if retaliation occurs.



Concerns, complaints, or questions relating to this Policy may be directed to the staff members listed below:

Yolanda Buckner, JD
University Title IX Coordinator
Department of Title IX
Administration Building, Suite 305
201 Dowman Drive
Atlanta, GA 30322
Phone: (404) 727-8205
yolanda.buckner@emory.edu

or

Judith Pannell, Ed.D.
Title IX Coordinator for Students
Department of Title IX
Administration Building, Suite 308
201 Dowman Drive
Atlanta, GA 30322
Phone: (404) 727-4079
judith.pannell@emory.edu

or

Marti McCaleb, JD
Title IX Coordinator for Faculty and Staff
Department of Title IX
Administration Building, Suite 305
201 Dowman Drive
Atlanta, GA 30322
marti.mccaleb@emory.edu

Questions may also be directed to a Deputy Title IX Coordinator. Their names and contact information are listed at the end of this document.

Applicability

II. POLICY JURISDICTIONAL SCOPE AND APPLICABILITY

This Policy applies to Students, Employees, and Third Parties. This Policy covers acts of Prohibited Conduct committed by or against Students, Employees, and Third Parties when:

- A. Conduct falls within the definition of Title IX Misconduct (as defined in [Section III B](#)).
- B. Conduct occurs in a University Program or Activity, including, but not limited to, conduct that occurs on the University campus or other property owned or controlled by the

University; conduct that occurs off campus, but in a University Program or Activity; in the context of University employment; or in the context of University-sponsored study abroad, research, field work, practica, or internship programs; (collectively “Prohibited Conduct”); or

- C. Conduct occurs outside of a University Program or Activity but poses a serious threat of harm, has a continuing adverse effect on, or creates a hostile environment for, Students, Employees, or Third Parties. In determining whether the University has jurisdiction over off-campus or online conduct that is not part of a University program or activity of the University, the University will consider the severity of the alleged conduct, the risk of ongoing harm, whether both parties are members of the University Community, impact on University programs or activities, and whether off-campus conduct is part of a series of actions that occurred both on and off campus (collectively, “Prohibited Conduct”).

Study-abroad programs and off-campus locations that are not within the University’s education program or activity are not covered by the Title IX regulations, but may constitute Prohibited Conduct under this Policy, and is subject the Non-Title IX Prohibited Conduct Procedure for Students (*See Appendix B*) and the Equal Opportunity and Harassment Policy 1.3. (*See prohibited conduct referral process in Section XI of this Policy*).

Definitions

III. POLICY DEFINITIONS

Prohibited Conduct includes a range of behaviors focused on sex and/or gender. Prohibited Conduct can occur between strangers, acquaintances, or people who know each other well—including between people involved in a consensual relationship. Prohibited Conduct can be committed by anyone regardless of gender identity or sexual orientation and can occur between people of the same or different sex or gender.

Consensual sexual activity requires a **knowing, voluntary, and mutual decision by all participants involved. Any non-consensual sexual activity is Prohibited Conduct.** A person who initiates sexual activity is responsible for obtaining consent for that conduct.

The following are grounding principles:

- Conduct that is not voluntary, including coerced sexual activity, is not consensual.
- A sleeping, unconscious, or incapacitated person cannot give affirmative consent.
- The use of alcohol or drugs does not justify or excuse Prohibited Conduct and never makes someone at fault for experiencing Prohibited Conduct.
- A person cannot give affirmative consent if the person lacks the ability to make or understand the decision to affirmatively consent to sexual activity. A person’s ability to decide to give affirmative consent might be significantly impacted by a disability, excessive consumption of alcohol, consumption of drugs, or unwilling restraint of the person by another; in each case, however, the specific factual circumstances regarding the issue of a person’s capability to provide affirmative consent must be considered.

For purposes of this Policy, some key terms are defined below. Additional terms are defined within the text of the Policy.

A. **Prohibited Conduct (aka Sexual Misconduct):** As referred to in [Section IV](#), “Prohibited Conduct” is an umbrella term that encompasses all unwelcome conduct based on sex or gender that is so severe and/or pervasive that it has the purpose or effect of unreasonably interfering with a person’s University employment, academic performance or participation in University programs or activities, or creates a working, learning, program or activity environment that a reasonable person would find intimidating, hostile or offensive. “Prohibited Conduct” includes Non-Consensual Sexual Intercourse, Non-consensual Sexual Contact; Sexual Exploitation; Sexual Harassment; Gender-Based Harassment; Retaliation; Aiding, Facilitating, Encouraging, Concealing, or Otherwise Assisting, Violating a Protective Measure and Title IX Misconduct. For a definition of each type of Prohibited Conduct, please refer to [Section IV](#) below.

B. **Title IX Misconduct:** “Title IX Misconduct” is a subset of Prohibited Conduct that rises to a level of severity and pervasiveness such that it is prohibited expressly by Title IX. Prohibited Conduct meets the definition of Title IX Misconduct when:

- An Employee conditions the provision of an aid, a benefit, or a service of the University on another Employee, Student, or Third Party’s participation in unwelcome sexual conduct;
- A Student, Employee, or Third Party engages in unwelcome conduct on the basis of sex that is so severe, pervasive, and objectively offensive that it effectively denies another person equal access to the University’s programs or activities; or
- A Student, Employee, or Third Party engages in Sexual Assault, Dating Violence, Domestic Violence, or Stalking, as defined in [Section IV \(9\)](#) below.

Alleged conduct is Title IX Misconduct (though it may still be Prohibited Conduct) only if:

- The alleged conduct was perpetrated against a person in the United States;
- The conduct took place within the University’s Programs or Activities; and
- At the time a Formal Complaint is filed, the Complainant was participating in or attempting to participate in the University’s programs or activities.

Conduct that does not meet this strict definition for Title IX Misconduct is still prohibited by this Policy if it otherwise constitutes Prohibited Conduct.

C. **Student:** “Student” means any person pursuing academic studies at the University. The term also includes:

- A person who, while not currently enrolled, was previously enrolled at Emory and who is reasonably anticipated to seek enrollment at a future date, or
 - A person who has applied to or been accepted for admission to Emory and has accepted an offer of admission or may reasonably be expected to enroll, or
 - A person enrolled in an Emory program on a credit or non-credit basis.
- D. **Employee:** “Employee” means all regular instructional faculty, supplemental instructional faculty, research track faculty, visiting faculty, adjunct faculty, or any individual who has an appointment at the University, librarians, archivists, curators, and all regular and temporary staff.
- E. **Third Party:** “Third Party” means all University contractors, guests, vendors, visitors, volunteers, and any individual who is participating in or attempting to participate in a University program or activity, but who is neither enrolled in an academic program and/or course at the University nor acting as a University Employee for purposes of alleged Prohibited Conduct (e.g., an individual who is participating in a summer camp; an individual who is attending a University program or activity by invitation or that is open to the public).
- F. **Complainant:** “Complainant” is used to refer to a Student, Employee, or Third Party who is reported to have experienced Prohibited (including Title IX Misconduct). In some instances, the person who is reported to have experienced such Prohibited Conduct may not wish to participate in a University process. In those cases, the University may pursue an investigation and adjudication under this Policy without a participating Complainant (in the case of Title IX Misconduct, the Title IX Coordinator may file the required Formal Complaint). For ease of reference, “Complainant” is used throughout this Policy and related procedures to refer generally to an individual who is reported to have experienced Prohibited Conduct (including Title IX Misconduct), even if they do not participate in any related process.
- G. **Formal Complaint:** “Formal Complaint” means a document signed by a Complainant or by the Title IX Coordinator alleging a Respondent engaged in Title IX Misconduct or Prohibited Conduct and requesting initiation of the University’s grievance procedures. Formal Complaints are required when the conduct being reported is Title IX Misconduct or Prohibited Conduct. At the time of filing a Formal Complaint, the Complainant must be participating in, or attempting to participate in, the University’s Programs or Activities. A Formal Complaint must be a written statement or electronic submission (such as by email) that contains the Complainant’s physical or digital signature, or otherwise indicates that the Complainant is the person filing the Formal Complaint. Where the Title IX Coordinator signs a Formal Complaint, the Title IX Coordinator is not a Complainant or a party during a grievance process.
- H. **Respondent:** “Respondent” is defined as an individual who is reported to have committed Prohibited Conduct.



- I. **The University's Programs or Activities:** "The University's Programs or Activities" are defined as (1) locations, events, and circumstances where the University exercises substantial control over the Respondent and the context in which the Prohibited Conduct (including Title IX Misconduct) occurred; and (2) events or circumstances taking place in any building owned or controlled by a student organization recognized by the University.
- J. **Responsible Employees:** "Responsible Employees" refer to individuals who, based on their role with respect to the University, are required to report to the Title IX Coordinator information about alleged Prohibited Conduct, including Title IX Misconduct. Responsible Employees are (1) University Employees (including Faculty and Staff); (2) Resident Advisors ("RAs"); and (3) Teaching Assistants or Teaching Associates. Designating an individual or group of individuals as "Responsible Employee(s)" does not affect an individual's employment status at Emory. For instance, RAs and Teaching Assistants or Teaching Associates are not employees. Rather, the University is simply identifying those individuals as mandatory reporters using the terminology familiar to those who participate in the Title IX process. A full list of Responsible Employees and more information about a Responsible Employee's obligations can be found in [Section VI](#). [As noted below, a Responsible Employee's receipt of information about alleged Prohibited Conduct (including Title IX Misconduct) will not automatically trigger a formal resolution under this Policy. The University will not commence a formal resolution of Prohibited Conduct (including Title IX Misconduct) without a Formal Complaint (which may be filed by the Complainant or by the Title IX Coordinator).]
- K. **University Community:** "University Community" refers to Students, Employees, and Alums.
- L. **Reasonable Person:** "Reasonable Person" is defined as a person using average care, intelligence, and judgment in the known circumstances.
- M. **Protected Activity:** "Protected Activity" includes most elements of participation in the University's processes related to this Policy, including, but not limited to: reporting Prohibited Conduct; pursuing a resolution of Prohibited Conduct; providing evidence in any investigation or hearing; or intervening to protect others who may have suffered Prohibited Conduct. Retaliation against any person because of Protected Activity is prohibited under this Policy, as discussed in [Section IV](#).
- N. **Course of Conduct:** "Course of Conduct" is defined as two or more acts, including, but not limited to, acts in which the stalker directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person's property.
- O. **Substantial Emotional Distress:** "Substantial Emotional Distress" is defined as significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling.

- P. **Crime of Violence:** Crime of Violence is defined as (a) an offense that has as an element the use, attempted use, or threatened use of physical force against the person or property of another, or (b) any other offense that is a felony and that, by its nature, involves a substantial risk that physical force against the person or property of another may be used in the course of committing the offense.
- Q. **Grievance Procedure:** “Grievance Procedure” is defined as the formal process by which the University evaluates a Complainant’s Formal Complaint as set forth in [Section XI](#).

Policy Details

IV. PROHIBITED CONDUCT

Prohibited Conduct under this Policy includes the following specifically defined forms of behavior: Non-Consensual Sexual Intercourse, Non-Consensual Sexual Contact; Sexual Exploitation; Sexual Harassment; Gender-Based Harassment; Retaliation; Aiding, Facilitating, Encouraging, Concealing, or Otherwise Assisting in Prohibited Conduct, Violating a Protective Measure and Title IX Misconduct.

Some Prohibited Conduct, that is sufficiently severe, pervasive, and objectively offensive that it effectively denies a person equal access to the University’s education program or activity and conduct that conditions an aid or benefit on unwelcome sexual activity, may also constitute Title IX Misconduct. Title IX Misconduct is a subset of Prohibited Conduct that rises to a level of severity and pervasiveness such that it is prohibited expressly by Title IX.

Federal law requires the University to define Title IX Sexual Harassment as including Sexual Assault (as defined in 20 U.S.C. 1092(f)(6)(A)(v)), Dating Violence (as defined in 34 U.S.C. 12291(a)(10)), Domestic Violence (as defined in 34 U.S.C. 12291(a)(8)), and Stalking (as defined in 34 U.S.C. 12291(a)(30)). The statutory definitions for these offenses were written by law enforcement. Because community members are not typically lawyers or law enforcement officials and the statutory definitions may in some cases be difficult for understand, the University has provided summary definitions for Sexual Assault, Dating Violence, Domestic Violence, and Stalking below. These summary definitions are intended to encompass the identical conduct as the legal definitions but are only an aid for community members -- they are not legal definitions. The statutory definitions, which we have inserted the corresponding link in this section, are the definitions that the University must and will use to decide whether reported conduct falls within the scope of Title IX Sexual Harassment for purposes of this Policy.

Whether someone has engaged in Prohibited Conduct under this Policy will be assessed under a Reasonable Person standard, which means the conduct will be evaluated from an objective standard that does not directly depend on the perspective of the Complainant, but depends on the perspective of a reasonable person similarly situated to the Complainant and in consideration of the context of the behavior and circumstances.

Some reports of Prohibited Conduct may also contain allegations that also implicate other University policies. Where such reports are made to the Title IX Coordinator, the Title IX Coordinator may refer such reports to the appropriate University office.

A. Types of Prohibited Conduct

1. Non-Consensual Sexual Intercourse (Prohibited Conduct)

Any form of vaginal, anal, or oral penetration by a penis, object, tongue, or digits without a person's affirmative consent; or oral copulation (mouth-to-genital contact or genital-to-mouth contact) without a person's affirmative consent, no matter how slight the penetration or contact.

2. Non-Consensual Sexual Contact (Prohibited Conduct)

Any intentional sexual touching, directly or indirectly, without a person's affirmative consent. Intentional sexual touching includes deliberate contact, under or over clothing, with the breasts, buttocks, groin, or genitals, or conscious and willful touching another with any of these body parts; making another person touch any of these body parts under or over clothing; and the emission of ejaculate on the clothing or body of another person.

3. Sexual Exploitation (Prohibited Conduct)

Non-consensual abuse or exploitation of another person's sexuality for the purpose of sexual gratification, financial gain, personal benefit or advantage, or any other purpose. Examples of sexual exploitation may include, but are not limited to: invasion of sexual privacy; prostituting an individual; non-consensual video- or audio-recording of sexual activity or circulation of such recorded material (i.e. revenge pornography); non-consensual photographing individuals who are partly undressed, naked, or engaged in sexual acts and transmitting or posting those photographs without an individual's consent; observing unsuspecting individuals who are partly undressed, naked, or engaged in sexual acts; knowingly transmitting a sexually transmitted disease (STD); exposing one's breasts, buttocks, or genitals without affirmative consent or inducing another to do the same; and inducing incapacitation for the purpose of making another person vulnerable to non-consensual sexual activity.

4. Sexual Harassment (Prohibited Conduct)

Unwelcome sexual advances, requests for sexual contact or favors, conduct based on gender stereotypes, or other verbal, non-verbal, physical, or visual conduct of a sexual nature constitutes sexual harassment when:

- i. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's academic, co-curricular, or campus life activities or of an individual's employment;
- ii. Submission to or rejection of such conduct by an individual is used as the basis for academic or student life or employment decisions affecting that individual;
- iii. The conduct is so severe and/or pervasive that it unreasonably interferes with a person's University employment, academic performance, or participation in University programs or activities; or



- iv. The conduct is so severe and/or pervasive that it creates an intimidating, hostile, demeaning, or offensive campus or living environment or employment setting.
 - Depending upon the severity and/or pervasiveness of the conduct, sexual harassment may include, for example, subjecting a person to egregious, unwelcome sexual attention, physical or verbal advances, sexual flirtations or propositions, vulgar talk or jokes, degrading graphic materials or verbal comments of a sexual nature about an individual or his or her appearance, or the display of sexually suggestive objects outside a scholarly context and purpose.
 - Conduct of a sexual nature that falls within the definition of Sexual Activity, above, will typically be reviewed as alleged Sexual Assault or Sexual Exploitation, as applicable, but may also be reviewed as alleged Sexual Harassment. Examples of conduct that may constitute Sexual Harassment include, but are not limited to:
 - a. Unwanted intentional touching such as kissing, hugging, or sexual touching that otherwise does not typically constitute Sexual Assault, defined above;
 - b. Unwanted sexual advances, including repeated unwanted requests for dates, or repeated unwanted requests for sexual contact;
 - c. Unwanted written, verbal, or electronic statements or photos of a sexual nature, including sexually suggestive comments, jokes, or innuendos;
 - d. Exposing one's genitalia, breasts, or buttocks, to another (including electronic means of exposure); and/or
 - e. Touching oneself sexually for others to view (including electronic means of exposure).

This definition addresses intentional conduct. It also includes conduct that results in negative effects even though such negative effects were unintended.

5. Aiding, Facilitating, Encouraging, Concealing, or Otherwise Assisting in Prohibited Conduct (Prohibited Conduct)

Aiding, facilitating, encouraging, concealing, or otherwise assisting in a violation (or attempted violation) of this Policy is prohibited by this Policy.

6. Gender-Based Harassment (Prohibited Conduct)

Gender-Based Harassment includes harassment based on actual or perceived sex, sexual orientation, gender identity, gender expression, or pregnancy. Such harassment may include acts of aggression, intimidation, or hostility, whether verbal, graphic, physical, or otherwise, even if the acts do not involve conduct of a sexual nature, when the behavior:



- Effectively denies access to a University program or activities, as defined by a reasonable person;
- Is used as the basis for or a factor in decisions affecting that individual's employment, education, living environment, or participation in a University program or activity; and/or
- Creates a hostile environment for that individual's participation in a University program or activity. A hostile environment exists when the conduct is sufficiently severe, persistent, and pervasive that it unreasonably interferes with an individual's participation in a University program or activity, or creates an intimidating, hostile, offensive, or abusive environment for that individual's employment, education, living environment, or participation in a University program or activity. Conduct must be deemed severe, persistent, and pervasive (based upon a reasonable person standard). In evaluating whether a hostile environment exists, the University will consider the totality of known circumstances, including the nature, frequency, intensity, location, context, and duration of the behavior.

Although a harassing hostile environment is generally created through a series of incidents, for purposes of this Policy, a severe incident, even if isolated, can be sufficient. Examples of conduct that may constitute Gender-Based Harassment include but are not limited to:

- A series of written, verbal, or electronic statements that disparage a person based on their actual or perceived sex, gender identity, gender expression, sexual orientation, or pregnancy;
- Threats of violence toward an individual based on their actual or perceived identity; within a protected class, or toward an entire sex, gender identity, gender expression, sexual orientation, or pregnancy status as a group; and/or
- Defacing University property, or another individual's property, with symbols or language intended or understood by a Reasonable Person to disparage or threaten a person or group based on sex, gender identity, gender expression, sexual orientation, or pregnancy.

This definition addresses intentional conduct. It also includes conduct which results in negative effects even though such negative effects were unintended. Unwelcome behavior constitutes Gender-Based Harassment if a Reasonable Person would consider it sufficiently severe, persistent, and pervasive as to interfere unreasonably with academic, other educational, or employment performance or participation in a University activity or living environment.

7. Violation of Protective Measures (Prohibited Conduct)

Violation of a protective measure occurs when an individual deviates from the guidelines of an express directive by a University official. Violation of a Protective Measure is considered a violation of this policy.

8. Retaliation (Title IX Misconduct and Prohibited Conduct)

Any adverse action or threatened action, taken or made, personally or through a third party, against someone who has filed a sexual harassment/misconduct complaint (a Complainant), has been the subject of a sexual harassment/misconduct complaint (a Respondent), or any other individual who engages with the University in connection with a sexual harassment/misconduct complaint. All individuals and groups of individuals, not just a Respondent or Complainant, are prohibited from engaging in retaliation.

- Retaliation includes directly or indirectly threatening, intimidating, harassing, or engaging in any other conduct that would discourage a reasonable person from engaging in activity protected under this Policy, such as seeking services; receiving protective measures and accommodations; reporting sexual harassment/misconduct; and/or participating in an investigation or adjudication.
- Retaliation includes maliciously and purposefully interfering with, threatening, or damaging the academic or professional career of another individual before, during or after the investigation and resolution of a report of Sex- and Gender-Based Harassment/Misconduct under this Policy.

Retaliation may be present even when there is a finding of “no responsibility.”

This provision does not apply to reports made, or information provided, in good faith, even if the facts alleged in the report are determined not to be accurate. Filing a counter complaint, counter appeal, or conduct complaint through processes established by University policy does not, in itself, constitute retaliation, unless it is determined that the filing was without a reasonable basis and made in bad faith.

Supportive Measures and other actions taken in accordance with this, or other University policies do not constitute Retaliation. Similarly, charging an individual with a code of conduct violation for making a materially false statement in bad faith in the course of a grievance proceeding under this Policy does not constitute prohibited retaliation, provided, however, that a determination regarding responsibility, alone, is not sufficient to conclude that any party made a materially false statement in bad faith. Retaliation also does not include pursuit of civil, criminal, or other legal action, internal or external to the University.

9. Sexual Harassment (Title IX Misconduct):

Sexual harassment occurs when:

- (1) An Employee conditions the provision of an aid, benefit, or service of the university on an individual’s participation in unwelcome sexual conduct, or
- (2) an individual is subjected to unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies the individual equal access to the University’s education program or activity

(3) Sexual Assault: Sexual assault is any sexual act directed against another person without the consent of the complainant, including any of the following:

- Sexual intercourse with another person, including oral or anal sexual intercourse, or the use of an object or instrument to unlawfully penetrate, however slightly, the genital or anal opening of the body of another person, without consent of the



complainant, including instances where the complainant is incapable of giving consent because of their age or because of their temporary or permanent mental or physical incapacity;

- Touching of the private body parts of another person for the purpose of sexual gratification, without the consent of the complainant, including instances where the complainant is incapable of giving consent because of their age or because of their temporary or permanent mental or physical incapacity;
- Sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law; or
- Sexual intercourse with a person who is under the statutory age of consent.

Clery Act Definition:

<https://www.law.cornell.edu/cfr/text/34/668.46>

(4) Domestic violence: Domestic violence includes felony or misdemeanor crimes of violence committed:

- By a current or former spouse or intimate partner of the victim,
- By a person with whom the victim shares a child in common,
- By a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner,
- By a person similarly situated to a spouse of the victim under the domestic or family violence laws of Georgia, or
- By any other person against an adult or youth complainant who is protected from that person's acts under the domestic or family violence laws of Georgia.

Clery Act Definition:

<https://www.law.cornell.edu/cfr/text/34/668.46>

(5) Dating violence: Dating violence is violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the complainant. The existence of such a relationship shall be determined based on a consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship.

Clery Act Definition:

<https://www.law.cornell.edu/cfr/text/34/668.46>

(6) Title IX Stalking: Stalking, for purposes of [Title IX Misconduct], means engaging in a course of conduct on the basis of sex directed at a specific person that would cause a reasonable person to fear for their safety or the safety of others, or suffer substantial emotional distress.

Clery Act Definition:

<https://www.law.cornell.edu/cfr/text/34/668.46>

B. Important Related Concepts and Definitions

1. Affirmative Consent

“Affirmative consent” is a knowing, voluntary, clear, and mutual agreement among all participants to engage in specific sexual activity.

- i. Affirmative consent can be given by words or actions, as long as those words or actions express willingness to engage in the sexual contact or activity. It is important not to make assumptions. If there is confusion or ambiguity, participants in sexual activity should stop and verbally clarify each person’s willingness to continue. A person who wants to engage in a specific sexual activity is responsible for obtaining affirmative consent for that activity.
- ii. Affirmative consent to one form of sexual activity does not imply affirmative consent to other forms of sexual activity.
- iii. Affirmative consent to engage in sexual activity with one person does not imply affirmative consent to engage in sexual activity with another person.
- iv. Silence or the lack of resistance, in and of itself, does not demonstrate affirmative consent. Again, it is important not to make assumptions; if confusion or ambiguity arises during a sexual interaction, each participant should stop and verbally clarify the other’s willingness to continue engaging in the sexual contact or activity.
- v. Affirmative consent may be initially given, but it can be withdrawn at any time. When affirmative consent is withdrawn or can no longer be given, sexual activity must stop.
- vi. Previous relationships or previous affirmative consent for sexual activity is not affirmative consent to sexual activity on a different occasion.
- vii. The definition of affirmative consent does not vary based upon a participant’s sex, sexual orientation, gender identity, gender expression or relationship status.
- viii. Affirmative consent cannot be procured by the use of physical force, compulsion, threats, intimidating behavior, coercion, or from a person who is incapacitated.
- ix. Under Georgia law, minors under the age of 16 years are generally unable to provide affirmative consent, with narrow exceptions. See O.C.G.A. § 16-6-3, Statutory Rape.

2. Force

“Force” refers to the use of physical violence and/or imposing on someone physically to gain sexual access. Sexual activity that is forced is non-consensual.

3. Incapacitation

“Incapacitation” occurs when an individual lacks the ability to knowingly choose to participate in sexual activity. A person who is incapacitated lacks the ability to understand a decision to participate in sexual activity.



- i. Incapacitation may be associated with a person’s lacking consciousness or awareness; being asleep; being involuntarily restrained; having a disability that impedes affirmative consent; or if an individual otherwise cannot affirmatively consent due to other forms of mental or physical helplessness.
- ii. Depending on the degree of intoxication, someone who is under the influence of alcohol, drugs, or other intoxicants may be incapacitated and therefore unable to provide affirmative consent.
- iii. Alcohol and drugs can lower inhibitions and create an atmosphere of confusion over whether consent is freely and affirmatively given. It is the responsibility of each party to be aware of the intoxication level of the other party before engaging in sexual activity. If there is any doubt as to the level or extent of the other individual’s intoxication, it is safest to forgo or cease any sexual contact or activity. Being intoxicated, impaired, or incapacitated by alcohol or other drugs is never an excuse for Prohibited Conduct and does not diminish anyone’s responsibility to obtain affirmative consent. The use of alcohol or other drugs never makes someone at fault for experiencing Prohibited Conduct.
- iv. Please see [Appendix E](#) to this Policy for a list of factors that will be considered in making a determination of whether the Complainant’s incapacitation has rendered the Complainant unable to provide affirmative consent.

4. Coercion

“Coercion” is conduct that would reasonably place an individual in fear of immediate or future physical, emotional, or other harm and that is used to pressure someone to engage in sexual contact. Coercion can include manipulation, intimidation, unwanted contact, express or implied threats of harm. Coercion is more than an effort to persuade, entice or attract another person to engage in sexual activity. In evaluating whether coercion was used, the University will consider whether pressure was applied and, if so, the frequency, intensity, and duration of the pressure, as well as the degree of isolation of the person being pressured. Sexual activity that is coerced is non-consensual.

5. Intimidation

“Intimidation” is the use of implied or overt threats that menace or cause reasonable fear to overcome an individual’s freedom of will to choose whether or not to participate in sexual activity or provide affirmative consent. Affirmative consent obtained by intimidation is not valid.

6. Report

A “Report” of “Prohibited Conduct” or “Title IX Misconduct” occurs when a Student, Employee, or Third Party notifies the Department of Title IX of alleged misconduct and requests support and resources, but where there has not yet been a decision about whether to resolve the allegations through University administrative process.

V. REPORTING

As Sexual and Gender-Based Harassment and Discrimination may, in some instances, constitute a violation of University policy and constitute criminal activity, the University encourages individuals to report alleged Prohibited Conduct promptly to campus officials and to law enforcement authorities, where appropriate.

The University and criminal justice systems work independently from one another; a Complainant may proceed with a Title IX grievance procedure and the criminal justice process concurrently, though investigations for each process will be conducted separately. Law enforcement authorities do not determine whether a violation of this Policy has occurred, and the criminal justice system uses different standards related to proof and evidence. Any questions about whether a specific incident violated the criminal law should be addressed to law enforcement.

Individuals may file a report at any time, but the University strongly encourages individuals to file complaints promptly in order to preserve evidence for a potential legal and/or grievance process.

Information on reporting Prohibited Conduct and a summary of helpful resources if a Student, Employee or Third Party has been impacted by Prohibited Conduct can be found in a brochure entitled “Sexual or Gender-Based Violence and Harassment: What You Need to Know,” which is available in hard copy in the Department of Title IX and in other locations on campus.

A. Sources for Confidential Reporting

1. Confidential Communications

The University understands that a Complainant may wish to discuss an incident of Prohibited Conduct in a confidential manner with a resource who is not required to report the incident to the Department of Title IX. There are five (5) resources at the University’s Atlanta campus and at the Oxford campus with whom communications are confidential and, in some cases, privileged. Contact information for these resources is located below in [Appendix B](#). They are as follows:

- a. Counseling and Psychological Services (CAPS) - Atlanta Campus / Counseling and Career Services (CCS) – Oxford Campus:** Both CAPS and CCS offer professional, licensed counselors who provide mental health counseling to students.
- b. Office of Spiritual and Religious Life – Atlanta and Oxford Campuses:** These Offices have chaplains and clergy members who provide pastoral counseling in their professional roles.
- c. Student Health Services (SHS) – Atlanta and Oxford Campuses:** A disclosure may be made to healthcare providers in their caregiving roles.
- d. Emory Ombuds Office - Atlanta and Oxford Campuses:** The Ombuds Office is a confidential resource for faculty, staff, and students.

- e. **Faculty and Staff Assistance Program (FSAP):** A disclosure may be made to a licensed mental health professional within FSAP.

Please Note: In limited circumstances, these privileged and confidential resources may have reporting or other obligations under state law and may have an obligation to follow moral and ethical guidelines. These reporting or other obligations may limit the extent to which the professional counselor may maintain a Complainant's confidentiality.

B. Reporting to the Department of Title IX

The University encourages individuals to report Prohibited Conduct to the University Title IX Coordinator, Title IX Coordinator for Students, Title IX Coordinator for Faculty and Staff, to the appropriate Deputy Title IX Coordinator associated with the impacted student's school, or to a Human Resources professional. By doing so, the University can take immediate steps to investigate and respond effectively to reports and the Complainant can learn more about available resources and the Title IX process.

Contact information for the University Title IX Coordinator, Title IX Coordinator for Students, and Title IX Coordinator for Faculty and Staff is located immediately below.

Yolanda Buckner, University Title IX Coordinator
(404) 727-8205
yolanda.buckner@emory.edu

Judith Pannell, Title IX Coordinator for Students
(404) 727-4079
jpanne2@emory.edu

Marti McCaleb, Title IX Coordinator for Faculty and Staff
marti.mccaleb@emory.edu

Please note, you may make a report at any time, but the Title IX Coordinators are only available to speak during business hours. For emergency calls, please call 911.

The University Title IX Coordinator oversees the University's response, obligations, and responsibilities to Title IX and ensures the Title IX policy, procedures, protocols, and practices are in alignment with federal regulations. The Title IX Coordinator for Students and the Title IX Coordinator for Faculty and Staff assist the Title IX Coordinator in overseeing the University's response to Title IX Misconduct reports and complaints and identifying and addressing any patterns or systemic problems revealed by such reports and complaints. They do not act as advocates but as neutral resources available to all students and employees.

The Title IX Coordinator for Students (or designee) and the Title IX Coordinator for Faculty and Staff (or designee) are responsible for referring individuals and employees to available resources, offering appropriate supportive measures and protections, and coordinating the disciplinary grievance procedure. Moreover, the Title IX Coordinator for Students and the Title IX Coordinator for Faculty and Staff also have primary responsibility for overseeing the investigation and adjudication of Prohibited Conduct complaints and coordinating remedial action.

In addition to the University Title IX Coordinator, Title IX Coordinator for Students, and Title IX Coordinator for Faculty and Staff, there are designated Deputy Title IX Coordinators within each of the University's schools who are also able to receive reports of Prohibited Conduct. For the names, affiliations and contact information for each of the Deputy Title IX Coordinators, please see Appendix D of this Policy. The list of Deputy Title IX Coordinators can also be found on the Department of Title IX's website: <http://equityandinclusion.emory.edu/title-ix/coordinators.html>.

The Department of Title IX will reveal information about its investigation and adjudication of Prohibited Conduct only to those who need to know the information in order to carry out their duties and responsibilities, and as required by law. It will inform all University individuals participating in an investigation, proceeding, or hearing that they are expected to maintain the privacy of the process; however, the University will not restrict the ability of either party to discuss the allegations under investigation or to gather and present relevant evidence.

C. Reporting to the Emory Police Department (EPD) / Oxford Police Department (OPD) or Law Enforcement

Students, Employees, and Third Parties have the option to file a complaint directly with EPD or OPD, as appropriate, or other applicable law enforcement authorities, so that the matter can be pursued through the criminal justice system. Students, Employees, and Third Parties may contact the Department of Title IX, and resources such as the Respect Program, for assistance in filing a complaint with law enforcement.

In an emergency situation, Students and Employees should call 911 to be directed to the closest law enforcement agency.

Atlanta Campus

Emory Police Department: 7-6111 (on-campus) or (404) 727-6111 (off-campus)
Atlanta Police Department: (404) 614-6544

Oxford Campus

Oxford Police Department: (770) 784-8377

Students, Employees, and Third Parties may also provide information to the EPD on an anonymous basis by utilizing the TIPS line ((404) 727-TIPS/8477). The Atlanta Police Department also operates an anonymous tip line: (404) 577-TIPS/8477. However, as a practical matter, the police response may be hindered or limited if a complaint is made anonymously.

Please note, the Emory Police Department's and Atlanta Police Department's anonymous TIPS lines are not for emergencies.

D. Information on Filing a Formal Complaint

When a Complainant has experienced Prohibited Conduct, the Complainant may file a Formal Complaint with the Title IX Coordinator in person, by mail, or by email. The Formal Complaint must contain the Complainant's physical or digital signature or otherwise indicate that the

Complainant is the person filing, and it should express a request that the University commence an investigation of the allegations in the Formal Complaint.

The Title IX Coordinator has discretion to file a Formal Complaint of reported Prohibited Conduct, even if the Complainant chooses not to participate in the process and/or does not wish to file a Formal Complaint, when the Title IX Coordinator determines that the report includes conduct that poses a threat to the health, safety and well-being of the community

The following factors may be considered when determining how to respond: the seriousness of the alleged sexual misconduct, the Complainant's age, whether there have been other complaints of Prohibited Conduct against the same Respondent. Please note, in cases involving a pattern of conduct by the Respondent, the use of weapons, or drugs to limit a Complainant's capacity, Emory is required to move forward with a formal process, even if the Complainant does not wish to do so. After a Formal Complaint has been filed by a Complainant or signed by the Title IX Coordinator, the University will commence its formal grievance process.

E. Other Information About Reporting

1. Reports from Others and Anonymous Reports

In cases where Prohibited Conduct is reported to the Title IX Coordinators or a Deputy Title IX Coordinator by someone (for example, a faculty member, resident advisor, friend, roommate or coworker) other than the Student, Employee, or Third Party individuals who were subjected to the alleged misconduct, the Title IX Coordinator will promptly notify the impacted Student, Employee, or Third Party that a report has been received and will provide information about available resources. This Policy will apply in the same manner as if the impacted Student, Employee, or Third Party had made the initial report. The Title IX Coordinator will make every effort to meet with the impacted Student, Employee, or Third Party to discuss available options and on-campus and off-campus resources. The Department of Title IX will handle reports from anonymous sources in the same manner. A Formal Complaint cannot be filed anonymously.

2. Requests Not to Pursue a Complaint or Requests for Confidentiality

A Complainant may decide to report an alleged incident of Prohibited Conduct (including Title IX Misconduct) without pursuing resolution of the complaint through the Title IX grievance process. A Complainant may also request that the University keep their identity confidential. The University takes these requests seriously; however, such requests may limit the University's ability to investigate and respond to the reported misconduct.

The Title IX Coordinator will decide whether to grant requests not to investigate the report or to keep the Complainant's identity confidential in light of the potential threat(s) of harm to the Complainant and/or the campus community. In determining whether to honor the request, the Title IX Coordinator will consider the seriousness of the alleged Prohibited Conduct, the Complainant's age, the Respondent's disciplinary history, and the parties' rights under the Family Educational Rights and Privacy Act (FERPA). The Title IX Coordinator will promptly notify the impacted Student, Employee, or Third Party making a request for confidentiality whether the University will be able to honor the request. If the Title IX Coordinator determine they must disclose a Complainant's identity to a

Respondent, they will inform the Complainant prior to filing a Formal Complaint for a formal investigation.

University personnel will reveal information about investigations and disciplinary proceedings related to Prohibited Conduct only on a “need to know” basis.

Please note: The fact that the University will keep information confidential does not prohibit either a Complainant or Respondent from obtaining the assistance of family members, counselors, therapists, clergy, doctors, attorneys, or similar resources. Additionally, there is no restriction preventing either party from discussing the alleged incident itself.

Even when the University is in receipt of a request not to pursue a complaint, Title IX requires that the University take action in response to the information known to it.

3. Related Alcohol and Drug Violations

The University recognizes that an impacted individual who has been drinking and/or using drugs at the time that Prohibited Conduct occurs may be hesitant to report such incidents due to fear of potential consequences for their own conduct. Because the University strongly encourages reporting Prohibited Conduct, an impacted individual who, in good faith, discloses any incident of Prohibited Conduct to a University employee or to law enforcement will not be subject to disciplinary action for personal consumption of drugs or alcohol, so long as such conduct did not place the health or safety of another person at risk. The Title IX Coordinator may initiate an educational discussion or recommend other voluntary educational or therapeutic remedies regarding alcohol or other drugs for the reporting individual(s).

4. Reporting of Crime and Disciplinary Statistics

The Clery Act requires the University to record and report certain information about campus safety, including the number of incidents of certain crimes on or near campus, some of which constitute Prohibited Conduct under this Policy. As described in the chart in the Resources section and in [Appendix C](#), many employees who receive reports of Prohibited Conduct are required by the Clery Act to notify EPD about such incidents for statistical reporting and safety purposes, including some employees who are otherwise considered confidential resources. These notifications may include the classification and location of the reported crime but do not identify the students involved.

5. Reporting of Child Abuse

Unless an exception under Georgia state law applies, the University requires all affiliates, including faculty, staff, student employees, certain volunteers whose capacity of employment or duties involve interaction with children and vendors, to report suspected child abuse of which they are made aware in their capacity at the University. Under Georgia law, child abuse includes sexual abuse or exploitation of a person who is under eighteen (18) years old. Any uncertainty about whether reporting is required should always be resolved in favor of making a report to the EPD. For more information, please read [University Policy 4.119](#), Emory University’s Mandated Child Abuse Reporting Policy.

VI. RESPONSIBLE EMPLOYEES – REPORTING INFORMATION AND OBLIGATIONS

A. Prompt Reporting

Responsible Employees are required to promptly share with the Title IX Coordinators all details they receive in the scope of their employment about Prohibited Conduct. Responsible Employees can make a report by contacting the Title IX Coordinators as set forth in [Section V](#) above. Failure by a Responsible Employee to promptly share with the Department of Title IX all details they receive in the scope of their employment about Prohibited Conduct may subject them to appropriate discipline, up to and including removal from their position.

The University recognizes that individuals may be most comfortable disclosing Prohibited Conduct to an employee they know well, such as a Campus Life professional, Faculty Member, Coach, or Resident Advisor. Any responsible employee (other than the [Privileged and Confidential](#) or [Limited Confidential Resources](#) listed above) who receives a report is considered a Responsible Employee, and thus, is required to inform the Title IX Coordinators about the incident, directly, or through their relevant reporting structure, or through a Deputy Title IX Coordinator.

VIII. SUPPORTIVE MEASURES

Supportive Measures are non-disciplinary, non-punitive individualized services, accommodations, and other assistance that the University offers and may put in place, as appropriate, as reasonably available, and without fee or charge, after receiving notice of possible Title IX Misconduct or other Prohibited Conduct. Supportive Measures are designed to restore or preserve access to the University's education programs and activities, protect the safety of all parties and the University's educational or work environment, or deter Prohibited Conduct, while not being punitive in nature or unreasonably burdening the other party.

Supportive Measures are available regardless of whether the matter is reported to the University for the purpose of initiating a proceeding under this Policy and before, after, and regardless of whether a Formal Complaint of Prohibited Conduct is filed. A Complainant who requests Supportive Measures retains the right to file a Formal Complaint, either at the time the Supportive Measure is requested or at a later date. Any Complainant that requests Supportive Measures will be informed in writing of their right to simultaneously or subsequently file a Formal Complaint pursuant to this Policy.

The Title IX Coordinators, or their designees, will contact a Complainant after receiving a report of possible Title IX Misconduct or other Prohibited Conduct (1) to discuss the availability of Supportive Measures; (2) to ask about the Complainant's wishes with respect to Supportive measures; (3) to explain that Supportive Measures are available with or without the filing of a Formal Complaint; and (4) to explain the process for filing a Formal Complaint. The Title IX Coordinators will consider the Complainant's wishes with respect to implementation of Supportive Measures.

Supportive Measures may also be requested by and made available to Respondents, witnesses, and other impacted members of the University community. Requests for supportive measures shall be submitted

in writing to the Title IX Coordinator for Students or the Title IX Coordinator for Faculty and Staff, who will consider these requests on a case-by-case basis.

While the Title IX Coordinators will ultimately serve as the point of contact for any party requesting Supportive Measures, Supportive Measures may, in the first instance, be requested directly from the [Confidential Resources](#) set forth above regardless of whether the Title IX Misconduct or other Prohibited Conduct is otherwise reported to the University or law enforcement. Ultimately, the Title IX Coordinator is responsible for coordinating the effective implementation of supportive measures.

To determine the appropriate Supportive Measure(s) to be implemented, the University conducts an individualized assessment based on the unique facts and circumstances of a situation. Supportive Measures will not be disciplinary or punitive in nature and will not unreasonably burden, or unreasonably interfere with the educational pursuits of, the other party. Whether a possible Supportive Measure would unreasonably burden the other party is a fact-specific determination that takes into account the nature of the educational programs, activities, opportunities and benefits in which an individual is participating.

Examples of Supportive Measures include:

- Academic support services and accommodations, including the ability to reschedule classes, exams and assignments, transfer course sections, or withdraw from courses without penalty;
- Academic schedule modifications (typically to separate Complainant and Respondent);
- Work schedule or job assignment modifications (for University employment);
- Changes in work or housing location;
- An escort to ensure safe movement on campus;
- On-campus counseling services and/or assistance in connecting to community-based counseling services;
- Assistance in connecting to community-based medical services;
- No contact directives (to instruct individuals to stop all attempts at communication or other interaction with one another);
- Temporarily limiting an individual's access to certain University facilities or activities;
- Work schedule or job assignment modifications, including suspending employment with or without pay, consistent with any applicable written procedures (for University employment);
- Information about and/or assistance with obtaining personal protection orders;
- Leaves of absences;
- Increased monitoring and security of certain areas of the campus; or

- A combination of any of these measures.

The University will maintain Supportive Measures provided to the Complainant or Respondent as confidential to the extent that maintaining such confidentiality would not impair the University's ability to provide the Supportive Measures.

IX. EMERGENCY REMOVAL

Where there is an immediate threat to the physical health or safety of any Students, Employees, or Third Parties arising from the alleged Prohibited Conduct, the University can remove a Respondent from the University's education program or activity and issue any necessary related no-trespass and no-contact orders. The University will make the decision to remove a Respondent from the University's education program or activity based on an individualized assessment and risk analysis.

If the University makes such a decision, the Respondent will be provided notice and an opportunity to challenge the decision immediately following the removal. Challenges to emergency removals must be submitted in writing to the University Title IX Coordinator within 7 business days from the day the parties are notified about the emergency removal. The phrase "business days" shall refer to those days ordinarily recognized by the University's administrative calendar as workdays. The University Title IX Coordinator will review the materials within 5 business days of receipt of the challenge and may affirm the original decision, modify the decision, which may be of greater or lesser severity, or dismiss the original decision. The University Title IX Coordinators' determinations on emergency removals are final and not appealable. Both parties shall receive simultaneous written notice of the outcome of the appeal.

X. ADMINISTRATIVE LEAVE

If the Respondent is an employee, the University may place the employee on administrative leave, with or without pay, to provide time to investigate and evaluate the circumstances regarding the complaint.

XI. GRIEVANCE PROCEDURE FOR TITLE IX MISCONDUCT

The University's grievance procedure for addressing alleged Title IX Misconduct is included in [Appendix A](#).

XII. REFERRAL PROCESS FOR PROHIBITED CONDUCT

For conduct that is not Title IX Misconduct, but still is Prohibited Conduct as defined by this Policy, in keeping with its commitment to maintaining an environment that is free of discrimination, Emory maintains grievance procedures to address other forms of harassment defined by this policy as Prohibited Conduct.

When a Formal Complaint is filed by a Complainant, but the alleged misconduct does not rise to a level of severity and pervasiveness such that it is prohibited expressly by Title IX, or does not occur within a University Program or Activity against a person in the United States, the Title IX Coordinator will dismiss

the report or complaint for purposes of Title IX and evaluate whether the alleged conduct may constitute Prohibited Conduct. This dismissal may be appealed by either party.

Promptly after the dismissal, the Title IX Coordinator will refer the matter to the appropriate department and/or academic unit for consideration through the following channels and applicable policies:

A. For Employees:

Prohibited Conduct as defined by this policy will be transferred to the Office of Equity and Inclusion when the matter involves an employee. The Office of Equity and Inclusion will adjudicate this matter pursuant to the [University's Equal Opportunity and Discriminatory Harassment Policy 1.3](#).

B. For Students:

Prohibited Conduct as defined by this policy will be adjudicated in conformity with the Non-Title IX Prohibited Conduct Grievance Procedure located in [Appendix B](#) of this policy when the matter involves students.

APPENDIX A:

GRIEVANCE PROCEDURE FOR TITLE IX MISCONDUCT

A. General Provisions

1. Equitable Treatment of the Parties

The University's response will treat Complainants and Respondents equitably by offering Supportive Measures, by providing Remedies to a Complainant where a determination for Title IX Misconduct has been made against the Respondent, and by following the grievance procedure as set forth herein before imposing any disciplinary sanctions or other actions that are not Supportive Measures, against a Respondent.

2. Presumed Not Responsible

The Respondent is presumed not responsible for the alleged Title IX Misconduct until a determination regarding responsibility is made at the conclusion of the grievance process.

3. Reasonably Prompt Time Frames

The University will seek to resolve every investigation and any subsequent adjudication within 120 business days from the receipt of a Formal Complaint. The overall time frame may be extended for good cause as necessary so that the grievance process may be carried out in a thorough and comprehensive manner that ensures the integrity of the process. The reasons for extension of the time frame also include, but are not limited to: compliance with a request from law enforcement; accommodations to ensure the availability of witnesses; consideration of exam periods, school breaks, vacations or inclement weather; complexities of a specific case, including the number of witnesses and volume of information provided by the parties; and other extenuating circumstances. The Title IX Coordinator for Students or the Title IX Coordinator for Faculty and Staff will notify the parties in writing of any extensions of the time frame.

Any calculation of days used in this Policy shall be in business days. To the extent a deadline falls on a University holiday, the deadline will be effective on the next business day.

B. Preliminary Assessment of a Title IX Report or Formal Complaint

1. Initial Assessment of a Formal Complaint

Written Notice: Upon receipt of a Formal Complaint, the Title IX Coordinators will provide the following written notice to the parties whose identities are known by the University:

- a) Notice of the University's Title IX grievance process, including an informal resolution process.

- b) Notice of the allegations potentially constituting Title IX Misconduct, including sufficient details known at the time and with sufficient time to prepare a response before any initial interview. Sufficient details include: the identities of the parties involved in the incident, if known; the conduct allegedly constituting Title IX Misconduct; and the date and location of the alleged incident, if known.

The written notice will also include a statement that the Respondent is presumed not responsible for the alleged conduct and that a determination regarding responsibility is made at the conclusion of the grievance process. The written notice will inform the parties that they may have an advisor of their choice, who may be, but is not required to be, an attorney, and may inspect and review evidence as described herein.

The written notice will additionally inform the parties of any provision in the University's Code of Conduct that prohibits knowingly making false statements or knowingly submitting false information during the grievance process.

- c) Ongoing Notice Requirement: If, in the course of an investigation, the University decides to investigate allegations about the Complainant or Respondent that are not included in the initial Written Notice provided, the University will provide notice of the additional allegations to the parties whose identities are known.

Initial Assessment: The Title IX Coordinator shall make an initial assessment as to whether the report on its face alleges an act of Title IX Misconduct and whether the conduct is covered by this Policy. If the Title IX Coordinator determines in their assessment that the allegations would not constitute Title IX Misconduct, the University will dismiss the matter as described below.

Dismissal of Formal Complaints:

- a) Mandatory Dismissal

Mandatory Dismissal will occur if, in their discretion, after undertaking the assessment above, the Title IX Coordinator determines that the conduct alleged in the Formal Complaint (1) would not constitute Title IX Misconduct Conduct, even if true; (2) did not occur against a person in the United States; and (3), or did not take place in the programs or activities of the University.

Dismissal of a Formal Complaint on this basis does not preclude action under another applicable policy. In the event of dismissal, the Title IX Coordinators (for Students or for Faculty, and Staff) may refer the matter to another office or channel through a separate conduct procedure for consideration under another University policy. Matters will be channeled as follows:

- Matters in which the Respondent is a Student will be addressed pursuant to the grievance procedures outlined in [Appendix B](#) of this policy.
 - Matters in which the Respondent is an Employee will be referred to the Department of Equity and Inclusion.
- b) The University may dismiss a Formal Complaint, or any allegations therein, at any time during the investigation or hearing, if:
- The Complainant notifies the Title IX Coordinator in writing that the Complainant would like to withdraw the Formal Complaint or any allegations therein;



- The Respondent is no longer enrolled or employed by the University; or
- Specific circumstances prevent the University from gathering evidence sufficient to reach a determination as to the formal complaint or allegations therein.
- The University retains discretion on a case-by-case basis to dismiss a Formal Complaint based on any of the above reasons. Just because one or all of the conditions above are satisfied, does not mean the University will automatically dismiss the Formal Complaint. Instead, the University will determine if such a decision is appropriate under the circumstances.

Written Notice of Dismissal:

Upon dismissal, the University will promptly send written notice of the dismissal and reason(s) therefore simultaneously to the parties. The parties are entitled to appeal the dismissal under the appeal procedures set forth below.

Appeal Procedure for Dismissals:

Challenges to dismissals must be submitted in writing to the University Title IX Coordinator within seven (7) business days from the day the parties are notified about the dismissal. The University Title IX Coordinator will review the materials within five (5) business days of receipt of the challenge and may affirm or deny the original decision. The University Title IX Coordinator's determinations on dismissals are final and not appealable. Both parties shall receive simultaneous written notice of the outcome of the appeal.

2. Rights and Responsibilities with Parties

The Title Coordinators, or their designees, will conduct an intake meeting to inform the Complainant and the Respondent of their rights and responsibilities, the prohibition against retaliation, further provide information about supportive measures, discuss the Title IX Misconduct allegations, and provide information about the investigative and adjudication processes.

3. Threat Assessment

After the initial assessment, if the Title IX Coordinators determine the available information provides a rational basis for concluding that there may be an immediate threat to the Complainant or the University Community, the Title IX Coordinators will contact the Emory Threat Assessment Team ("TAT"). If TAT believes an immediate threat is present, they will determine what type of action should be taken.

For more information about the Threat Assessment Team, please see
<http://emergency.emory.edu/threat-assessment/index.html>

4. Methods of Resolution

Claims of Title IX Misconduct may be resolved by using an informal or a formal process. The Title IX Coordinator will discuss these two options for resolution during initial meetings with the Complainant and Respondent, as well as upon conclusion of the preliminary assessment process, if appropriate. Either party may request one of these forms of resolution, but for informal resolution, the University must approve that such a process is appropriate under the circumstances and both parties must provide voluntary, informed, written consent to the informal resolution process.

Informal resolution is not available to resolve allegations by a Student against an Employee.

a) Informal Resolution

Parties have the option of informally resolving complaints of alleged Title IX Misconduct. For the informal resolution process to commence, however, both parties must agree to submit to the informal resolution process. The University has the discretion to determine whether an informal resolution process is appropriate.

Prior to any informal resolution process, the University will provide the parties a written notice disclosing the allegations, the requirements of the informal resolution process, and any consequences resulting from participating in the process, including the records that will be maintained or could be shared. The written notice will also contain a consent form that will inform the Complainant and the Respondent that participation is voluntary and that either party can request to end informal resolution and pursue an investigative resolution. The written consent will also inform parties about how information gathered and utilized in the informal resolution process may be used in any other University process, including investigative resolution, if informal resolution ends and investigative resolution begins or resumes. In order to proceed with this method of resolution, both parties must sign the written consent.

i. Administrative Resolution

One type of informal resolution is administrative resolution. If the parties agree to submit to administrative resolution, then the Title IX Coordinator, or designee, works with each party separately to determine mutually agreeable outcomes. Both parties submit a written statement that includes basic facts about allegations and the parties' intended outcomes. After receiving the written statements, the appropriate Title IX Coordinator offers both parties the opportunity to review and respond to the statements in writing.

The Title IX Coordinator will review the written statements, including the parties' suggested outcomes, and will determine which outcome(s) should apply to the Respondent, taking into consideration the parties' feedback on the appropriate outcome(s). Some examples of outcomes include, but are not limited to: counseling, restitution, No Contact Orders, and educational programming. The factors pertinent to the determination of what outcome is appropriate include, but are not limited to: the nature and severity of the conduct at issue, the circumstances surrounding the violation, the impact of the misconduct upon the Complainant, and the interest of the University and its community. The Title IX Coordinator may meet with each

party separately to obtain feedback on the appropriate outcome, to which the parties must agree. If the parties come to an agreement regarding the outcome, then the appropriate Title IX Coordinator will issue an Outcome Agreement Form via email to the parties, and the case will be closed.

Either party's failure to abide by the terms of the Outcome Agreement Form may subject them to disciplinary proceedings and sanctions under the applicable Code of Conduct or Standards of Conduct. Both parties retain the right to end the Administrative Resolution process at any time prior to signing the Outcome Agreement Form and to initiate the formal process.

ii. Mediation

A party may request mediation from the appropriate Title IX Coordinator at any stage of the process before a hearing is scheduled. Mediation will be used only with the consent of both the parties, and either party has the right to terminate the mediation process and resume the formal grievance process at any time.

The mediation process will typically commence within ten (10) business days after consent to mediate is received from both the Complainant and the Respondent and will continue until concluded or terminated either by one of the parties or the Department of Title IX. During mediation, the investigation and time frames will be stayed. If the mediation results in a resolution, the grievance process will be concluded, and the matter will be closed. If a resolution cannot be reached, the grievance process will proceed as it would have before the mediation process.

Failure by either party to adhere to the terms outlined in the mediation resolution may result in disciplinary action and sanctions under other University policies.

iii. Restorative Justice Circles

Restorative Justice Circles ("Circles") are an example of an informal resolution process that provides an opportunity for community members to come together to address harmful behavior in a process that explores harms and needs, obligations, and necessary engagement. Circles bring all parties together to meet, talk about what happened, and settle on a plan to repair the harm. Rather than focusing on what policies have been violated, Circles instead help identify who has been hurt and what must be done to repair the harm.

b) Formal Resolution

The formal resolution process typically commences when a Complainant files a Formal Complaint and an investigation proceeds. The Written Notice will include information about the conduct process. Formal resolution may also commence when the Title IX Coordinator signs a Formal Complaint.

After providing Written Notice to the Complainant and Respondent, the Title IX Coordinator will appoint an investigator to gather all available information relevant to the allegations in the Formal Complaint. The Title IX Coordinator will share the Complainant's and Respondent's names and contact information with the investigator, who will reach out to the parties to introduce themselves. All investigators will have

training in investigating and evaluating conduct prohibited under the Policy. The investigator will be impartial and unbiased.

The Title IX Coordinator may consolidate multiple Formal Complaints against a single Respondent or group of Respondents, or a single Complainant or group of Complainants, into one investigation if the evidence related to each incident would be relevant and probative in reaching a determination on the other incident(s). Where a Formal Complaint contains allegations that may implicate violations of other University policies, the Title IX Coordinator, in consultation with other University administrators, may, in their discretion, choose to consolidate those allegations with the Formal Complaint or refer those allegations to the appropriate University office for investigation under a different applicable process. The decision to consolidate Formal Complaints is not subject to appeal.

1. Investigations

The University will investigate the allegations in any Formal Complaint not subject to dismissal. The burden of gathering evidence is on the University. Upon receipt of the Formal Complaint, the investigator will promptly begin the investigation. The investigator will meet with each party. During their investigation, the investigator will ask each party to provide information relating to the event(s) in question, and to provide a list of witnesses and/or any relevant documents or evidence. The Complainant, the Respondent, and the witness(es) are permitted to provide other relevant evidence to the investigator. Evidence includes any facts or information presented in support of an assertion and may include text messages, email exchanges, timelines, receipts, photographs, etc.

i. Rights of the Parties

- a) Advisor.** The Complainant and the Respondent may be accompanied to any meeting or hearing by the advisor of their choice through the course of the Title IX process. The advisor may be any person, including an attorney.

Complainants and Respondents may consult with their advisors in drafting any written submissions that are allowed under this Policy; the written submission, however, must be from the Complainant or Respondent and not the advisor. Advisors, if present, shall be restricted to consulting with their advisees. Advisors may not intervene in a meeting or address the investigator unless invited to do so. Any violation of University policies committed by an advisor may lead to the exclusion of that advisor from the process. That includes, but is not limited to, any act of retaliation or breach of privacy committed by an advisor.

Each party has a responsibility to notify their advisor of the time, date and location of any meeting or disciplinary proceeding. Proceedings will not be unduly delayed to accommodate an advisor.



The University offers trained Title IX advisors for Complainants and Respondents. The University Title IX advisors support the Complainant or Respondent through the investigation and adjudication process. Individuals interested in utilizing a University Title IX advisor should submit a request in writing to the appropriate Title IX Coordinator.

University Title IX advisors may guide and assist the Complainant or the Respondent by:

- Connecting them to support services as needed;
- Clarifying questions about the investigation and adjudication process;
- Assisting in the reporting of any instance of retaliation;
- Providing general support during what can be a stressful process;
- Attending meetings or proceeding throughout the investigation and adjudication process; and
- For Complainants – connecting them to the appropriate resources for the process of criminal reporting if the Complainant chooses to explore that option.

Whether they select a University or outside advisor, a party must provide either their advisor's name or contact information to the Title IX Coordinator prior to the party's first meeting with the investigator. A party must also inform the Title IX Coordinator if a new advisor is selected. A party wishing to bring an attorney as an advisor must inform the Title IX Coordinator at least five days in advance of the first meeting that the advisor will attend.

Parties may have one advisor for all matters leading up to a hearing and a different advisor for the hearing. If a party plans to change advisors for the hearing, the party must inform the Title IX Coordinator at least five days before the hearing.

If a party does not have an advisor for the hearing, the University will select an advisor, at no cost to the party, for the purpose of conducting cross-examination.

- b) Equal Opportunity to Present Evidence.** Both parties have an equal opportunity to present fact and expert witnesses and other inculpatory and exculpatory evidence.

ii. Investigation Process

- a) **Investigator.** The Title IX Coordinator will designate an individual (who will not be the Title IX Coordinator) to conduct an Investigation of a Formal Complaint, when a decision is made not to dismiss such complaint and when Informal Resolution is not appropriate or both parties do not give voluntary, informed, written consent to Informal Resolution.
- b) **Written Notice of Interviews, Meetings, or Hearings.** The University will send the parties and their advisors prior written notice of any investigative interviews, meetings, or hearings with sufficient time for the individual to prepare.
- c) **Disclosure of Information.** Following the conclusion of the investigation, the University will send the parties and their advisors evidence directly related to the allegations in electronic format, at least 10 days prior to any hearing, for the parties to inspect, review, and respond to the evidence.
- d) **Report of Investigation.** At the conclusion of the investigation, the investigator will prepare a draft Report of Investigation that fairly summarizes relevant evidence, which they will provide to the Title IX Coordinator. After reviewing the draft Report of Investigation, the Title IX Coordinator for Students or the Title IX Coordinator for Faculty and Staff may direct the investigator to ask further clarifying questions of the Complainant, Respondent, or witness(es) to supplement the Report of Investigation. The Title IX Coordinator will then send to the parties and their advisors, the report of investigation, in electronic format, with at least 10 business days for the parties to respond. The information provided by the parties in response to the Report of Investigation will be included in the Report of Investigation as an appendix, and the Report will then be finalized. In the event the determination is made to dismiss the Formal Complaint (see below), that information will be included in the Report of Investigation.

2. Live Hearings

The University's grievance process shall provide for a live hearing. Within 5 business days of Final Report of Investigation, the Title IX Coordinator will select the date, time, and location of the hearing in consultation with the Hearing Officer, and will provide notice to both parties. The Hearing Officer will be trained in Title IX procedures and will preside over the hearing.

All parties shall be given at least 10 business days' notice in advance of the hearing date, absent agreement by the parties to shorten the time or extraordinary circumstances as determined by the Hearing Officer. Extraordinary circumstances may include, but are not limited to: fall/spring/summer/holiday breaks; circumstances in which critical witnesses are unavailable; and other extenuating circumstances.

Hearings may be conducted with all parties physically present in the same geographic location or, at the University's discretion, any or all parties, witnesses, and other



participants may appear at the live hearing virtually, with technology enabling participants simultaneously to see and hear each other. At the request of either party, the University must provide for the hearing to occur with the parties located in separate rooms with technology enabling the decision-maker(s) and parties to simultaneously see and hear the party or the witness answering questions.

- i. **Advisors at the Live Hearing.** If a party does not have an advisor present at the hearing, the University shall provide without fee or charge to that party, an advisor of the University's choice to conduct cross-examination on behalf of that party.
- ii. **Standard of Evidence.** The level of proof required to determine whether or not a Respondent is responsible for the allegations shall be preponderance of the evidence, i.e., it is more likely than not that alleged conduct occurred.
- iii. **Relevance.** Although the determination of relevance of testimony and information is in the discretion of the Hearing Officer, certain categories of evidence will rarely, if ever, be relevant. These include character evidence, polygraph and other generally unreliable or unproven scientific evidence, speculation, and the like. The Hearing Officer has broad discretion to determine the relevance of evidence.
- iv. **Role of the Hearing Officer/Decision-Maker.**
 - a) **Pre-Hearing Procedures and Ground Rules.** The Hearing Officer (and/or the Department of Title IX) may establish pre-hearing procedures relating to issues such as scheduling, hearing procedures, witness and advisor participation and identification, structure, advance determination of the relevance of certain topics, and other procedural matters. The Hearing Officer will communicate with the parties prior to the hearing with respect to these issues and establish reasonable, equitable deadlines for party participation/input.
 - b) **Decorum.** The Hearing Officer also has wide discretion over matters of decorum at the hearing, including the authority to excuse from the hearing process participants who are unwilling to observe rules of decorum.
 - c) **Determine Relevance of Questions.** At the hearing, both parties will be given the opportunity to ask cross-examination questions of the other party through their advisors; however, only relevant cross-examination and other questions may be asked of a party or witness. Before a Complainant, Respondent, or witness answers a cross-examination or other question, the Hearing Officer must first determine whether the question is relevant and explain any decision to exclude a question as not relevant. The Hearing Officer's relevance determinations at the hearing are not subject to further objection or discussion at the hearing, and failure to adhere to this rule may constitute a breach of the rules of decorum.



- d) **Provide Rape Shield Protections for Complainants.** The Hearing Officer will prohibit any questions and evidence about the Complainant’s sexual predisposition or prior sexual behavior as not relevant, unless such questions and evidence about the Complainant’s prior sexual behavior are offered to prove that someone other than the Respondent committed the conduct alleged by the Complainant, or if the questions and evidence concern specific incidents of the Complainant’s prior sexual behavior with respect to the Respondent and are offered to prove consent.
- e) **Permit Cross-Examination.** At the live hearing, the Hearing Officer shall permit each party’s advisor to ask the other party, and any witnesses, all relevant questions and follow-up questions, including those challenging credibility. Such cross-examination at the live hearing must be conducted directly, orally, and in real time by the party’s advisor and never by a party personally, notwithstanding the discretion of the University to otherwise restrict the extent to which advisors may participate in the proceedings.
- f) **Exclude Statements, as Appropriate, in Reaching a Determination Regarding Responsibility.** If a party or witness does not submit to cross-examination at the live hearing, the Hearing Officer must not rely on any statement of that party or witness in reaching a determination regarding responsibility; provided, however, that the Hearing Officer cannot draw an inference about the determination regarding responsibility based solely on a party’s or witness’ absence from the live hearing or refusal to answer cross-examination or other questions.

“Statements” for purposes of the hearing means factual assertions made by a party or witness. Statements might include factual assertions made during an interview or conversation, written by the individual making the assertions (including those found in a Formal Complaint), and memorialized in the writing of another (e.g. in an investigative report, police report, or medical record). Where evidence involves intertwined statements of both parties (e.g. a text message exchange or an email thread) and one party refuses to participate in the hearing or submit to questioning about the evidence while the other does participate and answer questions, the statements of only the participating party may be relied on by the Hearing Officer. A threat, verbal conduct that is itself harassment, or another non-factual assertion is not a “statement” for this purpose.

3. Hearing Procedures

- i. The Hearing Officer shall call the hearing to order and state the date and time.
- ii. The Hearing Officer shall ask for identification of the parties attending the hearing for the record. If the Complainant and/or the Respondent fails to appear at the hearing, and such party was provided proper notice of the



hearing as set forth above, then absent extenuating circumstances, the Hearing Officer will proceed to determine the resolution of the complaint.

- iii. The Hearing Officer shall state the conditions of the hearing including:
- 1) There shall be a single verbatim record, such as a tape recording, of all hearings (not including deliberations). The recording shall be the property of the University. Documentation of the proceedings, including the written decision, transcripts, and any audio recordings, are maintained in accordance with the applicable University document retention records. Reasonable care will be taken to create a quality audio recording and minimize technical problems; however, technical problems that result in no recording or an inaudible one cannot, by itself, serve as a basis to overturn an outcome upon appeal by a party.
 - 2) Rules of evidence applicable to courts of law will not apply.
 - 3) The hearing shall be non-adversarial in nature. The Hearing Officer shall be empowered to take all steps as necessary to preserve the non-adversarial character of the proceeding.
 - 4) The hearing shall be closed, with participation limited to the Respondent, Complainant, Advisors, and/or Witness(es). Witnesses will remain outside the hearing until asked to provide information.
 - 5) The University may request that a non-party student or a faculty/staff member attend the hearing and give testimony relevant to the case under consideration.
 - 6) Both parties have the right to be present for the entire hearing, except for deliberations or recesses for the hearing board to discuss procedural issues. Neither party shall be required to be in the physical presence of the other. A party who wishes to participate electronically should submit a written request to the appropriate Title IX Coordinator no more than two (2) business days after receipt of the Notice of Hearing.
 - 7) All statements, testimony, and evidence shall be restricted to matters directly relevant to the case, as determined by the Hearing Officer.
 - 8) Each party is presumed to have good character; accordingly, character witnesses are not allowed.
 - 9) Any person disrupting, interfering with the hearing, or failing to abide by the rulings of the Hearing Officer may be excused from the hearing.



- 10) The level of proof required to determine whether or not a Respondent is responsible for the allegations shall be by a preponderance of the evidence, *i.e.*, it is more likely than not that Title IX Misconduct occurred.
- 11) The hearing and its final outcome shall be considered part of the Respondent's educational record or employment record as applicable, and as such shall be kept confidential, except as provided under federal and state law.
- iv. After the Hearing Officer states the conditions of the hearing, the Hearing Officer shall ask the Complainant and the Respondent if there are any objections to proceeding with the hearing. The Hearing Officer shall be solely responsible for deciding if such objections are reasonable and/or what measures should be taken to address them.
 - v. The Complainant and Respondent each shall be given the opportunity to provide brief opening statements to the Hearing Officer.
 - vi. The Complainant shall be given the opportunity to present evidence and/or call witnesses. The Hearing Officer shall have the first option of questioning the Complainant and/or witness(es), followed by the Respondent.
 - vii. The Respondent shall then be given the opportunity to present evidence and/or call witnesses. The Hearing Officer shall have the first option of questioning the Respondent and/or witness(es), followed by the Complainant.
 - viii. At the live hearing, the Hearing Officer shall permit each party's advisor to ask the other party and any witnesses all relevant questions and follow-up questions, including those challenging credibility. The Hearing Officer will screen the questions submitted by the parties' advisors and only permit questions they deem appropriate and relevant to the case. Only relevant cross examination and other questions may be asked of a party or witness.
 - o If the Hearing Officer declines a question requested by a party's advisor, he/she will indicate verbally in the hearing why the question was not asked and will make note of it in the formal hearing outcome form.
 - i. The Complainant and Respondent each shall be given the opportunity to make a closing statement.
 - j. The Hearing Officer shall conclude the hearing.
 - k. The Hearing Officer shall enter closed deliberation.



l. Written Determination Regarding Responsibility. The Hearing Officer shall issue a written determination regarding responsibility within 15 business days of the conclusion of the hearing, applying the preponderance of the evidence standard of evidence. The written determination shall include:

- 1) Identification of the allegations potentially constituting Title IX Misconduct;
- 2) A description of the procedural steps taken from the receipt of the Formal Complaint through the determination;
- 3) Findings of fact supporting determination;
- 4) Conclusions regarding application of the University's policy to the facts;
- 5) The rationale for the result as to each allegation;
- 6) Any disciplinary sanctions imposed (or Recommendation for Sanctions) on the Respondent;
- 7) Whether Remedies will be provided to the Complainant; and
- 8) Information about how to file an appeal.

The Title IX Coordinator is responsible for effective implementation of any Supportive Measures and any Remedies.

m. Recording of the Hearing. The University shall create an audio or audiovisual recording, or transcript, of any live hearing and make it available, upon request, to the parties for inspection and review.

4. Sanctions

The Respondent is a Student:

Emory may impose a range of sanctions and protective measures following a final determination of a violation of this Policy. The sanctioning decision will be informed by the degree to which the behavior was intentional or irresponsible.

Factors pertinent to the determination of what sanction applies include, but are not limited to; the nature and severity of the conduct at issue, as well as the circumstances surrounding the violation; the impact of the misconduct upon the Complainant; the prior disciplinary history of the Respondent (shared with the Hearing Officer only upon a finding of responsibility); previous University responses to similar conduct; the impact on the Respondent of separating them from their education (when considering expulsion or suspension); and the interests of the University and its community. The sincerity demonstrated by the Respondent in their willingness to accept responsibility for their actions may be a mitigating factor in the determination of sanctions on a case-by-case basis.

The broad range of sanctions for students includes, but is not limited to, the following:

- Revocation of degree; (if the Respondent graduates prior to the conclusion of the disciplinary process)
- Revocation of alumni privileges (if the Respondent graduates prior to the conclusion of the disciplinary process));



- Expulsion;
- Suspension for an identified time frame or until satisfaction of certain conditions, or both;
- Disciplinary probation (formal recognition that a student is not currently in good disciplinary standing with the University) for an identified time frame or until satisfaction of certain conditions, or both;
- Removal from student housing;
- Restriction from University premises;
- Dismissal or restriction from University employment;
- Temporary or permanent separation of the parties (by way of example only: change in classes, reassignment of residence, no contact orders, limiting geography where parties may go on campus) with additional sanctions for violating orders;
- Successful completion of educational or training programs;
- Successful completion of alcohol and other drug awareness and abuse prevention program;
- Counseling or mentoring;
- Removal from leadership/supervisory positions within the University community;
- Revocation of honors or awards;
- Loss of University privileges (i.e., using University athletic facilities, parking on campus, using the campus library, utilizing the dining hall);
- Community service;
- Reprimand;
- Restitution;
- Warning;
- Permanent or time-limited restrictions from participation in certain University programs or activities; and
- any other discretionary sanctions that are directly related to the violation or conduct and that are aimed at eliminating Title IX Misconduct, preventing its recurrence, and addressing its effects on the Complainant and, if applicable, the University community.

If the Hearing Officer finds that there has been a violation of this policy, the Hearing Officer may consult with the Title IX Coordinator about the sanction level, but the Hearing Officer retains the sole discretion to impose the sanction. The Hearing Officer will provide a written determination that includes the appropriate sanction to the Title IX Coordinator for Students. The Title IX Coordinator for Students will send the determination simultaneously to the parties, along with information about how to file an appeal. The determination regarding responsibility becomes final either on the date that the University provides the parties with the written determination of the result of the appeal, if an appeal is filed, or if an appeal is not filed, the date on which an appeal would no longer be considered timely. Sanctions and remedies determined by the Hearing Officer will not be imposed prior to the outcome becoming final.

The Respondent is an Employee:

Emory may impose a range of sanctions and protective measures following a final determination of a violation of this Policy. The sanctioning decision will be informed by the degree to which the behavior was intentional or irresponsible. Sanctions imposed on

those individuals who have been found to be in violation of this Policy shall be commensurate with the severity and/or frequency of the conduct and shall be adequate and sufficient to prevent such conduct in the future. The broad range of sanctions for employees includes, but is not limited to, the following:

- An apology to the Complainant;
- A verbal or written reprimand;
- A requirement to attend remedial training;
- Restorative justice sessions;
- Appropriate workplace restrictions;
- Denial of a merit pay increase or other benefit;
- Denial of promotion;
- Reassignment;
- Suspension;
- Separation from the University; or
- Any other discretionary sanctions that are directly related to the violation or conduct and that are aimed at eliminating Title IX Misconduct, preventing its recurrence, and addressing its effects on the Complainant and, if applicable, the University community.

If the Hearing Officer finds that there has been a violation of this policy, the Title IX Coordinator will present the findings to the appropriate authority. After consulting with the Department of Title IX and others as needed, the appropriate authority will determine the sanction. Immediately thereafter, the appropriate authority must notify the Department of Title IX of the sanctions to be imposed upon the Respondent. Additionally, the appropriate authority must notify the Department of Title IX if the faculty or staff member is currently serving the University under a grant program.

The Title IX Coordinator for Faculty and Staff will then send the determination simultaneously to the parties, along with information about how to file an appeal. The determination regarding responsibility becomes final either on the date that the University provides the parties with the written determination of the result of the appeal, if an appeal is filed, or if an appeal is not filed, the date on which an appeal would no longer be considered timely.

Failure to comply with any sanction will not only be considered a violation of this Policy, but also may be considered a violation of other University policies and will be referred to the appropriate office or division for handling.

The Respondent is a Third Party:

The University's ability to take appropriate corrective action against a Third Party will be determined by the nature of the Third Party's relationship to the University. The Title IX Coordinator will determine the appropriate manner of resolution in accordance with the University's commitment to a prompt and equitable process and consistent with state and federal law, regulations, guidance, and this Policy.

If the Respondent is a University Employee and/or Student but acting outside their Employee/Student capacity, the Third-Party Procedures may apply. The Title IX

Coordinator will determine which Procedures apply based upon the facts and circumstances, such as whether the Respondent's status as a Third Party or Employee/Student predominates in the context of the Prohibited Conduct.

5. Appeals

Both parties have the right to appeal the University's dismissal of a Formal Complaint, or any allegations therein, and the outcome of the hearing on the following grounds:

- Procedural irregularity that affected the outcome of the matter, which may include, but is not limited to, failure to objectively evaluate all relevant evidence, including inculpatory and exculpatory evidence;
- New evidence that was not reasonably available at the time the determination regarding responsibility or dismissal was made, that could affect the outcome of the matter; and/or
- The Title IX Coordinator, investigator(s), or members of the hearing board had a conflict of interest or bias for or against Complainants or Respondents generally, or the individual Complainant or Respondent that affected the outcome of the matter.

Appeals may be submitted in writing by a Complainant or Respondent to the appropriate University Title IX Coordinator. Appeals must be filed within seven (7) business days of the date that the Title IX Coordinator sends the parties the written determination.

Upon receipt of an appeal the University Title IX Coordinator shall:

- 1) Notify the other party in writing.
- 2) Give the non-appealing party seven (7) business days from the date the party receives notice to submit a written statement challenging the appeal.
- 3) Appoint an appellate review panel of three (3) members from a pool of trained faculty, staff, and graduate/professional students with appropriate knowledge and training to determine if there is a reasonable basis for changing the outcome of a hearing or the sanction imposed.

The appeals panel will review the materials within 10 business days of receipt of the appeal, examining all documentation of the hearing to determine if there is a reasonable basis for changing the outcome. The appeals panel will issue a written determination of the appeal and the rationale for the result, or may request that the Title IX Coordinator take the following steps:

- Affirm the original finding and sanction;
- Affirm the original finding but issue a new sanction, which may be of greater or lesser severity;



- Remand the case back to the hearing board or a new hearing board to correct a procedural or factual defect; or
- Dismiss the case if there was a procedural or factual defect that cannot be remedied by remand.

The appeal panel's determinations are **final and not appealable**. However, the outcome of a remanded case may again be appealed under this provision. Procedures on remand to the hearing board will be directed and communicated to the parties by the Title IX Coordinator and will, to the extent possible, comply with analogous, original time frames for the Hearing Board's resolution.

Both parties shall receive simultaneous written notice of the outcome of the appeal. The determination regarding responsibility becomes final on the date that the Title IX Coordinator provides the parties with the written decision of the result of the appeal.

This appeal process is specifically to challenge the outcomes in the Title IX process and does not alter or limit the ability for an employee to appeal an employment action under any other applicable policy.

APPENDIX B

NON-TITLE IX PROHIBITED CONDUCT PROCEDURE FOR STUDENTS

A. General Provisions

1. Equitable Treatment of the Parties

The University's response shall treat Complainants and Respondents equitably by offering Supportive Measures, by providing Remedies to a Complainant where a determination for Prohibited Conduct has been made against the Respondent, and by following the grievance procedure as set forth herein before imposing any disciplinary sanctions or other actions that are not Supportive Measures, against a Respondent.

2. Reasonably Prompt Time Frames

The University will seek to resolve every investigation and any subsequent adjudication within 120 days from the receipt of a complaint. The overall time frame may be extended for good cause as necessary so that the grievance process may be carried out in a thorough and comprehensive manner that ensures the integrity of the process. The reasons for extension of the time frame also include, but are not limited to: compliance with a request from law enforcement; accommodations to ensure the availability of witnesses; consideration of exam periods, school breaks, vacations or inclement weather; complexities of a specific case, including the number of witnesses and volume of information provided by the parties; and other extenuating circumstances. The Non-Title IX Conduct Official will notify the parties in writing of any extensions of the time frame.

To the extent a deadline falls on a University holiday, the deadline will be effective on the next business day.

B. Preliminary Assessment of a Prohibited Conduct Report or Complaint

1. Intake Meeting with Complainant and Respondent

The Title IX Coordinator for Students, or designee, will conduct an intake meeting to inform the Complainant and the Respondent of their rights and responsibilities, the prohibition against retaliation, further provide information about supportive measures, discuss the Prohibited Conduct allegations and information about the investigative and adjudication processes.

2. Initial Assessment of a Formal Complaint

Written Notice. Upon receipt of a Formal Complaint, the Title IX Coordinator for Students must provide the following written notice to the parties whose identities are known by the University:



- i. Notice of the University's Prohibited Conduct grievance process, including an informal resolution process.
- ii. Notice of the allegations potentially constituting Prohibited Conduct, including sufficient details known at the time and with sufficient time to prepare a response before any initial interview. Sufficient details include: the identities of the parties involved in the incident, if known; the conduct allegedly constituting Prohibited Conduct; and the date and location of the alleged incident, if known.

C. Methods of Resolution

Prohibited Conduct may be resolved by using an informal or a formal process. The Title IX Coordinator for Students will discuss these two options for resolution during initial meetings with the Complainant and Respondent, as well as upon conclusion of the preliminary assessment process, if appropriate. Either party may request one of these forms of resolution, but for informal resolution, both parties must agree to submit to the informal resolution process.

1. Informal Resolution

Parties have the option of informally resolving complaints of alleged sexual misconduct. For the informal resolution process to commence, however, both parties must agree to submit to the informal resolution process. The University has the discretion to determine whether the nature of the reported conduct is appropriate for informal resolution. With the informal resolution process, the Respondent is never charged with a Policy violation and is not found responsible for a Policy violation; accordingly, expulsion or suspension of the Respondent are not potential outcomes in a matter that has been decided via an informal resolution process.

If the parties agree to submit to alternative resolution, then the Department of Title IX will conduct a short investigation of the matter; the Title IX Coordinator for Students will meet with the parties and collect information relevant to the matter, but may not necessarily speak to any witnesses identified by either party.

Both parties retain the right to end the informal resolution process at any time prior to signing the Outcome Agreement Form and initiate the formal process.

Two examples of informal resolution processes, mediation and restorative justice circles, are described in further detail below.

a) Administrative Resolution

One type of informal resolution is administrative resolution. If the parties agree to submit to administrative resolution, then the Title IX Coordinator works with each party separately to determine mutually agreeable outcomes. Both parties submit a written statement that includes basic facts about allegations and the parties' intended outcomes. After receiving the written statements, the Title IX Coordinator for Students offers both parties the opportunity to review and respond to the statements in writing.

The Title IX Coordinator will review the written statements, including the parties' suggested outcomes, and will determine which outcome(s) should apply to the Respondent, taking into consideration the parties' feedback on the appropriate outcome(s). Some examples of outcomes include, but are not limited to: counseling, restitution, No Contact Orders, and educational programming. The factors pertinent to the determination of what outcome is appropriate include, but are not limited to: the nature and severity of the conduct at issue, the circumstances surrounding the violation, the impact of the misconduct upon the Complainant, and the interest of the University and its community. The Title IX Coordinator may meet with each party separately to obtain feedback on the appropriate outcome, to which the parties must agree. If the parties come to an agreement regarding the outcome, then the appropriate Title IX Coordinator will issue an Outcome Agreement Form via email to the parties, and the case will be closed.

Either party's failure to abide by the terms of the Outcome Agreement Form may subject them to disciplinary proceedings and sanctions under their school's Code of Conduct. Both parties retain the right to end the Administrative Resolution process at any time prior to signing the Outcome Agreement Form and to initiate the formal process.

b) Mediation

A party may request mediation from the Title IX Coordinator for Students at any stage of the process before a hearing is scheduled. Mediation will be used only with the consent of both the parties, and either has the right to terminate the mediation process and resume the regular disciplinary process at any time.

The mediation process will typically commence within ten (10) business days after consent to mediate is received from both the Complainant and the Respondent and will continue until concluded or terminated either by one of the parties or the Department of Title IX. During mediation, the investigation and time frames will be stayed. If the mediation results in a resolution, the disciplinary process will be concluded, and the matter will be closed. If a resolution cannot be reached, the disciplinary process will proceed as it would have before the mediation process.

Failure by either party to adhere to the terms outlined in the mediation may result in disciplinary action and sanctions under the Conduct Code for the school in which the offending party is enrolled.

c) Restorative Justice Circles

Restorative Justice Circles ("Circles") are an example of an informal resolution process that provides an opportunity for community members to come together to address harmful behavior in a process that explores harms and needs, obligations, and necessary engagement. Circles bring all parties together to meet, talk about what happened, and settle on a plan to repair the harm. Rather than focusing on what policies have been violated, Circles instead help identify who has been hurt and what must be done to repair the harm.

2. Formal Resolution

When a matter is dismissed under a Title IX Grievance procedure, the Title IX Coordinator for Students will notify the Complainant and the Respondent, in writing, that the process will proceed under the procedures set forth in this section.

After providing notice to the Complainant and Respondent, the Title IX Coordinator for Students will assign an investigator to promptly and thoroughly investigate the complaint to determine whether a violation of the Policy has occurred.

Please Note: The Department of Title IX may consolidate multiple reports against a single Respondent or group of Respondents into one investigation if the evidence related to each incident would be relevant and probative in reaching a determination on the other incident(s).

a) Investigation and Adjudication Resolution Process

The University's response to the alleged discrimination will depend upon the severity and pervasiveness of the alleged conduct, which may be determined by the existence of prior incidents of harassment or discrimination. Depending upon the severity of the offense, however, a single violation of this Policy may be sufficient to support a violation.

Upon receipt of a complaint, the Title IX Coordinator for Students will assign an investigator to the case. The investigator will investigate, within 120 business days, the circumstances of the allegations. However, if additional time is needed to conduct a thorough investigation, DTIX may, at its discretion, extend the time for completing the investigation as reasonably necessary. In this case, DTIX will notify the Complainant and the Respondent of the extension.

The investigation will include interviews with the Complainant, Respondent, and any material witnesses identified, as well as a review of any documents or other evidence. The Complainant and Respondent will be kept apprised of the conduct of the investigation and will be given the opportunity to provide any additional relevant information to the investigator, including the names of additional witnesses to contact and/or additional documents to review before the investigation is closed.

The level of proof required to determine whether or not a Respondent is responsible for the allegations shall be by a preponderance of the evidence, i.e., it is more likely than not that alleged conduct occurred.

After the investigation, the investigator will submit a written Report of Investigation to the Complainant and Respondent detailing the information that was collected and will allow them to submit written statements responding to or clarifying information found in the report; any material submitted by the parties will be attached to the Report of Investigation as appendices. The parties shall have five (5) business days to supplement the report. The investigator shall finalize the report, including a determination of whether, based upon a preponderance of the evidence, a policy violation occurred and if so, a sanction recommendation.

Upon finalizing the Report of Investigation, the investigator shall submit the report to the Title IX Coordinator for Students for the sole purpose of making a final determination on the recommended sanction.

The Title IX Coordinator for Students will provide a written notice of Final Outcome to both Complainant and Respondent within seven (7) business days after receiving the final Report of Investigation.

The final written determination will state whether, based on DTIX's investigation, there was a violation of this Policy, imposed sanctions, and information regarding parties' right to appeal. The Complainant and Respondent will be promptly notified of the final determination. The Department of Title IX shall have independent authority to impose sanctions for students.

b) Sanctions

Emory may impose a range of sanctions and protective measures following a determination of a violation of this Policy. The sanctioning decision will be informed by the degree to which the behavior was intentional or irresponsible.

Factors pertinent to the determination of what sanction applies include, but are not limited to, the nature and severity of the conduct at issue, as well as the circumstances surrounding the violation; the impact of the misconduct upon the Complainant; the prior disciplinary history of the Respondent (shared with the hearing board only upon a finding of responsibility); previous University responses to similar conduct; the impact on the Respondent of separating them from their education (when considering expulsion or suspension); and the interests of the University and its community. The sincerity demonstrated by the Respondent in their willingness to accept responsibility for their actions may be a mitigating factor in the determination of sanctions on a case-by-case basis. Although sanctions are determined based upon the facts of each case, students found responsible for violating this Policy, should be prepared to be temporarily or permanently separated from the University.

The broad range of sanctions includes, but is not limited to, the following:

- Revocation of degree;
- Revocation of alumni privileges (if the Respondent graduates prior to the conclusion of the disciplinary process);
- Expulsion;
- Suspension for an identified time frame or until satisfaction of certain conditions, or both;
- Disciplinary probation (formal recognition that a student is not currently in good disciplinary standing with the University) for an identified time frame or until satisfaction of certain conditions, or both;
- Removal from student housing;
- Restriction from University premises;
- Dismissal or restriction from University employment;
- Temporary or permanent separation of the parties (by way of example only: change in classes, reassignment of residence, no contact orders, limiting



geography where parties may go on campus) with additional sanctions for violating orders;

- Successful completion of educational or training programs;
- Successful completion of alcohol and other drug awareness and abuse prevention program;
- Counseling or mentoring;
- Removal from leadership/supervisory positions within the University community;
- Revocation of honors or awards;
- Loss of University privileges (i.e., using University athletic facilities, parking on campus, using the campus library, utilizing the dining hall);
- Community service;
- Reprimand;
- Restitution;
- Warning; and
- Any other discretionary sanctions that are directly related to the violation or conduct and that are aimed at eliminating sexual misconduct, preventing its recurrence, and addressing its effects on the Complainant and, if warranted, the University community.

The University reserves the right to place a hold on the diploma, degree certification, official transcripts, or registration of the Respondent even though he or she may have completed all academic requirements. The diploma, degree certification, official transcripts, or registration may be withheld until any allegations of misconduct are resolved and/or sanctions as well as other conduct obligations are completed.

c) Appeals

Both parties shall have the right to appeal the outcome on any of the following grounds:

- 1) To consider new information, sufficient to alter the decision, or other relevant facts not brought out in the investigation because such information was not known or knowable to the appealing party during the investigation.
- 2) To allege a significant procedural error within the investigative process that may have substantially impacted the fairness of the investigation, the decision, and/or the sanction.
- 3) To allege that the sanction imposed is overly excessive or insufficient based upon the weight of the information considered by Title IX Coordinator for Students.

Appeals must be submitted in writing to University Title IX Coordinator within seven (7) business days from the day the parties are notified about the outcome of the case. Upon receipt of an appeal, the University Title IX Coordinator will send a copy of the appeal to the other party, who will have seven (7) business days to file a response, if the party chooses to do so.



The University Title IX Coordinator will appoint an appellate review panel of three (3) members from a pool of trained faculty, staff, and graduate/professional students with appropriate knowledge and training whose job it is to determine if there is a reasonable basis for changing the outcome or the sanction imposed. The appeals panel will review the materials within ten (10) business days of receipt of the appeal, examining the Report of Investigation and appeal(s) to determine if there is a reasonable basis for changing the outcome or sanction. The appeals panel will issue a written determination of the appeal, or may request that DTIX takes the following steps:

- Affirm the original finding and sanction;
- Affirm the original finding but issue a new sanction, which may be of greater or lesser severity;
- Remand the case back to the Department of Title IX to correct a procedural or factual defect; or,
- Dismiss the case if there was a procedural or factual defect that cannot be remedied by remand.

The appeal panel's determinations are final and not appealable. Both parties shall receive simultaneous written notice of the outcome of the appeal.

This appeal process is specifically to challenge the outcomes in the Prohibited Conduct process and does not alter or limit the ability for an employee to appeal an employment action under any other applicable policy.

**APPENDIX C — SEXUAL MISCONDUCT RESOURCES
 (ATLANTA AND OXFORD CAMPUSES)**

ATLANTA CAMPUS

	Seeking information and support	Obtaining counseling	Seeking accommodations or interim measures	Bringing formal Title IX or criminal charges
Counseling and Psychological Services (CAPS) 404-727-7450 http://studenthealth.emory.edu/cs/ <i>*Confidential Resource*</i>	X	X		
Student Health Services 404-727-7551 (press 1) http://studenthealth.emory.edu/hs/ <i>*Confidential Resource*</i>	X	X		
Office of Spiritual and Religious Life 404-727-6226 or 404-727-4070 http://www.religiouslife.emory.edu/ <i>*Confidential Resource*</i>	X	X		
Emory DeKalb Hospital 2701 North Decatur Road Decatur, GA 30033 404-501-1000 <i>*Confidential Resource*</i>	X	X		
Title IX Coordinator for Students (Dr. Judith Pannell) 404-727-4079 http://equityandinclusion.emory.edu/title-ix/index.html	X		X	X
The Office of Respect – for sexual assault survivors (470) 270-5360 http://healthpromotion.emory.edu/respect/advocacy/index.html	X			X
Emory Police Department 404-727-6111 http://campserv.emory.edu/public-safety/police/index.html	X			X

Deputy Title IX Coordinators http://equityandinclusion.emory.edu/title-ix/coordinators.html	X		X	X
Office of Equity and Inclusion 404-727-9867 http://equityandinclusion.emory.edu/about/index.html	X		X	X
Student Case Management and Intervention Services http://success.emory.edu/index.html	X			
The University Ombuds Office https://ombuds.emory.edu/	X			
Faculty and Staff Assistance Program (FSAP) http://www.fsap.emory.edu/	X	X		

OXFORD CAMPUS

	Seeking information and support	Obtaining counseling	Seeking accommodations or interim measures	Bringing a formal Title IX complaint or criminal charges
Counseling and Career Services (CCS) 770-784-8394 https://oxford.emory.edu/life/thriving-at-oxford/counseling-and-career.html <i>*Confidential Resource*</i>	X	X		
Student Health Services 770-784-8376 https://oxford.emory.edu/life/thriving-at-oxford/student-health-services.html <i>*Confidential Resource*</i>	X	X		
Office of Spiritual and Religious Life (Chaplain Lyn Pace) 770-784-8392 https://oxford.emory.edu/life/thriving-at-oxford/religious-and-spiritual-life.html <i>*Confidential Resource*</i>	X	X		
Emory Hillandale Hospital (Lithonia) 280 DeKalb Medical Parkway Lithonia, GA 30058	X	X		



404-501-8000 <i>*Confidential Resource*</i>				
Title IX Coordinator for Students (Dr. Judith Pannell) 404-727-4079 http://equityandinclusion.emory.edu/title-ix/index.html	X		X	X
Title IX Coordinator for Faculty and Staff (Marti McCaleb) http://equityandinclusion.emory.edu/title-ix/index.html	X		X	X
Brittany McDermott <i>Health Educator & Coordinator of Student Support</i> brittany.mcdermott@emory.edu	X		X	X
Emory Police Department 770-784-8377 http://campserv.emory.edu/public-safety/police/index.html	X			X
Rhiannon Hubert , Deputy Title IX Coordinator (Oxford) 770-784-8445	X		X	X
Megan Pendleton , Deputy Title IX Coordinator (Oxford) 770-784-4527	X		X	X
Office of International Student Programs 770-784-8702 http://oxford.emory.edu/life/international-students.html	X			

Other Resources (Available to Atlanta and Oxford Campuses)

All Emergencies (any campus/location): 9-1-1

Emory Police Department TIPS line (allows for anonymous and confidential reporting; *not an emergency number*):

404-727-TIPS (8477)

<http://campserv.emory.edu/public-safety/police/services/>

Emory Trust Line (allows for anonymous and confidential reporting 24/7):

1-888-550-8850



<http://iad.emory.edu/compliance/trustline/index.html>

Emory Public Safety's Victim and Survivor Resources:

<http://campserv.emory.edu/public-safety/police/services/survivor-resources.html>

DeKalb County Day League (formerly DeKalb Rape Crisis Center; services DeKalb, Newton, and Rockdale Counties):

404-377-1428 for 24-hour confidential crisis line / 404-377-1429 for free counseling service

<http://www.dayleague.org/>

Georgia's 24-hour Domestic Violence Hotline: 800-334-2836

Georgia Legal Aid: <https://www.georgialegalaid.org/>

Georgia Network to End Sexual Assault (GNESA): <http://www.gnesa.org/>

Center for Changing our Campus Culture (nationwide resource): <http://changingourcampus.org/>

U.S. Department of Education, Office of Civil Rights (OCR): Complaints of discrimination, harassment, and retaliation may be directed at OCR. For more information, please see

<https://www2.ed.gov/about/offices/list/ocr/index.html>.

APPENDIX D**DEPUTY TITLE IX COORDINATORS****Candler School of Theology**

Dr. Anne Burkholder
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Rollins School of Public Health

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Nell Hodgson Woodruff School of Nursing

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School of Law

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Goizueta Business School

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Goizueta Business School
1330 Clifton Rd., Room 212
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Oxford College

Rhiannon Hubert
Asst. Dean for Campus
Life/Director for Student
Involvement & Leadership
Candler Hall / Student Center
100 Hamill Street
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rhiannon.hubert@emory.edu

Megan Pendleton
Director, Office of Diversity & Inclusion
Oxford Student Center
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megan.pendleton@emory.edu

School of Medicine

Dr. J. William ("Bill") Eley
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APPENDIX E

CONSIDERATIONS OF INCAPACITATION

For determining whether incapacitation impacts consent, the following explanations should be considered as guideposts for determinations; however, not all factors need to be present to support a finding:

- The question of incapacitation does not need to rely on medical expertise/judgment or the legal standard of intoxication. The determination of incapacitation from drugs or alcohol can be properly based on objective and reasonably apparent indications.
- Incapacitation is a state beyond impairment or intoxication and therefore it is important to identify how and to what extent a person's ability to make a decision about sexual activity was affected.
- Incapacitation, by definition, means that a person's decision-making ability was affected, so much so that a person does not have awareness of consequences; have the ability to make informed, rational judgments; or the capacity to appreciate the nature and quality of the act.
- Mental and/or physical helplessness may result in incapacity. Mentally helpless means a person is rendered temporarily incapable of appraising or controlling one's own conduct. Physically helpless means a person is physically unable to verbally or otherwise communicate consent or unwillingness to an act.
- Consider whether the person against whom Prohibited Conduct is alleged to have occurred was asleep, unconscious, or unaware that sexual activity was occurring.
- Consider whether there were common and obvious warning signs that show that a person may have been incapacitated during the relevant time frame or approaching incapacitation. Although every individual may show signs of incapacitation differently, and the impact of alcohol and other drugs varies from person to person, typical signs include slurred or incomprehensible speech, unsteady gait, combativeness, emotional volatility, vomiting, or incontinence.
- A person who is incapacitated may not be able to understand some or all of the following questions: "Do you know where you are?" "Do you know how you got here?" "Do you know what is happening?" "Do you know whom you are with?" (Who, what, where, when, why?)
- Whether sexual activity with an incapacitated person constitutes Prohibited Conduct may depend on whether the Respondent knew or should have known of the Complainant's incapacitation. What the Respondent should have known will be assessed based on objective and reasonably apparent indications when viewed from the perspective of a sober, reasonable person in the Respondent's position, unless the evidence shows that the Respondent subjectively understood that the Complainant was incapacitated.

- That a Respondent may in fact have been unaware of the Complainant’s incapacity is irrelevant to this analysis, particularly where the Respondent’s failure to appreciate the Complainant’s incapacitation resulted from the Respondent’s failure to take reasonable steps to determine the Complainant’s incapacitation or where the Respondent’s own incapacitation (from alcohol or drugs) caused the Respondent to misjudge the Complainant’s incapacity.

Related Links

- Policy 1.3: Equal Opportunity and Discriminatory Harassment Policy (<http://policies.emory.edu/1.3>)
- Policy 4.119: Mandated Child Abuse Reporting (<http://policies.emory.edu/4.119>)
- Policy 8.16: Title IX Reporting Exception for Research (<http://policies.emory.edu/8.16>)

Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Yolanda Buckner, University Title IX Coordinator	404-727-8205	yolanda.buckner@emory.edu

Revision History

- Version Published on: August 14, 2020: Updated policy to comply with the U.S. Department of Education’s New Title IX Regulations
- Version Published on: March 15, 2021 removed the Office of Respect’s semi-confidential source status
- Version Published on: June 29, 2021 updated Coordinators’ contact information



Policy 8.7

Mandatory Student Insurance

Responsible Official:	VP and Dean for Campus Life
Administering Division/Department:	Campus Life
Effective Date:	August 31, 2007
Last Revision Date:	September 21, 2018

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

Effective Fall Semester 2006, Emory University requires that all new and continuing degree-seeking students and all international students (including Oxford College) either have health insurance or purchase the University-sponsored plan.

Applicability

Students

Policy Details

In order to waive enrollment in the Emory Student Health Insurance Plan, students must show evidence of enrollment in a United States domiciled health insurance plan that meets specific waiver criteria. Each academic year, new and



continuing degree-seeking students and all international students who do not wish to be enrolled in the Emory Student Health Insurance Plan must successfully complete an online waiver process prior to the first day of Fall Semester classes. Students may access the waiver process via their OPUS account at www.opus.emory.edu. Students who do not complete a successful waiver will be automatically enrolled in the annual Emory Student Health Insurance Plan and billed for the annual premium via Student Financial Services.

New and transfer students entering in Spring or Summer Semester who do not wish to be enrolled in the Emory Student Health Insurance Plan will complete the on line waiver process prior to the start of classes for their first semester at Emory. These mid-year admits will then join all continuing students in completing the process for the subsequent Fall Semester.

Emory students who have failed the waiver process (or failed to complete the process by the deadline date) may appeal the decision to enroll them in the University-sponsored plan. The Mandatory Student Health Insurance Appeals Committee, consisting of students, faculty and staff, reviews and votes upon requests for reconsideration of denied waivers.

Individual Emory undergraduate, graduate and professional colleges and schools may have a more restrictive mandatory health insurance policy in order to meet the needs of their individual academic discipline and students.

Definitions

n/a

Related Links

- Current Version of This Policy: <http://policies.emory.edu/8.7>
- OPUS-access waiver forms (<http://www.opus.emory.edu>)

Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Student Health Services	404-727-7560	shsinsurance@emory.edu
Policy Posting	Campus Life Central	404-737-4364	campuslife@emory.edu

Revision History

- Version Published on: [Sep 21, 2018](#) (*Updated contact email*)
- Version Published on: [Apr 02, 2007](#) (*Original Publication*)

Policy 8.8

Alcohol and Drug Abuse Policy

Responsible Official: VP and Dean for Campus Life

Administering Division/Department: Campus Life

Effective Date: March 31, 2007

Last Revision: March 2, 2020

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Definitions](#)
- IV. [Policy Details](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

Emory University is committed to the health and well-being of its faculty, staff, and student body. Alcohol and drug misuse and abuse can be detrimental to one's overall physical and emotional health; can be detrimental to academic and/or professional performance; and can adversely impact family, friends and co-workers.

As a recipient of federal grants and contracts, Emory University adheres to the provisions of the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act, as amended. As administrator of certain state-funded financial aid programs for students, Emory University also adheres to Georgia's Drug-Free Postsecondary Education Act of 1990.

This policy is also designed to convey the University's care and concern for its members and their well-being, given that alcohol and other drug misuse on college campuses is a major public health concern. In order to foster academic achievement, personal success and wellness, and to promote the safety of the community, the University has adopted the following tenets to guide the prevention of alcohol and other drug misuse:

- Emory University complies with and upholds all applicable federal, state, and local laws related to alcohol, illicit drugs and controlled substances. Violations of such laws that come to the attention of University officials may be addressed within the University or through prosecution in the courts, or both.
- In instances where individuals are found to be in violation of this policy, the University's response will stress individual accountability, personal development and education, and connection to appropriate health services, as well as the effect on impacted parties and the community.
- The University strives to create an environment that supports individuals who choose not to use alcohol and individuals who choose to use alcohol legally and in a low risk way. Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.

- The University encourages individuals with prescription medications to safely and legally use such medications in compliance with their prescriptions. The misuse of prescription medication or other controlled substances is not tolerated.
- The sale, distribution or use of illegal drugs is not permitted.
- The illegal sale, distribution or use of alcohol is not permitted.
- The sale of alcoholic beverages without an applicable license is not permitted.
- The University seeks to create an environment of personal development through education and supportive community. It supports individuals seeking services for alcohol, tobacco and/or other drug misuse and makes confidential services available to them.
- Emory is a Tobacco-Free Campus. The use or sale of tobacco products in or on Emory owned or Emory leased property is prohibited. See Policy 4.113 Tobacco-Free Environment for more information (<http://policies.emory.edu/4.113>), including resources for tobacco cessation.

Applicability

This policy applies to all Emory University full-time, part-time and temporary faculty, staff, and students for all University-Sponsored Events and to all activities conducted on University-owned property.

Emory University permits the purchase and use of alcoholic beverages with University funds under certain conditions but expects faculty, staff and students to take measures to prevent alcohol and drug misuse. Specific offices have been designated to provide clarification about the procedures and guidelines for event planning, as well as services and resources available to faculty, staff and students for reducing at-risk behaviors related to alcohol and drug use. The contact information for, and responsibility of, each of these offices is listed at the conclusion of this policy under “Contact Information.”

Definitions

University Housing—includes University-owned and/or managed student residential facilities such as residence halls, fraternity and sorority housing, theme houses, and apartments.

University-Sponsored Event—is an event hosted, organized or financed by a University-Sponsored Student Organization or by a department or division of the University. University-Sponsored Events include, but are not limited to, any internal or external sponsored events held on campus; fraternity and sorority events; and campus organization, divisional or departmental events.

University-Sponsored Student Organization – is a student organization, including sororities and fraternities, undergraduate, graduate and professional organizations, that (1) is registered with the University; (2) is affiliated with a University department or division that acknowledges the organization as part of its activities; or (3) sponsors activities that relate to the education, research and community service missions of the University or to the goals or objectives of the department or division of affiliation.

Policy Details

1. Standards of Conduct

2. General Restrictions as of the Policy Effective Date

2.1. Possession of Alcohol

2.2. Other Drugs

2.3. False Identification

3. Sanctions and Penalties

4. Notification of Drug-Related Convictions

4.1. Employee Notification of Drug-Related Convictions

4.2. Student Notification of Drug-Related Convictions

5. Advertisements and Promotions

5.1. Advertisements and Promotion of Events

5.2. Use of Name, Logo, Seal, Insignia or Mascot

6. Purchasing Alcohol

7. Storage of Alcohol

8. Use of Alcohol in University Housing

9. Use of Alcohol at Athletic Events

10. Procedures for Events with Alcohol

10.1. On-Campus and Off-Campus Events with Alcohol

10.2. Additional Food and Beverages

11. Additional Information

11.1. Health Risks

11.2. Resources for Education, Consultation and Counseling

11.3. Distribution

11.4. Additional Policies Regarding Alcohol

11.5. Review

1. Standards of Conduct

All Emory University faculty, staff and students are prohibited by the University from unlawfully using, possessing, manufacturing, dispensing or distributing alcohol, controlled substances or illegal drugs on University-owned property, University Housing or at University-Sponsored Events.

Emory University expects all of its faculty, staff and students to comply with any applicable federal, state or local laws pertaining to the use, possession, manufacture, dispensation or distribution of alcohol, controlled substances, or illegal drugs.

2. General Restrictions as of the Policy Effective Date

2.1. Possession of Alcohol

Possession or use of alcoholic beverages by persons under 21 years of age, or distribution or furnishing of alcoholic beverages to persons under 21 years of age or who are intoxicated, is prohibited.

2.2. Other Drugs

It is illegal for an individual to manufacture, possess, use, dispense, sell or distribute controlled substances or illegal drugs (as defined by state and federal law).

2.3. False Identification

It is illegal for an individual to provide false name, address or date of birth for the purpose of acquiring alcohol or other drugs.

3. Sanctions and Penalties

3.1. Any member of the Emory University faculty, staff or student body who violates this Policy shall be subject to corrective disciplinary actions and penalties up to and including expulsion from University academic programs, termination of employment and referral to the appropriate federal, state or local authorities for prosecution in the courts.

Alleged violations of this policy by an individual undergraduate student shall be referred to the Office of Student Conduct. Alleged violations of this policy by an individual graduate/professional student shall be referred to the established disciplinary body of the school in which the student is enrolled. The Office of Student Conduct and the established disciplinary bodies of the graduate/professional schools shall have the authority to make appropriate referrals and to impose on students and student organizations such sanctions for violations of the policy as it may deem appropriate, including but not limited to participating in educational programs, parental notification and/or loss of privileges.

3.2. Persons convicted of violating federal and/or state laws prohibiting the unlawful use, possession, dispensation, and distribution of alcohol, controlled substances, or illegal drugs may face stiff sanctions such as heavy fines; incarceration for various periods of time, including life; forfeiture of assets; or suspension or loss of driver's, business or professional licenses. Federal, state and/or local officials are responsible for enforcing these laws and any sanctions for such crimes will be determined by the courts. The University does not manage the criminal process but will cooperate with legal authorities in a manner consistent with its legal obligations.

3.3. The Higher Education Act states that a federal or state drug conviction can disqualify a student for Federal Student Aid funds. As of the effective date of the policy, the period of ineligibility depends on whether the conviction was for sale or possession during a period of enrollment in which a student received federal student aid and whether the student had previous offenses, ranging from one year to an indefinite period of time. A student regains eligibility the day after the period of ineligibility ends, when he or she successfully completes a qualified drug rehabilitation program, when he or she successfully passes two unannounced drug tests conducted by a qualified drug rehabilitation program; or if the conviction is reversed, set aside or otherwise rendered nugatory.

Please see the Related Links section below for the [Federal Drug Trafficking Penalties](#) and [Georgia Controlled Substance and Dangerous Drug Law](#) charts for additional information.

4. Notification of Drug-Related Convictions

As of the effective date of the policy, the following is a summary of the notification requirements upon a drug-related conviction:

4.1. Employee Notification of Drug-Related Convictions

(a) In accordance with the mandates of the Drug-Free Workplace Act of 1988, and as a condition of employment at Emory, all employees (including student employees) will:

(1) abide by the terms of this policy; and

(2) notify, as appropriate, their supervisor, vice president, administrator, dean or department head, as applicable, if they have been convicted of any criminal drug statute violation occurring in the workplace no later than five days after such a conviction. If a federal grant is involved, the Emory University Office of Sponsored Programs must be notified immediately. Failure to notify the appropriate person within the five-day period may result in disciplinary action.

(b) Within thirty (30) calendar days of receiving notice of a conviction, the person notified pursuant to Paragraph 4.1(a)(2) above shall consult with the human resources department of Emory University (human resources department may contact the Office of Equal Employment Opportunity, as appropriate), and said person shall then:

(1) take appropriate personnel action against the employee, up to and including termination, consistent with the requirement of the Rehabilitation Act of 1973, as amended, or the Americans with Disabilities Act; and/or

(2) require the employee to participate successfully, and provide evidence of such participation, in a drug-abuse assistance or rehabilitation program approved for such purposes by a federal, state or local health, law enforcement, or other appropriate agency.

4.2. Student Notification of Drug-Related Convictions

All students must abide by the terms of this policy. In accordance with the State of Georgia's Drug-Free Postsecondary Education Act of 1990, any student convicted under the laws of Georgia, the United States or any other state of any felony offense involving the manufacture, distribution, sale, possession or use of marijuana, a controlled substance, or a dangerous drug must, within ten (10) days of said conviction, report it in writing to the Emory University or Oxford College of Emory University Office of Financial Aid, as appropriate. Any student who suffers such a conviction shall, as of the date of the conviction, be denied state of Georgia funds for certain types of loans, grants or scholarships, including Georgia Higher Education Loan Program loans, student incentive grants or tuition equalization grants.

As of the effective date of the policy, the denial of state funds shall become effective on the first day of the term for which the student was enrolled immediately following either the date of conviction or the date on which the court accepts a plea of nolo contendere or formally allows a student to receive first offender treatment. The denial of funds shall continue through the end of said term.

5. Advertisements and Promotions

5.1. Advertisements and Promotion of Events

Publications of any type and in any media, including but not limited to The Wheel and other newspapers, pamphlets, flyers, and websites, that receive some or all of their funding from University sources (including the Student Activity Fee) must not accept or contain commercial advertising or other materials that promote, depict or encourage excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances. This section is not intended to restrict advertisement or promotion of curricula or research objectives involving alcohol consumption.

Depictions promoting excessive alcohol consumption including but not limited to any of the following may not be used in advertisements or in the promotion of events:

- Excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances
- All-you-can-drink activities
- Drinking games

- Price specials on alcohol
- Promotions or prizes featuring alcohol

This list is not exhaustive; it is meant to provide examples of the types of activities that are considered by the University as promoting excessive alcohol consumption.

5.2. Use of Name, Logo, Seal, Insignia or Mascot

Neither the University's name, including the names of university departments and University-Sponsored Student Organization, nor its logos, mascots, marks or other identifying indicia may be used in conjunction with any materials, references or imagery, including commercial sponsorship, related to excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances.

6. Purchasing Alcohol

Alcoholic beverages may not be purchased with any state or federal appropriated funds. For more information, contact Research Grants and Contracts.

Schools, colleges, departments, or units determine the permissibility of charging alcoholic beverages to University accounts. For more information, contact the head of the specific unit or department.

University-Sponsored Student Organizations must follow all applicable Student Government Association and Graduate Student Government Association financial policies for the purchase of any alcoholic beverages.

Fraternities and sororities recognized by the Office of Sorority and Fraternity Life are prohibited from using organizational funds to purchase alcohol.

The use of alcoholic beverages purchased with University and student activity funds as a prize in any type of contest is prohibited.

7. Storage of Alcohol

Any alcohol that is stored on campus must be kept in a place where it is not accessible by those under twenty-one years of age.

8. Use of Alcohol in University Housing

Activities that take place within University Housing are governed by applicable laws and regulations and the terms of applicable University policies, including but not limited to the Undergraduate Code of Conduct.

- Alcohol is not allowed in University Housing community spaces (such as lobbies, lounges, study rooms, or hallways) without prior approval from Residence Life and Housing Operations, with the exception of organizations that fall under the Office of Sorority and Fraternity Life. Fraternities and sororities are required to follow [Office of Sorority and Fraternity Life Social Events Policy](#) and from their respective national organizations. Other individuals or groups who wish to serve alcohol in community spaces of University Housing are required to complete the [Campus Life online registration form](#).
- Common containers (such as kegs and punch bowls) are not permitted.
- Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.
- Brewing or production of alcohol beverages is prohibited.

Residents are required to inform all guests of the aforementioned regulations and to make sure their guests abide by all provisions of this policy. In cases where the guest of a resident violates this policy, the hosting resident may be subject to disciplinary consequences.

Residents under the age of 21:

- Are not permitted to be in possession of, consume or store alcohol in any University Housing, consistent with state law.

Residents age 21 and over:

- Are permitted to be in possession of, consume or store alcohol in University Housing, consistent with state law, with the exception of those at Oxford College. Possessing, consuming and/or storing alcohol is prohibited in all residence halls at Oxford College.

9. Use of Alcohol at Athletic Events

Alcoholic beverages may not be possessed, consumed or served at University intramural and club sports contests or intercollegiate athletic contests but may be allowed at adjacent events. Interpretation of "adjacent events" will be under the authority of the Director of Athletics or his/her staff, as appropriate.

The possession, consumption and purchase of alcoholic beverages, tobacco and/or illegal drugs by any student-athlete or manager is prohibited while participating in an intercollegiate, club, intramural or recreational athletics activity, including such activities taking place off campus, from the time the team leaves campus until the time the team returns to campus.

Student-athletes should refer to Emory's Student-Athlete handbook for information regarding NCAA banned substances or contact their team physician or certified athletic trainer with any questions.

10. Procedures for Events with Alcohol

The following procedures apply to all University-Sponsored Events where alcohol will be served. The following procedures are provided to assist with the planning of University-Sponsored Events; however, the service of alcoholic beverages is permitted only in accordance with this policy and applicable local laws.

10.1. On-Campus and Off-Campus Events with Alcohol

University-Sponsored Student Organization Events

All University-Sponsored Student Organizations must complete the [online registration form](#) for student organizations if they are serving alcohol at an event.

The following management strategies must be in place in order for alcohol service to be permitted:

- The president or risk manager of the University-Sponsored Student Organization must attend a Campus Life sponsored training session that includes content about hosting events with alcohol;
- University-Sponsored Student Organizations must comply with any applicable regulations from their national organizations;
- Under no circumstances is the alcohol to be left unattended; and
- Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.

In addition, the following management strategies must be in place in order for alcohol service to be permitted at events in which attendance is expected by individuals under the age of twenty-one (21):

- EmoryCard readers or another age-verification plan approved by Campus Life must be utilized; and

- A licensed caterer or a non-student employee must serve the alcohol. The non-student employee must:
 - a. Be at least twenty-one years old;
 - b. Be listed by name on the online registration form for University-Sponsored Student Organizations;
 - c. Be present for the duration of the alcohol being served; and
 - d. If not an employee, have documentation of current insurance.

Other Events

Any academic or administrative department having or hosting an event with alcohol at which individuals under twenty-one (21) years of age are expected to attend must implement an age-verification plan, such as use of an Emory Card Reader or licensed server and must not leave alcohol unattended.

10.2. Additional Food and Beverages

All University-Sponsored Events where alcohol is served must have free non-alcoholic beverages and free and substantive food offerings available at all times during the event.

11. Additional Information

11.1. Health Risks

The scope and impact of health risks from alcohol and drug misuse and abuse are extensive and well documented, ranging from mood-altering to life-threatening, with consequences that extend beyond the individual to classmates, co-workers, family, friends, organizations and society at large. The University, therefore, conducts regular programs to educate its faculty, staff, and students that the misuse and abuse of alcohol and other drugs alters behavior, distorts perception, impairs thinking, impedes judgment and sabotages opportunity. Alcohol and drug abuse also may result in deterioration of physical health by causing or contributing to various diseases, illnesses, birth defects and even death. In addition, substance use negatively impacts health and wellness. Please see the Related Links section below for [Drugs of Abuse – Uses & Effects](#), for additional information.

11.2. Resources for Education, Consultation and Counseling

The University sponsors several programs that provide information and professional services for its faculty, staff and students on matters related to the misuse and abuse of alcohol and drugs. These programs provide education, consultation, assessment, counseling and referral in a professional environment that respects individual confidentiality and integrity. The University maintains the [Faculty Staff Assistance Program](#) (404.727.4328) for faculty and staff; and the [Counseling and Psychological Services](#) (404.727.7450) and the [Office of Health Promotion](#) (404.727.7551) are available to students on the Atlanta campus. Counseling and Career Services (770.784.8394) and Center for Healthful Living (770.784.8634) are available to students on the Oxford Campus. Augmenting these formal programs, a variety of other campus programs and services educate and assist individuals who take the initiative to help themselves. Please see the Related Links section below for additional information on these services.

Common to all of these programs is the ethic that personal responsibility and professional guidance are keys to success. Therefore, the University expects its faculty, staff, and students to take measures to prevent alcohol and drug misuse and abuse in the community. The University also encourages its members to seek assistance from the above programs if they think that they may have a problem with alcohol or drug use.

11.3. Distribution

This policy and any revisions thereto shall be distributed to all faculty, staff, and students at least annually. Other applicable policies that reference this policy are found in the Campus Life Handbook, the Faculty Handbook, the Staff Handbook, the Human Resources Handbook and Policies and Procedures Manual, the Undergraduate Code of Conduct, and the Doctor of Medical Student Handbook.

11.4. Additional Policies Regarding Alcohol

All University-Sponsored Student Organizations are under the jurisdiction of the Student Government Association and/or Graduate Student Government Association and their policies and procedures and the policies and procedures of the Office of Student Involvement, Leadership, and Transition.

In addition:

Fraternities and sororities must comply with their respective national organizations' alcohol policies, the Interfraternity Council, Multicultural Greek Council, National Pan-Hellenic Council and Panhellenic Council policies, and the [policies of the Office of Sorority and Fraternity Life](#);

Residence Hall events must comply with the [Office of Residence Life and Housing Operations policies](#);

Students at Oxford College must comply with the Oxford College Alcohol Policy; and

Miller Ward Alumni House events must comply with the [Miller Ward Alumni House Alcohol Policy](#).

11.5. Review

A biennial review of this policy shall be conducted by a committee appointed by the president that shall include representatives from the following offices, programs, divisions and departments: Office of the President, Office of the Senior Vice President and General Counsel, Office of Compliance, Faculty Staff Assistance Program, Human Resources Division, Division of Campus Life, Office of Financial Aid, Emory Police Department, Office of the Provost, and Office of the Vice President for Health Affairs, as well as one or more student representatives. In addition, in accordance with the Higher Education Opportunity Act, the review shall include the number of drug and alcohol-related violations and fatalities that occur on campus or as part of the University's activities and are reported to campus officials, as well as the number and type of sanctions imposed as a result of such drug and alcohol-related violations and fatalities that occur on campus or as part of the University's activities.

Related Links (references and links)

Laws, Policies, and Protocols

- Current Version of This Policy (<http://policies.emory.edu/8.8>)
- Student organization registration system for events with alcohol (<https://emory.campuslabs.com/engage/submitter/form/start/315808v>)
- Office of Sorority and Fraternity Life Social Event Policy (<http://osfl.emory.edu/current-members/index.html>)
- Substance Abuse/Drug-Free Workplace (<http://policies.emory.edu/4.66>)
- Tobacco Free Environment Policy 4.113 (<https://policies.emory.edu/4.113>)
- Medical Amnesty Protocol (http://conduct.emory.edu/policies/medical_amnesty/)
- Undergraduate Student Code of Conduct (Atlanta) (<http://conduct.emory.edu/>)
- Oxford College Code of Conduct (<http://www.oxford.emory.edu/life-at-oxford/student-conduct/>)
- Student Government Association Finance Policy (<https://orgsync.com/116828/chapter>)
- Graduate Student Government Association Finance Policy (<http://emory.orgsync.com/org/gsga/>)
- Georgia Controlled Substance and Dangerous Drug Laws Chart (<http://tinyurl.com/26pfhy>)
- Miller-Ward Alumni House Policy (<http://millerward.emory.edu/>)
- NCAA Banned Substances (<http://www.ncaa.org/2018-19-ncaa-banned-drugs-list>)

Support Resources

- Faculty Staff Assistance Program (www.fsap.emory.edu)
- Office of Health Promotion (<http://healthpromotion.emory.edu/>)
- Counseling and Psychological Services (<http://counseling.emory.edu/>)
- Student Health Services (<http://studenthealth.emory.edu/hs/>)
- Oxford College Counseling and Career Services (www.oxford.emory.edu/counseling)
- Emory Police Department (www.campserv.emory.edu/epd/)

Educational Resources

- Drugs of Abuse: Uses and Effects (<http://www.emory.edu/WELCOME/SECURITY/2005-06/charts/ControlledSubUses&Effects.pdf>)

Handbooks

- [Doctor of Medicine Student Handbook](https://med.emory.edu/handbook/) (<https://med.emory.edu/handbook/>)
- Emory's Student-Athlete handbook (https://issuu.com/emoryathletics/docs/student-athlete_handbook_2016-17)

Contact Information

Subject	Contact	NCPHONE	Web Address
Clarification of Policy	Emory Campus Life	404-727-4364	http://campuslife.emory.edu/
Information about state and federal laws and the interpretation of the policy	Office of General Counsel	404-727-6011	www.emory.edu/OGC

Revision History

- Version Published on: Mar 02, 2020
- Version Published on: [Aug 31, 2017](#) (*Reinstated "health risks" section 8.8.11.1*)
- Version Published on: [Jun 07, 2016](#) (*updated MWAH web address*)
- Version Published on: [Sep 18, 2014](#) (*added Oxford contact information*)
- Version Published on: [Feb 06, 2014](#)
- Version Published on: [Feb 05, 2013](#) (*resource contact information updated/revised 8.8.11.1*)
- Version Published on: [Jan 31, 2013](#) (*reordered 8.8.1 and 8.8.2. Wording changed in 8.8.2*)
- Version Published on: [Dec 20, 2012](#) (*revised Campus Services Available for Drug Abuse document*)
- Version Published on: [Dec 14, 2012](#) (*revised 8.8.3.3 and Drug Trafficking Penalty Link*)
- Version Published on: [Jul 02, 2012](#)
- Version Published on: [Jun 29, 2012](#) (*June 2012-updated 8.8.10. Clarify definition for student organizations*)
- Version Published on: [Dec 02, 2009](#) (*12/2/2009-changed name to Office of Student Leadership & Service*)
- Version Published on: [Jun 04, 2007](#) (*Original Publication*)



Policy 8.9

Student Vehicle Use Policy

Responsible Official:	VP and Dean for Campus Life
Administering Division/Department:	Campus Life
Effective Date:	May 01, 2010
Last Revision Date:	September 21, 2018

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

The goal of the Student Vehicle Use Policy is to protect our students from injury while driving personal vehicles on University-sponsored activities and programs and while driving University vehicles or those rented for University sponsored-activities and programs.

Applicability

This Student Vehicle Use Policy sets forth the University's regulations and procedures for all students (graduate, professional, and undergraduate) who drive University-owned, rented, or leased vehicles in connection with University-sponsored activities or programs or personal vehicles in connection with University-sponsored activities and programs.

The Student Vehicle Use Policy does not apply to the rental of vehicles to be used by graduate or professional students for a University-sponsored activity or program and that is: (1) for less than seven days, and (2) for a driving distance of no more than 300 miles one-way.

University-sponsored activities and programs are defined in this policy as all activities funded in any way through the University, such as all recognized/chartered student organizations, Residential Life, programs and organizations in



Civic and Community Engagement, programs and organizations in Recreation and Wellness, athletic or academic, academic employment or internships, and off-campus programs.

Policy Details

8.9.1 Requirements

8.9.2 Motor Vehicle Record

8.9.3 Driver Training

8.9.4 Personal Vehicles

8.9.5 Travel Limitations

8.9.6 Travel Itineraries/Parties

8.9.7 General Operating Instructions

8.9.8 Emergency Action Plan and Accident Reporting

8.9.8.1 Important Notes

8.9.8.2 Recommended Emergency Action Plan Guidelines

8.9.9 Violations of this policy for undergraduate students are subject to the Undergraduate Code of Conduct while graduate and professional school students will be subject to the disciplinary processes of their respective academic units.

8.9.1 Requirements

To drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs for any purpose, a student will need to:

- Follow this policy;
- Be at least 18 years of age;
- Hold a valid U.S. driver's license and have held either such license or a foreign license for at least two years;
- Disclose any moving violations and vehicle accidents during the last three years;
- Complete the Motor Vehicle Record Consent Form (available in the forms section on any student organizational portal on Orgsync), which authorizes Emory University Human Resources to conduct a state level driving record check;
- Have a "clear" or "acceptable" driving record as defined below; and
- Successfully complete the Emory Defensive Driving Course every two years in order to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs.

8.9.2 Motor Vehicle Record

The University will check a motor vehicle record (MVR) when the Consent Form is first submitted and at least bi-annually (every two years) thereafter. Additional checks may be conducted if the University becomes concerned about a student's ability to drive in an official capacity on a University-sponsored activity or program.

Please allow sufficient time for the MVR receipt and review, as you will not be permitted to drive a University Vehicle on a University-sponsored activity or program until your MVR is received, approved and the defensive driving program test is passed and certificate of completion is submitted to Student Involvement, Leadership, and Transitions.



MVRs will be assessed based on the criteria below, as a minimum standard. In certain situations, drivers may be held to higher standards, depending on the nature of the driving, driving record, or concerns about ability to drive safely.

An MVR will be considered unacceptable if it involves:

(a) One or more of the following violations during the previous three-year period:

- reckless driving;
- driving while impaired or under the influence of alcohol or drugs;
- homicide by vehicle, negligent homicide or involuntary manslaughter;
- fleeing or attempting to elude police officers;
- driving without a license or while a license is suspended or revoked;
- hit and run or failure to stop after an accident; or
- major speeding (20 MPH or more over limit)

(b) Two or more of the following violations during the previous two-year period:

- speeding (less than 20 MPH over limit);
- any other moving violation other than speeding or listed in (a), (b) or (c);
- "at-fault" accident; or
- failure to have required insurance

(c) Three of the following violations during the previous two-year period:

- defective equipment;
- oversize or overweight load;
- operating without required equipment or warnings;
- other equipment violations; or
- not "at-fault" accident

Driving records must be clear or acceptable, as outlined above, for a student to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

If a student does not meet the requirements, he or she will not be allowed to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

If a student's driving record changes or if there is a change in a student's medical condition that may affect his or her driving after initial driving approval, the student must report the change immediately to the office or department that manages such travel, or owns, rents, or leases the vehicle and Student Involvement, Leadership, and Transitions.

If a student becomes ineligible to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program, the approved status will be revoked for the duration of enrollment at the University. Further, the student may be subject to disciplinary action from the Office of Student Conduct for undergraduate students or the appropriate graduate or professional school conduct process for graduate students.

8.9.3 Driver Training

In order to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs, students must successfully complete the Emory Defensive Driving Course once every two years. Student Involvement, Leadership, and Transitions oversees the online Emory Defensive Driving Course, and the National Safety Council will certify individuals who successfully complete the Defensive Driving Course.

Students must first have their Motor Vehicle Record checked by turning in an MVR Clearance Form and a copy of their Drivers License to Student Involvement, Leadership, and Transitions via OrgSync. Once the MVR passes, the student will be informed on how to take the course. For forms and more information go to the forms section of any student organization portal on OrgSync.



Individuals who do not successfully complete the Defensive Driving Course will be provided an opportunity to repeat the course and successfully complete it. If a passing score is not attained the second time, such students will not be allowed to drive on a University-sponsored activity or program, and a decision will be made regarding the employment status of a student whose job requirement requires driving on a University-sponsored activity or program.

8.9.4 Personal Vehicles

A student who uses his or her personal vehicle on a University-sponsored program must:

- Obtain personal auto insurance and provide the following upon request - a valid and current certificate of insurance that includes insurance company name, make/model of vehicle, vehicle VIN number, policy number and name of person insured.
- Acknowledge that the University does not carry insurance on, and assumes no responsibility for, any damage to personal vehicles, even when used on a University-sponsored activity or program. The student's auto insurance will respond for third party liability including liability for injuries to passengers in the vehicle. It is an industry standard that insurance follows the vehicle.
- Acknowledge responsibility for paying any deductibles or co-pays associated with personal insurance in the event of an accident.

8.9.5 Travel Limitations

- Students may not drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs, on a University-sponsored activity or program, more than 500 miles one-way. For trips over 500 miles one-way, students must contract with a third party carrier (i.e. airline, bus company, shuttle service) or received special permission from the Director of Student Involvement, Leadership, and Transitions.
- Note: Proposed travel that falls outside of these travel limitations must be reviewed and approved in advance by the Student Travel Committee (Director of Student Leadership and Service, Dean of Students, Director of Athletics and Recreation). Third party carriers must be chosen from a list pre-approved by the Student Travel Committee. For more information, please contact the Director of the Office of Student Leadership and Service.
- Do not exceed the recommended load capacity for vehicles for both number of passengers and weight of cargo.
- 15 passenger vans may not be leased, purchased or driven as University vehicles. Only 12 passenger vans or smaller may be used.

8.9.6 Travel Itineraries/Parties

This section of the policy applies to all trips greater than 60 miles from Emory's campus.

- A complete roster of travelers including cell phone numbers and a trip itinerary should be filed with appropriate on-campus personnel (i.e. staff member, student organization advisor) for each University-sponsored activity. There should be at least two on-campus personnel who have responsibility for implementing the emergency action plan (see 8.9.8), and the traveling party should have emergency phone numbers for both of these individuals.
- There should be more than one traveling person designated as the "person responsible" on all trips in case of injury to one of the persons.
- Other than Emory students, minors may not ride in vehicles used on a University-sponsored activity or program.
- Family members may not be transported in University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

8.9.7 General Operating Instructions



- Drivers must drive responsibly and are expected to follow traffic laws, posted speed limits, practice defensive driving, wear seat belts and avoid any activity that has the potential to divert attention from driving safely.
- Drivers are restricted from activities of distracted driving while driving on behalf of the University, including but not limited to use of navigation, cell phones, texting, smoking, eating, checking email, etc.
- Drivers must abide by the hands free law (House Bill 673) in the state of Georgia.
- Drivers must monitor weather and road conditions and commit to change plans if warranted to ensure safety. This may mean taking breaks more frequently, stopping overnight, or postponing the trip altogether.
- Change drivers at least every 2 hours, more frequently if the driving is fatiguing. If a trip is more than 2 hours away, there must be at least 2 certified drivers per vehicle.
- Drivers must assess the type of driving (highway, back roads, winding roads, hilly roads) compared to the driver's experience and comfort level and assign driving shifts accordingly.
- Do not caravan. Each driver should have a set of directions and maps. Do not attempt to stay together or rendezvous along the way. Each driver should travel independently. It is recommended that there be no driving between 12:00 midnight and 6:00 a.m.
- While driving on a University-sponsored activity or program, a driver may not be under the influence of illegal drugs or alcohol. Drivers and passengers may not bring alcoholic beverages (even unopened) into a vehicle. Such behavior will subject students to disciplinary action as determined by the Office of Student Conduct.
- Drivers must secure University Vehicles when not occupied and must have contents reasonably safeguarded.
- The use of radar detectors (or similar speed enforcement detection) is strictly prohibited.
- Trailer, hitches or towing are not permitted without special permission.
- University Vehicles should be used only for University business and should not be taken home at night (special exceptions may be approved by student activity advisor).
- Drivers are personally responsible for paying all traffic tickets.

8.9.8 Emergency Action Plan and Accident Reporting

8.9.8.1 Important Notes

- The University's liability insurance protects the University against damages resulting from bodily injury and/or property damage. The University's liability insurance will also protect an authorized driver as long as the authorized driver is driving a University Vehicle and is acting within the scope of his/her authority and responsibilities. As noted above, however, when driving your personal vehicle - even on a University-sponsored activity or program - your personal insurance is primary.
- Immediately report all accidents during a University-sponsored program to your student activity advisor, even if you are driving your personal vehicle per the agreed upon Emergency Action Plan.
- Depending on the circumstances, advisors will contact the following University officials to enact an emergency action plan:
 - University Communications – 404/727-6216
 - Emory Police Department - 404/727-6111
 - Campus Life Emergency Line – 404/280-7073 or 404/895-5948
- Failure to report an accident will result in the revocation of your authorization to drive a University Vehicle on a University-sponsored activity or program.
- All University-owned vehicles contain an accident reporting kit and insurance card. Driver is responsible for using kit in the event of an accident.
- When you return to campus, promptly complete an accident report form with the Emory Police Department and contact the Office of Risk and Insurance Services.
- All accidents will be investigated and may result in revocation of driving authorization and other disciplinary action.

8.9.8.2 Recommended Emergency Action Plan Guidelines

- Each department and division should develop detailed instructions in an Emergency Action Plan. This plan should be disseminated to all students driving or travelling under your jurisdiction.



- All chartered Student Organizations should abide by the Office of Student Leadership & Service Emergency Action Plan unless otherwise noted (http://www.osls.emory.edu/student_orgs/eagle_source/student_driving.html).
- General recommended actions to include are as follows:
 - Assess safety of self and passengers
 - If injuries, Call 9-1-1 immediately.
 - If no immediate injuries, move the vehicle to a nearby, safe place if possible.
 - Call 9-1-1.
 - Take down all information, take pictures of damages, etc.
 - Contact your activity advisor, faculty, or staff member ASAP
 - When police arrive, do file a police report no matter how serious the damage or injuries
 - Work with your advisor, faculty, or staff member contact to determine how to proceed back to campus.
 - Within 24 hours, contact Office of Risk Management to alert to the issue (EPD/Risk Management – 404-727-6111/ 404/686-2470).
 - Complete an internal incident report form to document statements from all witnesses back on campus.

8.9.9 Violations of this policy may subject a student to disciplinary action as determined by the Office of Student Conduct.

Definitions

n/a

Related Links

- Current Version of This Policy: <http://policies.emory.edu/8.9>
- [Safe Driver Enrollment Form](http://www.osls.emory.edu/student_orgs/eagle_source/student_driving.htm) (http://www.osls.emory.edu/student_orgs/eagle_source/student_driving.htm)

Contact Information

Subject	Contact	Phone	Email
Content	Lisa Loveall	404/727-6169	Lisa.loveall@emory.edu
Accident Reporting	EPD/Risk and Insurance Services	404/727-6111	

Revision History

- Version Published on: [Sep 21, 2018](#) (*Updated policy content, contact information.*)
- Version Published on: [Sep 19, 2013](#)
- Version Published on: [Dec 12, 2012](#) (*2nd sentence under applicability*)
- Version Published on: [Sep 27, 2012](#) (*procedures and protocol revisions*)
- Version Published on: [Jun 22, 2012](#) (*corrected link in 8.9.3*)
- Version Published on: [Oct 18, 2010](#)
- Version Published on: [Mar 03, 2010](#)



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- Version Published on: [Feb 12, 2010](#) (*Original Publication*)



Policy 8.12

University Recognized Student Organizations

Responsible Official:	VP and Dean for Campus Life
Administering Division/Department:	Campus Life
Effective Date:	July 11, 2012
Last Revision Date:	September 21, 2018

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
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Overview

The purpose of this policy is to outline the authority of various entities at Emory University to recognize Student Organizations. Further, the policy outlines the list of benefits that Emory University grants official Student Organizations. Finally, the policy provides for the registration of all Student Organizations on campus so that a comprehensive list of all groups can be maintained.

Applicability

n/a

Policy Details

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8.12.3 Authorization

8.12.4 Responsibilities of Student Organizations

8.12.5 Benefits to Registration

8.12.5.1 Available to all Student Organizations at Emory University

8.12.5.2 Available to Student Organizations who receive recognition from the Emory University Student Government Association.

8.12.6 Student Organization Websites

8.12.6.1 Student Organization Website Domain Names

8.12.1 Rights

Emory University students may organize Student Organizations. In accordance with the Emory University Non-Discrimination Policy, no student shall be denied membership in any Student Organization.

Notwithstanding the foregoing, certain limitations for participation based on major, degree, grade point average, or school of enrollment may be imposed if approved in advance by the Recognizing Body. Student Organizations that wish to make exceptions to enrollment based on religious or other purposes must petition the appropriate Recognizing Body.

8.12.2 Official Registration List

Campus Life is responsible for maintaining a comprehensive and up to date list of all registered Student Organizations through the Office of Student Leadership & Service staff. All Student Organizations at Emory University who wish to have access to any of the rights, privileges, and benefits outlined in this policy must follow the official registration procedures as outlined by the Division of Campus Life. Such registration list shall be deemed the official list of Student Organizations recognized at Emory University at any time.

8.12.3 Authorization

In order for an organization to be recognized as an official Student Organization, the Student Organization must have the approval of a Recognizing Body and be listed on the official list of Student Organizations maintained by the Campus Life through Student Involvement, Leadership, and Transitions. Each Recognizing Body is responsible for managing their own processes to recognize Student Organizations. The Vice-President and Dean for Campus Life, or his/her designee, are responsible for holding Student Organizations and Recognizing Bodies accountable to all relevant University policies.

In addition, all Student Organizations must have an official University advisor. For groups recognized by University departments, their advisor is the director/chair of that department or his/her designee. For all groups chartered by the Student Government Association and/or Graduate Student Government Association, advisors are required to be a full-time faculty or staff member. Campus Life grants authority to Student Involvement, Leadership, and Transition to set additional requirements for SGA/GSGA Advisors.

The Student Government Association and/or Graduate Student Government Association, is also responsible for collecting and distributing the Student Activity Fee. Final decision-making authority regarding the Student Activity Fee resides with the Student Government Association and/or Graduate Student Government Association, in consultation with the Vice President and Dean for Campus Life or his/her designee, who will ensure accountability with relevant University policies and procedures.

8.12.4 Responsibilities of Student Organizations



All Student Organizations are required to abide by and follow all Emory University policies, rules, and regulations. Any Student Organization that does not follow such policies, rules or regulations will be referred to the Office of Student Conduct while graduate and professional school student organizations will be subject to disciplinary processes of their respective academic units.

8.12.5 Benefits to Registration

The following benefits are available, if applicable, to Student Organizations. No student groups who have not followed this policy to become officially recognized Student Organizations have access to these benefits.

8.12.5.1 Available to all Student Organizations at Emory University

- Use of Emory University name to identify institutional affiliation (per guidelines of Emory Brand Management) which can include a logo, access to letterhead, and other such benefits.
- Ability to reserve space on campus/use space on campus (some charges may apply) and use University meeting rooms and facilities.
- Free organizational advising, consulting and training by Student Involvement, Leadership, and Transitions Staff
- Participation in Student Activity Fairs as hosted by Campus Life or the Student Involvement, Leadership, and Transitions
- Ability to be financially supported by other University Departments with co-sponsorship funding opportunities.
- Access to the Student Organization Management database "OrgSync."
- Access to a website supported and hosted by Emory University (subject to Emory University Policy 8.12.6)
- Ability to apply for Grant Opportunities in Campus Life such as Late Night @ Emory, the Student Organization Food Grant managed by SGA and/or GSGA and Emory Dining, etc...
- Other benefits as deemed appropriate by various offices, departments, and divisions of Emory University.

8.12.5.2 Available to Student Organizations who receive recognition from the Emory University Student Government Association and/or Graduate Student Government Association.

- Ability to apply for Student Activity Fee money
- Access to apply for Student Organization Locker storage

8.12.6 Student Organization Websites

Registered student organizations are entitled to a website supported and hosted on Emory OrgSync/Engage. All student organization websites must meet the following criteria:

- Hosted on Emory OrgSync/Engage
- Compliant with applicable local, state, and federal laws, including but not limited to those concerning copyright and trademark protections, harassment, and sexual misconduct
- Compliant with Emory University Branding Guidelines
- Compliant with Campus Life Technology and Communications Guidelines
- Administrated by students bound by the Student Code of Conduct and other applicable Policies and Codes

Student organizations in violation of this policy forfeit their entitlement to a website and may have their website deactivated and archived until compliance is reestablished.

Websites are protected under Policy 8.14, Respect for Open Expression Policy.

8.12.6.1 Student Organization Website Domain Names

Registered student organizations are required to maintain their websites on Emory OrgSync/Engage. Each organization will have a unique website URL within OrgSync/Engage.

Domain names purchased through third parties will not be supported.



Unregistered student organizations will not be provided OrgSync access nor permitted to use the Emory name or logo for promotional purposes or establishing domains/URLs.

Definitions

Department or Division is defined as a department or division of Emory University that has a Director, Department Chair, or similar title.

Recognizing Body is defined as the Department or Division, Emory University Student Government Association and/or Graduate Student Government Association or other Emory University authorized governing or recognizing body that may authorize a Student Organization.

Student Organizations are groups of students that meet the Student Government Association and/or Graduate Student Organization requirements for recognition. This term includes, but is not limited to, student organizations recognized by the Emory Campus Life through the Student Involvement, Leadership, and Transitions, Greek letter organizations recognized by the Office of Sorority and Fraternity Life, athletic teams organized by Athletics and Recreation (including varsity and intramural sports teams), and organizations recognized and/or advised by a Recognizing Body or other administrative units of the University.

Related Links

- Current Version of This Policy: <http://policies.emory.edu/8.12>
- [Community Platform for Registration](http://www.studentorgs.emory.edu) (<http://www.studentorgs.emory.edu>)

Contact Information

Subject	Contact	Phone	Email
Questions about Registration Process	Lisa Loveall	404-727-6169	Lisa.loveall@emory.edu

Revision History

- Version Published on: [Sep 21, 2018](#) (*Updated Details, Definitions, Contact*)
- Version Published on: [Aug 14, 2014](#) (*added 8.12.6 & 8.12.6.1. changed name of policy, changed definition*)
- Version Published on: [Nov 27, 2012](#) (*changed wording in 8.12.3*)
- Version Published on: [Jul 11, 2012](#) (*Original Publication*)



Policy 8.14

Respect for Open Expression Policy

Responsible Official:	VP and Dean for Campus Life
Administering Division/Department:	Campus Life
Effective Date:	October 29, 2013
Last Revision Date:	September 21, 2018

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Overview

n/a

Applicability

n/a

Policy Details

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8.14.1 Principles

Emory University (“University”) is committed to an environment where the open expression of ideas and open, vigorous debate and speech are valued, promoted, and encouraged. As a community of scholars, we affirm these freedoms of thought, inquiry, speech, and assembly. Firmly grounded in the principles outlined by the 2011 Taskforce on Dissent, Protest & Community Report (https://www.emory.edu/CAMPUS_LIFE/documents/archive/2011_DPC_report.pdf), this Policy reaffirms Emory’s unwavering commitment to a community that inspires and supports courageous inquiry through open expression, dissent, and protest, while acknowledging the challenges of the creative tensions associated with courageous inquiry in an ever changing community.

Recognizing that the educational process of our institution necessarily includes various and diverse forms of open expression, the University affirms the rights of members of the Community to assemble and demonstrate peaceably within the limits of this Policy. Simultaneously, the University affirms the right of others to pursue their normal activities and to be protected from injury or property damage, as defined by law.



Emory University also affirms values of diversity, inclusion, and community. The University Community is diverse -- in race, ethnicity, gender, sexual orientation, background, age, religion, abilities, life experiences, political ideologies, ideas of thought, and in many other ways. The actions of each member have an impact upon the culture of inclusion and respect for which we strive as a community. The University is fundamentally committed to open inquiry, open expression, and the vigorous discussion and debate upon which the advancement of its multifaceted mission depends. Civility and mutual respect are important values in our community; while they do not limit the rights protected by this Policy, we ask all members of the Community to consider these values carefully when exercising their fundamental right to open expression.

8.14.2 Applicability, Scope, and Definitions

Emory University Community (“Community”): the following individuals are considered members of the Community for purposes of this Policy:

1. students, defined as any person pursuing studies at the University, including (1) a person not currently enrolled who was enrolled in the preceding fall, spring, or summer; (2) a person not currently enrolled who was previously enrolled in Emory University and may reasonably seek re-enrollment at a future date; (3) a person who has applied to and been accepted for admission to Emory University and has accepted an offer of admission or may reasonably be expected to enroll; and (4) a person enrolled in the Emory University Pre-College Program on a credit or non-credit basis;
2. persons who are employed by Emory University or Emory Healthcare as faculty or staff, and persons who are employed by contracted entities to provide a service to Emory University and whose work location is on any of Emory’s multiple campus locations;
3. trustees of the University and members of Boards of various entities of the University;
4. alumni of the University when returning to campus or to official University events;
5. invited guests of the University such as guest speakers, panelists, artists, performers, participants, etc. for events, both on and off campus; and
6. patrons, guests, and those receiving the services of Emory Healthcare or other businesses, such as Continuing Education, of Emory University.

Meetings and Events (“Meetings” or “Events”): gatherings of members of the Community in a location specifically reserved for that purpose. Events are generally considered to be public. Meetings are generally considered to be private.

Dissent (“Dissent”): the fundamental right of expression of counterpoint(s) through symbols, speech, expression, satire, flyers or leaflets, action, and other comparable forms of expression.

Protest (“Protest”): dissent with the goal of change, which may attract attention. Protests may include an actual gathering of people to bring attention to the cause, such as picketing, rallies, sit-ins, vigils, or similar forms of expression. Protest may also include more individually-based forms of Dissent such as posting flyers, wearing t-shirts or arm bands, and other similar actions.

Internal vs. External Dissent: The University acknowledges that some protest may be externally focused, meaning the topic of protest is directed at some broader issue beyond the University. Examples may include protesting local legislation or global social injustices, among others. The University also acknowledges that some protest may be internally focused, directed at the leadership of the institution, at decisions made by faculty or administrators, or toward other members of the Community with whom one disagrees. Both forms of protest are valued, protected, and affirmed.

Nothing in this Policy prevents Emory Healthcare from managing its property with due regard for the unique needs of healthcare delivery. The Vice President and Dean of Campus Life (DCL) is responsible for enforcing this policy. The DCL and their designee may send Open Expression Observers on their behalf during Events to enforce this Policy.

Conflicting Policies: This Policy is paramount to other policies of the University that may conflict, except those grounded expressly in local, state, or national law.

8.14.3 Committee for Open Expression

The University Senate Standing Committee for Open Expression (hereinafter Committee) is a working group of community members—faculty, staff, and students—who seek to promote and protect the rights and responsibilities of



community members related to issues and controversies involving speech, debate, open expression, protest, and other related matters.

8.14.3.1 Jurisdiction

The Committee has responsibility for all issues and controversies involving various forms of expression, including but not limited to speech, debate, Protest, Dissent, and other related matters in accordance with this Policy.

8.14.3.2 Committee Responsibilities

The Committee shall provide advice and counsel to Community members interpreting the Policy and the rights and responsibilities of individuals and groups under it. The Committee shall have the following powers and duties:

- to investigate alleged infringements of the right of members of the Community concerning speech, debate, open expression, Protest, Dissent, and other related matters, between all members of the Community;
- to provide education and training to the Community regarding open expression;
- to provide resources and referral to appropriate campus colleagues as necessary;
- to regularly review this Policy and its applicability, and to recommend changes to the University Senate as necessary;
- to report annually on the status of the Committee's work for presentation to the University Senate, and to make such reports available to the Community; and
- to take other actions as necessary to effectuate this Policy and the principles contained herein.

8.14.3.3 Composition and Term

The Committee shall consist of 13 members:

Four Faculty Members should be appointed to staggered two-year terms. At least one faculty should be from one of the Woodruff Health Sciences schools (Medicine, Public Health, Nursing, or Yerkes).

Three Staff Members should be appointed to staggered two-year terms so that each year at least one new member is named or reappointed to the Committee.

Five student members should be appointed to one-year terms. At least two students must be undergraduates and at least two students must be graduate or professional students. All of the graduate or professional students must represent different academic divisions of the institution.

One member of Student Government Association's Constitutional Council, as appointed by the President and confirmed by the SGA Legislature, shall serve a one-year term as an ex officio member of the committee. This ex officio member is not a voting member of the committee and should not count for quorum purposes.

One representative from Campus Life should also be appointed to a two year term.

The appropriate nominating body (University Senate) should make all reasonable efforts to nominate new representatives to the Committee, but nothing in this Policy prohibits members from serving multiple and/or consecutive terms if deemed appropriate by the nominating body.

The Committee Chair will be nominated by the Committee for Open Expression for appointment by the University Senate Executive Committee.

Under the advice and consent of this Committee, Oxford College of Emory University may assemble its own Committee, which must include students, to support, promote, and protect Open Expression at Oxford.

8.14.3.4 Committee Procedures

The following procedures are designed to ensure continuity and effectiveness of the Committee:

- a. Except as provided with respect to the conflict resolution and mediation function outlined in section 8.14.4, 7 members constitute a quorum. In order for a quorum to exist, at least one faculty, one staff, and one student representative must be present.



- b. The Committee may authorize the creation of subcommittees to act for the Committee in any matter except for proposing changes to the Policy and submitting yearly reports. The University Senate must approve the membership of any subcommittees if 1) members of said subcommittees are not current approved Senate members and 2) members of the subcommittees need to cast any actionable votes.
- c. The Committee or any subcommittee may invite other Community members to provide consultative services to the Committee for their areas of expertise. The opinions of invited members are non-binding and only serve to help inform the Committee in its decision-making.
- d. The Committee shall maintain a spirit of openness and transparency. Under certain conditions, the Committee shall respect the privacy of individuals over transparency to the broader community and shall maintain the right to declare its proceedings confidential.
 - i. If a person appearing before the Committee requests confidentiality, the Committee will consider that request and notify the individual of the decision before the scheduled testimony.
 - ii. Committee minutes may be declared confidential by the overall Committee or by the Chair of the Committee or subcommittee subject to review by the overall Committee.
 - iii. All minutes and materials deemed confidential shall be clearly marked and shall be accompanied by a warning against unauthorized disclosure.

8.14.4 Filing Complaints to the Committee for Open Expression

The University seeks to actively promote open expression within our Community. As such, this Policy enumerates an investigation procedure for those members who believe their rights under this Policy have been violated. When an Event, Meeting, or Protest is occurring, the enforcement of this policy shall follow the guidelines outlined in 8.14.7; however, should a member of the Community believe their open expression has been violated, the Committee shall work to resolve those concerns as outlined in this section. An initial complaint may be submitted to the Committee for review through the Committee's email, through the Campus Life, or through other channels as the Committee deems appropriate.

8.14.4.1 Hearing Panel

The Committee will appoint a three member panel from the membership of the Committee to investigate the incident. The Committee shall consider any potential conflicts of interest when appointing this panel.

8.14.4.2 Investigations

Investigations as conducted by this Panel may include:

- collection of written statements from involved parties;
- informal interviews of involved parties;
- informal interviews of topical experts for additional perspective; and
- other information as needed.

8.14.4.3 Findings

When a complaint is submitted and to the greatest extent possible, the Committee will seek to resolve the conflict and mediate the situation between the parties.

This Committee, however, has no disciplinary authority because of its role protecting and promoting Open Expression. Actions that violate other Community expectations such as the Undergraduate Code of Conduct, the conduct expectations of the graduate and professional schools, or any other appropriate University policy, may be referred to the appropriate body.

8.14.4.4 Authority

This Committee, when it finds violations of this Open Expression policy by any member of the Community including those acting in the name of the University, may submit recommendations to the University Senate, the President, the DCL, or any other appropriate person or governing body for review.



8.14.5 Community Responsibilities

Emory University respects the Constitutional rights of free speech and assembly. As such, the only responsibilities outlined in this section that limit the free exercise thereof have been done in a way to ensure maximum open expression and narrowly tailoring exceptions to specific safety or community concerns.

8.14.5.1 Awareness of Community Responsibilities

Each member of the Community is expected to know and follow this Policy. A person who violates these standards or other policies of the University in the course of open expression may be held accountable for that conduct. Any member of the Community who is in doubt as to the propriety of planned conduct may seek guidance from the Committee for Open Expression in advance of the Event.

8.14.5.2 Freedom of Speech and Freedom of Expression: Joint Standards

Expression that communicates a viewpoint, regardless of form, is protected as long as it does not violate the guidelines of this Policy. This includes protest, dissent, and any other communicative activity, whether or not it occurs in the context of a Meeting or Event.

The right to Dissent is the complement of the right to speak, but these rights may conflict at certain times. The University promotes simultaneous, but not disruptive, Dissent. As such, during a scheduled Event or Meeting, a speaker is entitled to communicate a message to an audience during an allotted time, and the audience is entitled to hear the message and see the speaker during that time. A dissenter must not substantially interfere with the speaker's ability to communicate or the audience's ability to hear, see, or question the speaker. Protests outside of a Meeting, Event, or another Protest shall not impede access to the Meeting, Event, or Protest nor substantially interfere with the communication inside.

8.14.5.3 Standards for Scheduling Meetings, Protests, and Events for both Indoor and Outdoor Locations

It is the policy of the University to protect voluntary assembly and to make its facilities available for assembly. The University shall establish standards for scheduling Events and Meetings. These standards should be published or provided to any member of the Community. Such standards must be reasonable and not require excessive limitations when not warranted, and it is the responsibility of administrators of space on campus to ensure policies and procedures promote open expression. Reservations shall not be denied to any member of the Community based on content of the Meeting, Event, or Dissent unless such content would otherwise violate the responsibilities set forth in 8.14.5.5 of this Policy.

The Committee for Open Expression should be consulted whenever possible before denying a request for use of a room, facility, or space by an organization recognized by the University for a reason other than prior assignment of the room, facility, or space. The University shall not deny recognition to an organization because of disagreement with its mission or the viewpoints that it represents. However, the University may properly take into account, when allocating scarce resources to groups, whether one group's mission is duplicative of another's.

8.14.5.4 Violation of Community Responsibilities

The Committee for Open Expression exists to help support the right to Expression, Dissent, and Protest. An affirmative commitment to helping rectify violations through support and alternatives shall be the appropriate course of action. Members of the Community serving as Open Expression Observers shall focus on helping the Expression, Dissent, or Protest continue while making modifications to ensure no violations continue to occur. Further, the Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy.

Community members, in the course of their actions, violate this Policy if they:

- a. Unreasonably infringe on the rights of other Community members to engage in open expression, Protest, and Dissent.



- b. Cause substantial disruption to a Meeting or Event that impedes the rights of attendees of that Meeting or Event, including excessive noise, continually interrupting a speaker, or preventing an audience from seeing/engaging with a speaker during a Meeting or Event.
- c. Create undue hardship that substantially impedes a Community member's right to open expression, such as unreasonable space reservation or usage policies.

8.14.5.5 Violation of Other Policies that relate to Open Expression

Community members, in the course of their actions, violate other policies of the University (such as the Undergraduate Student Code of Conduct, Codes of Conduct in the Graduate and Professional schools, and others that can be found at www.policies.emory.edu) and are no longer operating within the spirit of Open Expression at Emory if:

- a. They violate any federal, state, local or other applicable law (e.g., gaining unauthorized access to restricted areas, refusing to leave restricted areas if instructed, defacing of public and/or private property, etc.).
- b. They interfere unreasonably with the activities or rights of other persons. Factors that may be considered in determining whether conduct is reasonable include, but are not limited to, the time of day, size of audience, and noise level of a Meeting, Event, or Protest.
- c. They interfere unreasonably with the general operations of the University.
- d. They hold Meetings, Events, or Protests under circumstances where the health or safety of persons is endangered.
- e. They knowingly interfere with unimpeded movement in a University location. Examples may include preventing access to a building, or blocking any entrances or exits in a way that causes safety concerns.
- f. They cause injury to persons or property or threaten to cause such injury.
- g. They use or threaten violence or force, or encourage others to use or threaten violence or force.
- h. They cause harassment, as defined by state law.
- i. They violate reasonable noise levels, such as but not limited to DeKalb County noise ordinances.

8.14.5.6 Supporting Expression, Protest, and Dissent through University Space

There are many locations on campus especially conducive to Expression, Protest, and Dissent. A list of suggested spaces can be obtained in the University Center's Meeting Services, who can assist with reservations of most space on campus or assist in connecting with owners of other spaces.

Moreover, the foundations of this Policy are grounded in the principles of the entire campus being open and available to members to build community through Expression, Protest, and Dissent. As such, all spaces, both indoors and outdoors, are available to support both planned and impromptu Expression, Protest, and Dissent except as provided below. For planned events, reservations can be made and no reservation shall be denied because of the content of expression. For impromptu Expression, Protest, and Dissent, please see 8.14.5.7.

The following locations are not available for these types of Events, Meetings, or Protests unless a special exception is granted; however, if the focus of the Expression, Protest, or Dissent includes one of these areas, there is an affirmative support to ensure protests occur in places like the outdoor spaces in front of the buildings or common gathering places close to these locations.

- a. Private offices, research laboratories or associated facilities, and computer centers.
- b. Specific areas of offices, museums, libraries, and other facilities that contain valuable or sensitive materials, collections, equipment, and records protected by law, or by existing University policy such as educational records, student-related or personnel-related records, or financial records.
- c. Classrooms, seminar rooms, auditoriums, meeting rooms, or outdoor spaces in which classes, private Events, or Meetings are being held or are scheduled to be held during the time of the Protest.



- d. Outdoor and indoor locations when the free flow of traffic, both vehicular and pedestrian, is unreasonably impeded; when entrances or exits to private offices, classrooms, and meeting spaces are blocked; or when undue health and safety risks are created.
- e. Hospitals, clinics, and surrounding green space or grounds (including, but not limited to, sidewalks, access roads, parking areas, etc.), the facilities of healthcare service providers, emergency facilities, communication systems, utilities, or other facilities or services vital to the continued functioning of the University.

8.14.5.7 Protests in Spaces that have not been reserved

We fully support and acknowledge as a Community that sometimes impromptu Expression, Dissent, and Protest are pivotal to achieve the principles of this Policy. Not having a reservation is not sufficient reason for terminating any Protest unless the impromptu Protest unreasonably interferes with prior scheduled Meetings, Events, or essential operations of the University. Community members serving as Open Expression Observers shall ensure impromptu Expression, Dissent, or Protest continues until it should otherwise be relocated to allow for prior scheduled activities. To encourage such impromptu Dissent, the Open Expression Observers shall demonstrate this affirmative commitment by working with those involved to identify space where the Expression, Protest, or Dissent can be continued should the space being used interfere with other scheduled Meetings, Events, or essential operations.

All general outdoor public areas of the institution, even those that have reservation procedures, should be available for impromptu Expression, Protest, and Dissent unless it otherwise violates this policy. Requirements to reserve space should not be unreasonable in terms of time frame, requirements, or costs to the group wishing to host the Event. No group or organization should be denied use of a space on campus because of the content of the Meeting, Event, or Protest, unless such content would otherwise violate the responsibilities set forth in 8.14.5.5 of this Policy.

8.14.5.8 Nonpersonal Expression such as flyers, signs, displays, etc.

For purposes of nonpersonal expression such as flyers, chalking, signs, and displays, persons expressing themselves should follow all applicable flyer posting policies and banner reservation rules; however, these requirements should not be unreasonable in terms of access, time frame, requirements, or costs to the group. No nonpersonal expression should be denied because of the content of the flyer, sign, or display within the limits of the law. Additionally, a member of the Community who defaces the open expression of others will be held in violation of this policy.

8.14.6 Promotion and Dissemination of this Policy

The Committee for Open Expression shall partner with the DCL to:

- promote this Policy through educational efforts to the Emory Community, at least annually;
- provide educational opportunities to make community members aware of their rights and responsibilities regarding Open Expression; and
- educate members of the Community actively participating in Expression, Dissent, or Protest of their rights and responsibilities.

8.14.7 Administration and Enforcement

Except for hospital facilities as managed by Emory Healthcare, it is the responsibility of the Vice President and Dean for Campus Life or their designee to protect and maintain the right of open expression under these Guidelines. This procedure is outlined as a transparent process for enforcing safety and other University policies while protecting the Community's rights to open expression.

8.14.7.1 Administrative Procedures

- a. Observation of Meetings, Events or Protests, when deemed necessary by the DCL to protect and maintain open expression, shall be the responsibility of the DCL, who may delegate such responsibility. This Observer shall have full authority to act in the name of the DCL under these Guidelines. References to the DCL include their designee, who will take the form of trained staff or faculty who will serve as Open Expression Observers to help protect open expression and the rights of all parties involved.



- b. Except in emergencies, the DCL's authority under these Guidelines shall not be delegated to employees of the Emory Police Department. Emergencies, for purposes of this clause, are defined as situations that include any of the following: imminent serious bodily harm; serious threat; imminent life threatening behavior; reckless disregard for human life; or threat to life, limb, or property.
- c. The Observer shall identify himself or herself to those responsible for the Meeting or Event or to the leaders of the Protest.
- d. The DCL shall attempt to inform the chair of the Committee for Open Expression of Meetings, Events, or Protests to which an Observer will be sent. The chair may designate a member or members of the Committee to accompany and advise the Observer. Such a Committee representative shall also be identified to those responsible for the Meeting or Event or to the leaders of the Protest.
- e. Any Observer who attends a Meeting, Event, or Protest shall reasonably attempt to respect the privacy of those involved.
- f. The Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy.

8.14.7.2 Enforcement Procedures

The Committee and the DCL shall work with Protestors or Dissenters to identify ways to continue the Expression, Protest, or Dissent with modifications to avoid future violations. The spirit of this policy is to protect the right of Protestors to do so while ensuring the narrow exceptions in this policy are no longer being violated.

- a. The DCL is responsible for enforcing Section 8.14.5 and may work with anyone whose behavior is violating or threatens to violate these Guidelines to modify or terminate such behavior. The instruction shall include notice that failure or refusal to comply is a further violation according to Section 8.14.7 of these Guidelines. However, an instruction or warning by the DCL is not a prerequisite for a finding that a violation has occurred.
- b. The Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy. When the DCL declares that an individual or a group has violated the Guidelines, they may request to examine their University or other identification. The hosts of invited guests may also be asked to provide their University identification.
 - ii. Failure to comply with this request is a violation of the Guidelines.
 - i. In the event that any person(s) are deemed by the DCL or their designee to have violated the Guidelines and such person(s) refuse to show University or other identification, the DCL has the authority to make reasonable efforts to identify the individuals. The DCL is not authorized to photograph or take video of individuals where a reasonable expectation of privacy exists.
- c. In carrying out this responsibility for safeguarding the right of open expression, the DCL shall obtain the advice and recommendation of the Committee for Open Expression whenever feasible.

8.14.7.3 Terminations or Arrests because of Violations of this Policy

Termination of an event or any arrests must be the option of last resort. The Chair of the Committee for Open Expression, or their designee, must be consulted and must have advised of all alternatives to support continuation of the Expression, Protest, or Dissent before there is any termination or arrest. Avoidance of injury to persons by the continuation of a Meeting, Event, or Protest is a key factor in determining whether it should be forcibly terminated. Property damage and significant interference with educational processes are also factors to be considered and may be of sufficient magnitude to warrant forcible termination.

If a Meeting, Event, or Protest is forcibly terminated, a full statement of the circumstances leading to the incident shall be publicized by the DCL within the University.

8.14.7.4 Violations of Other University Policies

The Committee for Open Expression is not an investigatory committee related to conduct of Community members. As such, all Community violations shall be handled in the following manner:

- a. Cases involving undergraduate students are referred to the Office of Student Conduct who investigates the Event and decides what disciplinary proceedings, if any, to pursue.
- b. Cases involving graduate or professional students are referred to the established disciplinary body of the school in which the student is enrolled.



- c. Cases involving faculty are referred to the appropriate Dean or to the Provost.
- d. Cases involving University, including Healthcare, staff or administrators are referred to that individual's supervisor, any other person with supervisory responsibility over that individual, or Human Resources.
- e. Cases involving trustees and associate trustees of the University and members of the Boards of Overseers or other bodies advisory to the University are referred to the Executive Committee of the Trustees.
- f. Cases involving contracted workers shall be discussed by the Committee for Open Expression in collaboration with the University administrator managing that relationship.

Definitions

Opinion of the Emory University Senate Standing Committee for Open Expression Regarding Definition of Community Member

Related Links

- Current Version of This Policy: <http://policies.emory.edu/8.14>
- 2011 Taskforce on Dissent, Protest & Community Report (https://www.emory.edu/CAMPUS_LIFE/documents/archive/2011_DPC_report.pdf)
- Undergraduate Student Code of Conduct (<http://conduct.emory.edu/>)
- Meeting Services Space Reservation Policies (<http://universitycenter.emory.edu/>)
- Posting Guidelines and Practices : download (<http://policies.emory.edu/uploads/Emory%20Posting%20Guidelines%20and%20Practices2016.pdf>)

Contact Information

Subject	Contact	Phone	Email
Complaints or Violations to this Policy	University Senate and the Committee for Open Expression	n/a	openexpression@emory.edu
Administration of Policy	Campus Life	404-727-4364	campuslife@emory.edu
Student Organization Support	Student Involvement, Leadership, and Transitions	404-727-6169	lisa.loveall@emory.edu
Conduct-Related Questions or Sanctions	Office of Student Conduct	404-727-7190	conduct@emory.edu
Space Reservations	Meeting Services	404-727-1706	universitycenter@emory.edu
Open Expression Observers	Campus Life	404-727-2136	mshutt@emory.edu

Revision History

- Version Published on: [Sep 21, 2018](#) (*Quick updates to Details, Updated Links, Contacts*)
- Version Published on: [Apr 12, 2017](#) (*policy updated by committee*)
- Version Published on: [Dec 05, 2016](#) (*link to Standing Committee opinion-cmty member definition*)
- Version Published on: [Aug 26, 2016](#)
- Version Published on: [Jun 01, 2016](#) (*links updated and uploaded guidelines*)
- Version Published on: [Nov 18, 2015](#)
- Version Published on: [Mar 02, 2015](#) (*Senate approved changes 2.2015*)



EMORY
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Official University Policy
<https://emory.ellucid.com>

- Version Published on: [Nov 05, 2013](#) (*Original Publication*)



Policy 10.12

Student Complaints

Responsible Official:	Provost and Executive Vice President for Academic Affairs
Administering Division/Department:	General Policies
Effective Date:	April 01, 2013
Last Revision Date:	February 24, 2020

Policy Sections:

- I. [Overview](#)
- II. [Applicability](#)
- III. [Policy Details](#)
- IV. [Definitions](#)
- V. [Related Links](#)
- VI. [Contact Information](#)
- VII. [Revision History](#)

Overview

Emory University is committed to receiving and addressing written student complaints against the university, its faculty, staff, or administrative personnel in a timely manner. Appropriate procedures are described below and should be adhered to in response to student complaints. Students should first attempt to resolve their complaints with the office most directly responsible for the action being challenged. Each school or administrative unit at Emory has an office of Student Services or other office that can further assist students and direct them -if they are uncertain about where to start. In addition, students may use the Office of the Ombuds (<https://ombuds.emory.edu/>) to assist with complaints if they are uncertain or wish to discuss a situation confidentially before taking more formal action. Note that in cases of sexual misconduct, the Ombuds is a mandated reporter.

Federal financial aid laws and regulations require that each state has a process to review and act on complaints concerning educational institutions in the state. You may file a complaint about Emory University with the State of Georgia Office of Inspector General by following the directions at the OIG website. In the event that OIG receives a student complaint relating to financial aid, it will forward it to the Office of Inspector General of the U.S. Department of Education.

An agreement with the Georgia Nonpublic Postsecondary Education Commission permits students enrolled in distance learning programs to file a complaint with the following agencies if their complaint cannot be resolved by following Emory University procedures: 1) the Georgia Nonpublic Postsecondary Commission, 2) the Southern Association of Colleges and Schools, Commission on Colleges, and 3) a complaint to the state in which the distance learning student resides.



Applicability

This policy applies to current and former students who choose to make a formal written complaint against the university, its faculty, staff, or administrative personnel..

Policy Details

Documentation of Complaint

Student complaints must be submitted in writing and accompanied by relevant documentation describing 1) the specific action, practice or decision that is being challenged, 2) the individuals involved in or with knowledge of the action, practice or decision at issue, 3) the impact of the decision, 4) what resolution is desired, and 5) why it should be granted.

Complaint Resolution

Except in situations involving allegations of discrimination or harassment (where students may file complaints directly with the Office of Equity and Inclusion), Emory encourages each student to pursue complaints against faculty, staff or administrative personnel at the school, office, or unit level. Each school and administrative unit has its own procedures as described in the student handbook, school's catalog, or unit website. Academic or other concerns usually begin with student service personnel in each school or administrative unit who then typically route the concerns to the appropriate school or administrative authority. Student concerns can be effectively handled by school or administrative unit personnel who have expertise in the academic or service discipline involved, familiarity with the faculty/staff, and who have experience in handling similar decisions made regarding its students.

To expedite a prompt resolution, complaints should include current contact information of the individual filing the complaint. In most cases, responses to the complaint, including the final decision, will be provided in writing within 30 days of receipt of the complaint. However, exceptions to this timeframe may be allowed with reasonable and regular communication to inform the student of the current status of the complaint.

Record Retention

The designated school or unit representative for reporting purposes should retain the written complaint along with the resolution of the complaint, and any additional supporting documentation including emails, or other communication. In addition, an action log of all complaints received should be maintained each year. This action log is collected by the Office of Planning and Administration as a part of the Annual Report process. An example is provided below in the "Related Link" section.

Distance Learning: National Council for State Authorization Reciprocity Agreements

Effective March 17, 2016, the Georgia Nonpublic Postsecondary Education Commission (GNPEC) approved Emory University to participate in the National Council for State Authorization Reciprocity Agreements (NC-SARA). A "State authorization reciprocity agreement" is an agreement between two or more States that authorizes an institution located and legally authorized in a State covered by the agreement to provide postsecondary education through distance education or correspondence courses to students in other States covered by the agreement. If a complaint submitted by a student enrolled in a distance learning program cannot be resolved by following the Emory University procedures, a student may file a complaint with the following agencies: 1) Georgia Nonpublic Postsecondary Commission (complete the [SARA Online Student Complaint form](#)), 2) the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), Emory University's regional accrediting body (["Complaint Procedures"](#)), and 3) a complaint to the state within which the distance learning student resides ([file a complaint in your state](#)).

State of Georgia

Federal financial aid laws and regulations require that each state has a process to review and act on complaints concerning educational institutions in the state. If you have a complaint, you may file it with Emory's financial aid office or call the Trust Line at 1-888-550-8850 or file a report online at <https://www.mycompliancereport.com/EmoryTrustLineOnline>. You may also file a complaint about Emory



University with the State of Georgia Office of Inspector General by following the directions at the OIG website. In the event that OIG receives a student complaint relating to financial aid, it will forward it to the Office of Inspector General of the Department of Education.

Southern Association of Colleges and Schools Commission on Colleges

The Southern Association of Colleges and Schools Commission on Colleges is Emory University’s regional accrediting body. Students may make inquiries to SACSCOC regarding complaint procedures or about issues and concerns that could be considered complaints. Policy and procedures for filing student complaints are outlined in the document “Complaint Procedures against SACSCOC or its Accredited Institutions.” SACSCOC asks that you read its policy statement before filing a complaint.

Definitions

A complaint is a written description of a problem or concern that has not been resolved through normal academic or administrative processes at the office or unit level. Student complaints can be categorized into four major areas: Academic, Non-academic, Discrimination/Harassment (equityandinclusion.emory.edu), or Appeals of any of the previously mentioned areas.

If a student has a complaint involving discrimination, harassment or sexual misconduct against an Emory employee, the complaint can be made directly to the Office of Equity and Inclusion. Otherwise, a complaint should be filed with and handled by the relevant school or administrative unit.

The “handling official” is the person designated in each school or administrative unit to address the complaint.

An ombudsperson is an independent, impartial individual from whom students may seek confidential guidance regarding a problem, conflict or concern. The Emory Ombuds Office offers assistance through informal means only and is not an advocate in grievance procedures, judicial procedures, or any other formal processes.

A “State authorization reciprocity agreement” is an agreement between two or more States that authorizes an institution located and legally authorized in a State covered by the agreement to provide postsecondary education through distance education or correspondence courses to students in other States covered by the agreement.

Related Links

- Current Version of This Policy: <http://policies.emory.edu/10.12>
- Office of the Ombuds Website (<https://ombuds.emory.edu/>)
- Emory Trustline (<http://www.mycompliancereport.com/EmoryTrustLineOnline>)
- Office of Inspector General (<https://oig.hhs.gov/>)
- Southern Association of Colleges and Schools Commission on Colleges Complaint Procedures (<http://www.sacscoc.org/pdf/081705/complaintpolicy.pdf>)
- NC-SARA Online Student Complaint Forms (<https://gnpec.georgia.gov/student-complaint-forms>)
- Information for Filing Complaints in Other States (<https://sheeo.org/about/>)
- Equity and Inclusion Website (<http://equityandinclusion.emory.edu/>)
- Student Complaint Example (<https://policies.emory.edu/uploads/StudentComplaintLogExample1.pdf>)

Contact Information

Subject	Contact	Phone	Email
Clarification of Policy	Office of the Provost	404-727-4170	nancy.bliwise@emory.edu



- Version Published on: [Jan 24, 2019](#)
- Version Published on: [Aug 07, 2018](#)
- Version Published on: [May 09, 2017](#)
- Version Published on: [Aug 10, 2015](#) (*March 2014 edits*)
- Version Published on: [Jan 28, 2015](#)
- Version Published on: [Mar 13, 2014](#) (*Original Publication*)