



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

AGENDA



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

GENERAL MEETING AGENDA

Friday, September 8, 2023
9:00 AM

Augustus B. Turnbull Conference Center
555 W Pensacola St, Tallahassee, FL 32306
Room 208

The agenda will be followed in subsequent order and items may be heard earlier than the scheduled time.

- I. CALL TO ORDER AND WELCOME**
Mr. Peter Collins, Chair
- II. APPROVAL OF MINUTES**
June 15, 2023, Meeting Minutes
August 2, 2023, Meeting Minutes
- III. PUBLIC COMMENTS**
- IV. PRESIDENT'S REPORT**
Dr. Richard McCullough, President
- V. CONSENT ITEMS**
 - A. Request for Approval:** Textbook and Instructional Materials Affordability Annual Report (Academic Affairs)
 - B. Request for Approval:** FSU College of Medicine Graduate Medical Education Annual Institutional Executive Summary (AY 2022-2023) (Academic Affairs)
 - C. Request for Approval:** Flaumenhaft Family Gate at Doak Campbell Stadium (Advancement)
 - D. Request for Approval:** OAAS Charter and A&C Committee Charter (Audit & Compliance)
 - E. Request for Approval:** FSU International Programs Association, Inc. (FSUIPA) 5-year contract renewal with James Moore & Co. (Audit & Compliance)

- F. Request for Approval:** The Collegiate School at FSU Panama City is requesting a 3-year contract with an option to renew for two (2) one-year periods with BKHM CPA (Audit & Compliance)
- G. Request for Approval:** 2023-2024 Carryforward Spending Plan (Finance & Business)
- H. Request for Approval:** 2023-2024 Fixed Capital Outlay Budget (Finance & Business)
- I. Request for Approval:** Status report on Purchase Orders over \$1M and 5+ Years of Service Contracts (Finance & Business)
- J. Request for Approval:** Technical Amendment to BOT Resolution Approving Tax Exempt Debt to Fund a Portion of the Dunlap Football Center and to Refund the FSU Financial Assistance, Inc. outstanding bonds (Finance & Business)
- K. Request for Approval:** Florida State University Employee Bonus Plan Report (Finance & Business)
- L. Request for Approval:** Regulation Amendment to FSU 2.009, Parking and Traffic (Finance & Business)
- M. Request for Approval:** Regulation Amendment to FSU-2.02414, Waivers and Exemptions of Tuition and Fees (Finance & Business)
- N. Request for Approval:** Student Conduct Code Regulation 3.004 (Student Affairs)
- O. Request for Approval:** Student Organization Conduct Code Regulation 3.0041 (Student Affairs)
- P. Request for Approval:** Involuntary Medical Withdrawal Regulation 3.0045 (Student Affairs)

VI. NEW BUSINESS AND UPDATES

A. Audit and Compliance Committee

Trustee Jim Henderson

Mr. Undra Baldwin, Chief Audit Officer and Interim Chief Compliance and Ethics Officer

B. Athletics Update

Mr. Michael Alford, Vice President and Director of Athletics

Information Item I:

Ms. Victoria Cervantes Millan, Women's Diving and 2023-2024 Student Athlete Advisory Council President

Action Item I: Request for Approval: ACC Governing Board Certification Form (Academic Year 2023-24)

C. Faculty Senate Steering Committee

Dr. Roxanne Hughes, Vice-Chair, Faculty Senate Steering Committee

D. Student Government Association

Ms. Nina Chong, Vice President, Student Government Association

E. Student Affairs Committee

Trustee Drew Weatherford, Chair

Dr. Amy Hecht, Vice President for Student Affairs

F. Academic Affairs Committee

Trustee Vivian de las Cuevas-Diaz, Chair

Dr. James Clark, Provost and Executive Vice President for Academic Affairs

Information Item I:

Mr. Liam White, PhD Student, Department of Computational Science

College of Arts & Sciences

Information Item II:

Ms. Lilian Garcia-Roig, 2023-2024 Robert O. Lawton Distinguished Professor

Professor, Department of Art, College of Fine Arts

G. Advancement Committee

Trustee John Thiel, Chair

Ms. Marla Vickers, Vice President for University Advancement and President, FSU Foundation, Inc.

H. Finance and Business Committee

Trustee Jim Henderson, Chair

Mr. Kyle Clark, Senior Vice President for Finance and Administration

Information Item I: BOT Resolution Approving FSU Athletics Association, Inc. Debt Financing to Fund a Portion of the Doak Campbell Football Stadium Premium Seating Project

I. University Research Committee

Trustee Jorge Gonzalez, Chair

Dr. Stacey Patterson, Vice President for Research

J. Governance Committee

Trustee Bob Sasser, Chair

Ms. Carolyn Egan, Vice President for Legal Affairs

VII. CHAIR'S REPORT

Mr. Peter Collins, Chair

Action Item I: Request for Approval: FY 2022-2023 Presidential Evaluation

Action Item II: Request for Approval: President's FY 2023 - 2024 Goals

VIII. OPEN FORUM FOR BOARD OF TRUSTEES

Mr. Peter Collins, Chair

IX. ADJOURNMENT



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

MEETING MINUTES

June 15, 2023



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

MEETING MINUTES

(DRAFT)

June 15, 2023

3:30 PM

General Meeting Held via Zoom

Attended via Zoom: *Kathryn Ballard, Bridgett Birmingham, Peter Collins, Vivian de las Cuevas-Diaz, Jack Hitchcock, Jorge Gonzalez, Jim Henderson, Justin Roth, Deborah Sargeant, Bob Sasser, and Drew Weatherford.*

Absent: *Max Alvarez, John Thiel.*

I. CALL TO ORDER AND WELCOME

Mr. Peter Collins, Chair

Chair Collins welcomed everyone and called the meeting to order at 3:24 PM.

Heather Mayo called the roll and confirmed a quorum.

II. APPROVAL OF MINUTES

February 24, 2023, Meeting Minutes

March 23, 2023, Meeting Minutes

April 25, 2023, Meeting Minutes

There was a motion to approve the February 24, 2023, March 23, 2023, and April 25, 2023, board meeting minutes. Trustee de las Cuevas-Diaz seconded the motion, and all sets of minutes were approved unanimously by all present on the call.

III. PUBLIC COMMENTS

There were no public comments.

Chair Collins read the Ethics Conduct Policy.

IV. PRESIDENT'S REPORT

Dr. Richard McCullough, President

President McCullough began his report by welcoming the two new trustees to the Board – Faculty Senate President Bridgett Birmingham and Student Body President Jack Hitchcock. He also congratulated Jack for being elected chair of the Florida Student Association. Additionally, he congratulated Trustee Kathryn Ballard on her reappointment to the FSU Board of Trustees.

President McCullough shared highlights from the spring semester and recent news related to FSU's goals for the future. He discussed spring commencement, the Princeton Review Rankings, the incoming summer freshmen class, the Florida Legislative Session, and FSU's 2023-2024 operating budget up for approval at the meeting.

President McCullough continued his report by sharing the university's future goals in rankings, research expenditures, new initiatives, and innovation. He highlighted that the U.S. News recently announced a change in their ranking methodology, and it will surely impact where universities stack up in the rankings. Most importantly, he assured the Board that regardless of the changing U.S. News metrics, FSU will continue to strategically invest in areas that will contribute to student success and help advance our goals as we strive for even greater academic and research excellence.

President McCullough concluded his report by congratulating Coach Lonni Alameda and the FSU Softball team for their great season and amazing performance in the Women's College World Series.

He thanked the Board for their continued support and commented that he looks forward to their continued work together.

V. CHAIR'S REPORT

Mr. Peter Collins, Chair

Chair Collins welcomed Trustee Jack Hitchcock and Trustee Bridgett Birmingham to the Board. Additionally, he congratulated Trustee Jack Hitchcock on his election to chair the Florida Student Association. He congratulated Trustee Ballard on her reappointment to the FSU Board of Trustees and thanked her for her continued service.

VI. CONSENT ITEMS

- A. Request for Approval:** 2024-2025 Academic Calendar (Academic Affairs)
- B. Request for Approval:** FSU-5.100 Confidentiality and Management of Examination and Assessment Materials (Academic Affairs)
- C. Request for Approval:** FSU Foundation, Inc. Board of Trustees Bylaw Revisions (Advancement)
- D. Request for Approval:** Nominations to the Board of Trustees of the FSU Foundation, Inc. (Advancement)
- E. Request for Approval:** Alumni Association Board of Directors Bylaw Revisions (Advancement)
- F. Request for Approval:** Nominations to the Board of Directors of the FSU Alumni Association, Inc. (Advancement)
- G. Request for Approval:** Nominations to the Board of Directors of the Seminole Boosters, Inc. (Advancement)
- H. Request for Approval:** Nominations to the Board of Directors of the John and Mable Ringling Museum of Art Foundation, Inc. (Advancement)
- I. Request for Approval:** Nominations to the Board of Trustees of the FSU International Programs Association, Inc. (Governance)

- J. Request for Approval:** Nominations to the Board of Directors of the FSU College of Business Student Investment Fund (Governance)
- K. Request for Approval:** Nominations to Board of Directors of the FSU Research Foundation, Inc. (Governance)
- L. Request for Approval:** Nominations to the Board of Directors of the FSU Magnet Research and Development, Inc. (Governance)
- M. Request for Approval:** FSU Magnet Research and Development, Inc. (MRD) 5-year Contract with James Moore & Company (Audit & Compliance)
- N. Request for Approval:** FY 2023-2024 OIGS Audit Plan (Audit & Compliance)
- O. Request for Approval:** FY 2024-2025 Capital Improvement Plan (Finance & Business)
- P. Request for Approval:** FSU Educational Plant Survey Report (Finance & Business)
- Q. Request for Approval:** Campus Master Plan Minor Amendment (Finance & Business)
- R. Request for Approval:** Emergency Regulation Amendment FSU-ER23-1, Waivers and Exemptions of Tuition and Fees (Finance & Business)
- S. Request for Approval:** Amendment to Regulation FSU-2.010, Bicycle Parking and Traffic Code (Finance & Business)
- T. Request for Approval:** Issue Tax-exempt Debt in the Amount not to Exceed \$125M to Fund a Portion of the Football Operations Facility Construction (Finance & Business)

Chair Collins stated that today's committee meeting format allowed the Trustees to hear reports from the committees and discuss items. However, he noted that if any Trustee wished to discuss any item on the consent agenda further, they may move the item to the regular agenda to do so.

No items were moved, and Chair Collins asked for a motion to approve Consent Items A-T.

Trustee de las Cuevas-Diaz moved to approve consent items A-T. Trustee Henderson seconded the motion, and it was approved unanimously by all present on the call.

VII. NEW BUSINESS AND UPDATES

A. Faculty Senate Steering Committee

Dr. Roxanne Hughes, Vice-Chair, Faculty Senate Steering Committee

Chair Collins welcomed Dr. Roxanne Hughes to her first FSU Board of Trustees meeting in her new role.

Dr. Roxanne Hughes, Vice-Chair of the Faculty Senate Steering Committee, reported that the Faculty Senate has met twice since the last FSU Board of Trustees meeting in February, and the Faculty Senate Steering Committee has been meeting weekly. Dr. Hughes discussed the Faculty Senate elections in April, faculty concerns regarding top faculty recruitment and retention, and faculty highlights. She thanked the Board for their continued support for FSU and its faculty.

B. Student Government Association

Ms. Nina Chong, Vice President, Student Government Association

Chair Collins welcomed Ms. Nina Chong to her first FSU Board of Trustees meeting.

Ms. Nina Chong, Vice President of the Student Government Association, reported on behalf of the student body. Ms. Chong highlighted student achievements from the past academic year, including noting student internships and student scholarships. She congratulated Trustee Hitchcock on his election to serve as the chair of the Florida Student Association.

Trustee Hitchcock commented on his leadership team and the excitement for the upcoming year.

C. Legislative Affairs

Mr. Clay Ingram, Chief Legislative Affairs Officer

Chair Collins introduced Mr. Clay Ingram to give a legislative affairs report.

Mr. Clay Ingram, Chief Legislative Affairs Officer, gave a report on legislative affairs, recapped the legislative session in Florida, and commented on the provided legislative information packet distributed to the Trustees before the meeting. He noted the Governor's action on the budget and discussed the state's approach to education during the legislative session. Mr. Ingram reported that Florida remains the number one state university system in the United States. He thanked everyone for all they did to make this session a success. Mr. Ingram also commented on the President's visit to Washington D.C. in March and the excitement for FSU in the D.C. area.

Chairman Collins thanked Clay and his team for their efforts during the legislative session.

D. Academic Affairs Committee

Trustee de las Cuevas-Diaz, Chair

Dr. James Clark, Provost & Executive Vice President for Academic Affairs

Action Item I: Request for Approval: FSU-4.073 Post-Tenure Faculty Review Regulation

Trustee de las Cuevas-Diaz introduced their action item and noted that it was discussed during their committee meeting. Chairman Collins asked for a motion to approve Action Item I: FSU-4.073 Post-Tenure Faculty Review Regulation.

Vice-Chair Sasser moved to approve FSU-4.073 Post-Tenure Faculty Review Regulation. Trustee de las Cuevas-Diaz seconded the motion, and it was approved unanimously by all present on the call.

E. Finance & Business Committee

Trustee Jim Henderson, Chair

Mr. Kyle Clark, Senior Vice President for Finance & Administration

Action Item I: Request for Approval: Regulation Amendment FSU-2.024, Tuition and Fees (Continuation of Existing Tuition and Fees for fiscal year 2023-2024)

Trustee Henderson and Vice President Clark introduced Action Item I: Regulation Amendment FSU-2.024, Tuition and Fees (Continuation of Existing Tuition and Fees for fiscal year 2023-2024) and noted that a report was made during their committee meeting and asked for a motion to approve.

Trustee Gonzalez moved to approve Regulation Amendment FSU-2.024, Tuition and Fees (Continuation of Existing Tuition and Fees for fiscal year 2023-2024). Trustee de las Cuevas-Diaz seconded the motion, and it was approved unanimously by all present on the call.

Action Item II: Request for Approval: FY 2023-2024 Operating Budget

Trustee Henderson and Vice President Clark introduced Action Item II. Trustee Henderson noted that there were individual meetings with Trustees with Vice President Clark to answer questions on the budget and discussion in the committee on the budget.

Chairman Collins read through each item and asked for a motion to approve Action Item II: FY 2023-2024 Operating Budget items 1-4.

1. Approve the university's fiscal year 2023-2024 operating budget of \$2,461,578,616 which includes \$347,411,462 for the Annual Capital Outlay Budget.
2. Approve the university's fiscal year 2023-2024 Florida Medical Practice Plan operating budget of \$14,247,734.
3. Approve the university's fiscal year 2023-2024 Direct Support Organizations operating budgets totaling \$150,553,291.
4. Grant approval for the President to make subsequent changes to the budgets outlined in motions 1, 2, and 3, as needed during the fiscal year, within available resources and fund balances, and consistent with applicable laws and regulations.

Trustee Henderson moved to approve the FY 2023-2024 Operating Budget items 1-4. Trustee Gonzalez seconded the motion, and it was approved unanimously by all present on the call.

F. Governance Committee

Trustee Bob Sasser, Chair

Ms. Carolyn Egan, Vice President for Legal Affairs

Action Item I: Board of Trustees Election of Chair & Vice-Chair

Vice-Chair Sasser nominated Chair Collins to chair the FSU Board of Trustees for a subsequent two-year term. Trustee Gonzalez moved to approve the nomination of Chair Collins. Trustee Weatherford seconded the motion, and the motion was approved unanimously by all who were present on the call.

Trustee Hitchcock nominated Vice-Chair Sasser to continue to serve as vice-chair of the FSU Board of Trustees for a subsequent two-year term. Trustee Henderson seconded the motion.

Trustee Weatherford noted that Chair Collins and Vice-Chair Sasser are a great team. Trustee de las Cuevas-Diaz commented that the election needs to be done in person next time. Chair Collins asked the Governance Committee to update the election policies at the next meeting to reflect that the election of officers needs to be done in person.

Vice-Chair Sasser's nomination to continue serving as vice-chair of the FSU Board of Trustees for a subsequent two-year term was approved unanimously by all present on the call.

VIII. OPEN FORUM FOR BOARD OF TRUSTEES

Chair Collins opened the floor for comments from the Board.

Trustee Deborah Sargeant asked the Board to consider saying the Pledge of Allegiance and a prayer before the Board meetings. Chairman Collins noted that the Board needs to consider the idea individually and as a Board and that he wants the Board to discuss it. Trustee Sargeant asked if FSU could research if other board of trustees at fellow state universities say the Pledge of Allegiance and a prayer before the meetings. Vice President Egan advised that she would gather information that would help the Board in the decision-making process.

Trustee de las Cuevas-Diaz, noted that there are two different items under consideration, and if anyone feels uncomfortable in either, they should bring their concerns to Vice President Egan so the Board can

consider it. Trustee de las Cuevas-Diaz and Trustee Sargeant both commented that if that the decision is to have a prayer before meetings that it needs to be inclusive. Trustee Weatherford said that he appreciated Trustee Sargeant's courage in bringing these ideas to the Board and is open to the discussion. He also noted that the Board should be cognizant of the fact that they are not only representing themselves individually but that they are representing the whole student body which is a diverse group of people. Chair Collins noted that the Board should feel free to talk about ideas. He asked for Vice President Egan to do some inquiries and come back to the Board with her findings at the next meeting. He also noted that if anyone has any concerns, to bring them to Vice President Egan.

Chair Collins noted upcoming important dates and meeting dates. He thanked the Board for their time.

President McCullough thanked the Board and thanked Chair Collins and Vice-Chair Sasser for agreeing to serve for two more years in their leadership positions.

IX. ADJOURNMENT

Chair Collins asked for a motion to adjourn the meeting at 4:41 PM. Trustee Henderson moved to adjourn the meeting. Trustee de las Cuevas-Diaz seconded the motion, and it was approved unanimously by all who were present on the call.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

MEETING MINUTES

August 2, 2023



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

MEETING MINUTES (DRAFT)

August 2, 2023

3:00 PM

Virtual Meeting via Zoom

Attended via Zoom: Max Alvarez, Kathryn Ballard, Bridgett Birmingham, Peter Collins, Vivian de las Cuevas-Diaz, Jack Hitchcock, Jorge Gonzalez, Jim Henderson, Justin Roth, Deborah Sargeant, Bob Sasser, John Thiel, and Drew Weatherford.

Absent: None.

I. CALL TO ORDER AND WELCOME

Mr. Peter Collins, Chair

Chair Collins welcomed everyone and called the meeting to order at 3:00 p.m.

Heather Mayo called the roll and confirmed a quorum.

II. PUBLIC COMMENTS

There were no public comments.

Chair Collins read the Ethics Conduct Policy.

III. NEW BUSINESS AND UPDATES

Chair Collins welcomed Provost Clark and asked for him to introduce the first two action items on the agenda.

Action Item I: Request for Approval: 2024-2025 Legislative Budget Request

Provost Clark provided an overview of the 2024-2025 Legislative Budget Request, which contained four individual requests. Provost Clark went through all four requests in detail.

Chair Collins and President McCullough provided additional information during Provost Clark's overview.

Trustee de las Cuevas-Diaz moved to approve the 2024-2025 Legislative Budget Request. Trustee Henderson seconded the motion, and it was approved unanimously by all who were present on the call.

Trustee Henderson reiterated the importance of these requests, especially the one in technology, as being of utmost importance for our growth.

Action Item II: Request for Approval: 2023-24 Linking Industry to Nursing Education (LINE) Fund Proposals

Chair Collins asked Provost Clark to give an overview of the two 2023-2024 Linking Industry to Nursing Education (LINE) Fund Proposals. Provost Clark gave an introduction and welcomed College of Nursing Dean Jing Wang to provide additional information. Dean Wang advised that it is a 1:1 matching grant from the state and that the grants require a healthcare partner. Dean Wang thanked Chair Collins and the Board for their support.

Trustee Thiel moved to approve the 2023-24 Linking Industry to Nursing Education (LINE) Fund Proposals. Trustee Birmingham seconded the motion, and it was approved unanimously by all who were present on the call.

Action Item III: Request for Approval: Creation of Direct Support Organization

Chair Collins invited Vice President for Legal Affairs and General Counsel Carolyn Egan to give an introduction and overview of the proposed direct support organization. The direct support organization would support the purchase of the aircraft. The request would be for the Board to create a direct support organization, which would be entitled "FSU Transportation." The materials contain the proposed articles of incorporation, and the bylaws will be created at the first meeting of the direct support organization. The purpose of the direct support organization would be to operate and otherwise govern the aircraft.

Chair Collins noted that the need for the direct support organization would be to hold the purchase of two planes. He commented that the Boosters needed to purchase planes due to the rising costs of charting aircrafts.

Trustee Weatherford moved to approve the Creation of the Direct Support Organization. Trustee Thiel seconded the motion, and it was approved unanimously by all who were present on the call.

Action Item IV: Request for Approval: Seminole Boosters, Inc. Loan

Chair Collins welcomed Senior Vice President for Finance & Administration Kyle Clark to introduce Action Item IV. Senior Vice President Clark gave an overview and reviewed two airplane financing options.

Senior Vice President Clark requested the Board's approval for the Seminole Boosters, Inc. to purchase up to two airplanes with a combined purchase price not to exceed \$9 million, subject to the Seminole Boosters, Inc.'s full Board approval. Financing will comply with the Board of Governors Debt Management Guidelines. Final financing terms will be presented to the Board of Trustees Finance Committee Chair for review.

Chair Collins asked Finance Committee Chair Trustee Henderson for additional comments and information. Trustee Henderson noted that it will be important to identify good pilots.

Chair Collins commented on the usage structure for FSU departments outside the Boosters who want to utilize the plane. Vice President Egan and Senior Vice President Clark also commented on the structure and provided additional clarification.

Trustee Alvarez moved to approve the Seminole Boosters, Inc. Loan. Trustee Sasser seconded the motion, and it was approved unanimously by all who were present on the call.

IV. OPEN FORUM FOR BOARD OF TRUSTEES

Mr. Peter Collins, Chair

There was discussion surrounding FSU and the Atlantic Coast Conference.

V. ADJOURNMENT

Chair Collins noted upcoming important dates and meeting dates. He thanked the Board for their time.

The meeting was adjourned at 4:18 p.m.

DRAFT



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM A



FLORIDA STATE UNIVERSITY
OFFICE OF THE PROVOST

TO: President Richard McCullough
FROM: Provost James Clark
DATE: August 24, 2023
SUBJECT: Textbook and Instructional Materials Affordability

Request for Approval

State law requires each university to submit an annual report to the Chancellor of the State University System on textbook and instructional materials affordability. Using a template and instructions provided by the Florida Board of Governors, the Provost's Office compiled and analyzed this information.

Per BOG Guidance:

Section 1004.085, Florida Statutes, establishes requirements regarding the textbook and instructional materials adoption process at public colleges and institutions in Florida. The law requires each institution's board of trustees in the State University System to submit an annual report by September 30 of each year, beginning in 2016, to the Chancellor of the State University System. In 2019, Chapter 2019-4, Laws of Florida removed subsections (4) and (8) of section 1004.085, Florida Statutes. Each institution's report is required to address four components.

- The selection process for textbooks and instructional materials for general education courses identified with high enrollments.
- Specific initiatives of each institution designed to reduce the costs of textbooks and instructional materials.
- Institution policies implemented for the posting of textbooks and instructional materials information for students.
- The number of courses and course sections that did not meet the textbook and instructional materials posting deadline in the previous academic year.

The attached report has been compiled in accordance with BOG guidelines. I recommend your approval of the Textbook and Instructional Materials Affordability Report. Consistent with state law, upon review and approval, the report will be submitted to the Chancellor of the State University System.

Textbook and Instructional Materials Affordability Annual Report

Instructions

1. Complete each tab/worksheet as designed. The template reflects the interpretation of the reporting requirements by Board staff.
Do not edit the content of the template. Expand the response space as needed.
2. Statutory due date is September 29, 2023.
3. If there are questions, contact Kirsten Harvey Director of Student Success & Workforce Alignment, at Kirsten.Harvey@flbog.edu
4. Include the university contact name and email for the staff who completed the report below:
5. Please note some cells are auto-calculated and do not require you to enter a figure. These cells are green.

University Contact Name and Email: James M. Hunt, Ph.D., jhunt@fsu.edu

**Textbook and Instructional Materials Affordability Annual Report
Fall 2022 and Spring 2023**

University Submitting Report:

Florida State University

Date Approved by the University Board of Trustees:

9/8/2023

Signature of Chair, University Board of Trustees:

Signature of Vice President for Academic Affairs:

Signature of President:

Textbook and Instructional Materials Selection Process

Report the textbook and instructional materials selection process used for general education courses with high enrollment. Include the course prefix(es) and number(s), the course title(s), and the total number of courses ($n=$). In column "F," use the drop-down arrow in each cell to select the appropriate selection process. The methodology for determining high enrollment courses is as follows: *Order courses (course prefix/number) by headcount enrollment, excluding honors courses. The top 10% of courses are determined as high enrollment.*

| General Education Courses with High Enrollment | | Total Number of Course Sections ($n=$) | Selection Process | If "other," describe |
|--|------------------------------|---|--------------------------|----------------------|
| Course Prefix & Number | Course Title | | | |
| ENC2135 | RESEARCH, GENRE, AND CONTEXT | 227 | Combination of the Above | |
| CHM1045 | GEN CHEMISTRY I | 60 | Department Committee | |
| MAC1105 | COLLEGE ALGEBRA | 59 | Department Committee | |
| STA2023 | FUND BUS STATISTICS | 33 | Combination of the Above | |
| STA2122 | INTRO APPL STATISTIC | 41 | Combination of the Above | |
| CHM1046 | GEN CHEMISTRY II | 44 | Department Committee | |
| MAC2233 | CALCULUS FOR BUSINES | 41 | Department Committee | |
| MAC1140 | PRECALCULUS ALGEBRA | 61 | Department Committee | |
| MAC1114 | ANALYTIC TRIGONOMETRY | 32 | Department Committee | |
| PHI2010 | INTRO TO PHILOSOPHY | 24 | Individual Faculty | |
| ECO2023 | PRIN OF MICROECON | 17 | Combination of the Above | |
| ECO2013 | PRIN OF MACROECON | 21 | Combination of the Above | |
| BSC2010 | BIOLOGICAL SCIENCE I | 31 | Department Committee | |
| CHM1045L | GEN CHEM I LAB | 55 | Department Committee | |
| ARH2000 | ART ARCH ARTITC VISN | 24 | Department Committee | |
| PSB2000 | INTRO BRAIN & BEHAVR | 15 | Individual Faculty | |
| POS1041 | AMER GOV: NATIONAL | 5 | Individual Faculty | |
| EVR1001 | INTRO ENV SCIENCE | 8 | Department Committee | |
| BSC1005L | GENERAL BIOLOGY LAB | 40 | Department Committee | |
| MAC2311 | CALC W/ANLYT GEOM I | 48 | Department Committee | |
| BSC1005 | GEN BIO NON-MAJORS | 8 | Department Committee | |
| BSC2010L | BIOLOGICAL SCI I LAB | 39 | Department Committee | |
| PSY2012 | GEN PSYCHOLOGY | 17 | Department Committee | |
| BSC2011 | BIOLOGICAL SCIENCE II | 8 | Department Committee | |
| ENC1101 | FRESH COMP & RHETRC | 65 | Combination of the Above | |
| CHM1046L | GEN CHEMISTRY II LAB | 39 | Department Committee | |

Course Sections with No Cost for Textbooks/Instructional Materials

Report the total number of course section(s) offered including exceptions and the total number of course sections that did not require or recommend the purchase of a textbook(s)/ instructional materials and/or utilized open educational resources. These may include general education courses, upper level courses, and courses for directed independent study, internships, thesis/dissertation, etc.

Fall 2022

| | |
|--|-------|
| Total Number of Course Sections Offered (Including Exceptions) | 12323 |
| Total Number of Course Sections Offered with No Cost Materials | 8268 |
| Percent of Course Sections with No Cost Materials (Auto-Calculated) | 67% |

Spring 2023

| | |
|--|-------|
| Total Number of Course Sections Offered (Including Exceptions) | 12162 |
| Total Number of Course Sections Offered with No Cost Materials | 8522 |
| Percent of Course Sections with No Cost Materials (Auto-Calculated) | 70% |

Board Action Plan - Low Cost Course Materials

Report the total number of course section(s) offered including exceptions and the total number of course sections that required or recommended textbook(s)/instructional materials for \$20 or less per credit hour (e.g., \$60 or less for a three-credit-hour course), which meets the State University System of Florida Action Plan for the Pricing of Textbooks and other Instructional Materials.

| Fall 2022 | |
|--|-------|
| Total Number of Course Sections Offered (Including Exceptions) | 12323 |
| Total Number of Course Sections Offered with the Cost of Materials at \$20 or less per credit hour | 773 |
| Percent of Course Sections Offered with the Cost of Materials at \$20 or less per credit hour (Auto-Calculated) | 6% |

| Spring 2023 | |
|--|-------|
| Total Number of Course Sections Offered (Including Exceptions) | 12162 |
| Total Number of Course Sections Offered with the Cost of Materials at \$20 or less per credit hour | 731 |
| Percent of Course Sections Offered with the Cost of Materials at \$20 or less per credit hour (Auto-Calculated) | 6% |

Textbook & Instructional Materials Affordability Initiatives

Describe specific initiatives of the institution designed to reduce the costs of textbooks and instructional materials.

The University Libraries have implemented an alternative textbook grant program, which has awarded \$73,000 in grants to FSU instructors to identify free or low-cost textbooks for forty-one courses. The Libraries estimates that instructors who have participated in the program saved students approximately \$647,921 on course materials since the program's inception, including International Program courses. In addition, the University Libraries implemented an eTextbooks Program in which library-licensed materials serve as course adopted textbooks. Instructors and students are able to search by course code instructor or book title to determine if required course materials identified by instructors are available online at no cost through the Libraries. Since its implementation, the Libraries have identified 2192 available eTextbooks in 2021, 2839 available eTextbooks in 2022 (a 29.52% increase), and 1480 available eTextbook titles in 2023 (spring & summer semesters only). In calculating the total potential savings for FSU students (assuming all possible courses adopted available eTextbook titles for all students), the impact now has exceeded five million dollars. This program is promoted directly to instructors with available eBooks each semester. Further, the University Libraries have a course reserve program in which materials available through the course reserve program are searchable by course, instructor, and title through the library catalog. Each academic department is assigned a subject librarian who communicates to faculty about library services, including course reserves. The library website contains information about the Course Reserve program for faculty and students, while students also hear from the instructor about Course Reserves. For the 2021-2022 academic year, the Course Reserve Program at the Libraries included physical reserves and eReserves for 166 courses, 89 of which are permanently on Reserve.

Has the *opt-in* provision been implemented by your institution for the purchase of student materials? If yes, describe the impact this has had on student savings, if any.

The University implemented the Follett Access Opt-In Program in Fall 2018 and administered the program through Fall 2020. The program allowed students to "opt in" to purchase materials at a reduced cost from the University Bookstore (Follett). These materials are digitally delivered to students providing advantages in both material accessibility and affordability for participating students. According to the University Bookstore, sixty-five courses participated in the opt-in program with a participation rate of 67% and a savings of \$528,954. Since the program's inception, the University Bookstore estimates that students saved nearly \$1.4 million as a result of the Follett Access Opt-In Program.

Textbook & Instructional Materials Affordability Initiatives

Has the *opt-out* provision been implemented by your institution for the purchase of student materials? If yes, describe the impact this has had on student savings, if any.

In Spring 2021, the university implemented the opt-out provision for the purchase of student materials for select courses (referred to as the “Follett Access Program”). The program is a partnership between Student Business Services and the University Bookstore to enhance student success by delivering required course materials to students on or before the first day of classes at the lowest cost available. To identify participating course, the University Bookstore collaborates with instructors. Students enrolled in a participating course are automatically enrolled in the Follett Access Program when registering for the course. Both Student Business Services and the University Bookstore provide information to students about accessing course materials through the Follett Access Program as well as instructors to opt-out of the program and relevant deadlines. Additionally, incoming students and their family members are presented with information on how the Follett Access Program works during new student orientation, which is required prior to matriculation. Course materials obtained through the Follett Access Program are charged automatically to student accounts through FSU invoices. If a student drops a course participating in the program, the charges are automatically removed from the invoice. According to the FSU Bookstore, in Fall 2022, one hundred sixty-three courses participated in the opt-out program with a total participation rate of 90%. When compared to the national digital price, there were student savings of \$1,282,839. When compared to the national print cost, there were \$3,178,953 in savings. In Spring 2023, one hundred ninety-five courses participated with a 92% total participation rate. When compared to the national digital price, there were student savings of \$1,094,013. When compared to the national print price, there were student savings of \$2,825,677. In the Summer A & C terms, one hundred twelve courses participated with a total participation rate of 93%. When compared to the national digital price, there were student savings of \$282,994. When compared to the national print price, there were student savings of \$768,233. Since the Implementation of the Follett Access program in Fall 2018, total savings to date compared to the national digital is over \$6.8 million.

University Policies for the Posting of Textbooks and Instructional Materials & Compliance with the Posting Deadline

Describe policies implemented to ensure the posting of textbooks and instructional materials for at least 95% of all courses and course sections 45 days before the first day of class.

The Office of the Provost requests that textbook and instructional material information be made available to students through the university's Student Information System by the first date of course registration (e.g., mid-March for Summer and Fall semesters and October for Spring semester), well ahead of the requirement of 45 days prior to the start of the semester. The Provost's Office establishes the deadlines for instructors of record or their designees to assign required and recommended textbooks and instructional material and input identifying information into the Student Information System. Textbook compliance information is posted on the Provost's website and also sent to colleges. Compliance is monitored by the Provost's Office and academic personnel provide regular reports to the Provost to ensure compliance. The Provost's Office also sends follow up emails and status updates regularly to the colleges. Students access the Student Information System through an online web portal using its course look-up feature to make decisions about courses, considering textbook costs, months in advance of the start of the term, and are encouraged to do so by academic personnel and advisors.

Are the policies effective in meeting the reporting requirement? If not, what measures will be taken by the university to increase faculty and staff compliance for meeting the reporting requirement?

The university's policies have been effective in meeting the reporting requirements. In the university's three most recent published operational audits in which textbook and instructional material compliance was included (conducted by the state auditor general), Florida State University had no findings related to compliance with s. 1004.085, Florida Statutes, concerning textbook affordability.

University Policies for the Posting of Textbooks and Instructional Materials & Compliance with the Posting Deadline

| Published List of Required and Recommended Textbooks and | |
|--|---------------------------------------|
| Please use the drop-down options to confirm the published list of required and recommended textbooks and instructional materials includes the following information. | |
| | |
| Information Required | Affirm Information is Included |
| International Standard Book Number (ISBN) or Other Identifying Information | Included |
| Title | Included |
| All Authors Listed | Included |
| Publishers | Included |
| Edition Number | Included |
| Copyright Date | Included |
| Published Date | Included |
| Searchable by Course Subject, Course Number, Course Title, Name of Instructor, Title of Material, and Author(s) of Material | Included |
| Material Information is Easily Downloadable by Current and Prospective | Included |

| Published Course Syllabus Requirements | |
|--|---------------------------------------|
| Please use the drop-down options to confirm the course syllabus of the general education core course options identified pursuant to section 1007.25, Florida Statutes include the following information. | |
| | |
| Information Required | Affirm Information is Included |
| Course Curriculum | Included |
| Goals, Objectives, and Student Expectations of the Course | Included |
| Performance will be Measured | Included |

| Link to Published List of Required and Recommended Textbooks and Instructional Materials |
|---|
| Please provide a link to the webpage housing the information listed under "Published List of Required and Recommended Textbooks and Instructional Materials." If each course section has its own website link, please provide one example link. |
| |
| Please Provide Link Below |
| https://registrar.fsu.edu/scheduling/textbooks/ |

| Link to Published List of Course Syllabi for General Education Courses | |
|--|---|
| Please provide links to the webpages housing the information under "Published Course Syllabus Requirements." | |
| | |
| Please Provide Links Below | |
| Communication | https://registrar.fsu.edu/scheduling/textbooks/ |
| Humanities | https://registrar.fsu.edu/scheduling/textbooks/ |
| Mathematics | https://registrar.fsu.edu/scheduling/textbooks/ |
| Natural Sciences | https://registrar.fsu.edu/scheduling/textbooks/ |
| Social Sciences | https://registrar.fsu.edu/scheduling/textbooks/ |

Exceptions

Per Board of Governors Regulation 8.003(1)(h), Textbook and Instructional Materials Affordability, any request for an exception to the compliance deadline shall be submitted in writing to the designated university official and shall provide a reasonable justification for an exception. A course or section added after the notification deadline is exempt from this notification requirement.

| Fall 2022 | | | | | Spring 2023 | | | | |
|---|---|---|---|--|---|---|---|---|--|
| Total # of Course Sections (Not Including Exceptions) | # of Course Sections Identified As Exceptions | Total # Of Course Sections Including Exceptions (Column A + Column B) (Auto-Calculated) | % Of Total Course Sections That Were Identified As Exceptions (Auto-Calculated) | Reasons For Exceptions | Total # Of Course Sections (Not Including Exceptions) | # Of Course Sections Identified As Exceptions | Total # Of Course Sections Including Exceptions (Column G + Column H) (Auto-Calculated) | % Of Total Course Sections That Were Identified As Exceptions (Auto-Calculated) | Reasons For Exceptions |
| 11491 | 832 | 12323 | 7% | added after 45-day posting deadline in order to meet student demand. | 11465 | 697 | 12162 | 6% | added after 45-day posting deadline in order to meet student demand. |

University Requirements for the Posting of Textbooks and Instructional Materials & Compliance with the Posting Deadline

Please use the tables below to report the total number of course sections offered at the 45-day posting deadline, the number of course sections that met the posting requirement, the number of course sections that changed materials after the posting deadline, and the number of course sections that did not meet the posting requirement.

| Fall 2022 | | | | | | Spring 2023 | | | | | |
|---|--|--|--|--|--|---|--|--|--|--|--|
| Total Course Sections at the 45-Day Posting Deadline (Not Including Exceptions) | # Of Course Sections Meeting Requirement (Not Including Course Sections That Changed Adopted Materials After The Deadline) | % Of Course Sections Meeting Requirement (Auto-Calculated) | # Of Course Sections That Changed Adopted Course Materials After The Required Posting Deadline | # Of Course Sections Not Meeting Requirement (Including Course Sections That Changed Adopted Materials After The Deadline) | % Of Course Sections Not Meeting Requirement (Auto-Calculated) | Total Course Sections at the 45-Day Posting Deadline (Not Including Exceptions) | # Of Course Sections Meeting Requirement (Not Including Course Sections That Changed Adopted Materials After The Deadline) | % Of Course Sections Meeting Requirement (Auto-Calculated) | # Of Course Sections That Changed Adopted Course Materials After The Required Posting Deadline | # Of Course Sections Not Meeting Requirement (Including Course Sections That Changed Adopted Materials After The Deadline) | % Of Course Sections Not Meeting Requirement (Auto-Calculated) |
| 11,491 | 11,261 | 98% | 97 | 230 | 2.00% | 11,465 | 11,128 | 97.06% | 110 | 337 | 2.94% |

****Note:** Per Board Regulation 8.003 (1) (h), a course or course section added after the posting requirement is considered an exception and should be reported on the "Exceptions" tab. A request for any other exception to the compliance deadline shall be submitted in writing to the designated university official and shall provide a reasonable justification for an exception. A course or section added after the notification deadline is exempt from this notification requirement.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM B



FLORIDA STATE UNIVERSITY
OFFICE OF THE PROVOST

TO: President Richard McCullough
FROM: Provost James Clark
DATE: August 24, 2023
SUBJECT: FSU College of Medicine Graduate Medical Education Annual Institutional Review Executive Summary (AY 2022-2023)

Request for Approval

The College of Medicine requests approval of the attached Graduate Medical Education Annual Institutional Review Executive Summary.



FLORIDA STATE UNIVERSITY
COLLEGE OF MEDICINE
OFFICE OF GRADUATE MEDICAL EDUCATION

Graduate Medical Education

Annual Institutional Report

2022 – 2023

William C. Boyer, DHSc, MS, CHSE
Associate Dean/DIO
Designated Institutional Official (DIO)

TABLE OF CONTENTS

| | |
|--|----|
| Rationale | 3 |
| Institutional Accreditation | 3 |
| Introduction | 3 |
| Graduate Medical Education Committee (GMEC) Overview | 4 |
| GMEC Oversight | 5 |
| ACGME General Competencies | 5 |
| <u>Accreditation Overview</u> | 6 |
| Program Leadership | 6 |
| Program Overview | 6 |
| ACGME Accreditation Status | 7 |
| Non-Accredited Fellowship | 7 |
| Major GME and Program Changes | 8 |
| GME Well – Being | 8 |
| <u>Scholarly Activity</u> | 8 |
| Resident Scholarly Activity | 8 |
| Faculty Scholarly Activity | 9 |
| <u>GME Performance Metrics</u> | 9 |
| Overall Match Results | 9 |
| Post – Graduate Placement | 10 |
| Geographic and Employment Placement | 10 |
| Board Pass Rate | 11 |
| GME Finance | 11 |
| New Resident Orientation | 13 |
| Citations and Action Plans | 13 |
| Resident and Faculty Survey Information | 13 |
| <u>APPENDICIES</u> | 33 |
| Appendix A: Resident Orientation Schedule | |
| Appendix B: ACGME Program Surveys | |
| Appendix C: ACGME Sponsored Program Summaries | |



Rationale

Pursuant to the Accreditation Council for Graduate Medical Education (ACGME) Institutional requirements, the following is submitted as an Annual Institutional Report (AIR) from the Designated Institutional Official (DIO) for academic year July 2022 to June 2023. The existing ACGME Institutional requirements state that “The GMEC must demonstrate effective oversight of the Sponsoring Institution’s accreditation through an Annual Institutional Review (AIR)” [I.B.5.] and the “DIO must annually submit a written executive summary of the AIR to the Sponsor Institution’s Governing Body” [I.B.5.b.]. The annual report will review the activities of GMEC during the past year with attention to, at a minimum, resident supervision, resident responsibilities, resident evaluation, compliance with clinical experience and education (“duty hour standards”), resident participation in patient safety and care education, and overall Program wellness.

Institutional Accreditation (ACGME)

| ACCREDITATION/REVIEW TYPE | DATE |
|-----------------------------|------------------|
| Institutional Accreditation | January 03, 2023 |
| CLER Visit | October 8, 2019 |
| Self – Study Due Date | August 1, 2026 |
| 10 – Year Site Visit | August 1, 2028 |

Introduction

This report covers Academic Year (AY) July 2022 to June 2023. The Graduate Medical Education community at Florida State University College of Medicine (FSUCOM) and the FSUCOM healthcare partners continue to develop and implement policies and learning strategies that achieve accreditation requirements and prepare our resident physicians to serve the State of Florida and beyond. The Graduate Medical Education Committee (GMEC) provides the institutional oversight required to achieve these requirements.

GME Mission – The Florida State University College of Medicine Office of Graduate Medical Education will foster programs that provide optimal clinical learning environments to develop exemplary physicians who independently practice culturally sensitive, patient-centered health care; commit to life-long learning and wellbeing; and lead their specialties and communities, especially through compassionate service to vulnerable populations.

GMEC Strategy – GMEC’s strategy is based on organizational objectives and the Accreditation Council for Graduate Medical Education (ACGME)’s definition of “institutional competency”, which includes an organization’s ability to:

- Gather and analyze data from the educational and clinical environments
- Ensure resident education in patient safety and quality of care
- Lead program and academic innovations
- Predict and trend performances
- Develop, align, and implement policies and procedures that impact graduate medical education programs
- Create conditions that promote collaboration and knowledge sharing and transfer

We are pleased to provide the following 2022 – 2023 Graduate Medical Education information

GRADUATE MEDICAL EDUCATION COMMITTEE OVERVIEW

The ACGME requires that an administrative system be in place in each sponsoring institution that includes a Graduate Medical Education Committee (GMEC) to provide oversight for its residency programs. FSUCOM meets up to four (4) times each year to fulfill these responsibilities. The GMEC is chaired by the Associate Dean/Designated Institutional Official (DIO) or designee. The GMEC has carried out its responsibilities as required by the ACGME [I.B.4].

- Establish and implement policies and procedures regarding the quality of education and the work environment for the Residents and Fellows [hereinafter referred to as Residents] in all ACGME-accredited programs.
- Review annually and make recommendations to the Sponsoring Institution on Resident stipends, benefits, and funding for Resident positions to assure that these are reasonable and fair.
- Establish and maintain appropriate oversight of and liaison with Program Directors and assure that Program Directors establish and maintain proper oversight of and liaison with appropriate personnel of other institutions participating in ACGME-accredited programs of the Sponsoring Institution.
- GMEC reviews all policies and procedures. The policies and procedures are up-to-date and in compliance.
- Develop and implement procedures to regularly monitor Resident clinical experience and education for compliance with the Sponsoring Institution's policies and the Institutional and Program Requirements.
- Assure that ACGME-accredited programs provide appropriate supervision for all Residents that is consistent with proper patient care, the educational needs of Residents, and the Applicable Program Requirements.
- Review all ACGME program accreditation letters and monitor action plans for the correction of concerns and areas of noncompliance.
- Review the Sponsoring Institution's Letter of Report to the Institutional Review Committee (IRC) and develop and monitor action plans for the correction of concerns and areas of noncompliance.
- DIO must approve all Annual Updates prior to submission
- Review and approve the following prior to submission to the ACGME:
 - all applications for ACGME accreditation of new programs and subspecialties;
 - changes in Resident complement;
 - major changes in program structure or length of training;
 - additions and deletions of participating institutions used in a program;
 - appointments of new Program Directors;
 - progress reports requested by any Review Committee;
 - responses to all proposed adverse actions;
 - requests for increases or any change in Resident clinical experience and education ("duty hours");
 - requests for "inactive status" or to reactivate a program;
 - voluntary withdrawals of ACGME-accredited programs;
 - requests for an appeal of an adverse action; and,
 - appeal presentations to a Board of Appeal or the ACGME

GMEC OVERSIGHT

GMEC provides institutional and program oversight in a structured format to ensure accreditation and educational compliance. During each GMEC, Program Directors or their designee are required to provide a program report that delivers relevant information about their specific programs:

| PROGRAM REPORTING ITEMS | |
|---|---|
| • Accreditation and correspondence | • Program Requirement Changes |
| • Clinical Experience and Education ((Duty Hours) | • Resident Supervision |
| • Resident Concerns/Issues | • Quality and Patient Safety |
| • Scholarly Activity/QI Projects | • Diversity, Equity and Inclusion (DEI) |
| • Resident Well-Being | |

In addition to the mandatory GMEC program reports delivered by the Program Directors and additional insight as provided by Quality and Safety Hospital Partner Representatives, GMEC and GME leadership (DIO) provides the following additional oversight. The goal is to work in a collaborative, team – focused and solutions-driven environment to address any concerns that arise through the reporting process, summative and formative reports:

Summative

GME leadership is in regular contact with institutional and program leadership, faculty, program coordinators and residents in the following manner:

- Regular, information discussion and meeting with hospital leadership with a focus on institutional support.
- Regular, information discussions and meetings with the Program Directors and Associate Program Directors
- Regular, information discussions and meetings with faculty
- Regular, information discussions and meetings with program coordinators
- Regular, information discussions and meetings with residents

Formative

- Quarterly Program Director meetings
- Bi-annual resident meetings (additional as needed)

ACGME GENERAL COMPETENCIES

Residents are considered both trainees and students of the Graduate Medical Education Program and are required to demonstrate competency in the six general competency areas required by the Accreditation Council for Graduate Medical Education:

| | |
|---|--|
| Patient Care | Interpersonal and Communication Skills |
| Medical Knowledge | Professionalism |
| Practice-Based Learning and Improvement | Systems-Based Practice |

Reappointment and promotion to the subsequent year of training requires satisfactory, cumulative evaluations by program faculty through the Clinical Competency Committee (CCC). Programs have been directed by the ACGME, GMEC and FSUCOM leadership to continue to adapt educational rotation goals and objectives by level of training and identify specific competencies that correlate with each individual learning objective, as well as teaching methods and evaluation tools. All programs have completed the initial revision to include specific competencies with each objective, but this is an ongoing process as rotations and educational methods change and improve.

ACCREDITATION OVERVIEW

| PROGRAM LEADERSHIP | | |
|--|-------------------------|---|
| PROGRAM | Program Director | Associate Program Director |
| BAYCARE (BC) | | |
| FAMILY MEDICINE | Nathan Falk, MD | Ashley Wilk, DO |
| DERMATOLOGY ASSOCIATES OF TALLAHASSEE (DAT) | | |
| MICROGRAPHIC SURGERY & DERMATOLOGIC ONCOLOGY | Armand Cognaetta, MD | W. Harris Green, MD |
| LEE HEALTH (LEE) | | |
| FAMILY MEDICINE | Alfred Gitu, MD | Christina Cavanagh, MD |
| INTERNAL MEDICINE | Maja Delibasic, MD | Iasmina Jivanov, MD |
| SARASOTA MEMORIAL HOSPITAL (SMH) | | |
| EMERGENCY MEDICINE | Kelly O’Keefe, MD | Sarah Temple, MD |
| HOSPICE & PALLIATIVE CARE | Joshua Gross, MD | N/A |
| INTERNAL MEDICINE | Karen Hamad, MD | Joel Baker, DO Ibrahim Saad, MD |
| TALLAHASSEE MEMORIAL HOSPITAL (TMH) | | |
| INTERNAL MEDICINE | Claudia Kroker-Bode, MD | Raymond Shashaty, MD Ingrid Jones-Ince, MD |
| SURGERY – GENERAL | Wade Douglas, MD | N/A |

| PROGRAM OVERVIEW (2022-2023) | | | | |
|--|-----------------|----------------|-----------------|--------|
| PROGRAM | Training Length | Positions/Year | Total Positions | Filled |
| BAYCARE (BH) | | | | |
| FAMILY MEDICINE | 3 | 8 | 24 | 19 |
| DERMATOLOGY ASSOCIATE OF TALLAHASEE (DAT) | | | | |
| MICROGRAPHIC SURGERY & DERMATOLOGIC ONCOLOGY | 1 | 2 | 2 | 2 |
| LEE HEALTH (LEE) | | | | |
| FAMILY MEDICINE | 3 | 10 | 30 | 24 |
| INTERNAL MEDICINE | 3 | 12 | 36 | 12 |
| SARASOTA MEMORIAL HOSPITAL (SMH) | | | | |
| EMERGENCY MEDICINE | 3 | 9 | 27 | 27 |
| HOSPICE & PALLIATIVE CARE | 1 | 2 | 2 | 2 |

| | | | | |
|--|---|------------------------|----|----|
| INTERNAL MEDICINE | 3 | 13 | 40 | 40 |
| TALLAHASSEE MEMORIAL HOSPITAL (TMH) | | | | |
| INTERNAL MEDICINE | 3 | 8 + 2 prelims PGY-1 | 36 | 25 |
| SURGERY – GENERAL | 5 | 2 + 2 prelims PGY-1 | 12 | 11 |

| ACGME ACCREDITATION STATUS | | | | | |
|--|-------------------------|-----------------------|---|---------------------------|--------------------|
| ACCREDITED PROGRAMS | Status | Effective Date | ACGME Site Visit Date (Self-Study) | 10-Year Site Visit | # Citations |
| INSTITUTIONAL | Continued Accreditation | 1/03/2023 | 1/1/2028 | 1/1/2030 | 0 |
| BAYCARE (BC) | | | | | |
| FAMILY MEDICINE | Continued Accreditation | 1/25/2023 | Postponed | Postponed | 0 |
| DERMATOLOGY ASSOCIATES OF TALLAHASSEE (DAT) | | | | | |
| MICROGRAPHIC SURGERY & DERMATOLOGIC ONCOLOGY | Continued Accreditation | 1/6/2023 | Postponed | Postponed | 0 |
| LEE HEALTH (LEE) | | | | | |
| FAMILY MEDICINE | Continued Accreditation | 1/25/2023 | Postponed | Postponed | 0 |
| INTERNAL MEDICINE | Initial Accreditation | 9/10/2021 | N/A | N/A | 0 |
| SARASOTA MEMORIAL HOSPITAL (SMH) | | | | | |
| EMERGENCY MEDICINE | Continued Accreditation | 1/12/2023 | Postponed | Postponed | 0 |
| HOSPICE & PALLIATIVE CARE | Continued Accreditation | 9/22/2022 | N/A | N/A | 0 |
| INTERNAL MEDICINE | Continued Accreditation | 1/20/2023 | Postponed | Postponed | 0 |
| TALLAHASSEE MEMORIAL HOSPITAL (TMH) | | | | | |
| INTERNAL MEDICINE | Continued Accreditation | 1/20/2023 | Postponed | Postponed | 0 |
| GENERAL SURGERY | Continued Accreditation | 1/4/2023 | Postponed | Postponed | 0 |

NON-ACCREDITED FELLOWSHIP

Within FSUCOM, there are training programs that are not accredited by the Accreditation Council for Graduate Medical Education (ACGME) or other applicable national accrediting bodies. These programs support the interests of FSUCOM and our healthcare partners, the patient care needs of the region, and other FSUCOM Graduate Medical Education (GME) programs. FSUCOM provides oversight, administration, and educational support from the Central GME Office and GMEC.

| PROGRAM LEADERSHIP | | |
|---------------------|------------------|----------------------------|
| PROGRAM | Program Director | Associate Program Director |
| GLOBAL HEALTH (LEE) | Lee Coghill, MD | N/A |

MAJOR GME AND PROGRAM CHANGES

During the 2022 – 2023 Academic Year, two (2) major changes occurred within GME:

1. Transitional Year program at Winter Haven Hospital received “Initial Accreditation” on July 1, 2023
2. Dean John Fogarty retired and was replaced by Interim Dean Alma Littles

GME WELL – BEING

The ACGME places responsibility for well – being on the program, in partnership with the Sponsoring Institution, to address well – being [ACGME IRC VI.C.1.] to include access to appropriate tools for self – screening [ACGME IRC VI.C.1.e.(2)].

The FSU COM highly encourages overall resident, faculty and staff wellness and related activities throughout its programs. FSU COM provides appropriate well – being funding in collaboration with its hospital partners to schedule programmatic – level well – being activities. Further, the GMEC Well – Being Sub-Committee is comprised of members from each Program and chaired by a licensed psychologist from the LEE family medicine residency. During the 2022-2023 academic year, the sub – committee met eight (8) times to develop well – being strategies and programming. One outcome of this sub – committee was the initiation of the Mayo Well-Being Index Survey. FSU COM residency programs ranked in the top tier for national participation during the initial roll out with 87% participation. The index focuses on six main dimensions and has numerous resources immediately available. The survey was administered twice during the year with residents having unlimited access throughout the academic year. The six dimensions include:

| Mayo Well – Being Index Six Dimensions | | |
|--|-----------------------|-------------------|
| Meaning in Work | Severe Fatigue | Quality of Life |
| Likelihood of Burnout | Work-Life Integration | Suicidal Ideation |

SCHOLARLY ACTIVITY

Resident Scholarly Activity

Resident scholarly activity requirements vary by program, in accordance with ACGME requirements and Program Director expectations. The requirements are presented to all residents during program orientation, and continuous discussions with Program Directors.

FSU COM residents participate in various forms of scholarly activity including quality assurance and quality improvement projects, research projects, case study presentations, scientific presentations, and manuscript presentations.

Although assistance is provided, residents are responsible for all aspects of their scholarly projects, including hypotheses, generation, initial proposal, IRB submission (if necessary), data collection, analyses, presentation, and publication. FSU COM residents regularly present their research in poster

and oral format at local, regional, and national meetings. Residents are strongly encouraged to, and provided resources and guidance, to submit their work for publication in peer reviewed journals.

At least twice per year, residents are to meet with their Program Director to discuss the progress of their scholarly activity.

| TYPE | NUMBER |
|--------------------------|--------|
| PMID | 19 |
| OTHER PUBLICATIONS | 48 |
| CONFERENCE PRESENTATIONS | 134 |
| BOOK CHAPTERS | 3 |

Faculty Scholarly Activity

Faculty scholarly activity requirements vary by program, in according with ACGME requirements and Program Director expectations.

Core faculty are responsible for overseeing resident research projects. Faculty members provide direct mentorship and are engaged with mentee residents through all aspects of research projects, from approving initial proposals to helping to write and edit manuscripts for publication.

FSU COM faculty may also independently participate in various forms of scholarly activity, which includes conducting their own research projects, grant writing, manuscript review for academic journals, delivering scholarly presentations, serving on academic committees, and manuscript preparation and submission.

| TYPE | NUMBER |
|--------------------------|--------|
| PMID | 41 |
| OTHER PUBLICATIONS | 31 |
| CONFERENCE PRESENTATIONS | 96 |
| OTHER PRESENTATIONS | 279 |
| BOOK CHAPTERS | 11 |
| GRANT LEADERSHIP | 116 |

GME PERFORMANCE METRICS

OVERALL MATCH RESULTS

| OVERALL MATCH RESULTS | | | |
|--|---------|----------|-------------|
| PROGRAM | Matched | US Grads | ECFMG Grads |
| BAYCARE | | | |
| FAMILY MEDICINE | 8 | 3 | 5 |
| DERMATOLOGY ASSOCIATES OF TALLAHASSEE (DAT) | | | |
| MICRO DERM FELLOW | 1 | 1 | 0 |
| LEE HEALTH | | | |
| FAMILY MEDICINE | 9 | 8 | 1 |
| INTERNAL MEDICINE | 12 | 7 | 5 |

| | | | |
|--------------------------------------|----|----|---|
| GLOBAL HEALTH | 2 | 2 | 0 |
| SARASOTA MEMORAL HOSPITAL | | | |
| EMER MEDICINE | 9 | 9 | 0 |
| HOSPICE/PALLIATIVE | 2 | 2 | 0 |
| INTERNAL MEDICINE | 13 | 12 | 1 |
| TALLAHASSEE MEMORIAL HOSPITAL | | | |
| INTERNAL MEDICINE | 10 | 7 | 3 |
| SURGERY-GENERAL | 4 | 4 | 0 |

POST – GRADUATE PLACEMENT

| AREA | AY 21-22 | | AY 22-23 | | PERCENT CHANGE |
|-----------------------------------|-----------|---------|-----------|---------|----------------|
| | TOTAL | PERCENT | TOTAL | PERCENT | |
| CHIEF YEAR – PGY4 | 3 | 6% | 0 | 0% | -6% |
| FELLOWSHIP – FSU | 3 | 6% | 0 | 0% | -6% |
| FELLOWSHIP – NON-FSU | 12 | 26% | 12 | 29% | 3% |
| FSU PARTNER EMPLOYED | 14 | 29% | 13 | 30% | 1% |
| NON – FSU PARTNER EMPLOYED | 15 | 31% | 20 | 39% | 12% |
| MILITARY/PUBLIC HEALTH OBLIGATION | 1 | 2% | 1 | 2% | - |
| NO POSITION/NOT EMPLOYED | 0 | 0% | 0 | 0% | - |
| TOTAL GRADUATES | 48 | | 46 | | |

GEOGRAPHIC AND EMPLOYMENT PLACEMENT

| GEOGRAPHY | AY 21-22 | | AY 22-23 | | PERCENT CHANGE |
|-----------------------|-----------|---------|-----------|---------|----------------|
| | TOTAL | PERCENT | TOTAL | PERCENT | |
| FLORIDA | 33 | 68% | 28 | 61% | -7% |
| GEORGIA | 1 | 2% | 1 | 2% | - |
| ALABAMA | 0 | 0% | 2 | 4% | 4% |
| NORTH/SOUTH CAROLINA | 0 | 0% | 3 | 7% | 7% |
| EAST COAST – OTHER | 8 | 17% | 5 | 11% | -6% |
| MID-WEST & WEST COAST | 6 | 13% | 7 | 15% | 2% |
| UNKNOWN/NO POSITION | 0 | 0% | 0 | 0% | - |
| OUT OF COUNTRY | 0 | 0% | 0 | 0% | - |
| TOTAL | 48 | | 46 | | |

BOARD PASS RATE

| BOARD PASS RATE | | |
|--|---------|--|
| PROGRAM | PERCENT | COMMENT |
| BAYCARE | | |
| FAMILY MEDICINE | 100% | |
| DERMATOLOGY ASSOCIATES OF TALLAHASSEE (DAT) | | |
| MICROGRPAHIC SURGERY & DERM ONCOLOGY | 100% | |
| LEE HEALTH | | |
| FAMILY MEDICINE | 100% | |
| INTERNAL MEDICINE | N/A | N/A (Began inaugural PGY-1's on 7.1.22) |
| SARASOTA MEMORIAL HOSPITAL | | |
| EMERGENCY MEDICINE | 97% | N/A (First class graduating 6.30.22; not eligible yet) |
| INTERNAL MEDICINE | 97.4% | One resident did not pass |
| TALLAHASSEE MEMORIAL HOSPITAL | | |
| INTERNAL MEDICINE-TMH | 100% | |
| SURGERY (GENERAL) - TMH | 66.7% | |

GME FINANCE

The Florida State University College of Medicine in conjunction with the FSU COM Florida Medical Practice Plan (FMPP) and our hospital partners collaboratively develop annual program budgets. The Office of Graduate Medical Education engages individual Program Directors and identified hospital leadership to develop the Program – specific budget.

RESIDENT STIPENDS

AY2022-2023 Salary and Benefits

The AAMC Nationwide southern region mean(s) are used for review annually, along with other state of Florida universities.

GMEC voted to increase Resident salaries as presented. The salary increase became effective July 1, 2023.

SEE SALARY AND BENEFITS CHART ON NEXT PAGE

| SALARY SCALE | |
|--------------------------------------|---|
| PGY1 | \$60,150.00 |
| PGY2 | \$63,150.00 |
| PGY3 | \$65,150.00 |
| PGY4 | \$67,150.00 |
| PGY5 | \$71,150.00 |
| PGY6 | \$74,150.00 |
| BENEFITS | |
| Healthcare (Medical, Dental, Vision) | <ul style="list-style-type: none"> Offered to all hospital – based Residents/Fellows. Please contact your program for specific details as they may vary by hospital partners. All salary and benefits are subject to change. |
| Professional Liability (Malpractice) | |
| Accidental and Life Insurance | |
| 403B or 401KPlan | |
| Paid Time Off (PTO) | |
| Educational Event Time Off | |
| Educational Allowance | |
| Lab Coats | |
| Meal Allowance | <ul style="list-style-type: none"> Offered by all hospital-based programs. Please contact your program for specific details as they may vary by hospital partners. All salary and benefits are subject to change. |
| Employee Assistance Program (EAP) | <ul style="list-style-type: none"> Available 24/7 via Third – Party Vendor Please contact your program for specific details as they may vary by hospital partners. All salary and benefits are subject to change. |
| Housing Allowance | <ul style="list-style-type: none"> Please contact your program for specific details as they may vary by hospital partners. All salary and benefits are subject to change. |
| Relocation | |
| Commencement Bonus | |
| Electronic Devices | |
| USMLE Step 3 Registration | <ul style="list-style-type: none"> Offered to all Residents. Please contact your program for specific details as they may vary by hospital partners. All salary and benefits is subject to change. |
| Medical Training License | |

NOTE: Other specific benefits may be offered by your residency/fellowship program and associated healthcare partner.

New Resident Orientation

For the 2022 - 2023 Resident Orientation, a centralized general orientation is conducted by FSUCOM. Currently, this is done virtually via Zoom. In addition to the centralized and program specific orientations, all incoming Residents are required to complete:

- American Medical Association Graduate Medical Education (AMA GME) Competency Education Program
- Institute for Healthcare Improvement (IHI) basic certificate in quality and safety

The GME Office monitors and provides oversight and ensures compliance with all Sponsoring Institution and program requirements related to orientation. This is done in collaboration with each program.

PROGRAM CITATIONS AND ACTION PLANS

For the AY 2022 – 2023, the Florida State University College of Medicine sponsored Graduate Medical Education programs had no citations. This is an outstanding accomplishment for all of our programs and show the continued high-quality education and clinical learning environment we provide to all of our residents and fellows.

RESIDENT AND FACULTY SURVEYS AT – A – GLANCE

The ACGME's Resident/Fellow and Faculty Surveys are used to monitor graduate medical clinical education and provide early warning of potential non-compliance with ACGME accreditation requirements. All accredited programs (regardless of size) are required to participate in these surveys each academic year between the months of January and April.

The required completion rate for both the Resident/Fellow and Faculty Survey is 70 percent. Programs failing to meet this threshold will not receive reports. When programs meet the required completion rate, and there are four or more people scheduled to participate in a survey, aggregated and anonymized survey data reports will be available. These reports provide a broad look at how programs compare to national, institutional, and specialty or subspecialty averages. Programs that meet the required completion rate but have fewer than four people scheduled to participate may receive aggregated reports in the future, using multiple years of program survey data.

Programs that do not reach the 70 percent response threshold will be flagged as non-compliant regarding their completion rate. These programs are highlighted as such for the Review Committees, which may take further action.

Resident and faculty of all ACGME accredited programs are required to complete the annual ACGME survey. Results of the survey are utilized by the ACGME as a key performance indicator for program quality and compliance with the working and learning environment requirements and for FSU COM institutional performance.

| Resident Survey Content Areas | |
|--------------------------------------|-----------------------------|
| Clinical Experience and Education | Resources |
| Faculty Teaching and Supervision | Patient Safety and Teamwork |
| Evaluation | Professionalism |
| Educational Content | Overall |
| Diversity and Inclusion | |

| Faculty Survey Content Areas | |
|-------------------------------------|-----------------------------|
| Faculty Teaching and Supervision | Patient Safety and Teamwork |
| Educational Content | Professionalism |
| Diversity and Inclusion | Teamwork |
| Resources | |

The complete listing of all Residents and Faculty program specific surveys are available in the appendix.

APPENDIX A
RESIDENT ORIENTATION SCHEDULE



GME ORIENTATION

JUNE 26, 2023

| TIME | TOPIC | FACILITATOR |
|-------------|--|---|
| 0700 – 0715 | Zoom Link connection begins | All participants |
| 0715 – 0730 | General Announcements | GME Leadership |
| 0730 – 0800 | Overview of GME (ACGME Competencies and GME Policies) <i>ACGME Competency: SBP</i> <i>CLER Pathways: PS2; HQ1; CT1; S1; DF1; DF2; PR1</i> | William C. Boyer, DHSc, MS, CHSE <i>Associate Dean/DIO</i> <i>Associate Professor – Department of Clinical Sciences</i> <i>FSU College of Medicine</i> |
| 0800 – 0845 | Professionalism in the Clinical Setting <i>ACGME Competency: P; ICS</i> <i>CLER Pathway: PR1</i> | |
| 0845 – 0900 | Benefits & Planning/Professional Benefits | Taylor Collins, CEBS, CLU, RHU <i>Professional Benefits</i> |
| 0900 – 0915 | BREAK | |
| 0915 – 1000 | Introduction to the FSU COM Self-Insurance Program – Professional Liability Protection <i>ACGME Competency: P</i> <i>CLER: N/A</i> | Jennifer Miller-Louw, Esq <i>Senior Litigation Attorney – SIP</i> <i>FSU College of Medicine</i> |
| 1000 – 1100 | Orientation to Clinical Teaching <i>ACGME Competency: P; ICS</i> <i>CLER Pathway: PR1</i> | Nate Falk, MD, MBA, CPE, CAQSM, FAAFP <i>Assistant Dean – GME</i> <i>Founding Program Director – Family Medicine</i> <i>Baycare -Winter Haven</i> <i>Professor, Department of Medicine</i> <i>FSU College of Medicine</i> |
| 1100 – 1130 | Closing and questions | GME Staff |

ZOOM LINK:

<https://fsu.zoom.us/j/92607831243>

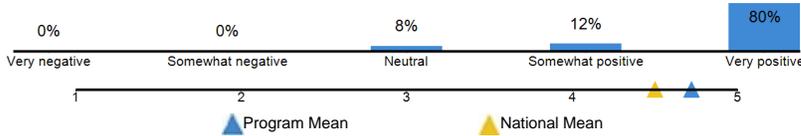
APPENDIX B

ACGME PROGRAM SURVEYS

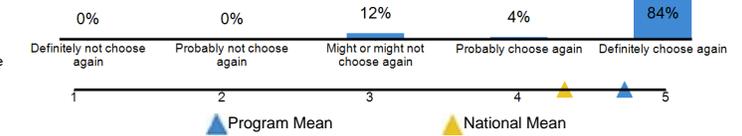
(INSTITUTIONAL, RESIDENT AND FACULTY)

Aggregate reports are available only to programs with 4 or more residents / fellows if a 70.0% response rate is reached.

Residents' overall evaluation of the program



Residents' overall opinion of the program



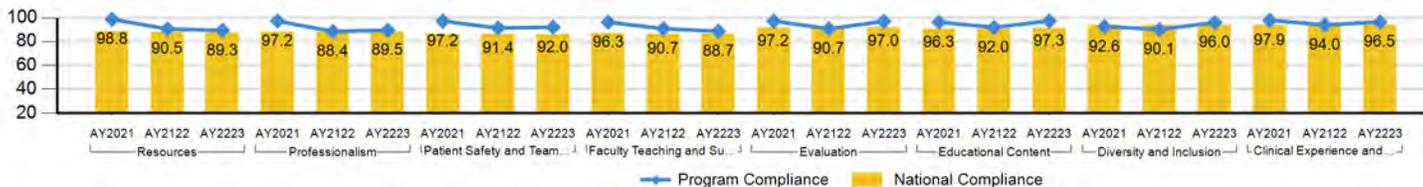
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---------------------|------------------------|-----------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 100% | 4.8 | 87% | 4.4 | 88% | 4.4 |
| | Impact of other learners on education | 64% | 2.8 | 78% | 3.3 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 92% | 4.6 | 87% | 4.3 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 76% | 2.9 | 87% | 3.4 | 90% | 3.6 |
| | Time to interact with patients | 96% | 4.7 | 86% | 4.2 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 100% | 4.9 | 93% | 4.6 | 85% | 4.3 |
| | Able to attend personal appointments | 92% | 4.7 | 90% | 4.6 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 92% | 4.7 | 96% | 4.8 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 92% | 4.8 | 84% | 4.3 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 96% | 4.8 | 93% | 4.6 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 92% | 4.8 | 95% | 4.6 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 96% | 4.8 | 98% | 4.8 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 80% | 4.2 | 93% | 4.7 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 80% | 4.2 | 84% | 4.3 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 80% | 4.4 | 82% | 4.2 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 96% | 4.8 | 94% | 4.7 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 96% | 4.8 | 93% | 4.6 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 92% | 4.4 | 83% | 4.1 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 92% | 4.7 | 92% | 4.5 | 89% | 4.4 |
| | Know how to report patient safety events | 96% | 4.8 | 97% | 4.9 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 88% | 4.6 | 85% | 4.3 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 88% | 4.5 | 84% | 4.4 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 96% | 4.8 | 90% | 4.6 | 89% | 4.6 |
| Faculty Teaching and Supervision | Faculty members interested in education | 84% | 4.5 | 89% | 4.4 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 88% | 4.6 | 87% | 4.4 | 82% | 4.3 |
| | Appropriate level of supervision | 84% | 4.5 | 94% | 4.8 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 84% | 4.6 | 86% | 4.6 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.7 | 98% | 4.4 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 92% | 4.6 | 89% | 4.4 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 99% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 100% | 5.0 | 97% | 4.9 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 88% | 4.6 | 78% | 4.1 | 75% | 4.0 |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 96% | 4.8 | 88% | 4.5 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 96% | 4.8 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 96% | 4.8 | 97% | 4.9 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 97% | 4.9 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 96% | 4.8 | 96% | 4.8 | 94% | 4.8 |
| | Taught about health care disparities | 96% | 4.0 | 89% | 3.9 | 84% | 3.8 |
| | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | | |
| Fatigue and sleep deprivation | 96% | | Substance use disorder | 96% | | | |
| Depression | 96% | | | | | | |
| Burnout | 96% | | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 96% | 4.4 | 96% | 4.4 | 95% | 4.3 |
| | Program fosters inclusive work environment | 96% | 4.7 | 97% | 4.6 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 96% | 4.4 | 93% | 4.3 | 90% | 4.1 |

Clinical Experience and Education

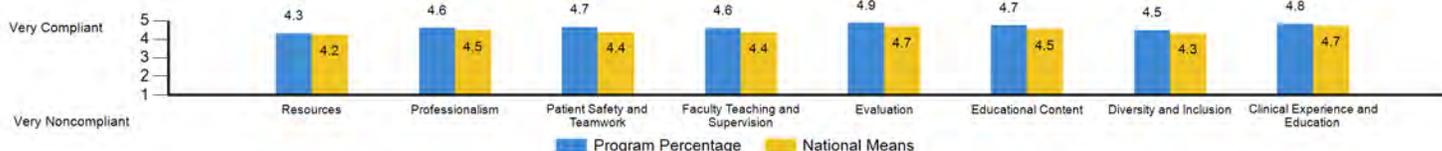
80-hour week (averaged over a four-week period)
 Four or more days free in 28 day period
 Taken in-hospital call more than every third night
 Less than 14 hours free after 24 hours of work
 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 100% | 4.8 | 95% | 4.7 | 92% | 4.6 |
| Four or more days free in 28 day period | 80% | 4.2 | 82% | 4.4 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 96% | 4.8 | 99% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 96% | 4.8 | 97% | 4.9 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 5.0 | 98% | 4.9 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 5.0 | 98% | 4.9 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 100% | 5.0 | 93% | 4.7 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 4.9 | 98% | 4.9 | 97% | 4.9 |

Total Percentage of Compliance by Category



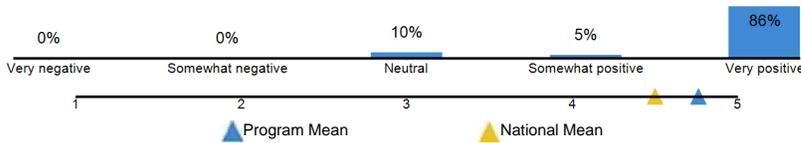
Program Percentage at-a-glance



| | Very Often | Often | Sometimes | Rarely | Never |
|--|------------|-------|-----------|--------|-------|
| How often do faculty members actively engage residents in learning during conferences? | 77.8% | 11.1% | 11.1% | 0.0% | 0.0% |

| | No | Yes |
|---|-------|--------|
| On average, were you able to attend at least 70% of your emergency medicine conferences/required educational experiences? | 0.0% | 100.0% |
| Does your program provide you the opportunity to perform an appropriate number of procedures to be competent? | 11.1% | 88.9% |
| Does your program provide you the opportunity to direct an appropriate number of major resuscitations to be competent? | 0.0% | 100.0% |
| Does your program provide you the opportunity to become a competent Emergency Medicine physician? | 0.0% | 100.0% |

Residents' overall evaluation of the program



Residents' overall opinion of the program



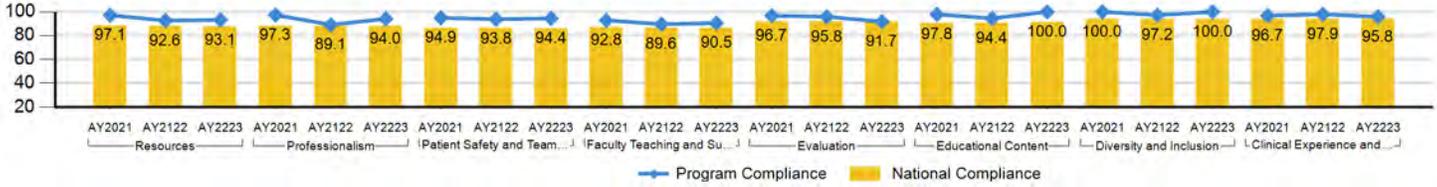
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---------------------|--------------|------------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 90% | 4.5 | 86% | 4.4 | 88% | 4.4 |
| | Impact of other learners on education | 86% | 3.5 | 87% | 3.6 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 86% | 4.1 | 76% | 4.0 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 100% | 4.2 | 94% | 3.7 | 90% | 3.6 |
| | Time to interact with patients | 81% | 4.0 | 78% | 4.0 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 95% | 4.6 | 83% | 4.2 | 85% | 4.3 |
| | Able to attend personal appointments | 100% | 5.0 | 89% | 4.6 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 100% | 5.0 | 91% | 4.7 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 100% | 4.8 | 83% | 4.3 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 95% | 4.7 | 85% | 4.4 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 95% | 4.6 | 90% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 4.9 | 95% | 4.7 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 95% | 4.8 | 84% | 4.4 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 86% | 4.4 | 73% | 4.0 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 81% | 4.1 | 67% | 3.8 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 91% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 90% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 86% | 4.2 | 81% | 4.0 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 95% | 4.4 | 85% | 4.3 | 89% | 4.4 |
| | Know how to report patient safety events | 100% | 5.0 | 96% | 4.8 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 95% | 4.7 | 75% | 4.1 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 90% | 4.6 | 77% | 4.1 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 100% | 5.0 | 86% | 4.4 | 89% | 4.6 |
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| | Faculty effectively creates environment of inquiry | 90% | 4.4 | 81% | 4.2 | 82% | 4.3 |
| | Appropriate level of supervision | 95% | 4.8 | 90% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 86% | 4.5 | 78% | 4.4 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 95% | 4.4 | 96% | 4.1 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 81% | 4.1 | 81% | 4.1 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 90% | 4.6 | 96% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 95% | 4.8 | 94% | 4.8 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 81% | 4.2 | 70% | 3.9 | 75% | 4.0 |
| | | | | | | | |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 100% | 5.0 | 82% | 4.3 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 93% | 4.7 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 100% | 5.0 | 93% | 4.7 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 97% | 4.9 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 100% | 5.0 | 90% | 4.6 | 94% | 4.8 |
| | Taught about health care disparities | 100% | 4.7 | 86% | 3.8 | 84% | 3.8 |
| | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | | |
| | Fatigue and sleep deprivation | 100% | | Substance use disorder | 100% | | |
| Depression | 100% | | | | | | |
| Burnout | 100% | | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 100% | 4.9 | 93% | 4.2 | 95% | 4.3 |
| | Program fosters inclusive work environment | 100% | 4.8 | 95% | 4.4 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 100% | 4.7 | 88% | 4.0 | 90% | 4.1 |

Clinical Experience and Education

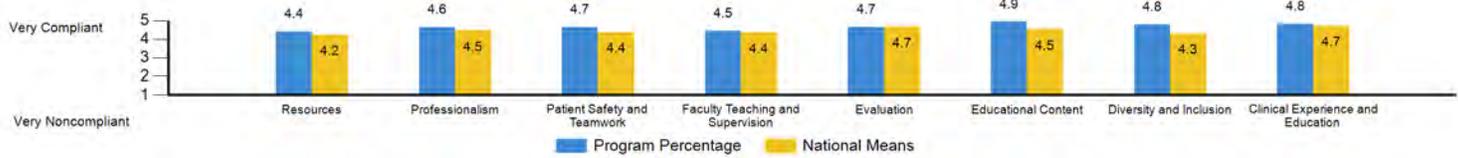
80-hour week (averaged over a four-week period)
 Four or more days free in 28 day period
 Taken in-hospital call more than every third night
 Less than 14 hours free after 24 hours of work
 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 100% | 4.9 | 87% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 71% | 4.1 | 76% | 4.1 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 100% | 5.0 | 97% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 100% | 5.0 | 93% | 4.7 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 95% | 4.7 | 84% | 4.3 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 5.0 | 96% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



Program Percentage at-a-glance



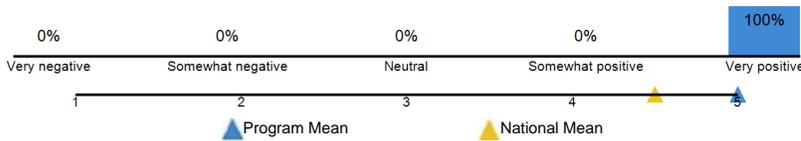
| | Year 1 | Year 2 | Year 3 | Year 4 |
|---------------------------|--------|--------|--------|--------|
| Indicate year in program: | 33.3% | 28.6% | 33.3% | 4.8% |

| | Yes | No |
|---|--------|-------|
| Have you personally delivered care to one of your family medicine patients in at least 3 different settings? | 100.0% | 0.0% |
| Has this occurred more than 3 times in the preceding 6 months? | 61.9% | 38.1% |
| Have you personally called and directed a family meeting for any reason? | 100.0% | 0.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 71.4% | 28.6% |
| Have you personally provided a comprehensive service for one of your patients for any reason? | 100.0% | 0.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 95.2% | 4.8% |
| Have you personally helped one of your patients by being supportive, making suggestions, and were you an important part of the healing for the patient? | 100.0% | 0.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 95.2% | 4.8% |

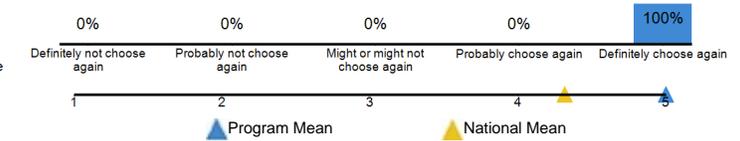
Percentage of Residents Reponding Yes

| | Overall (21 residents) | 1 (7 residents) | 2 (6 residents) | 3 (7 residents) | 4 (1 residents) |
|---|---------------------------|--------------------|--------------------|--------------------|--------------------|
| Have you personally delivered care to one of your family medicine patients in at least 3 different settings? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 3 times in the preceding 6 months? | 61.9% | 57.1% | 66.7% | 57.1% | 100.0% |
| Have you personally called and directed a family meeting for any reason? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 71.4% | 85.7% | 66.7% | 57.1% | 100.0% |
| Have you personally provided a comprehensive service for one of your patients for any reason? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 95.2% | 100.0% | 100.0% | 85.7% | 100.0% |
| Have you personally helped one of your patients by being supportive, making suggestions, and were you an important part of the healing for the patient? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 95.2% | 100.0% | 100.0% | 85.7% | 100.0% |

Residents' overall evaluation of the program



Residents' overall opinion of the program



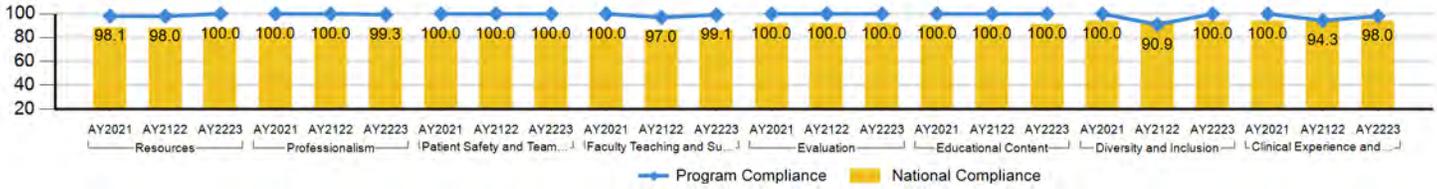
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---|--------------|------------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 100% | 5.0 | 86% | 4.4 | 88% | 4.4 |
| | Impact of other learners on education | 100% | 4.6 | 87% | 3.6 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 100% | 5.0 | 76% | 4.0 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 100% | 4.5 | 94% | 3.7 | 90% | 3.6 |
| | Time to interact with patients | 100% | 4.9 | 78% | 4.0 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 100% | 5.0 | 83% | 4.2 | 85% | 4.3 |
| | Able to attend personal appointments | 100% | 5.0 | 89% | 4.6 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 100% | 5.0 | 91% | 4.7 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 100% | 5.0 | 83% | 4.3 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 100% | 5.0 | 85% | 4.4 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 100% | 5.0 | 90% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 5.0 | 95% | 4.7 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 100% | 5.0 | 84% | 4.4 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 95% | 4.8 | 73% | 4.0 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 100% | 5.0 | 67% | 3.8 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 91% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 90% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 5.0 | 81% | 4.0 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 100% | 4.9 | 85% | 4.3 | 89% | 4.4 |
| | Know how to report patient safety events | 100% | 5.0 | 96% | 4.8 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 100% | 4.9 | 75% | 4.1 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 100% | 5.0 | 77% | 4.1 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 100% | 5.0 | 86% | 4.4 | 89% | 4.6 |
| Faculty Teaching and Supervision | Faculty members interested in education | 100% | 5.0 | 85% | 4.4 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 100% | 5.0 | 81% | 4.2 | 82% | 4.3 |
| | Appropriate level of supervision | 100% | 5.0 | 90% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 100% | 5.0 | 78% | 4.4 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.9 | 96% | 4.1 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 95% | 4.7 | 81% | 4.1 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 96% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 100% | 5.0 | 94% | 4.8 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 100% | 4.9 | 70% | 3.9 | 75% | 4.0 |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 100% | 5.0 | 82% | 4.3 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 93% | 4.7 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 100% | 5.0 | 93% | 4.7 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 97% | 4.9 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 100% | 5.0 | 90% | 4.6 | 94% | 4.8 |
| | Taught about health care disparities | 100% | 4.8 | 86% | 3.8 | 84% | 3.8 |
| | | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | |
| | Fatigue and sleep deprivation | 100% | | Substance use disorder | 100% | | |
| | Depression | 100% | | | | | |
| | Burnout | 100% | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 100% | 4.9 | 93% | 4.2 | 95% | 4.3 |
| | Program fosters inclusive work environment | 100% | 5.0 | 95% | 4.4 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 100% | 4.9 | 88% | 4.0 | 90% | 4.1 |

Clinical Experience and Education

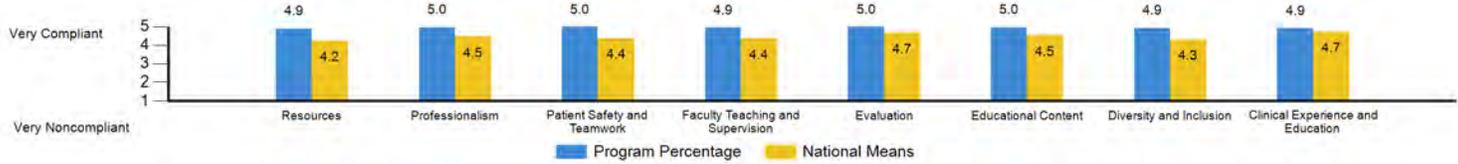
80-hour week (averaged over a four-week period)
 Four or more days free in 28 day period
 Taken in-hospital call more than every third night
 Less than 14 hours free after 24 hours of work
 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 100% | 5.0 | 87% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 95% | 4.9 | 76% | 4.1 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 100% | 5.0 | 97% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 89% | 4.6 | 93% | 4.7 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 100% | 4.9 | 84% | 4.3 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 5.0 | 96% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



Program Percentage at-a-glance



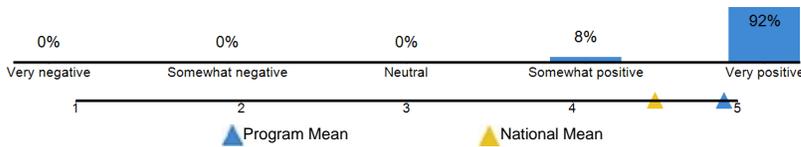
| | Year 1 | Year 2 | Year 3 | Year 4 |
|---------------------------|--------|--------|--------|--------|
| Indicate year in program: | 42.1% | 31.6% | 21.1% | 5.3% |

| | Yes | No |
|---|--------|-------|
| Have you personally delivered care to one of your family medicine patients in at least 3 different settings? | 100.0% | 0.0% |
| Has this occurred more than 3 times in the preceding 6 months? | 84.2% | 15.8% |
| Have you personally called and directed a family meeting for any reason? | 94.7% | 5.3% |
| Has this occurred more than 2 times in the preceding 6 months? | 78.9% | 21.1% |
| Have you personally provided a comprehensive service for one of your patients for any reason? | 94.7% | 5.3% |
| Has this occurred more than 2 times in the preceding 6 months? | 89.5% | 10.5% |
| Have you personally helped one of your patients by being supportive, making suggestions, and were you an important part of the healing for the patient? | 100.0% | 0.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 89.5% | 10.5% |

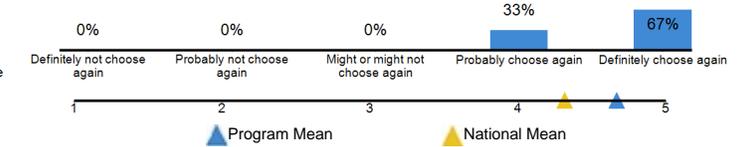
Percentage of Residents Reponding Yes

| | Overall (19 residents) | 1 (8 residents) | 2 (6 residents) | 3 (4 residents) | 4 (1 residents) |
|---|---------------------------|--------------------|--------------------|--------------------|--------------------|
| Have you personally delivered care to one of your family medicine patients in at least 3 different settings? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 3 times in the preceding 6 months? | 84.2% | 100.0% | 66.7% | 75.0% | 100.0% |
| Have you personally called and directed a family meeting for any reason? | 94.7% | 100.0% | 83.3% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 78.9% | 100.0% | 50.0% | 75.0% | 100.0% |
| Have you personally provided a comprehensive service for one of your patients for any reason? | 94.7% | 100.0% | 83.3% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 89.5% | 100.0% | 83.3% | 75.0% | 100.0% |
| Have you personally helped one of your patients by being supportive, making suggestions, and were you an important part of the healing for the patient? | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| Has this occurred more than 2 times in the preceding 6 months? | 89.5% | 100.0% | 83.3% | 75.0% | 100.0% |

Residents' overall evaluation of the program



Residents' overall opinion of the program



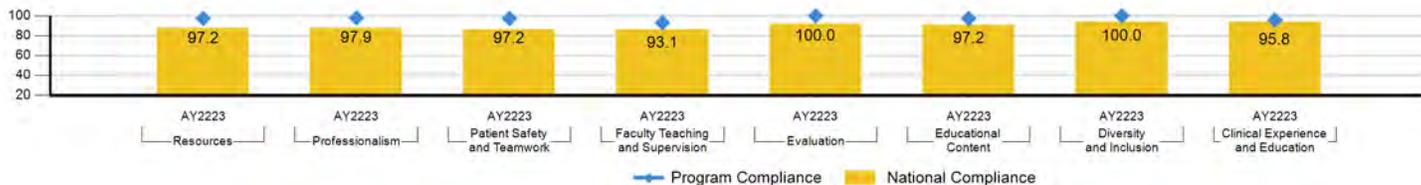
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---------------------|--------------|------------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 92% | 4.8 | 84% | 4.3 | 88% | 4.4 |
| | Impact of other learners on education | 100% | 4.0 | 87% | 3.6 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 100% | 4.6 | 71% | 3.9 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 100% | 3.9 | 90% | 3.5 | 90% | 3.6 |
| | Time to interact with patients | 100% | 4.8 | 84% | 4.2 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 83% | 4.5 | 78% | 4.1 | 85% | 4.3 |
| | Able to attend personal appointments | 100% | 5.0 | 85% | 4.4 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 100% | 5.0 | 92% | 4.7 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 100% | 4.8 | 81% | 4.2 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 83% | 4.6 | 82% | 4.3 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 100% | 4.6 | 90% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 4.9 | 94% | 4.6 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 100% | 5.0 | 88% | 4.5 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 100% | 4.7 | 73% | 4.0 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 100% | 4.8 | 68% | 3.9 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 90% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 89% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 92% | 4.6 | 78% | 4.0 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 100% | 4.8 | 84% | 4.2 | 89% | 4.4 |
| | Know how to report patient safety events | 100% | 5.0 | 95% | 4.8 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 100% | 4.5 | 72% | 4.0 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 92% | 4.7 | 75% | 4.0 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 100% | 5.0 | 86% | 4.4 | 89% | 4.6 |
| Faculty Teaching and Supervision | Faculty members interested in education | 100% | 4.8 | 80% | 4.2 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 100% | 4.9 | 79% | 4.1 | 82% | 4.3 |
| | Appropriate level of supervision | 100% | 4.9 | 90% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 92% | 4.7 | 78% | 4.4 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.8 | 95% | 4.0 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 67% | 4.0 | 78% | 4.1 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 98% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 100% | 5.0 | 94% | 4.7 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 100% | 4.3 | 71% | 3.9 | 75% | 4.0 |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 100% | 5.0 | 79% | 4.2 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 91% | 4.6 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 92% | 4.7 | 90% | 4.6 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 96% | 4.8 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 92% | 4.7 | 91% | 4.6 | 94% | 4.8 |
| | Taught about health care disparities | 100% | 3.8 | 81% | 3.6 | 84% | 3.8 |
| | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | | |
| | Fatigue and sleep deprivation | 100% | | Substance use disorder | 100% | | |
| Depression | 100% | | | | | | |
| Burnout | 100% | | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 100% | 4.6 | 93% | 4.2 | 95% | 4.3 |
| | Program fosters inclusive work environment | 100% | 4.9 | 96% | 4.4 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 100% | 4.7 | 88% | 3.9 | 90% | 4.1 |

Clinical Experience and Education

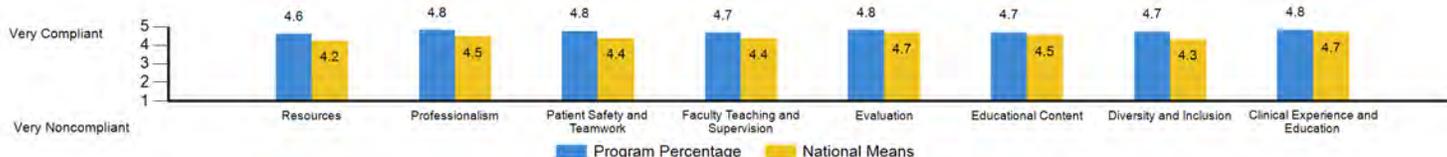
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| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 92% | 4.8 | 89% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 100% | 4.8 | 79% | 4.3 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 100% | 5.0 | 98% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 5.0 | 97% | 4.9 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 75% | 4.1 | 87% | 4.4 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 4.9 | 96% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



Program Percentage at-a-glance



Internal Medicine

| | 1 | 2 | 3 |
|-----------------------------------|--------|------|------|
| What year are you in the program? | 100.0% | 0.0% | 0.0% |

| Rate the quality of your program's facilities: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| Safety of on-call rooms | 0.0% | 0.0% | 0.0% | 8.3% | 91.7% |
| Proximity of on-call rooms | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Adequacy of conference rooms | 0.0% | 0.0% | 0.0% | 16.7% | 83.3% |
| Adequacy of computer access | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Availability of ancillary support personnel | 0.0% | 0.0% | 0.0% | 16.7% | 83.3% |
| Accessibility of electronic reference resources | 0.0% | 0.0% | 0.0% | 8.3% | 91.7% |
| Availability of telehealth technology | 0.0% | 0.0% | 8.3% | 16.7% | 75.0% |

| | Never | Almost never | Sometimes | Often | Always |
|---|-------|--------------|-----------|-------|--------|
| How often do you provide care for patients on the non-teaching service (excluding consults/potential ICU transfers/responses to codes)? | 75.0% | 8.3% | 8.3% | 8.3% | 0.0% |
| How often does someone outside of your team write significant/important orders for patients under your care without communicating with you? | 41.7% | 41.7% | 16.7% | 0.0% | 0.0% |
| How often does the number of attending physicians-of-record on inpatient rotations interfere with your educational experience? | 75.0% | 25.0% | 0.0% | 0.0% | 0.0% |
| How often do residents from other specialties supervise you while on internal medicine inpatient rotations? (Note: Supervision by IM subspecialty fellows and assistance with specific procedures by non-physicians is permitted as long as ultimate supervisory responsibility rests with the resident's attending physician.) | 66.7% | 16.7% | 16.7% | 0.0% | 0.0% |

| | Never | Almost never | Sometimes | Often | Always |
|--|--------|--------------|-----------|-------|--------|
| How often do you feel overloaded with clinical responsibilities on the general medicine wards without access to additional support (physicians and advanced practice providers)? | 58.3% | 33.3% | 8.3% | 0.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on critical care assignments without access to additional support (physicians and advanced practice providers)? | 66.7% | 33.3% | 0.0% | 0.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on night call without access to additional support (physicians and advanced practice providers)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% |

Internal Medicine

| | Never | Almost never | Sometimes | Often | Always |
|---|-------|--------------|-----------|-------|--------|
| How often are you assigned more than 5 new admissions (plus an additional 2 transfers or night float admissions) per admitting day? | 91.7% | 8.3% | 0.0% | 0.0% | 0.0% |
| How often are you assigned more than 8 new patients in a 48-hour period (excluding night float)? | 91.7% | 0.0% | 8.3% | 0.0% | 0.0% |
| How often are you responsible for the ongoing care of more than 10 patients (excluding night and other cross-coverage situations)? | 91.7% | 8.3% | 0.0% | 0.0% | 0.0% |

Internal Medicine

Aggregate reports are available only to programs with 4 or more residents in advanced level of training.

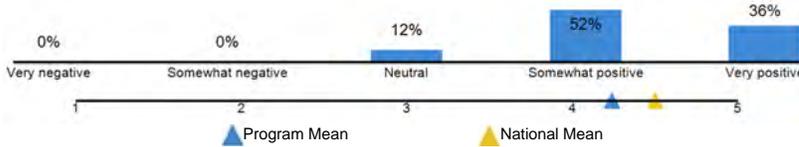
Internal Medicine

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Internal Medicine

Aggregate reports are available only to programs with 4 or more residents in advanced level of training.

Residents' overall evaluation of the program



Residents' overall opinion of the program



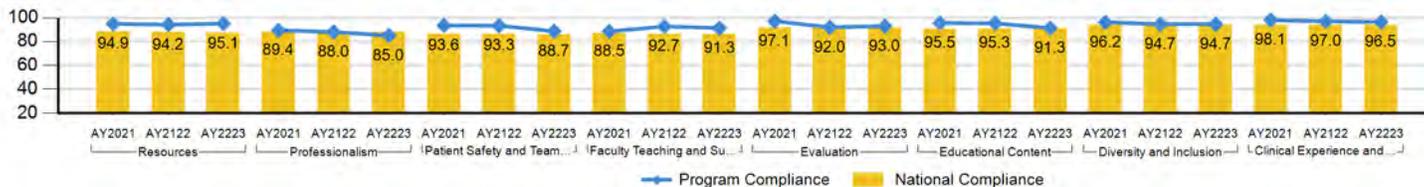
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---------------------|------------------------|-----------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 100% | 4.9 | 84% | 4.3 | 88% | 4.4 |
| | Impact of other learners on education | 92% | 3.9 | 87% | 3.6 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 92% | 4.2 | 71% | 3.9 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 100% | 4.0 | 90% | 3.5 | 90% | 3.6 |
| | Time to interact with patients | 96% | 4.6 | 84% | 4.2 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 92% | 4.7 | 78% | 4.1 | 85% | 4.3 |
| | Able to attend personal appointments | 92% | 4.7 | 85% | 4.4 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 92% | 4.7 | 92% | 4.7 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 100% | 4.6 | 81% | 4.2 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 100% | 4.6 | 82% | 4.3 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 80% | 4.1 | 90% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 4.6 | 94% | 4.6 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 88% | 4.5 | 88% | 4.5 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 56% | 3.3 | 73% | 4.0 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 72% | 3.7 | 68% | 3.9 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 92% | 4.6 | 90% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 92% | 4.5 | 89% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 92% | 4.2 | 78% | 4.0 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 96% | 4.5 | 84% | 4.2 | 89% | 4.4 |
| | Know how to report patient safety events | 92% | 4.7 | 95% | 4.8 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 84% | 4.2 | 72% | 4.0 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 76% | 4.0 | 75% | 4.0 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 92% | 4.7 | 86% | 4.4 | 89% | 4.6 |
| Faculty Teaching and Supervision | Faculty members interested in education | 92% | 4.4 | 80% | 4.2 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 84% | 4.0 | 79% | 4.1 | 82% | 4.3 |
| | Appropriate level of supervision | 92% | 4.6 | 90% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 92% | 4.5 | 78% | 4.4 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.2 | 95% | 4.0 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 88% | 4.1 | 78% | 4.1 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 98% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 92% | 4.7 | 94% | 4.7 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 80% | 3.8 | 71% | 3.9 | 75% | 4.0 |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 80% | 4.2 | 79% | 4.2 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 91% | 4.6 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 92% | 4.7 | 90% | 4.6 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 96% | 4.8 | 96% | 4.8 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 96% | 4.8 | 91% | 4.6 | 94% | 4.8 |
| | Taught about health care disparities | 84% | 3.8 | 81% | 3.6 | 84% | 3.8 |
| | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | | |
| Fatigue and sleep deprivation | 96% | | Substance use disorder | 80% | | | |
| Depression | 88% | | | | | | |
| Burnout | 92% | | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 92% | 4.4 | 93% | 4.2 | 95% | 4.3 |
| | Program fosters inclusive work environment | 96% | 4.7 | 96% | 4.4 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 96% | 4.4 | 88% | 3.9 | 90% | 4.1 |

Clinical Experience and Education

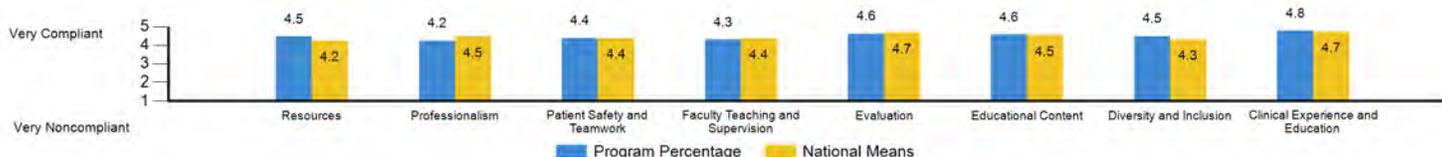
80-hour week (averaged over a four-week period)
 Four or more days free in 28 day period
 Taken in-hospital call more than every third night
 Less than 14 hours free after 24 hours of work
 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 92% | 4.6 | 89% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 88% | 4.4 | 79% | 4.3 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 100% | 5.0 | 98% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 4.9 | 96% | 4.8 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 4.9 | 97% | 4.9 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 92% | 4.5 | 87% | 4.4 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 4.9 | 96% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



Program Percentage at-a-glance



Internal Medicine

| | 1 | 2 | 3 |
|-----------------------------------|-------|-------|-------|
| What year are you in the program? | 40.0% | 32.0% | 28.0% |

| Rate the quality of your program's facilities: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| Safety of on-call rooms | 0.0% | 4.0% | 4.0% | 8.0% | 84.0% |
| Proximity of on-call rooms | 0.0% | 0.0% | 0.0% | 16.0% | 84.0% |
| Adequacy of conference rooms | 0.0% | 0.0% | 8.0% | 16.0% | 76.0% |
| Adequacy of computer access | 0.0% | 0.0% | 16.0% | 16.0% | 68.0% |
| Availability of ancillary support personnel | 0.0% | 0.0% | 12.0% | 32.0% | 56.0% |
| Accessibility of electronic reference resources | 0.0% | 0.0% | 0.0% | 28.0% | 72.0% |
| Availability of telehealth technology | 0.0% | 0.0% | 4.0% | 36.0% | 60.0% |

| | Never | Almost never | Sometimes | Often | Always |
|---|-------|--------------|-----------|-------|--------|
| How often do you provide care for patients on the non-teaching service (excluding consults/potential ICU transfers/responses to codes)? | 84.0% | 12.0% | 0.0% | 4.0% | 0.0% |
| How often does someone outside of your team write significant/important orders for patients under your care without communicating with you? | 44.0% | 44.0% | 8.0% | 0.0% | 4.0% |
| How often does the number of attending physicians-of-record on inpatient rotations interfere with your educational experience? | 72.0% | 28.0% | 0.0% | 0.0% | 0.0% |
| How often do residents from other specialties supervise you while on internal medicine inpatient rotations? (Note: Supervision by IM subspecialty fellows and assistance with specific procedures by non-physicians is permitted as long as ultimate supervisory responsibility rests with the resident's attending physician.) | 88.0% | 4.0% | 4.0% | 4.0% | 0.0% |

| | Never | Almost never | Sometimes | Often | Always |
|--|-------|--------------|-----------|-------|--------|
| How often do you feel overloaded with clinical responsibilities on the general medicine wards without access to additional support (physicians and advanced practice providers)? | 64.0% | 32.0% | 0.0% | 4.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on critical care assignments without access to additional support (physicians and advanced practice providers)? | 76.0% | 24.0% | 0.0% | 0.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on night call without access to additional support (physicians and advanced practice providers)? | 76.0% | 20.0% | 4.0% | 0.0% | 0.0% |

Internal Medicine

| | Never | Almost never | Sometimes | Often | Always |
|---|-------|--------------|-----------|-------|--------|
| How often are you assigned more than 5 new admissions (plus an additional 2 transfers or night float admissions) per admitting day? | 70.0% | 30.0% | 0.0% | 0.0% | 0.0% |
| How often are you assigned more than 8 new patients in a 48-hour period (excluding night float)? | 50.0% | 50.0% | 0.0% | 0.0% | 0.0% |
| How often are you responsible for the ongoing care of more than 10 patients (excluding night and other cross-coverage situations)? | 90.0% | 10.0% | 0.0% | 0.0% | 0.0% |

Internal Medicine

| | Never | Almost never | Sometimes | Often | Always | Not applicable |
|--|-------|--------------|-----------|-------|--------|----------------|
| If you are supervising more than one R1, how often are you responsible for the supervision or admission of more than 10 new patients (plus an additional 4 transfer patients) in 24 hours? | 86.7% | 13.3% | 0.0% | 0.0% | 0.0% | 0.0% |
| If you are supervising more than one R1, how often are you responsible for the supervision or admission of more than 16 new patients in 48 hours (excluding night float)? | 93.3% | 0.0% | 6.7% | 0.0% | 0.0% | 0.0% |
| If you are supervising more than one R1, how often are you responsible for the ongoing care of more than 20 patients (excluding night and other cross-coverage situations)? | 93.3% | 6.7% | 0.0% | 0.0% | 0.0% | 0.0% |
| If you are supervising one R1, how often are you responsible for the ongoing care of more than 14 patients (excluding night and other cross-coverage situations)? | 66.7% | 13.3% | 13.3% | 0.0% | 0.0% | 6.7% |

Internal Medicine

| Rate the quality of your continuity clinic experience in the following: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|-------|------------|-------|-----------|
| Preventive health | 0.0% | 0.0% | 0.0% | 28.6% | 71.4% |
| Chronic disease management | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Common acute ambulatory problems | 0.0% | 0.0% | 14.3% | 28.6% | 57.1% |
| Women's health | 0.0% | 0.0% | 14.3% | 28.6% | 57.1% |
| Working with an outpatient interdisciplinary team (medical assistant, social worker, pharmacist, case manager, scheduler, etc.) | 0.0% | 28.6% | 0.0% | 42.9% | 28.6% |
| Availability of population-based data for patient panels | 0.0% | 0.0% | 14.3% | 42.9% | 42.9% |

| Rate the quality of your <u>clinical</u> experience in each of the following: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| General Medicine | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Cardiovascular Disease | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Critical Care Medicine | 0.0% | 0.0% | 0.0% | 28.6% | 71.4% |
| Endocrinology, Diabetes & Metabolism | 0.0% | 0.0% | 14.3% | 42.9% | 42.9% |
| Gastroenterology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Geriatric Medicine | 0.0% | 0.0% | 0.0% | 28.6% | 71.4% |
| Hematology | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Infectious Disease | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Nephrology | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Oncology | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Pulmonology | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Rheumatology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Neurology | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Emergency Medicine | 0.0% | 0.0% | 0.0% | 71.4% | 28.6% |
| Addiction Medicine | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Hospice and Palliative Medicine | 0.0% | 0.0% | 0.0% | 71.4% | 28.6% |
| Telemedicine | 14.3% | 0.0% | 14.3% | 71.4% | 0.0% |
| Elective opportunities relative to future practice | 0.0% | 0.0% | 14.3% | 42.9% | 42.9% |

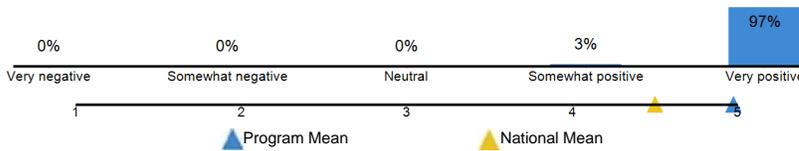
| | Very poor | Poor | Acceptable | Good | Excellent |
|--|-----------|-------|------------|-------|-----------|
| Rate the adequacy of the continuity clinic facilities: | 0.0% | 0.0% | 14.3% | 85.7% | 0.0% |
| Rate your ability to develop a continuous, therapeutic relationship with a panel of continuity clinic patients | 0.0% | 0.0% | 0.0% | 85.7% | 14.3% |
| Rate the overall quality of conferences: | 0.0% | 0.0% | 14.3% | 71.4% | 14.3% |
| Rate the opportunity to review content from conferences you could not attend. (Note that being able to review the slides and subsequently discuss them with the presenter is considered acceptable.) | 0.0% | 28.6% | 0.0% | 57.1% | 14.3% |

Internal MedicineRate the quality of your didactic experience in each of the following:

| | Very poor | Poor | Acceptable | Good | Excellent |
|--|-----------|------|------------|-------|-----------|
| General Medicine | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Cardiovascular Disease | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Critical Care Medicine | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Endocrinology, Diabetes & Metabolism | 0.0% | 0.0% | 14.3% | 42.9% | 42.9% |
| Gastroenterology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Geriatric Medicine | 0.0% | 0.0% | 0.0% | 42.9% | 57.1% |
| Hematology | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Infectious Disease | 0.0% | 0.0% | 0.0% | 71.4% | 28.6% |
| Nephrology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Oncology | 0.0% | 0.0% | 14.3% | 71.4% | 14.3% |
| Pulmonology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Rheumatology | 0.0% | 0.0% | 0.0% | 57.1% | 42.9% |
| Neurology | 0.0% | 0.0% | 14.3% | 71.4% | 14.3% |
| Addiction Medicine (may be included in GIM didactics) | 0.0% | 0.0% | 14.3% | 57.1% | 28.6% |
| Hospice and Palliative Medicine (may be included in GIM didactics) | 0.0% | 0.0% | 0.0% | 85.7% | 14.3% |

| | Not at all confident | Slightly confident | Moderately confident | Quite confident | Very confident |
|---|----------------------|--------------------|----------------------|-----------------|----------------|
| How confident are you that, at the completion of training, you will be able to treat patients with diseases typically managed by a general internist? | 0.0% | 0.0% | 0.0% | 14.3% | 85.7% |

Residents' overall evaluation of the program



Residents' overall opinion of the program



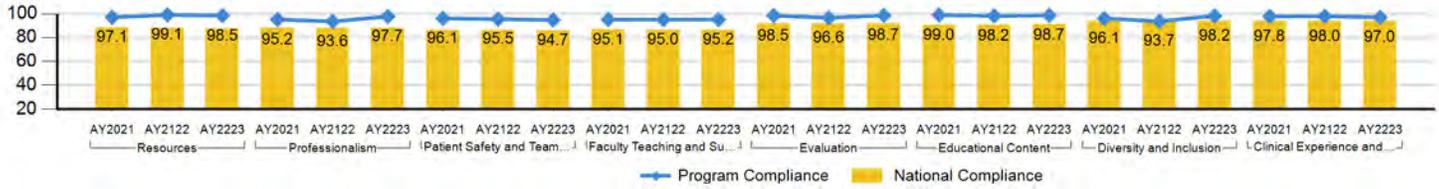
| Category | Item | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|----------------------------------|---|---------------------|--------------|------------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 100% | 5.0 | 84% | 4.3 | 88% | 4.4 |
| | Impact of other learners on education | 97% | 4.5 | 87% | 3.6 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 97% | 4.8 | 71% | 3.9 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 97% | 4.3 | 90% | 3.5 | 90% | 3.6 |
| | Time to interact with patients | 97% | 4.7 | 84% | 4.2 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 100% | 4.9 | 78% | 4.1 | 85% | 4.3 |
| | Able to attend personal appointments | 100% | 5.0 | 85% | 4.4 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 97% | 4.9 | 92% | 4.7 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 100% | 4.9 | 81% | 4.2 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 100% | 4.8 | 82% | 4.3 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 97% | 4.8 | 90% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 5.0 | 94% | 4.6 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 95% | 4.8 | 88% | 4.5 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 97% | 4.8 | 73% | 4.0 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 92% | 4.7 | 68% | 3.9 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 90% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 89% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 95% | 4.5 | 78% | 4.0 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 97% | 4.9 | 84% | 4.2 | 89% | 4.4 |
| | Know how to report patient safety events | 100% | 5.0 | 95% | 4.8 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 97% | 4.8 | 72% | 4.0 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 79% | 4.2 | 75% | 4.0 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 100% | 5.0 | 86% | 4.4 | 89% | 4.6 |
| Faculty Teaching and Supervision | Faculty members interested in education | 97% | 4.9 | 80% | 4.2 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 97% | 4.8 | 79% | 4.1 | 82% | 4.3 |
| | Appropriate level of supervision | 92% | 4.8 | 90% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 89% | 4.7 | 78% | 4.4 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.8 | 95% | 4.0 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 95% | 4.4 | 78% | 4.1 | 81% | 4.2 |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 98% | 4.9 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 100% | 5.0 | 94% | 4.7 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 95% | 4.6 | 71% | 3.9 | 75% | 4.0 |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 97% | 4.9 | 79% | 4.2 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 91% | 4.6 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 100% | 5.0 | 90% | 4.6 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 96% | 4.8 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 97% | 4.9 | 91% | 4.6 | 94% | 4.8 |
| | Taught about health care disparities | 97% | 4.4 | 81% | 3.6 | 84% | 3.8 |
| | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | | |
| | Fatigue and sleep deprivation | 97% | | Substance use disorder | 97% | | |
| Depression | 100% | | | | | | |
| Burnout | 100% | | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 97% | 4.8 | 93% | 4.2 | 95% | 4.3 |
| | Program fosters inclusive work environment | 100% | 5.0 | 96% | 4.4 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 97% | 4.6 | 88% | 3.9 | 90% | 4.1 |

Clinical Experience and Education

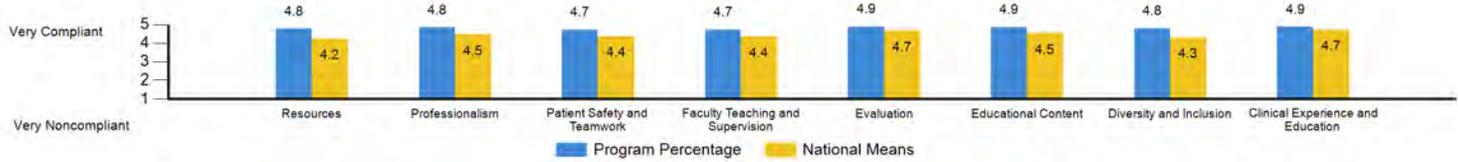
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 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 100% | 5.0 | 89% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 87% | 4.5 | 79% | 4.3 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 97% | 4.9 | 98% | 4.9 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 97% | 4.9 | 96% | 4.8 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 5.0 | 96% | 4.8 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 100% | 5.0 | 97% | 4.9 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 95% | 4.8 | 87% | 4.4 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 5.0 | 96% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



Program Percentage at-a-glance



Internal Medicine

| | 1 | 2 | 3 |
|-----------------------------------|-------|-------|-------|
| What year are you in the program? | 34.2% | 36.8% | 28.9% |

| Rate the quality of your program's facilities: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| Safety of on-call rooms | 0.0% | 0.0% | 2.6% | 2.6% | 94.7% |
| Proximity of on-call rooms | 0.0% | 0.0% | 5.3% | 7.9% | 86.8% |
| Adequacy of conference rooms | 0.0% | 0.0% | 2.6% | 7.9% | 89.5% |
| Adequacy of computer access | 0.0% | 0.0% | 7.9% | 13.2% | 78.9% |
| Availability of ancillary support personnel | 0.0% | 0.0% | 0.0% | 2.6% | 97.4% |
| Accessibility of electronic reference resources | 0.0% | 0.0% | 0.0% | 2.6% | 97.4% |
| Availability of telehealth technology | 0.0% | 0.0% | 10.5% | 10.5% | 78.9% |

| | Never | Almost never | Sometimes | Often | Always |
|---|--------|--------------|-----------|-------|--------|
| How often do you provide care for patients on the non-teaching service (excluding consults/potential ICU transfers/responses to codes)? | 86.8% | 5.3% | 7.9% | 0.0% | 0.0% |
| How often does someone outside of your team write significant/important orders for patients under your care without communicating with you? | 81.6% | 18.4% | 0.0% | 0.0% | 0.0% |
| How often does the number of attending physicians-of-record on inpatient rotations interfere with your educational experience? | 97.4% | 2.6% | 0.0% | 0.0% | 0.0% |
| How often do residents from other specialties supervise you while on internal medicine inpatient rotations? (Note: Supervision by IM subspecialty fellows and assistance with specific procedures by non-physicians is permitted as long as ultimate supervisory responsibility rests with the resident's attending physician.) | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% |

| | Never | Almost never | Sometimes | Often | Always |
|--|-------|--------------|-----------|-------|--------|
| How often do you feel overloaded with clinical responsibilities on the general medicine wards without access to additional support (physicians and advanced practice providers)? | 97.4% | 2.6% | 0.0% | 0.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on critical care assignments without access to additional support (physicians and advanced practice providers)? | 89.5% | 7.9% | 2.6% | 0.0% | 0.0% |
| How often do you feel overloaded with clinical responsibilities on night call without access to additional support (physicians and advanced practice providers)? | 86.8% | 13.2% | 0.0% | 0.0% | 0.0% |

Internal Medicine

| | Never | Almost never | Sometimes | Often | Always |
|---|--------|--------------|-----------|-------|--------|
| How often are you assigned more than 5 new admissions (plus an additional 2 transfers or night float admissions) per admitting day? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| How often are you assigned more than 8 new patients in a 48-hour period (excluding night float)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| How often are you responsible for the ongoing care of more than 10 patients (excluding night and other cross-coverage situations)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% |

Internal Medicine

| | Never | Almost never | Sometimes | Often | Always | Not applicable |
|--|--------|--------------|-----------|-------|--------|----------------|
| If you are supervising more than one R1, how often are you responsible for the supervision or admission of more than 10 new patients (plus an additional 4 transfer patients) in 24 hours? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| If you are supervising more than one R1, how often are you responsible for the supervision or admission of more than 16 new patients in 48 hours (excluding night float)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| If you are supervising more than one R1, how often are you responsible for the ongoing care of more than 20 patients (excluding night and other cross-coverage situations)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |
| If you are supervising one R1, how often are you responsible for the ongoing care of more than 14 patients (excluding night and other cross-coverage situations)? | 100.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |

Internal Medicine

| Rate the quality of your continuity clinic experience in the following: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| Preventive health | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Chronic disease management | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Common acute ambulatory problems | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Women's health | 0.0% | 0.0% | 18.2% | 9.1% | 72.7% |
| Working with an outpatient interdisciplinary team (medical assistant, social worker, pharmacist, case manager, scheduler, etc.) | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Availability of population-based data for patient panels | 0.0% | 9.1% | 0.0% | 18.2% | 72.7% |

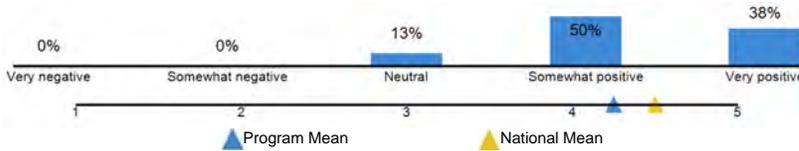
| Rate the quality of your <u>clinical</u> experience in each of the following: | Very poor | Poor | Acceptable | Good | Excellent |
|---|-----------|------|------------|-------|-----------|
| General Medicine | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Cardiovascular Disease | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Critical Care Medicine | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Endocrinology, Diabetes & Metabolism | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Gastroenterology | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Geriatric Medicine | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Hematology | 0.0% | 0.0% | 0.0% | 27.3% | 72.7% |
| Infectious Disease | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Nephrology | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Oncology | 0.0% | 0.0% | 0.0% | 27.3% | 72.7% |
| Pulmonology | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Rheumatology | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Neurology | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Emergency Medicine | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Addiction Medicine | 0.0% | 0.0% | 18.2% | 0.0% | 81.8% |
| Hospice and Palliative Medicine | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Telemedicine | 0.0% | 9.1% | 9.1% | 9.1% | 72.7% |
| Elective opportunities relative to future practice | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |

| | Very poor | Poor | Acceptable | Good | Excellent |
|--|-----------|------|------------|-------|-----------|
| Rate the adequacy of the continuity clinic facilities: | 0.0% | 0.0% | 0.0% | 27.3% | 72.7% |
| Rate your ability to develop a continuous, therapeutic relationship with a panel of continuity clinic patients | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Rate the overall quality of conferences: | 0.0% | 0.0% | 0.0% | 45.5% | 54.5% |
| Rate the opportunity to review content from conferences you could not attend. (Note that being able to review the slides and subsequently discuss them with the presenter is considered acceptable.) | 0.0% | 9.1% | 0.0% | 18.2% | 72.7% |

Internal MedicineRate the quality of your didactic experience in each of the following:

| | Very poor | Poor | Acceptable | Good | Excellent |
|---|----------------------|--------------------|----------------------|-----------------|----------------|
| General Medicine | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Cardiovascular Disease | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Critical Care Medicine | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Endocrinology, Diabetes & Metabolism | 0.0% | 0.0% | 0.0% | 9.1% | 90.9% |
| Gastroenterology | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Geriatric Medicine | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |
| Hematology | 0.0% | 0.0% | 9.1% | 0.0% | 90.9% |
| Infectious Disease | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Nephrology | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Oncology | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Pulmonology | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Rheumatology | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Neurology | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| Addiction Medicine (may be included in GIM didactics) | 0.0% | 0.0% | 9.1% | 9.1% | 81.8% |
| Hospice and Palliative Medicine (may be included in GIM didactics) | 0.0% | 0.0% | 0.0% | 18.2% | 81.8% |
| | Not at all confident | Slightly confident | Moderately confident | Quite confident | Very confident |
| How confident are you that, at the completion of training, you will be able to treat patients with diseases typically managed by a general internist? | 0.0% | 0.0% | 0.0% | 0.0% | 100.0% |

Residents' overall evaluation of the program



Residents' overall opinion of the program



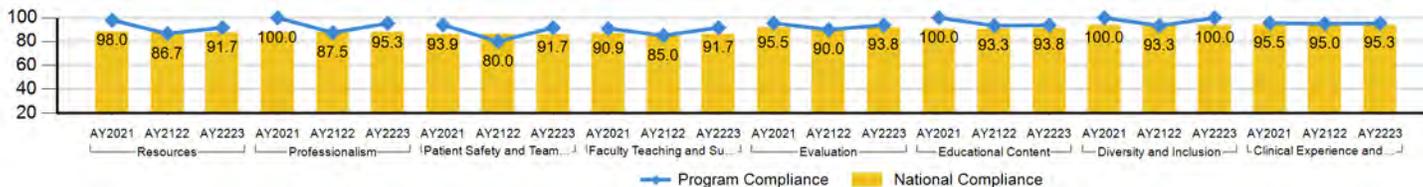
| | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---|---|--------------|------------------------|----------------|----------------------|---------------|
| Resources | Education compromised by non-physician obligations | 100% | 5.0 | 89% | 4.5 | 88% | 4.4 |
| | Impact of other learners on education | 88% | 3.8 | 89% | 3.9 | 88% | 3.7 |
| | Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care | 100% | 4.5 | 83% | 4.2 | 79% | 4.1 |
| | Faculty members discuss cost awareness in patient care decisions | 63% | 3.0 | 89% | 3.6 | 90% | 3.6 |
| | Time to interact with patients | 100% | 4.4 | 90% | 4.4 | 87% | 4.3 |
| | Protected time to participate in structured learning activities | 100% | 4.9 | 89% | 4.5 | 85% | 4.3 |
| | Able to attend personal appointments | 100% | 5.0 | 94% | 4.8 | 91% | 4.6 |
| | Able to access confidential mental health counseling or treatment | 100% | 5.0 | 95% | 4.8 | 94% | 4.8 |
| | Satisfied with safety and health conditions | 75% | 4.4 | 88% | 4.5 | 86% | 4.4 |
| Professionalism | Residents/fellows encouraged to feel comfortable calling supervisor with questions | 100% | 4.6 | 89% | 4.5 | 88% | 4.5 |
| | Faculty members act professionally when teaching | 100% | 4.5 | 91% | 4.5 | 92% | 4.5 |
| | Faculty members act professionally when providing care | 100% | 4.9 | 96% | 4.7 | 96% | 4.7 |
| | Process in place for confidential reporting of unprofessional behavior | 100% | 5.0 | 92% | 4.7 | 89% | 4.6 |
| | Able to raise concerns without fear of intimidation or retaliation | 75% | 4.3 | 81% | 4.3 | 78% | 4.2 |
| | Satisfied with process for dealing confidentially with problems and concerns | 88% | 4.4 | 77% | 4.2 | 75% | 4.0 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 91% | 4.6 | 93% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 90% | 4.5 | 92% | 4.6 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 4.1 | 87% | 4.2 | 85% | 4.2 |
| | Culture reinforces personal responsibility for patient safety | 100% | 4.6 | 92% | 4.5 | 89% | 4.4 |
| | Know how to report patient safety events | 100% | 5.0 | 97% | 4.9 | 96% | 4.9 |
| | Interprofessional teamwork skills modeled or taught | 100% | 4.8 | 81% | 4.3 | 78% | 4.2 |
| | Participate in safety event investigation and analysis | 50% | 3.0 | 79% | 4.2 | 79% | 4.1 |
| | Process to transition patient care and clinical duties when fatigued | 100% | 5.0 | 89% | 4.6 | 89% | 4.6 |
| | | | | | | | |
| Faculty Teaching and Supervision | Faculty members interested in education | 88% | 4.3 | 84% | 4.3 | 84% | 4.3 |
| | Faculty effectively creates environment of inquiry | 88% | 4.4 | 82% | 4.3 | 82% | 4.3 |
| | Appropriate level of supervision | 100% | 5.0 | 93% | 4.7 | 92% | 4.7 |
| | Appropriate amount of teaching in all clinical and didactic activities | 88% | 4.8 | 82% | 4.5 | 81% | 4.5 |
| | Quality of teaching received in all clinical and didactic activities | 100% | 4.1 | 96% | 4.3 | 96% | 4.2 |
| | Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability | 88% | 4.0 | 80% | 4.2 | 81% | 4.2 |
| | | | | | | | |
| Evaluation | Access to performance evaluations | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| | Opportunity to confidentially evaluate faculty members at least annually | 100% | 5.0 | 99% | 5.0 | 98% | 4.9 |
| | Opportunity to confidentially evaluate program at least annually | 100% | 5.0 | 97% | 4.9 | 96% | 4.8 |
| | Satisfied with faculty members' feedback | 75% | 4.1 | 73% | 4.0 | 75% | 4.0 |
| | | | | | | | |
| Educational Content | Instruction on minimizing effects of sleep deprivation | 100% | 5.0 | 87% | 4.5 | 85% | 4.4 |
| | Instruction on maintaining physical and emotional well-being | 100% | 5.0 | 95% | 4.8 | 93% | 4.7 |
| | Instruction on scientific inquiry principles | 100% | 5.0 | 94% | 4.8 | 94% | 4.7 |
| | Education in assessing patient goals e.g. end of life care | 100% | 5.0 | 96% | 4.8 | 95% | 4.8 |
| | Opportunities to participate in scholarly activities | 88% | 4.5 | 92% | 4.7 | 94% | 4.8 |
| | Taught about health care disparities | 75% | 3.1 | 84% | 3.8 | 84% | 3.8 |
| | | | | | | | |
| | | <u>Program instruction in how to recognize the symptoms of and when to seek care regarding:</u> | | | | | |
| | Fatigue and sleep deprivation | 100% | | Substance use disorder | 100% | | |
| | Depression | 100% | | | | | |
| | Burnout | 100% | | | | | |
| Diversity and Inclusion | Preparation for interaction with diverse individuals | 100% | 4.8 | 95% | 4.4 | 95% | 4.3 |
| | Program fosters inclusive work environment | 100% | 4.5 | 96% | 4.5 | 97% | 4.5 |
| | Engagement in program's diverse resident/fellow recruitment/retainment efforts | 100% | 4.6 | 91% | 4.2 | 90% | 4.1 |
| | | | | | | | |

Clinical Experience and Education

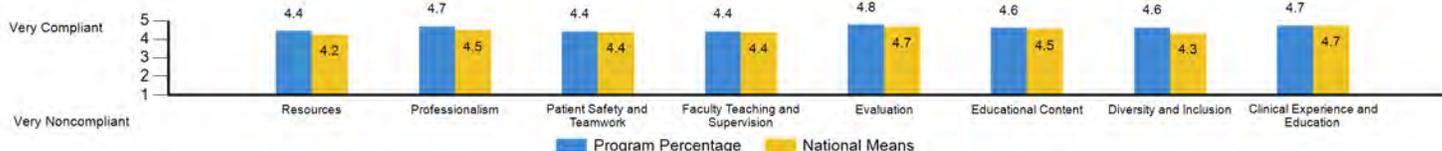
80-hour week (averaged over a four-week period)
 Four or more days free in 28 day period
 Taken in-hospital call more than every third night
 Less than 14 hours free after 24 hours of work
 More than 28 consecutive hours work
 Additional responsibilities after 24 consecutive hours of work
 Adequately manage patient care within 80 hours
 Pressured to work more than 80 hours

| | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 80-hour week (averaged over a four-week period) | 100% | 4.9 | 87% | 4.5 | 92% | 4.6 |
| Four or more days free in 28 day period | 100% | 4.9 | 90% | 4.6 | 84% | 4.4 |
| Taken in-hospital call more than every third night | 100% | 4.8 | 95% | 4.8 | 98% | 4.9 |
| Less than 14 hours free after 24 hours of work | 88% | 4.4 | 91% | 4.6 | 96% | 4.8 |
| More than 28 consecutive hours work | 100% | 4.5 | 92% | 4.6 | 96% | 4.8 |
| Additional responsibilities after 24 consecutive hours of work | 75% | 4.5 | 92% | 4.6 | 96% | 4.8 |
| Adequately manage patient care within 80 hours | 100% | 4.9 | 90% | 4.5 | 91% | 4.6 |
| Pressured to work more than 80 hours | 100% | 5.0 | 95% | 4.8 | 97% | 4.9 |

Total Percentage of Compliance by Category



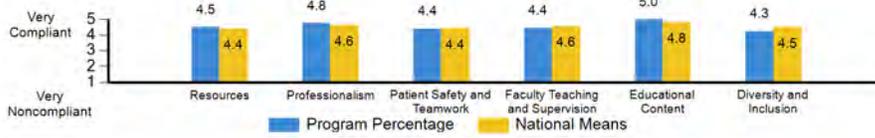
Program Percentage at-a-glance



Aggregate reports are available only to programs with 4 or more residents in advanced level of training.

Aggregate reports are available only to programs with 4 or more residents / fellows if a 70.0% response rate is reached.

Program Percentage at-a-glance



Faculty's overall evaluation of the program



| Resources | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Satisfied with professional development and education | | 100% | 4.0 | 100% | 4.7 | 97% | 4.5 |
| Workload exceeded residents'/fellows' available time for work | | 100% | 5.0 | 95% | 4.6 | 89% | 4.4 |
| Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | | |
| Education | 100% | | | | | | |
| Quality improvement and patient safety | 100% | | | | | | |
| Fostering your own well-being | 75% | | | | | | |
| | Fostering resident/fellow well-being | | | 75% | | | |
| | Practice-based learning and improvement | | | 100% | | | |
| | Contributing to an inclusive clinical learning environment | | | 100% | | | |

| Professionalism | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Faculty members act unprofessionally | | 100% | 4.8 | 95% | 4.7 | 94% | 4.5 |
| Residents/fellows comfortable calling supervisors with questions | | 100% | 4.3 | 97% | 4.8 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | | 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | | 100% | 4.8 | 95% | 4.7 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 97% | 4.8 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 97% | 4.8 | 95% | 4.7 |

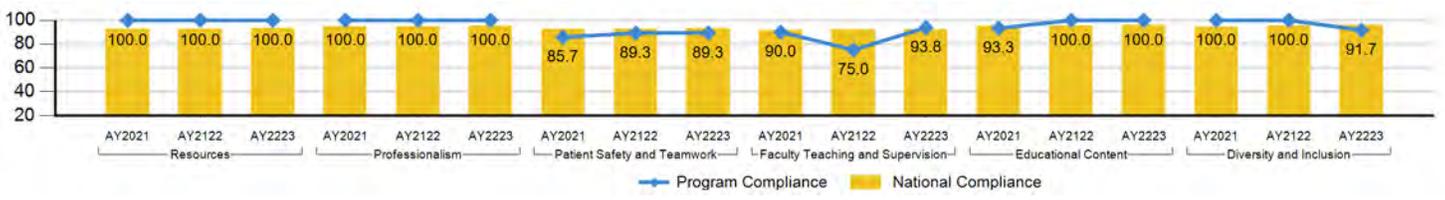
| Patient Safety and Teamwork | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Information not lost during shift changes, patient transfers, or the hand-over process | | 100% | 5.0 | 96% | 4.7 | 90% | 4.3 |
| Effective teamwork in patient care | | 100% | 4.8 | 99% | 4.8 | 96% | 4.7 |
| Interprofessional teamwork skills modeled or taught | | 75% | 4.3 | 97% | 4.8 | 91% | 4.5 |
| Effectively emphasizes culture of patient safety | | 100% | 4.8 | 98% | 4.9 | 96% | 4.7 |
| Residents/fellows participate in clinical patient safety investigation and analysis of safety events | | 75% | 4.0 | 92% | 4.7 | 93% | 4.7 |
| Know how to report patient safety events | | 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| Process to transition patient care and clinical duties when residents/fellows fatigued | | 75% | 3.8 | 87% | 4.4 | 89% | 4.5 |

| Faculty Teaching and Supervision | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Sufficient time to supervise residents/fellows | | 75% | 4.0 | 95% | 4.6 | 94% | 4.6 |
| Faculty members committed to educating residents/fellows | | 100% | 4.5 | 97% | 4.9 | 96% | 4.8 |
| Program director effectiveness | | 100% | 4.8 | 96% | 4.8 | 94% | 4.7 |
| Faculty members satisfied with process for evaluation as educators | | 100% | 4.5 | 91% | 4.5 | 84% | 4.3 |

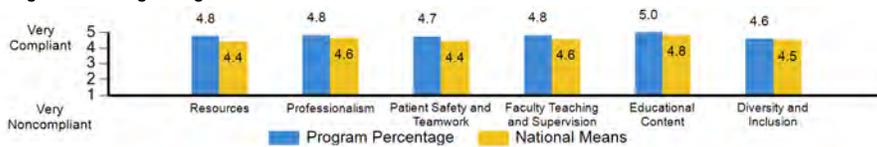
| Educational Content | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Residents/fellows instructed in cost-effectiveness | | 100% | 5.0 | 98% | 4.9 | 94% | 4.8 |
| Residents/fellows prepared for unsupervised practice | | 100% | 5.0 | 99% | 4.9 | 97% | 4.8 |
| Learning environment conducive to education | | 100% | 5.0 | 97% | 4.9 | 97% | 4.8 |

| Diversity and Inclusion | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|------------------|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | | 100% | 5.0 | 100% | 4.8 | 99% | 4.7 |
| Engaged by program in efforts to recruit diverse residents/fellows | | 100% | 4.0 | 94% | 4.5 | 95% | 4.5 |
| Engaged by program in efforts to retain diverse residents/fellows | | 75% | 3.8 | 92% | 4.4 | 94% | 4.4 |
| Participated in efforts to recruit diverse: | % Frequency** | | | | | | |
| Pre-residency learners, including medical students* | 75% | | | | | | |
| Residents/Fellows* | 100% | | | | | | |
| | Faculty members* | | | 100% | | | |
| | Other GME staff* | | | 75% | | | |

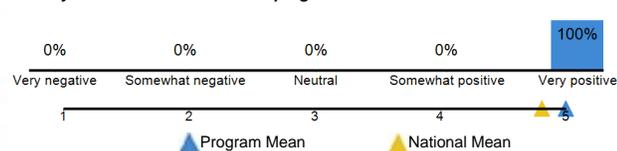
Total Percentage of Compliance by Category



Program Percentage at-a-glance



Faculty's overall evaluation of the program



| Resources | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Satisfied with professional development and education | 100% | 4.8 | 98% | 4.6 | 97% | 4.5 |
| Workload exceeded residents/fellows' available time for work | 100% | 4.7 | 90% | 4.4 | 89% | 4.4 |
| Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| Education | 100% | | | | | |
| Quality improvement and patient safety | 100% | | | | | |
| Fostering your own well-being | 100% | | | | | |
| Fostering resident/fellow well-being | | | 100% | | | |
| Practice-based learning and improvement | | | 100% | | | |
| Contributing to an inclusive clinical learning environment | | | 100% | | | |

| Professionalism | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Faculty members act unprofessionally | 92% | 4.5 | 95% | 4.5 | 94% | 4.5 |
| Residents/fellows comfortable calling supervisors with questions | 100% | 4.9 | 98% | 4.8 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | 100% | 4.9 | 96% | 4.7 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 95% | 4.7 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.8 | 94% | 4.6 | 95% | 4.7 |

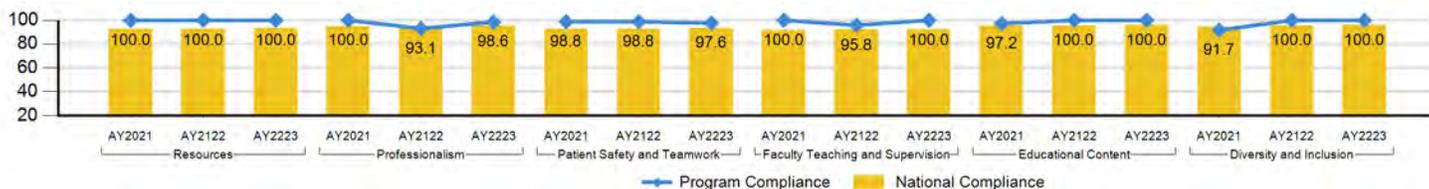
| Patient Safety and Teamwork | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 4.8 | 89% | 4.2 | 90% | 4.3 |
| Effective teamwork in patient care | 100% | 4.9 | 96% | 4.7 | 96% | 4.7 |
| Interprofessional teamwork skills modeled or taught | 100% | 4.8 | 94% | 4.7 | 91% | 4.5 |
| Effectively emphasizes culture of patient safety | 100% | 4.8 | 95% | 4.7 | 96% | 4.7 |
| Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 100% | 5.0 | 98% | 4.9 | 93% | 4.7 |
| Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Process to transition patient care and clinical duties when residents/fellows fatigued | 83% | 4.3 | 94% | 4.7 | 89% | 4.5 |

| Faculty Teaching and Supervision | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Sufficient time to supervise residents/fellows | 100% | 4.8 | 97% | 4.7 | 94% | 4.6 |
| Faculty members committed to educating residents/fellows | 100% | 4.8 | 97% | 4.8 | 96% | 4.8 |
| Program director effectiveness | 100% | 4.8 | 95% | 4.8 | 94% | 4.7 |
| Faculty members satisfied with process for evaluation as educators | 100% | 4.8 | 88% | 4.4 | 84% | 4.3 |

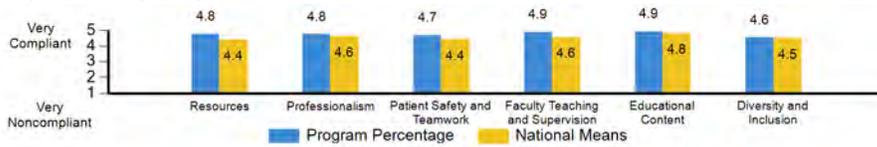
| Educational Content | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 95% | 4.8 | 94% | 4.8 |
| Residents/fellows prepared for unsupervised practice | 100% | 5.0 | 99% | 4.9 | 97% | 4.8 |
| Learning environment conducive to education | 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |

| Diversity and Inclusion | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 4.6 | 99% | 4.8 | 99% | 4.7 |
| Engaged by program in efforts to recruit diverse residents/fellows | 100% | 4.6 | 97% | 4.7 | 95% | 4.5 |
| Engaged by program in efforts to retain diverse residents/fellows | 100% | 4.6 | 97% | 4.6 | 94% | 4.4 |
| Participated in efforts to recruit diverse: | | | | | | |
| Pre-residency learners, including medical students* | 100% | | | | | |
| Residents/Fellows* | 100% | | | | | |
| Faculty members* | | | 100% | | | |
| Other GME staff* | | | 83% | | | |

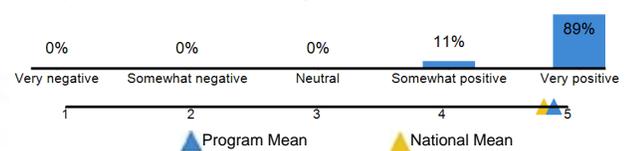
Total Percentage of Compliance by Category



Program Percentage at-a-glance

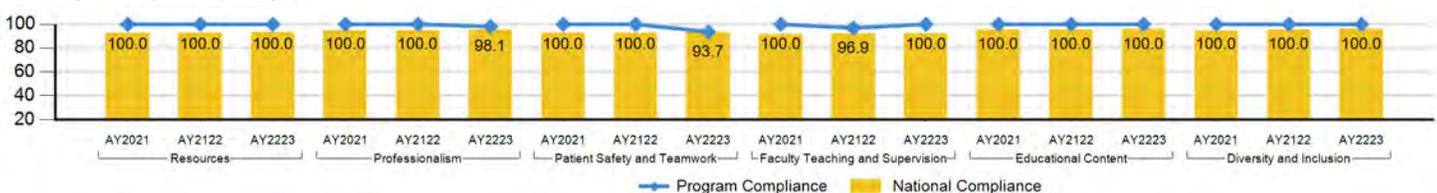


Faculty's overall evaluation of the program

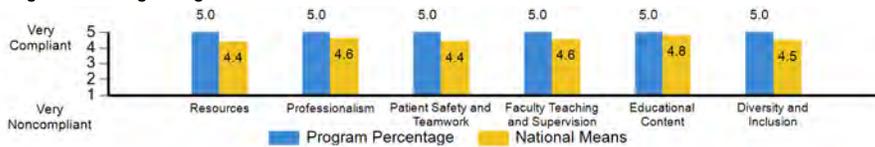


| Category | Item | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|----------------------------------|--|---------------------|--------------------------------------|-----------------------|----------------|----------------------|---------------|
| Resources | Satisfied with professional development and education | 100% | 4.8 | 96% | 4.3 | 97% | 4.5 |
| | Workload exceeded residents'/fellows' available time for work | 100% | 4.8 | 80% | 4.1 | 89% | 4.4 |
| | Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| | Education | 100% | | | | | |
| | Quality improvement and patient safety | 100% | | | | | |
| | Fostering your own well-being | 100% | | | | | |
| | Fostering resident/fellow well-being | 100% | | | | | |
| | Practice-based learning and improvement | 100% | | | | | |
| | Contributing to an inclusive clinical learning environment | 100% | | | | | |
| | | | | | | | |
| Professionalism | Faculty members act unprofessionally | 89% | 4.4 | 94% | 4.5 | 94% | 4.5 |
| | Residents/fellows comfortable calling supervisors with questions | 100% | 4.9 | 94% | 4.6 | 96% | 4.7 |
| | Process for confidential reporting of unprofessional behavior | 100% | 5.0 | 98% | 4.9 | 99% | 4.9 |
| | Satisfied with process to deal confidentially with problems and concerns | 100% | 4.8 | 91% | 4.5 | 93% | 4.6 |
| | Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.9 | 97% | 4.8 | 95% | 4.7 |
| | Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.8 | 95% | 4.7 | 95% | 4.7 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 4.7 | 87% | 4.1 | 90% | 4.3 |
| | Effective teamwork in patient care | 89% | 4.6 | 91% | 4.5 | 96% | 4.7 |
| | Interprofessional teamwork skills modeled or taught | 89% | 4.8 | 88% | 4.4 | 91% | 4.5 |
| | Effectively emphasizes culture of patient safety | 89% | 4.8 | 93% | 4.6 | 96% | 4.7 |
| | Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 89% | 4.6 | 94% | 4.8 | 93% | 4.7 |
| | Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Faculty Teaching and Supervision | Process to transition patient care and clinical duties when residents/fellows fatigued | 100% | 5.0 | 92% | 4.6 | 89% | 4.5 |
| | Sufficient time to supervise residents/fellows | 100% | 4.8 | 95% | 4.6 | 94% | 4.6 |
| | Faculty members committed to educating residents/fellows | 100% | 5.0 | 97% | 4.8 | 96% | 4.8 |
| | Program director effectiveness | 100% | 4.9 | 91% | 4.6 | 94% | 4.7 |
| | Faculty members satisfied with process for evaluation as educators | 100% | 4.9 | 79% | 4.1 | 84% | 4.3 |
| Educational Content | Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 99% | 4.9 | 94% | 4.8 |
| | Residents/fellows prepared for unsupervised practice | 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |
| | Learning environment conducive to education | 100% | 4.9 | 97% | 4.8 | 97% | 4.8 |
| Diversity and Inclusion | Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 4.8 | 98% | 4.6 | 99% | 4.7 |
| | Engaged by program in efforts to recruit diverse residents/fellows | 100% | 4.4 | 94% | 4.4 | 95% | 4.5 |
| | Engaged by program in efforts to retain diverse residents/fellows | 100% | 4.4 | 92% | 4.3 | 94% | 4.4 |
| | Participated in efforts to recruit diverse: | % Frequency** | | | | | |
| | Pre-residency learners, including medical students* Residents/Fellows* | 67% 100% | Faculty members* Other GME staff* | 100% 78% | | | |

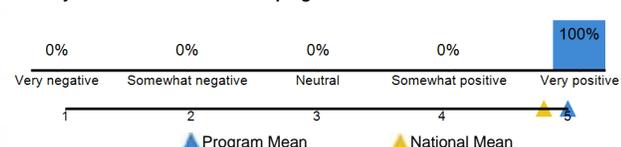
Total Percentage of Compliance by Category



Program Percentage at-a-glance

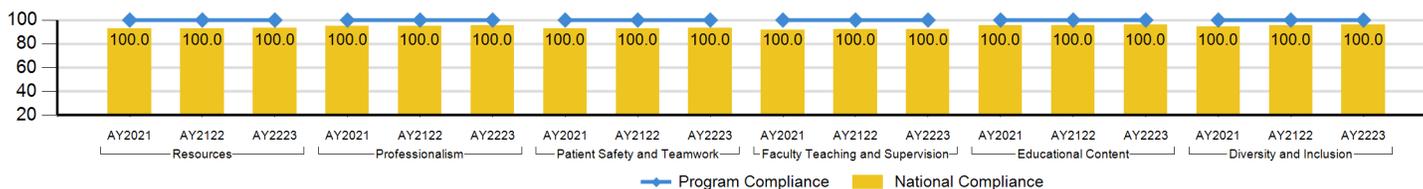


Faculty's overall evaluation of the program

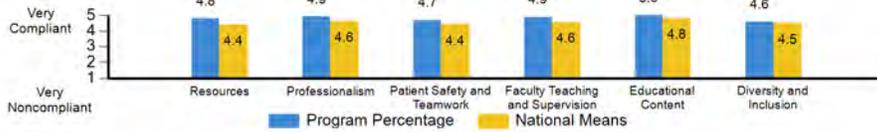


| Category | Item | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|--------------------------------------|--------------|--------------------------------------|----------------|----------------------|---------------|
| Resources | Satisfied with professional development and education | 100% | 5.0 | 96% | 4.3 | 97% | 4.5 |
| | Workload exceeded residents'/fellows' available time for work | 100% | 5.0 | 80% | 4.1 | 89% | 4.4 |
| | Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| | Education | 100% | | | | | |
| | Quality improvement and patient safety | 100% | | | | | |
| | Fostering your own well-being | 100% | | | | | |
| | Fostering resident/fellow well-being | | | 100% | | | |
| | Practice-based learning and improvement | | | 100% | | | |
| | Contributing to an inclusive clinical learning environment | | | 100% | | | |
| | Professionalism | Faculty members act unprofessionally | 100% | 5.0 | 94% | 4.5 | 94% |
| Residents/fellows comfortable calling supervisors with questions | | 100% | 5.0 | 94% | 4.6 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | | 100% | 5.0 | 98% | 4.9 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | | 100% | 5.0 | 91% | 4.5 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 97% | 4.8 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 95% | 4.7 | 95% | 4.7 |
| Patient Safety and Teamwork | Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 5.0 | 87% | 4.1 | 90% | 4.3 |
| | Effective teamwork in patient care | 100% | 5.0 | 91% | 4.5 | 96% | 4.7 |
| | Interprofessional teamwork skills modeled or taught | 100% | 5.0 | 88% | 4.4 | 91% | 4.5 |
| | Effectively emphasizes culture of patient safety | 100% | 5.0 | 93% | 4.6 | 96% | 4.7 |
| | Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 100% | 5.0 | 94% | 4.8 | 93% | 4.7 |
| | Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Faculty Teaching and Supervision | Process to transition patient care and clinical duties when residents/fellows fatigued | 100% | 5.0 | 92% | 4.6 | 89% | 4.5 |
| | Sufficient time to supervise residents/fellows | 100% | 5.0 | 95% | 4.6 | 94% | 4.6 |
| | Faculty members committed to educating residents/fellows | 100% | 5.0 | 97% | 4.8 | 96% | 4.8 |
| | Program director effectiveness | 100% | 5.0 | 91% | 4.6 | 94% | 4.7 |
| | Faculty members satisfied with process for evaluation as educators | 100% | 5.0 | 79% | 4.1 | 84% | 4.3 |
| Educational Content | Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 99% | 4.9 | 94% | 4.8 |
| | Residents/fellows prepared for unsupervised practice | 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |
| | Learning environment conducive to education | 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |
| Diversity and Inclusion | Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 5.0 | 98% | 4.6 | 99% | 4.7 |
| | Engaged by program in efforts to recruit diverse residents/fellows | 100% | 5.0 | 94% | 4.4 | 95% | 4.5 |
| | Engaged by program in efforts to retain diverse residents/fellows | 100% | 5.0 | 92% | 4.3 | 94% | 4.4 |
| | Participated in efforts to recruit diverse: | | | | | | |
| | Pre-residency learners, including medical students* Residents/Fellows* | 100% 100% | | Faculty members* Other GME staff* | 100% 100% | | |

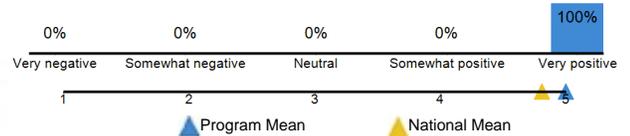
Total Percentage of Compliance by Category



Program Percentage at-a-glance

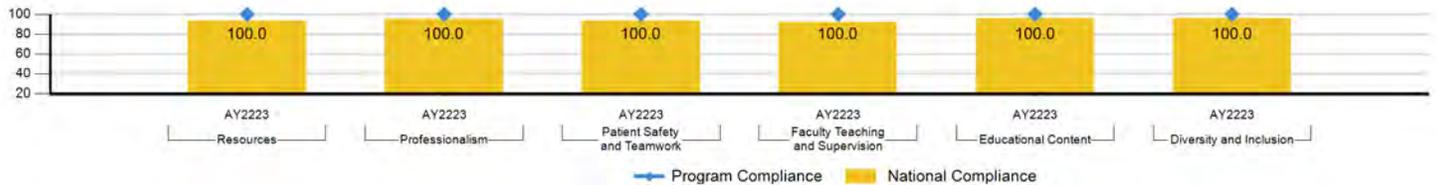


Faculty's overall evaluation of the program

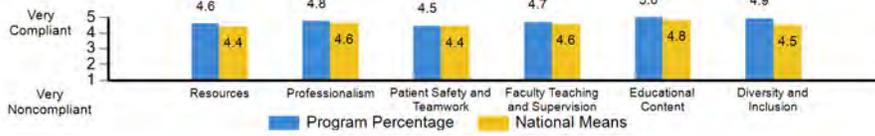


| Category | Item | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|--|--------------|--------------------------------------|----------------|----------------------|---------------|
| Resources | Satisfied with professional development and education | 100% | 4.6 | 97% | 4.4 | 97% | 4.5 |
| | Workload exceeded residents'/fellows' available time for work | 100% | 5.0 | 90% | 4.3 | 89% | 4.4 |
| | Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| | Education | 100% | | | | | |
| | Quality improvement and patient safety | 100% | | | | | |
| | Fostering your own well-being | 100% | | | | | |
| | Fostering resident/fellow well-being | 100% | | | | | |
| | Practice-based learning and improvement | 80% | | | | | |
| | Contributing to an inclusive clinical learning environment | 80% | | | | | |
| | Professionalism | Faculty members act unprofessionally | 100% | 4.8 | 94% | 4.5 | 94% |
| Residents/fellows comfortable calling supervisors with questions | | 100% | 5.0 | 95% | 4.6 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | | 100% | 4.8 | 94% | 4.6 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 96% | 4.7 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 94% | 4.6 | 95% | 4.7 |
| Patient Safety and Teamwork | | Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 4.6 | 85% | 4.1 | 90% |
| | Effective teamwork in patient care | 100% | 4.6 | 94% | 4.6 | 96% | 4.7 |
| | Interprofessional teamwork skills modeled or taught | 100% | 4.8 | 89% | 4.5 | 91% | 4.5 |
| | Effectively emphasizes culture of patient safety | 100% | 4.8 | 95% | 4.6 | 96% | 4.7 |
| | Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 100% | 5.0 | 95% | 4.8 | 93% | 4.7 |
| | Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Faculty Teaching and Supervision | Process to transition patient care and clinical duties when residents/fellows fatigued | 100% | 5.0 | 92% | 4.6 | 89% | 4.5 |
| | Sufficient time to supervise residents/fellows | 100% | 5.0 | 96% | 4.6 | 94% | 4.6 |
| | Faculty members committed to educating residents/fellows | 100% | 5.0 | 96% | 4.7 | 96% | 4.8 |
| | Program director effectiveness | 100% | 4.8 | 93% | 4.7 | 94% | 4.7 |
| | Faculty members satisfied with process for evaluation as educators | 100% | 4.8 | 84% | 4.2 | 84% | 4.3 |
| Educational Content | Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 97% | 4.9 | 94% | 4.8 |
| | Residents/fellows prepared for unsupervised practice | 100% | 5.0 | 96% | 4.8 | 97% | 4.8 |
| | Learning environment conducive to education | 100% | 5.0 | 96% | 4.8 | 97% | 4.8 |
| Diversity and Inclusion | Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 4.8 | 99% | 4.7 | 99% | 4.7 |
| | Engaged by program in efforts to recruit diverse residents/fellows | 100% | 4.4 | 95% | 4.5 | 95% | 4.5 |
| | Engaged by program in efforts to retain diverse residents/fellows | 100% | 4.6 | 94% | 4.4 | 94% | 4.4 |
| | Participated in efforts to recruit diverse: | % Frequency** | | % Frequency** | | | |
| | Pre-residency learners, including medical students* Residents/Fellows* | 80% 100% | | Faculty members* Other GME staff* | 100% 80% | | |

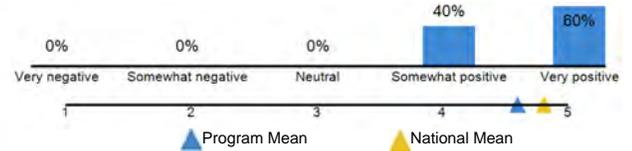
Total Percentage of Compliance by Category



Program Percentage at-a-glance



Faculty's overall evaluation of the program



| Resources | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Satisfied with professional development and education | | 100% | 4.4 | 97% | 4.4 | 97% | 4.5 |
| Workload exceeded residents/fellows' available time for work | | 100% | 4.8 | 90% | 4.3 | 89% | 4.4 |
| <u>Participated in faculty development and/or scholarly activities to enhance professional skills in:</u> | | | | | | | |
| Education | 100% | | | | | | |
| Quality improvement and patient safety | 100% | | | | | | |
| Fostering your own well-being | 100% | | | | | | |
| | Fostering resident/fellow well-being | | | 100% | | | |
| | Practice-based learning and improvement | | | 100% | | | |
| | Contributing to an inclusive clinical learning environment | | | 100% | | | |

| Professionalism | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Faculty members act unprofessionally | | 100% | 4.4 | 94% | 4.5 | 94% | 4.5 |
| Residents/fellows comfortable calling supervisors with questions | | 100% | 4.8 | 95% | 4.6 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | | 100% | 4.6 | 94% | 4.6 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 96% | 4.7 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 94% | 4.6 | 95% | 4.7 |

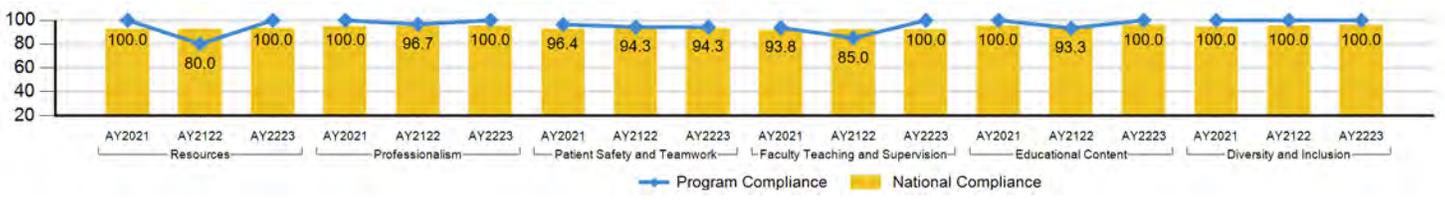
| Patient Safety and Teamwork | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Information not lost during shift changes, patient transfers, or the hand-over process | | 100% | 4.4 | 85% | 4.1 | 90% | 4.3 |
| Effective teamwork in patient care | | 80% | 4.4 | 94% | 4.6 | 96% | 4.7 |
| Interprofessional teamwork skills modeled or taught | | 80% | 4.4 | 89% | 4.5 | 91% | 4.5 |
| Effectively emphasizes culture of patient safety | | 100% | 4.6 | 95% | 4.6 | 96% | 4.7 |
| Residents/fellows participate in clinical patient safety investigation and analysis of safety events | | 100% | 5.0 | 95% | 4.8 | 93% | 4.7 |
| Know how to report patient safety events | | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Process to transition patient care and clinical duties when residents/fellows fatigued | | 100% | 5.0 | 92% | 4.6 | 89% | 4.5 |

| Faculty Teaching and Supervision | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Sufficient time to supervise residents/fellows | | 100% | 4.6 | 96% | 4.6 | 94% | 4.6 |
| Faculty members committed to educating residents/fellows | | 100% | 4.8 | 96% | 4.7 | 96% | 4.8 |
| Program director effectiveness | | 100% | 4.8 | 93% | 4.7 | 94% | 4.7 |
| Faculty members satisfied with process for evaluation as educators | | 100% | 4.6 | 84% | 4.2 | 84% | 4.3 |

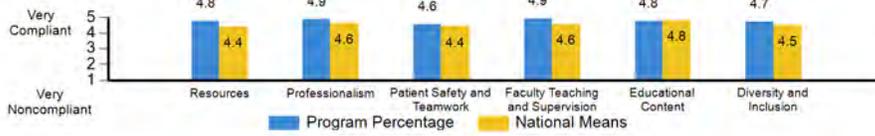
| Educational Content | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Residents/fellows instructed in cost-effectiveness | | 100% | 5.0 | 97% | 4.9 | 94% | 4.8 |
| Residents/fellows prepared for unsupervised practice | | 100% | 5.0 | 96% | 4.8 | 97% | 4.8 |
| Learning environment conducive to education | | 100% | 5.0 | 96% | 4.8 | 97% | 4.8 |

| Diversity and Inclusion | | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|-------------------|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | | 100% | 4.8 | 99% | 4.7 | 99% | 4.7 |
| Engaged by program in efforts to recruit diverse residents/fellows | | 100% | 5.0 | 95% | 4.5 | 95% | 4.5 |
| Engaged by program in efforts to retain diverse residents/fellows | | 100% | 5.0 | 94% | 4.4 | 94% | 4.4 |
| <u>Participated in efforts to recruit diverse:</u> | | | | | | | |
| Pre-residency learners, including medical students* | % Frequency** 60% | | | | | | |
| Residents/Fellows* | 100% | | | | | | |
| | Faculty members* | | | | 100% | | |
| | Other GME staff* | | | | 100% | | |

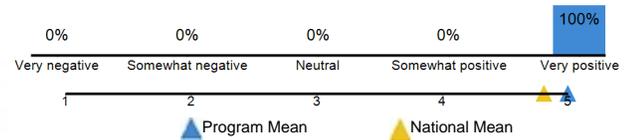
Total Percentage of Compliance by Category



Program Percentage at-a-glance

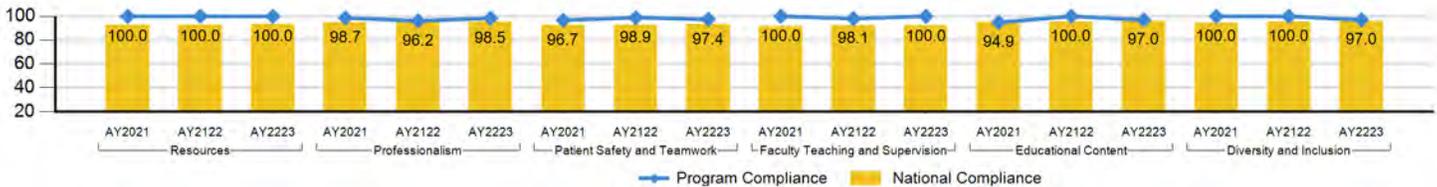


Faculty's overall evaluation of the program

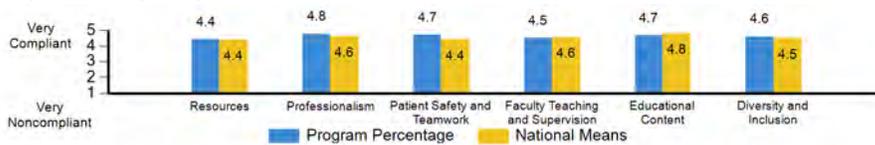


| Category | Item | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|--|--|--------------|-----------------------|----------------|----------------------|---------------|
| Resources | Satisfied with professional development and education | 100% | 4.9 | 97% | 4.4 | 97% | 4.5 |
| | Workload exceeded residents'/fellows' available time for work | 100% | 4.6 | 90% | 4.3 | 89% | 4.4 |
| | Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| | Education | 100% | | | | | |
| | Quality improvement and patient safety | 91% | | | | | |
| | Fostering your own well-being | 91% | | | | | |
| | Fostering resident/fellow well-being | | | 100% | | | |
| | Practice-based learning and improvement | | | 100% | | | |
| | Contributing to an inclusive clinical learning environment | | | 100% | | | |
| | Professionalism | Faculty members act unprofessionally | 91% | 4.6 | 94% | 4.5 | 94% |
| Residents/fellows comfortable calling supervisors with questions | | 100% | 4.7 | 95% | 4.6 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | | 100% | 5.0 | 94% | 4.6 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 96% | 4.7 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | | 100% | 5.0 | 94% | 4.6 | 95% | 4.7 |
| Patient Safety and Teamwork | | Information not lost during shift changes, patient transfers, or the hand-over process | 91% | 4.2 | 85% | 4.1 | 90% |
| | Effective teamwork in patient care | 100% | 4.9 | 94% | 4.6 | 96% | 4.7 |
| | Interprofessional teamwork skills modeled or taught | 100% | 4.8 | 89% | 4.5 | 91% | 4.5 |
| | Effectively emphasizes culture of patient safety | 100% | 4.8 | 95% | 4.6 | 96% | 4.7 |
| | Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 100% | 5.0 | 95% | 4.8 | 93% | 4.7 |
| | Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Faculty Teaching and Supervision | Process to transition patient care and clinical duties when residents/fellows fatigued | 91% | 4.5 | 92% | 4.6 | 89% | 4.5 |
| | Sufficient time to supervise residents/fellows | 100% | 4.8 | 96% | 4.6 | 94% | 4.6 |
| | Faculty members committed to educating residents/fellows | 100% | 5.0 | 96% | 4.7 | 96% | 4.8 |
| | Program director effectiveness | 100% | 5.0 | 93% | 4.7 | 94% | 4.7 |
| | Faculty members satisfied with process for evaluation as educators | 100% | 4.9 | 84% | 4.2 | 84% | 4.3 |
| Educational Content | Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 97% | 4.9 | 94% | 4.8 |
| | Residents/fellows prepared for unsupervised practice | 100% | 4.9 | 96% | 4.8 | 97% | 4.8 |
| | Learning environment conducive to education | 91% | 4.6 | 96% | 4.8 | 97% | 4.8 |
| Diversity and Inclusion | Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 4.9 | 99% | 4.7 | 99% | 4.7 |
| | Engaged by program in efforts to recruit diverse residents/fellows | 100% | 4.8 | 95% | 4.5 | 95% | 4.5 |
| | Engaged by program in efforts to retain diverse residents/fellows | 91% | 4.5 | 94% | 4.4 | 94% | 4.4 |
| | Participated in efforts to recruit diverse: | % Frequency** | | % Frequency** | | | |
| | Pre-residency learners, including medical students* Residents/Fellows* | 91% | | 91% | | | |
| Faculty members* Other GME staff* | | | 82% | | | | |

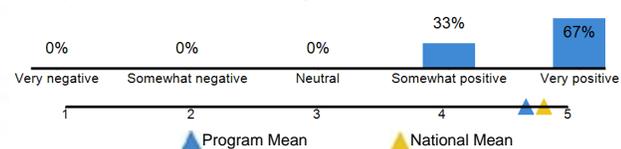
Total Percentage of Compliance by Category



Program Percentage at-a-glance



Faculty's overall evaluation of the program



| Resources | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Satisfied with professional development and education | 100% | 4.3 | 96% | 4.4 | 97% | 4.5 |
| Workload exceeded residents/fellows' available time for work | 100% | 4.5 | 88% | 4.3 | 89% | 4.4 |
| Participated in faculty development and/or scholarly activities to enhance professional skills in: | | | | | | |
| Education | 100% | | | | | |
| Quality improvement and patient safety | 100% | | | | | |
| Fostering your own well-being | 83% | | | | | |
| Fostering resident/fellow well-being | | | 100% | | | |
| Practice-based learning and improvement | | | 100% | | | |
| Contributing to an inclusive clinical learning environment | | | 100% | | | |

| Professionalism | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Faculty members act unprofessionally | 100% | 4.7 | 90% | 4.3 | 94% | 4.5 |
| Residents/fellows comfortable calling supervisors with questions | 100% | 4.7 | 95% | 4.7 | 96% | 4.7 |
| Process for confidential reporting of unprofessional behavior | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Satisfied with process to deal confidentially with problems and concerns | 100% | 4.7 | 92% | 4.6 | 93% | 4.6 |
| Personally experienced abuse, harassment, mistreatment, discrimination, or coercion | 100% | 5.0 | 94% | 4.7 | 95% | 4.7 |
| Witnessed abuse, harassment, mistreatment, discrimination, or coercion | 100% | 4.8 | 94% | 4.6 | 95% | 4.7 |

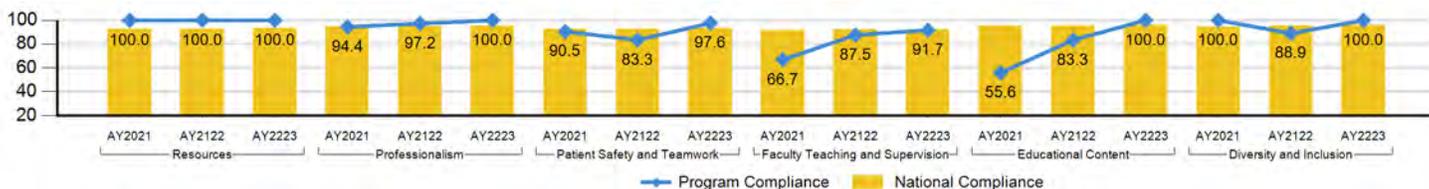
| Patient Safety and Teamwork | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Information not lost during shift changes, patient transfers, or the hand-over process | 100% | 4.5 | 84% | 4.1 | 90% | 4.3 |
| Effective teamwork in patient care | 100% | 4.8 | 94% | 4.6 | 96% | 4.7 |
| Interprofessional teamwork skills modeled or taught | 100% | 4.7 | 89% | 4.5 | 91% | 4.5 |
| Effectively emphasizes culture of patient safety | 100% | 4.8 | 95% | 4.7 | 96% | 4.7 |
| Residents/fellows participate in clinical patient safety investigation and analysis of safety events | 83% | 4.3 | 94% | 4.8 | 93% | 4.7 |
| Know how to report patient safety events | 100% | 5.0 | 99% | 5.0 | 99% | 4.9 |
| Process to transition patient care and clinical duties when residents/fellows fatigued | 100% | 5.0 | 91% | 4.6 | 89% | 4.5 |

| Faculty Teaching and Supervision | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Sufficient time to supervise residents/fellows | 100% | 4.7 | 96% | 4.6 | 94% | 4.6 |
| Faculty members committed to educating residents/fellows | 100% | 4.7 | 95% | 4.7 | 96% | 4.8 |
| Program director effectiveness | 67% | 4.0 | 92% | 4.6 | 94% | 4.7 |
| Faculty members satisfied with process for evaluation as educators | 100% | 4.7 | 85% | 4.3 | 84% | 4.3 |

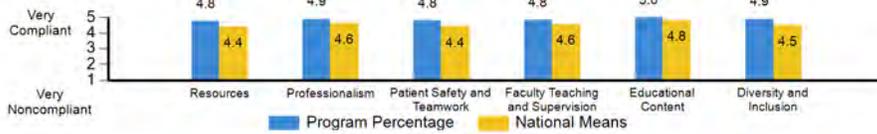
| Educational Content | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Residents/fellows instructed in cost-effectiveness | 100% | 5.0 | 92% | 4.7 | 94% | 4.8 |
| Residents/fellows prepared for unsupervised practice | 100% | 4.7 | 94% | 4.7 | 97% | 4.8 |
| Learning environment conducive to education | 100% | 4.7 | 96% | 4.8 | 97% | 4.8 |

| Diversity and Inclusion | % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|--|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion) | 100% | 4.8 | 98% | 4.7 | 99% | 4.7 |
| Engaged by program in efforts to recruit diverse residents/fellows | 100% | 4.5 | 95% | 4.5 | 95% | 4.5 |
| Engaged by program in efforts to retain diverse residents/fellows | 100% | 4.5 | 94% | 4.4 | 94% | 4.4 |
| Participated in efforts to recruit diverse: | | | | | | |
| Pre-residency learners, including medical students* | 67% | | | | | |
| Residents/Fellows* | 100% | | | | | |
| Faculty members* | | | 67% | | | |
| Other GME staff* | | | 67% | | | |

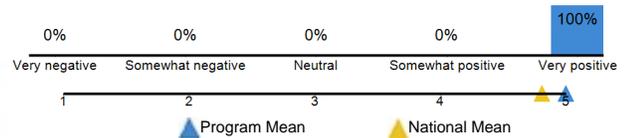
Total Percentage of Compliance by Category



Program Percentage at-a-glance



Faculty's overall evaluation of the program



Resources

Satisfied with professional development and education
 Workload exceeded residents/fellows' available time for work

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 4.5 | 97% | 4.4 | 97% | 4.5 |
| 100% | 5.0 | 91% | 4.4 | 89% | 4.4 |

Participated in faculty development and/or scholarly activities to enhance professional skills in:
 Education

100%

Quality improvement and patient safety
 Fostering your own well-being

100%

83%

Fostering resident/fellow well-being
 Practice-based learning and improvement
 Contributing to an inclusive clinical learning environment

83%

100%

100%

Professionalism

Faculty members act unprofessionally
 Residents/fellows comfortable calling supervisors with questions
 Process for confidential reporting of unprofessional behavior
 Satisfied with process to deal confidentially with problems and concerns
 Personally experienced abuse, harassment, mistreatment, discrimination, or coercion
 Witnessed abuse, harassment, mistreatment, discrimination, or coercion

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 5.0 | 95% | 4.6 | 94% | 4.5 |
| 100% | 4.8 | 95% | 4.6 | 96% | 4.7 |
| 100% | 5.0 | 97% | 4.9 | 99% | 4.9 |
| 100% | 4.8 | 91% | 4.5 | 93% | 4.6 |
| 100% | 5.0 | 96% | 4.8 | 95% | 4.7 |
| 100% | 4.8 | 95% | 4.7 | 95% | 4.7 |

Patient Safety and Teamwork

Information not lost during shift changes, patient transfers, or the hand-over process
 Effective teamwork in patient care
 Interprofessional teamwork skills modeled or taught
 Effectively emphasizes culture of patient safety
 Residents/fellows participate in clinical patient safety investigation and analysis of safety events
 Know how to report patient safety events
 Process to transition patient care and clinical duties when residents/fellows fatigued

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 5.0 | 93% | 4.4 | 90% | 4.3 |
| 100% | 4.8 | 97% | 4.7 | 96% | 4.7 |
| 100% | 4.7 | 95% | 4.7 | 91% | 4.5 |
| 100% | 4.7 | 96% | 4.7 | 96% | 4.7 |
| 100% | 5.0 | 84% | 4.4 | 93% | 4.7 |
| 100% | 5.0 | 99% | 4.9 | 99% | 4.9 |
| 100% | 5.0 | 84% | 4.2 | 89% | 4.5 |

Faculty Teaching and Supervision

Sufficient time to supervise residents/fellows
 Faculty members committed to educating residents/fellows
 Program director effectiveness
 Faculty members satisfied with process for evaluation as educators

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 4.8 | 89% | 4.4 | 94% | 4.6 |
| 100% | 4.8 | 97% | 4.8 | 96% | 4.8 |
| 100% | 5.0 | 94% | 4.7 | 94% | 4.7 |
| 100% | 4.7 | 78% | 4.0 | 84% | 4.3 |

Educational Content

Residents/fellows instructed in cost-effectiveness
 Residents/fellows prepared for unsupervised practice
 Learning environment conducive to education

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 5.0 | 93% | 4.7 | 94% | 4.8 |
| 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |
| 100% | 5.0 | 97% | 4.8 | 97% | 4.8 |

Diversity and Inclusion

Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion)
 Engaged by program in efforts to recruit diverse residents/fellows
 Engaged by program in efforts to retain diverse residents/fellows

| % Program Compliant | Program Mean | % Specialty Compliant | Specialty Mean | % National Compliant | National Mean |
|---------------------|--------------|-----------------------|----------------|----------------------|---------------|
| 100% | 5.0 | 99% | 4.7 | 99% | 4.7 |
| 100% | 4.8 | 93% | 4.3 | 95% | 4.5 |
| 100% | 4.8 | 90% | 4.2 | 94% | 4.4 |

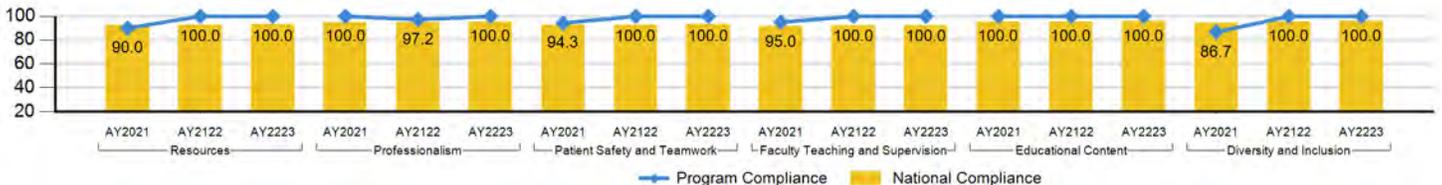
Participated in efforts to recruit diverse:
 Pre-residency learners, including medical students*
 Residents/Fellows*

% Frequency**
 67%
 100%

Faculty members*
 Other GME staff*

% Frequency**
 83%
 83%

Total Percentage of Compliance by Category



APPENDIX C
SPONSORED PROGRAM SUMMARIES

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [0811100068] - Florida State University College of Medicine Program |
| Specialty: | Micrographic surgery and dermatologic oncology |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/06/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Armand B. Cognetta Jr, MD |
| Director First Appointed Date: | 07/01/2013 |
| Program Coordinator(s): | Elaine Freni |
| Length of Training: | 1 |
| Annual Update Begin Date: | 07/17/2023 |
| Annual Update Due Date: | 09/22/2023 |
| Annual Update Complete Date: | |
| Self-Study Due Date: | 01/01/2025 (Postponed) |
| 10-Year Site Visit: | 01/01/2027 (Postponed) |
| Total Approved Fellow Positions: | 2 |
| Total Filled Fellow Positions: | 2 |
| Original Specialty Accreditation: | 07/01/2013 |
| Last Notification Letter Date: | 01/27/2023 |
| Last Other Correspondence Date: | 06/05/2015 |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [1101100203] - Florida State University College of Medicine Program |
| Specialty: | Emergency medicine |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/12/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Kelly P. O'Keefe, MD |
| Director First Appointed Date: | 06/30/2017 |
| Program Coordinator(s): | Jean Dunn Wendy Guerrier, BA |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | 08/14/2023 |
| Self-Study Due Date: | N/A |
| Total Approved Resident Positions: | 27 |
| Total Filled Resident Positions: | 27 |
| Original Specialty Accreditation: | 04/05/2018 |
| Last Notification Letter Date: | 03/10/2023 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|--|
| Program Code / Name: | [1201100728] - Florida State University College of Medicine/Lee Memorial Health System Program |
| Specialty: | Family medicine |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/25/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Alfred Gitu, MBChB |
| Director First Appointed Date: | 06/27/2018 |
| Program Coordinator(s): | Renee Gill, BA |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | 08/10/2023 |
| Self-Study Due Date: | 08/01/2026 (Postponed) |
| 10-Year Site Visit: | 08/01/2028 (Postponed) |
| Total Approved Resident Positions: | 30 |
| Total Filled Resident Positions: | 24 |
| Original Specialty Accreditation: | 07/01/2013 |
| Last Notification Letter Date: | 02/06/2023 |
| Last Other Correspondence Date: | 02/21/2023 |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [1201100749] - Florida State University College of Medicine Program |
| Specialty: | Family medicine |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/25/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Nathan P. Falk, MD, MBA |
| Director First Appointed Date: | 09/21/2018 |
| Program Coordinator(s): | Jaclyn M. Silverman, BS Joel Rothrock |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | |
| Self-Study Due Date: | N/A |
| Total Approved Resident Positions: | 24 |
| Total Filled Resident Positions: | 19 |
| Original Specialty Accreditation: | 07/01/2019 |
| Last Notification Letter Date: | 02/06/2023 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [1401100002] - Florida State University College of Medicine Program |
| Specialty: | Internal medicine |
| Accreditation Status: | Initial Accreditation |
| Effective Date: | 09/10/2021 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Maja Delibasic, MD |
| Director First Appointed Date: | 09/10/2021 |
| Program Coordinator(s): | Ginger D. Cook |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | 07/21/2023 |
| Self-Study Due Date: | N/A |
| Total Approved Resident Positions: | 36 |
| Total Filled Resident Positions: | 24 |
| Original Specialty Accreditation: | 09/10/2021 |
| Last Notification Letter Date: | 10/22/2021 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [1401100894] - Florida State University College of Medicine (Tallahassee) Program |
| Specialty: | Internal medicine |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/20/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Claudia A. Kroker-Bode, MD, PhD |
| Director First Appointed Date: | 06/15/2018 |
| Program Coordinator(s): | Brenda D. MacLean, BS |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | |
| Self-Study Due Date: | 01/01/2026 (Postponed) |
| 10-Year Site Visit: | 01/01/2028 (Postponed) |
| Total Approved Resident Positions: | 36 |
| Total Filled Resident Positions: | 25 |
| Original Specialty Accreditation: | 07/01/2012 |
| Last Notification Letter Date: | 02/16/2023 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|--|
| Program Code / Name: | [1401100947] - Florida State University College of Medicine (Sarasota) Program |
| Specialty: | Internal medicine |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/20/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Karen Hamad, MD |
| Director First Appointed Date: | 09/08/2022 |
| Program Coordinator(s): | Caitlin Taylor, BA Wendy Guerrier, BA |
| Length of Training: | 3 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | 08/11/2023 |
| Self-Study Due Date: | 09/01/2028 (Postponed) |
| 10-Year Site Visit: | 09/01/2030 (Postponed) |
| Total Approved Resident Positions: | 40 |
| Total Filled Resident Positions: | 40 |
| Original Specialty Accreditation: | 04/08/2016 |
| Last Notification Letter Date: | 02/16/2023 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [4401100438] - Florida State University College of Medicine Program |
| Specialty: | Surgery |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 01/04/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Wade G. Douglas, MD |
| Director First Appointed Date: | 07/01/2014 |
| Program Coordinator(s): | Erin Easterling, MBA |
| Length of Training: | 5 |
| Annual Update Begin Date: | 07/17/2023 |
| Annual Update Due Date: | 09/22/2023 |
| Annual Update Complete Date: | |
| Self-Study Due Date: | 04/01/2028 (Postponed) |
| 10-Year Site Visit: | 04/01/2030 (Postponed) |
| Total Approved Resident Positions: | 12 |
| Total Filled Resident Positions: | 11 |
| Original Specialty Accreditation: | 07/01/2015 |
| Last Notification Letter Date: | 03/06/2023 |
| Last Other Correspondence Date: | 09/20/2017 |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|--|
| Program Code / Name: | [5401112123] - Florida State University College of Medicine (Sarasota) Program |
| Specialty: | Hospice and palliative medicine (multidisciplinary) |
| Accreditation Status: | Continued Accreditation |
| Effective Date: | 09/09/2022 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Joshua A. Gross, MD |
| Director First Appointed Date: | 09/15/2022 |
| Program Coordinator(s): | Caitlin Taylor, BA Wendy Guerrier, BA |
| Length of Training: | 1 |
| Annual Update Begin Date: | 07/05/2023 |
| Annual Update Due Date: | 08/25/2023 |
| Annual Update Complete Date: | 08/10/2023 |
| Self-Study Due Date: | N/A |
| Total Approved Fellow Positions: | 2 |
| Total Filled Fellow Positions: | 2 |
| Original Specialty Accreditation: | 09/27/2019 |
| Last Notification Letter Date: | 11/10/2022 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | 02/13/2023 - 04/09/2023 |
| Last Faculty Survey Date: | 02/13/2023 - 04/09/2023 |

Sponsored Programs Summary

[119505] - Florida State University College of Medicine
Programs Count: 10



Information is subject to change during current academic year

| | |
|---|---|
| Program Code / Name: | [9991100007] - Florida State University College of Medicine Program |
| Specialty: | Transitional year |
| Accreditation Status: | Initial Accreditation |
| Effective Date: | 07/01/2023 |
| Osteopathic Recognition Status: | |
| Osteopathic Recognition Effective Date: | |
| Program Director: | Ashley J. Falk, MD |
| Director First Appointed Date: | 07/01/2023 |
| Program Coordinator(s): | Jaclyn M. Silverman, BS Joel Rothrock |
| Length of Training: | 1 |
| Annual Update Begin Date: | |
| Annual Update Due Date: | |
| Annual Update Complete Date: | |
| Self-Study Due Date: | N/A |
| Total Approved Resident Positions: | 13 |
| Total Filled Resident Positions: | 0 |
| Original Specialty Accreditation: | 07/01/2023 |
| Last Notification Letter Date: | 06/21/2023 |
| Last Other Correspondence Date: | |
| Last Resident Survey Date: | |
| Last Faculty Survey Date: | |



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM C

From: [Richard McCullough](#)
To: [Heather Mayo](#)
Cc: [Marissa Langston](#)
Subject: Re: Naming Request - Gate K at Doak Campbell Stadium
Date: Wednesday, August 23, 2023 7:10:09 PM
Attachments: [image001.png](#)
[image003.png](#)

Dear Heather and Marissa,

I approve.

Best Regards,
Rick

Richard McCullough
President
Florida State University

Get [Outlook for iOS](#)

From: Heather Mayo <hmayo@fsu.edu>
Sent: Wednesday, August 23, 2023 4:16:05 PM
To: Richard McCullough <rmccullough@fsu.edu>
Cc: Marissa Langston <m.langston@fsu.edu>
Subject: FW: Naming Request - Gate K at Doak Campbell Stadium

Hi President,

Please see below and attached for your review. If you approve, we will add it to the Advancement Committee and General Meeting Agenda.

Thank you!

All the best,

Heather Mayo
Deputy Chief of Staff
Office of the President
Florida State University
850-644-0803 (office)
850-509-3380 (cell)
hmayo@fsu.edu

From: Caroline Poole <caroline.poole@fsu.edu>
Sent: Wednesday, August 23, 2023 3:04 PM
To: Heather Mayo <hmayo@fsu.edu>; Marissa Langston <m.langston@fsu.edu>
Cc: Kelly Razzano <krazzano@fsu.edu>; Marla A Vickers <Marla.Vickers@fsu.edu>; Kari Terezakis

<kterezakis@admin.fsu.edu>; Stephen Ponder <Stephen.Ponder@fsu.edu>; Carolyn Egan <cegan@admin.fsu.edu>

Subject: FW: Naming Request - Gate K at Doak Campbell Stadium

Heather and Marissa

We are happy to share that the Campus Committee on Namings has approved the naming of Gate K at Doak Campbell Stadium.

To complete the internal process and then move forward with a Trustee vote, we will need final approval from the President. Please forward the committee approval below and attached memo to the President for final review. If the President approves, please forward the approval email to me and we will move forward with placing the naming on both the UBOT Advancement committee agenda and the UBOT consent agenda.

Please let me know if you have questions.

Thank you,
Caroline

Caroline C. Poole

Assistant Vice President of Advancement, Strategic Initiatives/Chief of Staff

211 Westcott Building | PO Box 3061350 | Tallahassee, FL 32306-1350

caroline.poole@fsu.edu | O:850.644.4506 | C: 850.566.1136



From: Kay Bartlett <kbartlett@admin.fsu.edu> **On Behalf Of** Janet Kistner

Sent: Wednesday, August 23, 2023 9:00 AM

To: Marla A Vickers <Marla.Vickers@fsu.edu>; Caroline Poole <caroline.poole@fsu.edu>

Cc: James Clark <jclark5@fsu.edu>; Kyle Clark <kyle.clark@fsu.edu>; SGA-President <FSUsgapresident@admin.fsu.edu>; Renisha Gibbs <rgibbs@admin.fsu.edu>; Sadie Greiner <sg22cy@fsu.edu>; Bridgett Birmingham <bbirmingham@fsu.edu>; morcom@comcast.net; Amy Hecht <ahecht@fsu.edu>; Michael Alford <Michael.Alford@fsu.edu>

Subject: RE: Naming Request - Gate K at Doak Campbell Stadium

We are pleased to inform you that this request has been approved by the Committee on Campus Names.

Best,

Janet

state/university employees and students are public records and available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure."

From: Kay Bartlett **On Behalf Of** Janet Kistner
Sent: Friday, August 18, 2023 7:40 AM
Subject: Naming Request - Gate K at Doak Campbell Stadium



FLORIDA STATE UNIVERSITY
OFFICE OF FACULTY DEVELOPMENT AND ADVANCEMENT

This naming request sent on behalf of Janet Kistner, Vice President for Faculty Development and Advancement.

Dear Committee Members,

The attached request has been submitted for review to the Committee on Campus Names. Please review and reply to this email with your vote to approve or oppose.

Thank you.

A handwritten signature in black ink, appearing to read "Janet Kistner".

Janet Kistner, Vice President for Faculty Development and Advancement.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM D



FLORIDA STATE UNIVERSITY
OFFICE OF AUDIT AND ADVISORY SERVICES

MEMORANDUM

TO: Richard McCullough, President

FROM: Undra Baldwin, Chief Audit Officer and Interim Chief Compliance and Ethics Officer

Date: August 21, 2023

SUBJECT: Consent Agenda Item for the September 8, 2023, BOT Meeting

Please find enclosed the Office of Audit and Advisory Services request for approval of the OAAS Charter and the A&C Committee Charter.

I respectfully request this item be placed on the BOT Consent Agenda for the September 8, 2023, BOT meeting.

Thank you.

Attachment



**Office of Audit and Advisory Services
Audit Charter**

1. Introduction

The Office of Audit and Advisory Services at Florida State University (hereafter referred to as “OAAS” and the “University,” respectively) has prepared this Charter to serve as a guide in the performance of its duties. The Charter does not include, nor is it intended to include, all the duties and responsibilities of OAAS.

Investigations are performed to address alleged fraud, waste, abuse, or other wrongdoing, which could result in the loss or misuse of University resources. Such wrongdoing may come to the attention of OAAS during an audit or investigation or through reporting by University faculty, staff, students, or the general public.

2. Authority for the Office

The Florida State University President (hereafter referred to as “President”) and Board of Trustees (hereafter referred to as “BOT”) initially approved a charter for the Office of Audit Services in September 2003. In November 2016, the Board of Governors (hereafter referred to as “BOG”) adopted Regulation 4.002 – State University System Chief Audit Executives. The charter was reaffirmed by the BOT in June 2021.

3. Purpose

OAAS helps the University accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes. OAAS works in conjunction with other offices and departments to monitor the risk management processes and provide assistance as needed. OAAS assists employees of the University in the effective discharge of their responsibilities, thereby protecting the resources and the students it serves.

4. Mission

OAAS’ mission is to:

- Provide an independent, objective, and comprehensive program of auditing and investigations.
- Improve the University’s operations through the provision of assurance and consulting services and investigations.
- Actively work with University Boards and Committees, management, faculty, and staff.
- Identify risks, evaluate controls, and make recommendations that promote economic, efficient, effective, unbiased, and ethical delivery of services.
- Evaluate and improve the effectiveness of risk management, control, and governance processes.



5. Vision

OAAS' vision is to add value and be trusted advisors for the University and the Board of Trustees. We will accomplish our vision by being an exemplary, professional audit and investigative organization that implements innovative processes, utilizes automation, performs robust risk-based assessments, and promotes ethical behavior.

6. Core Values

OAAS' core values are:

- Integrity – Ensure projects are performed with confidentiality, fairness, and objectivity. The basis of our existence, credibility, and effectiveness.
- Quality and Accuracy – Demonstrate excellence by performing audits/investigations that are accurate and timely and provide results and recommendations which will enhance operations.
- Innovative – Utilize automation and data analytics to support our systematic, disciplined approach of completing audits/investigations.
- Teamwork – Accomplish goals and objectives through collaborative efforts with faculty, staff, and external teams.
- Value Added – Identify process improvements and promote efficiencies that will result in the overall improvement for the University and/or quantifiable cost savings.

7. Organization

OAAS, headed by the Chief Audit Officer (hereafter referred to as “CAO”), provides a central point in the University for coordinating and carrying out activities that promote accountability, integrity, and objectivity. The Chief Audit Officer will report directly and administratively to the President, functionally to the Chair of the BOT Audit and Compliance Committee (hereafter referred to as “Chair A&C”) and shall have unrestricted access to the BOT.

The Chair A&C works in concert with the President prior to any action to hire or terminate the CAO. Any allegations related to wrongdoing by the CAO shall be reported to the BOG, President, Chairman of the BOT, and Chair A&C for their review and disposition.

8. Code of Ethics

All OAAS staff shall abide by the Florida Code of Ethics for Public Officers and Employees as provided for in Florida Law, any additional code of ethics or conflict of interest policy of the University, and the Code of Ethics issued by the Institute of Internal Auditors (IIA), Association of Certified Fraud Examiners (ACFE), the Association of Inspectors General (AIG), and the Information Systems Audit and Control Association (ISACA).



9. Independence and Objectivity

- a. To permit independence and objectivity in mental attitude and appearance, OAAS will remain free from interference from any element in the University to include matters of topic selection, scope, procedures, frequency, timing, report content, and report issuance. OAAS will have no direct authority or responsibility over any of the activities audited. OAAS will not implement internal controls, develop and write policies or procedures, design or install systems, or engage in any activity that may impair independence or objectivity.
- b. OAAS may review management initiated projects and provide advice and counsel to University departments. Management assistance activities that OAAS may perform shall meet professional auditing standards and result in management accepting responsibility for actions taken in response to accepted recommendations.
- c. OAAS staff will exhibit the highest level of professional objectivity in gathering, evaluating, and communicating information about the activities or processes being examined.
- d. OAAS staff will make a balanced assessment of all relevant circumstances and not be unduly influenced by their own interests, or those of others, in forming conclusions on engagement results.

10. Authority and Access to Records

OAAS provides audit and investigative services to all entities of Florida State University, including schools, colleges, departments, auxiliary enterprises, and Direct Support Organizations (DSOs). Accordingly, OAAS is authorized to:

- a. Have unlimited and unrestricted access to all data, books, records, files, property, information systems, and personnel of Florida State University and its DSOs and component units as deemed necessary to carry out its duties and responsibilities.
- b. Have “right-to-audit” language in all University contracts.
- c. Allocate resources, establish schedules, select subjects, determine scopes of work, and apply techniques required to accomplish objectives.
- d. Obtain essential assistance and cooperation from personnel in areas of the University where audits and investigations are performed.

The President and the Chair A&C have the authority to request audits and advisory services to be added to the audit plan at their discretion. Decisions to amend the approved audit plan are made in light of the University’s risk profile and available audit resources. Additionally, the CAO has the authority to direct OAAS to audit specific areas of the University.



11. Standards and Professionalism

Audit and compliance activities will be governed by adherence to the IIA's Professional Practices Framework, which is composed of the Core Principles, the Definition of Internal Auditing, the Code of Ethics, and the International Standards for the Professional Practice of Internal Auditing. Other professional auditing standards may be followed, as applicable to OAAS.

Investigative services will be governed by adherence to Principles and Standards for Offices of Inspector General issued by the Association of Inspectors General, the Standards for Complaint Handling and Investigations for the State University System of Florida, and the Commission for Florida Law Enforcement Accreditation Standards for Inspectors General.

OAAS will adhere to and be guided by applicable Florida law, as well as State University System Board of Governors, BOT, and University regulations, policies, and procedures.

12. Duties and Responsibilities

OAAS' responsibilities include, but are not limited to, the examination and evaluation of the adequacy and effectiveness of the University's governance, risk management, and internal controls, as well as the quality of performance in carrying out assigned responsibilities to achieve the University's stated goals and objectives. This includes, but is not limited to, the following:

- a. Develop an internal audit workplan based on a prioritization of the audit universe using a risk-based methodology, including input from the BOT, President, and Executive Management.
- b. Perform assurance and consulting engagements and investigations in accordance with the annual workplan taking into consideration any special tasks or projects requested by the President, the BOT A&C, and University management.
- c. The CAO will review and adjust the plan as necessary in response to changes in the University's activities, risks, operations, programs, systems, and controls. Any significant deviation from the approved audit workplan will be discussed with the President and BOT Audit Committee and communicated, as appropriate, to the BOT. In addition, the CAO will communicate the impact of resource limitations and significant audit plan changes to the BOT A&C.
- d. Provide the approved workplan to appropriate University management and the BOG's Office of Inspector General. The workplan will be revised as needed to meet the requests and needs of the President, BOT, and the University.
- e. Conduct follow-up activities for OAAS issued audits annually. As warranted by the specific issues, follow-up activities may occur at any time to protect University financial and program operations.



FLORIDA STATE UNIVERSITY
OFFICE OF AUDIT AND ADVISORY SERVICES

- f. Periodically report in writing and verbally upon request to the BOT, President, and Executive Management on OAAS activities as well as its performance relative to: its workplan; significant risk exposures and control issues, including fraud/abuse, risk, and governance issues; and other matters as needed or requested.
- g. Report at every BOT A&C meeting or at other times, depending on whether there are significant issues the Committee should be made aware of for their information, discussion, direction, and/or disposition.
- h. Recruit, develop, and retain professional staff with sufficient knowledge, skills, and experience, and professional certifications to fulfill the responsibilities of OAAS and ensure appropriate and required training and education are provided to staff in accordance with applicable professional education standards.
- i. OAAS staff will maintain confidentiality of all audit working papers and notes related to an audit and all information received, produced, or derived from an investigation, until such time as a final audit or investigative report is issued in accordance with applicable law.
- j. Maintain a reporting system that includes mechanisms available for anonymity or confidentiality, whereby University employees, students, vendors, contractors, and other interested parties may report or seek guidance regarding significant abuse, fraud, or criminal conduct, without fear of retaliation. In cases where a component of the reporting system is managed by another operational unit, the CAO shall have access to reported information.
- k. Work cooperatively with the University Compliance and Ethics Officer in the determination of issues that can be addressed most appropriately and efficiently jointly, or by one Office or the other.
- l. Provide training to the University community on internal control, risks management, fraud, abuse, administrative investigations, and other matters for which OAAS has expertise.
- m. Review all DSO financial statements and the related external audit reports issued for completeness and compliance with applicable Generally Accepted Accounting Principles, Generally Accepted Government Auditing Standards, and applicable laws, rules, and regulations.
- n. Review management's follow-up activities intended to address observations or recommendations of external audit or regulatory agencies to include any reports issued by the Auditor General, the Office of Program Policy Analysis and Government Accountability, a federal audit organization or its subcontractors, DSO external auditors, or others.
- o. Assist and provide technical advice and support to the BOT A&C in its selection of any external auditors/consultants to perform work within the University.



FLORIDA STATE UNIVERSITY
OFFICE OF AUDIT AND ADVISORY SERVICES

- p. OAAS will have primary responsibility for implementing, coordinating, and managing contracts involving external financial, performance, or compliance audits. OAAS will assist and provide technical advice and support to the BOT A&C in its oversight of DSOs that select external auditors/consultants to perform work for them.
- q. Distribute to the Board of Governors, BOT, President, and Executive Management an Annual Report that describes OAAS' accomplishments and significant audits and investigations conducted during the preceding year. The report shall be issued by September 30 following the end of each fiscal year.

13. OAAS performs three types of projects:

a. Audits

Audits are assurance services defined as examinations of evidence for the purpose of providing an independent assessment of governance, risk management, and control processes for the organization. Examples include:

- Operational – designed to evaluate the effectiveness, efficiency, and reasonableness of a department's operational processes.
- Compliance – designed to determine if activities are in compliance with applicable regulations, policies, procedures, and practices.
- Financial – designed to examine the accounting and reporting of financial transactions.
- Information Systems – designed to examine the accuracy, reliability, access controls, and security of information systems.

b. Advisory and Consulting Services

Advisory and consulting services are designed to add value to and improve the University's risk management and control processes. These engagements are performed upon request by Executive Management or departmental managers. Consulting services offered by OAAS include risk and internal control assessments, workshops, and other services, as requested.

c. Investigations

Investigations are independent evaluations of allegations generally focused on improper organization activities including misuse of University resources, fraud, financial irregularities, significant internal control weaknesses, and unethical behavior or actions. Examples of other duties are as follows:

- Investigate allegations of suspected abuse/fraudulent activities within the University and provide to the BOG, President, University management, and the BOT A&C investigative reports issued. The final OAAS investigative report may also be distributed to any other parties deemed necessary by the CAO.



- Address allegations of waste, fraud, or financial mismanagement. The CAO will use professional judgment in assessing materiality such that it would be appropriate to inform the BOG Office of Inspector General and Director of Compliance of such allegations. Significant and credible allegations shall be addressed to meet the requirements of BOG Regulation 4.001.
- Investigate complaints received under the State Whistle-blowers Act pursuant to sections 112.3187-112.31895, Florida Statutes, as applicable.
- Report allegations received by OAAS that the CAO has reason to believe involve potential violations of criminal law to the University Police, other law enforcement agencies, and other responsible state or federal agencies, as appropriate.
- Report information received of known or suspected child abuse, abandonment, or neglect committed on the property of the University or during an event or function sponsored by the University to the Florida Department of Children and Families.
- Assist University Police and other law enforcement organizations with criminal financial and other investigations as requested.

14. Quality Assurance and Improvement Program

OAAS will maintain a quality assurance and improvement program (QAIP) that covers all aspects of the internal audit process. The program will include an evaluation of OAAS’ conformance with the Definition of Internal Auditing and the *Standards* and an evaluation of whether staff comply with the *Code of Ethics*. The program also assesses the efficiency and effectiveness of OAAS activity and identifies opportunities for improvement.

The CAO will communicate to the President, Chair A&C, and Executive Management on OAAS’ quality assurance and improvement program, including results of ongoing internal assessments and external assessments conducted at least every five years.

| | |
|---|---------------|
| _____ President, Florida State University | _____ Date |
| _____ Board of Trustees’ Chair, Audit and Compliance Committee | _____ Date |
| _____ Chief Audit Officer, Florida State University | _____ Date |

History: 9-2003; revised: 8-18-2010; 11-19-2012; 3-4-2016; 6-7-2018; 6-6-2019, 8-30-2023
Note: Charter not changed but reaffirmed: 2-21-17, 6-3-2020

Florida State University

Audit and Compliance Committee Charter

1. Purpose

The Audit and Compliance Committee (the Committee) is a standing committee of the Florida State University Board of Trustees (BOT). The purpose of the Committee is to provide assurances to the BOT regarding University risk management, control, and governance processes thereby assisting the BOT in fulfilling its statutory, fiduciary, and oversight responsibilities. Additionally, the Committee shall provide oversight and direction to the Office of Audit and Advisory Services (OAAS) and the Office of Compliance and Ethics (OCE).

2. Authority

The Board authorizes the Committee to:

- 2.1 Perform activities within the scope of this charter.
- 2.2 Participate, through the Chair, in the process of appointment, evaluation, and/or dismissal of the Chief Audit Officer (CAO) or the Chief Compliance and Ethics Officer (CCEO).
- 2.3 Have unrestricted access to management, faculty, and employees of the university and its component units, all of whom are directed to cooperate with the Committee's request.
- 2.4 Meet as needed with those persons responsible for university compliance with state and federal laws and applicable rules, regulations, and policies.
- 2.5 Have access to all books, records, and facilities thereof of the University.
- 2.6 Study or investigate any matter related to audit, compliance, or related concerns such as potential fraud or conflicts of interest that the Committee deems appropriate.
- 2.7 Retain independent counsel, or others to advise the Committee or assist in the conduct of an investigation upon approval of the BOT.
- 2.8 Meet with the University's General Counsel to review any legal matters that may have a significant impact on the University's overall finances, operations, and compliance with regulatory agencies.
- 2.9 Provide oversight and direction to the OAAS and the OCE to include reviewing and recommending BOT approval of the annual work plan.
- 2.10 Provide oversight of audits performed of the University and its component units by state and federal auditors, to include the Auditor General, as well as external auditors.
- 2.11 Review this Charter at least once every three (3) years for consistency with applicable law, BOG, and University regulations and policies, professional standards, and best practices.
- 2.12 Nothing in this Charter shall be construed to limit the authority of the BOT or the Committee.

3. Organization

Composition

- 3.1 The Committee shall be appointed and comprised of members of the Florida State University Board of Trustees as provided for in the BOT Operating Procedures.

- 3.2 The members will be free from any financial, family, or other material personal relationships, including relationships with members of university management, University Office of Audit and Advisory Services and Office of Compliance and Ethics staff, and other professional consultants that would interfere with the exercise of his or her independence to perform assigned duties and responsibilities.
- 3.3 The majority of the Committee members will be financially literate and collectively having experience in accounting, finance, business, internal controls, risk management, and ethics.
- 3.4 If possible, the Committee will include at least one member who is considered an accounting or financial expert having an understanding of generally accepted accounting principles and financial statements, internal controls, and the role and responsibilities of internal and external auditors.

Meetings

- 3.5 A simple majority of the members of the Committee will constitute a quorum for the transaction of business.
- 3.6 The Committee will meet during regularly scheduled BOT meeting days, or at a minimum of three times per year. Additional meetings may occur as circumstances dictate.
- 3.7 The Committee Chair will approve the meeting agenda prior to each meeting subject to amendment at the Committee meeting.
- 3.8 The Committee shall maintain written minutes of meetings.
- 3.9 The Committee will look to the CAO and the CCEO for staffing and other administrative needs relating to Committee operation.

4. Internal Controls

The Committee will:

- 4.1 Evaluate the overall effectiveness of the University's system of internal control to include the control environment, risk assessment, control activities, information and communications systems, and monitoring thereof.
- 4.2 Provide oversight of the University's internal control structure and the processes in place to ensure the effectiveness and reliability of business, financial and information systems controls.
- 4.3 Understand the internal control system implemented by management for the University and each component unit for the approval of transactions and the recording and processing of financial data.

5. Risk Management

The Committee will:

- 5.1 Provide oversight of the University's enterprise risk management process by reviewing procedures in place to assess and minimize significant risk.
- 5.2 Review and consider the effectiveness of the University's process for identifying significant financial, operational, reputational, strategic, compliance and regulatory risk or exposure and management's plans and efforts to control and monitor such risks.

- 5.3 Obtain management assurances that internal controls have been established to mitigate major identified risks.
- 5.4 Evaluate the University's monitoring of insurance coverage and the process used to identify and manage any uninsured risks.

6. Compliance with Laws, Rules, Regulations, Contracts, and Agreements

The Committee will:

- 6.1 Review the effectiveness of management's system for monitoring compliance with laws, rules, regulations, contracts and agreements and for follow-up on any reported non-compliance, fraud, abuse, or ethics violations.
- 6.2 Obtain regular updates from management and legal counsel regarding compliance matters that may have a material impact on the University's operations, financial statements, programs, or ethics policies.
- 6.3 Review and discuss any significant results of compliance audits; any significant matters of litigation or contingencies that may materially affect the University's financial statements; and any legal, tax or regulatory matters that may have a material impact on University operations, financial statements, policies and programs.
- 6.4 Ensure that significant compliance findings and recommendations made by the university compliance officer or audit officer are received, discussed, and appropriately acted upon.
- 6.5 Review the effectiveness of the system for monitoring compliance with laws and regulations and follow-up (including disciplinary action) of significant wrongful acts or non-compliance.
- 6.6 Ascertain whether the University has an effective process for determining risks and exposure from asserted and unasserted litigation and other claims of noncompliance with laws and regulations.
- 6.7 Obtain reports concerning financial fraud resulting in losses in excess of \$10,000 or of any amount involving a member of senior management.
- 6.8 Obtain regular updates from the CCEO and CAO regarding compliance matters that may have a material impact on the organization's financial statements, compliance program, conflict of interest, or ethics policies.
- 6.9 Review and approve procedures for the receipt, retention, and treatment of complaints regarding financial, compliance, ethics, and conflict of interest matters.
- 6.10 Review the University's monitoring of compliance with University policies and standards of ethical conduct and conflict of interest policies.
- 6.11 Review findings of any examinations by state and federal regulatory agencies.
- 6.12 Review the University's process for monitoring contracts and agreements significant to university operations.

7. Ethics and Business Conduct

The Committee will:

- 7.1 Review University processes to ensure actual or potential conflicts of interest are clearly defined.

- 7.2 Review the process followed to assure the University's code of conduct and is communicated to all employees on an annual basis.
- 7.3 Review University processes to require the reporting and approval of outside businesses involvement, employment, and consulting services.
- 7.4 Review University policies relating to ethics and business conduct, financial disclosure, and environmental health and safety.

8. Financial Reporting

Financial Statements and Reports

Management is responsible for the preparation, presentation, and integrity of the University's financial statements and for the appropriateness of the accounting principles and reporting policies used by the University. The following shall be the principle duties and responsibilities of the Committee regarding financial statements:

- 8.1 Review the annual audited financial statements and ensure that significant findings and recommendations made by the auditors and management's response are received, discussed, and appropriately acted upon.
- 8.2 Make inquiries of management and auditors concerning the adequacy and effectiveness of the University's systems of financial reporting and internal control and compliance.
- 8.3 Discuss with management, the State Auditor General, and/or other external auditors the appropriateness of accounting principles used by the University and component units.
- 8.4 Review the audit report on Federal Awards as required by OMB Circular A-133 and State Awards required by Section 215.97, Florida Statutes.
- 8.5 Review the annual audit reports of component units, including management responses and corrective action plans to address the resulting recommendations.
- 8.6 Review significant accounting and reporting issues and recent professional regulatory pronouncements, and the impact on the financial statements of the University.
- 8.7 Review compliance with federal and state guidelines for financial reporting.

9. External Auditors

- 9.1 Monitor the work of the State Auditor General and other external auditors engaged to perform work within the University.
- 9.2 Review and assist in resolution of any disagreements between management and the external auditors regarding financial reporting.
- 9.3 Inquire of management as to whether external audits of DSO's are being acquired in accordance with BOT Regulation 2.025.
- 9.4 Inquire of management as to whether external audits of auxiliaries are being acquired within the spirit and intent of BOT Regulation 2.025 that is applicable to DSO's.
- 9.5 Provide oversight of component units (DSO's and auxiliaries) that select external auditors to perform audit work.

10. Office of Audit and Advisory Services

- 10.1 Review and approve the annual work plan, ensuring it addresses key areas of risk.

- 10.2 Approve and periodically review the charter, staffing, and activities of the OAAS.
- 10.3 Review a summary of significant findings and recommendations of completed work including management's response and time frame for corrective actions and the appropriateness of proposed actions.
- 10.4 Obtain periodic progress reports on the status of execution of work plans.
- 10.5 Review significant changes or deviations from approved work plans.
- 10.6 Determine the degree of implementation of past recommendations and the sufficiency of actions taken in addressing those recommendations.
- 10.7 Ensure there are no unjustified restrictions or limitations on the scope of work.
- 10.8 Through the Chair and with Committee input, provide the President an annual assessment of the performance of the CAO.
- 10.9 Discuss with the CAO any difficulties encountered in the course of work, including restrictions on the scope of work or access to required information, and any lack of cooperation.
- 10.10 Review the results of periodic quality assurance reviews performed by external organizations that assess whether work of the OAAS meets professional standards.
- 10.11 Identify areas warranting policy changes, if any, and make recommendations to the BOT.
- 10.12 Meet with the CAO to discuss any issues of concern.
- 10.13 Review controls and guidelines for receiving and investigating reported fraud waste, or abuse.
- 10.14 Review guidelines for the CAO receiving and investigating complaints relating to the Whistle-blower's Act pursuant to Chapter 112, Florida Statutes.
- 10.15 Require the CAO to annually report in writing on the activities of the OAAS.

11. Office of Compliance and Ethics

- 11.1 Provide governance oversight of the compliance program.
- 11.2 Review at least every three (3) years and approve the OCE charter and any subsequent revisions.
- 11.3 Review and approve the OCE Program Plan and any subsequent changes.
- 11.4 Review a summary of significant findings and recommendations of completed work including management's response and time frame for corrective actions and the appropriateness of proposed actions.
- 11.5 Review the independence, qualifications, activities, resources, and structure of the compliance and ethics function and ensure no unjustified restrictions or limitations are made.
- 11.6 Determine the degree of implementation of past recommendations and the sufficiency of actions taken in addressing those recommendations.
- 11.7 Through the Chair, and with input from the Committee provide the President an annual assessment of the performance of the CCEO.
- 11.8 Review the CCEO's annual report on the effectiveness of the compliance program.

- 11.9 Review the effectiveness of the University’s efforts to comply with BOG regulations and any applicable federal, state, and local laws, rules, and regulations.
- 11.10 Review the effectiveness of the compliance and ethics program in preventing and detecting noncompliance, unethical behavior, and criminal misconduct and ensure that it has appropriate standing and visibility across the University.
- 11.11 Identify areas warranting policy changes, if any, and make recommendations to the BOT.
- 11.12 Obtain regular updates from the CCEO regarding compliance and ethics matters that may have a material impact on the University’s financial statements or compliance policies.
- 11.13 Review controls and guidelines for receiving and investigating reported compliance, or ethics complaints.
- 11.14 Review guidelines relating to CCEO responsibilities under applicable sections of the Federal Sentencing Guidelines.
- 11.15 Require the CCEO to annually report in writing on the activities of the OCE.
- 11.16 Review at least once every five years, an external evaluation of the OCE program’s design and effectiveness and approve any recommendations for improvement.

This Audit and Compliance Committee Charter is hereby adopted on July 1, 2023.

Board of Trustee Chair

Date

President

Date

Audit and Compliance Committee Chair

Date



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM E



FLORIDA STATE UNIVERSITY
OFFICE OF AUDIT AND ADVISORY SERVICES

MEMORANDUM

TO: Richard McCullough, President

FROM: Undra Baldwin, Chief Audit Officer and Interim Chief Compliance and Ethics Officer

Date: August 21, 2023

SUBJECT: Consent Agenda Item for the September 8, 2023, BOT Meeting

Please find enclosed FSU International Programs Association, Inc. (FSUIPA) request for a 5-year contract renewal with James Moore & Company.

I respectfully request this item be placed on the BOT Consent Agenda for the September 8, 2023, BOT meeting.

Thank you.

Attachment



Florida State University

INTERNATIONAL PROGRAMS ASSOCIATION, Inc.

August 22, 2023

To: FSU Board of Trustees

From: Florida State University International Programs Association, Inc.

Request to Approve Extension of 5-Year Contract with James Moore for the Audit of the Florida State University International Programs Association (FSUIPA), Inc.

The Board of Florida State University International Programs Association (FSUIPA), Inc., a 501 (c)(3) not-for-profit direct support organization of the University approved the extension of the contract for audit services by the firm of James Moore on 8/22/2023. The terms of the extension include a change in the lead partner from Kevin Warren to Katie Davis as allowed under by FSU BOT Rule 2.025.

This contract includes fees for the audit as follows:

| | |
|------|----------|
| 2023 | \$26,000 |
| 2024 | \$27,000 |
| 2025 | \$28,000 |
| 2026 | \$29,000 |
| 2027 | \$30,000 |

The Board of FSUIPA, Inc. respectfully requests that the FSU Board of Trustees confirm and approve the extension.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM F



FLORIDA STATE UNIVERSITY
OFFICE OF AUDIT AND ADVISORY SERVICES

MEMORANDUM

TO: Richard McCullough, President

FROM: Undra Baldwin, Chief Audit Officer and Interim Chief Compliance
and Ethics Officer

Date: August 21, 2023

SUBJECT: Consent Agenda Item for the September 8, 2023, BOT Meeting

Please find enclosed the FSU Collegiate School's request to enter into a 3-year contract with BKHM CPA with an option to renew for two (2) one-year audit periods.

I respectfully request this item be placed on the BOT Consent Agenda for the September 8, 2023, BOT meeting.

Thank you.

Attachment

From: [Candace Tibbetts](mailto:Candace.Tibbetts)
To: [Candace Tibbetts](mailto:Candace.Tibbetts)
Subject: FW: The Collegiate School at FSU Panama City - Audit Firm BOT approval
Date: Wednesday, August 23, 2023 12:48:18 PM

From: Michael Williams <mswilliams@fsu.edu>
Sent: Thursday, August 17, 2023 8:52:30 AM
To: Undra Baldwin <ub22@fsu.edu>
Cc: Kyle Clark <kyle.clark@fsu.edu>; Steven Conner <sconner@fsu.edu>; Daniel Nix <dnix@pc.fsu.edu>
Subject: FW: The Collegiate School at FSU Panama City - Audit Firm BOT approval

Undra,

The Collegiate School at FSU Panama City is recommending a contract with BKHM CPA for three fiscal years with an option to renew for two (2) one-year audit periods which was approved by their Board on June 27, 2023. Per regulation FSU-2.025 Direct Support Organizations, the contract must be approved by the Florida State University President and then forwarded to the University Board of Trustees for review and final approval. If approved, the fees for the initial three years are provided below:

| <u>Engagement Period</u> | <u>Audit Fee</u> | <u>Form 990 Fee</u> |
|----------------------------------|----------------------------|---------------------------|
| Fiscal Year ending June 30, 2024 | \$15,000 - \$16,000 | \$3,000 - \$4,000 |
| Fiscal Year ending June 30, 2025 | \$16,000 - \$17,000 | \$3,250 - \$4,250 |
| Fiscal Year ending June 30, 2026 | \$17,000 - \$18,000 | \$3,500 - \$4,500 |
| Total (3 Years) | <u>\$48,000 - \$51,000</u> | <u>\$9,750 - \$12,750</u> |

Please accept this email as The Collegiate School at FSU Panama City's formal request for Board of Trustees approval during their next meeting.

Thank You,

Michael

Michael Williams, CPA
Associate Vice President
Florida State University
850.644.7351



From: Daniel Nix <dnix@pc.fsu.edu>
Sent: Thursday, August 03, 2023 6:06 PM
To: Michael Williams <mwilliams@fsu.edu>
Cc: Steven Conner <sconner@fsu.edu>
Subject: Audit Firm BOT approval

Michael,
Below is the information you requested for the BOT approval for TCS audit firm. I have also included the following attachments:

- RFP document sent to 6 firms
- Copies of emails sending RFP to 6 firms
- Responses received from 3 firms
- TCS Board Approval
- Request for FSU BOT approval

If you have time tomorrow, I would like to discuss a possible issue with BKHM's proposal. Let me know if you have time tomorrow for a zoom call.

Thanks,
Dan

The Collegiate School at FSU Panama City are recommending a contract with BKHM CPA for three fiscal years with an option to renew for two (2) one-year audit periods which was approved by their Board on June 27, 2023. Per regulation FSU-2.025 Direct Support Organizations, the contract must be approved by the Florida State University President and then forwarded to the University Board of Trustees for review and final approval. If approved, the fees for the initial three years are provided below:

| <u>Engagement Period</u> | <u>Audit Fee</u> | <u>Form 990 Fee</u> |
|---|----------------------------|-------------------------------|
| <i>Fiscal Year ending June 30, 2024</i> | <i>\$15,000 - \$16,000</i> | <i>\$3,000 - \$4,000</i> |
| <i>Fiscal Year ending June 30, 2025</i> | <i>\$16,000 - \$17,000</i> | <i>\$3,250 - \$4,250</i> |
| <i>Fiscal Year ending June 30, 2026</i> | <i>\$17,000 - \$18,000</i> | <i>\$3,500 - \$4,500</i> |
| <i>Total (3 Years)</i> | <i>\$48,000 - \$51,000</i> | <i>\$9,750 - \$12,750</i> |

Please accept this email as The Collegiate School at FSU Panama City's formal request for Board of Trustees approval during their next meeting.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM G



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: President Richard McCullough

FROM: Kyle Clark, Sr. Vice President for Finance and Administration

DATE: September 8, 2023

SUBJECT: Request for Approval
2023-2024 Carryforward Spending Plan

As required by Florida Statute 1011.45 *End of year balance of funds* and Board of Governors Regulation 9.007 *State University Operating Budgets and Requests*, each university board of trustees shall adopt a carryforward spending plan as prescribed by law and regulations.

The following motions are presented for your consideration:

1. Approve the university's fiscal year 2023-2024 carryforward spending plan of \$201,278,901.
2. Grant approval for the President to submit this budget in the format prescribed by the Board of Governors, and to make subsequent changes to the budget outlined in motion 1 as needed during the fiscal year, within available resources and fund balances, and consistent with applicable laws and regulations.

I recommend approval of these motions.

Summary of 2023-2024 Carryforward Spending Plan

| Carryforward Spending Plan Category | Salary & Benefits, Bonuses, and Awards | OPS | Library Resources | Student Aid | Equipment, Vehicles, and Furniture | Renovations, Repairs, and Maintenance | Technology | General Operating, Travel, Training, and Memberships | Services | Total |
|--|---|---------------------|----------------------|---------------------|--|---|--------------------|--|---------------------|----------------------|
| | Campus Security and Safety Enhancements | \$314,750 | \$95,000 | \$0 | \$0 | \$1,179,369 | \$145,791 | \$468,899 | \$144,616 | \$300,355 |
| Compliance Program Enhancements | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 40,000 | 40,000 |
| Faculty Research and Public Service Support and Start-Up Funding | 2,111,504 | 4,655,098 | 0 | 0 | 8,582,198 | 153,995 | 73,910 | 2,996,675 | 4,521,704 | 23,095,084 |
| Faculty/Staff, Instructional and Advising Support and Start- up Funding | 10,442,183 | 21,014,586 | 0 | 0 | 14,360,488 | 2,565,531 | 1,850,368 | 6,212,379 | 11,900,887 | 68,346,422 |
| Information Technology (ERP, Equipment, etc.) | 0 | 212,000 | 0 | 0 | 6,265,900 | 250,000 | 1,982,791 | 393,765 | 1,437,206 | 10,541,662 |
| Library Resources | 0 | 0 | 518,000 | 0 | 0 | 0 | 0 | 0 | 0 | 518,000 |
| Other Operating Requirements | 3,211,512 | 4,391,836 | 0 | 0 | 7,874,585 | 9,491,113 | 753,494 | 4,053,675 | 4,524,195 | 34,300,409 |
| Restricted by Appropriations | 35,400 | 0 | 0 | 0 | 0 | 0 | 21,000 | 47,442 | 27,775 | 131,617 |
| Student Financial Aid | 0 | 0 | 0 | 25,896,149 | 0 | 0 | 0 | 0 | 0 | 25,896,149 |
| Student Services, Enrollment, and Retention Efforts | 1,562,822 | 6,472,044 | 0 | 0 | 395,841 | 520,000 | 171,740 | 480,920 | 295,001 | 9,898,368 |
| Subtotal | \$17,678,171 | \$36,840,564 | \$518,000 | \$25,896,149 | \$38,658,380 | \$13,126,429 | \$5,322,202 | \$14,329,471 | \$23,047,124 | \$175,416,491 |
| Fixed Capital Outlay | | | | | | | | | | \$25,862,410 |
| Total | | | | | | | | | | \$201,278,901 |



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM H



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: President Richard McCullough

FROM: Kyle Clark, Sr. Vice President for Finance and Administration

DATE: September 8, 2023

SUBJECT: Request for Approval
2023-2024 Fixed Capital Outlay Budget

As required by Florida Statute 1013.61 *Annual capital outlay budget* and Board of Governors Regulation 14.003 *Fixed Capital Outlay Projects – University Budgeting Procedures*, each university board of trustees shall adopt a fixed capital outlay budget as prescribed by law and regulations.

The following motions are presented for your consideration:

1. Amend the university's fiscal year 2023-2024 fixed capital outlay budget from \$347,411,462 to \$367,830,215.
2. Grant approval for the President to submit this budget in the format prescribed by the Board of Governors, and to make subsequent changes to the budget outlined in motion 1 as needed during the fiscal year, within available resources and fund balances, and consistent with applicable laws and regulations.

I recommend approval of these motions.

Summary of 2023-2024 Fixed Capital Outlay Budget

| Project | Project Funding Sources | | | Estimated Total Project Cost | FY24 Estimated Spend |
|---|-------------------------|----------------------|----------------------|---------------------------------|-------------------------|
| | State Appropriated | University E&G/CF | Non- Appropriated | | |
| Doak Campbell Seating Enhancement | \$ - | \$ - | \$ 200,000,000 | \$ 200,000,000 | \$ 54,268,590 |
| Legacy Hall, College of Business | 44,000,000 | 57,519,189 | 58,480,811 | 160,000,000 | 40,000,000 |
| Student Union | 46,531,170 | 2,027,077 | 97,321,822 | 145,880,069 | 3,235,188 |
| Football Operations Facility | - | - | 138,000,000 | 138,000,000 | 36,282,000 |
| IRCB | 44,000,000 | 37,000,000 | 49,000,000 | 130,000,000 | 35,000,000 |
| FSU/TMH Academic Health Center | 125,000,000 | - | - | 125,000,000 | 15,000,000 |
| Dittmer Building - Remodel | 40,000,000 | - | - | 95,400,000 | 5,000,000 |
| Academic Support - Maintenance Complex | 30,000,000 | - | - | 70,800,000 | 4,000,000 |
| Main Campus - Deferred Maintenance | 66,187,052 | - | - | 66,187,052 | 25,000,000 |
| Veterans Legacy Complex | 10,000,000 | - | - | 44,000,000 | 3,000,000 |
| Kellogg Remodel | 2,300,000 | 10,905,762 | 194,238 | 32,500,000 | 4,000,000 |
| College of Engineering - Building C | 20,000,000 | - | - | 20,000,000 | 2,000,000 |
| Doak Campbell Structural Improvements | - | - | 20,000,000 | 20,000,000 | 10,000,000 |
| Mag Lab Primary Electrical | 15,820,017 | 620,000 | - | 16,440,017 | 10,000,000 |
| Biology Unit 1 Facility - Second Floor | - | 10,000,000 | 3,208,000 | 13,208,000 | 3,000,000 |
| Tucker Center Deferred Maintenance | - | 10,000,000 | - | 10,000,000 | 3,500,000 |
| Energy Research Facility | - | - | 6,000,000 | 6,000,000 | 650,000 |
| 200 W College - Deferred Maintenance | - | - | 5,185,000 | 5,185,000 | 200,000 |
| UCA Chilled Water Loop Extension | - | 2,000,000 | 3,000,000 | 5,000,000 | 3,000,000 |
| Engineering Lab Building Renovation | - | 5,000,000 | - | 5,000,000 | 1,000,000 |
| Kleman Plaza Renovation | - | - | 5,000,000 | 5,000,000 | 500,000 |
| Reynolds Hall Acquisition | - | - | 5,000,000 | 5,000,000 | 5,000,000 |
| Panama City - Deferred Maintenance | 5,000,000 | - | - | 5,000,000 | 3,000,000 |
| Trane for CUP Chiller #1 & #4 | - | - | 4,650,000 | 4,650,000 | 650,000 |
| WFSU Transmitter | - | 4,100,000 | 500,000 | 4,600,000 | 1,000,000 |
| Strozier Library Water Damage Repair | 119,280 | 3,880,720 | - | 4,000,000 | 2,817,959 |
| Maryland Circle - Phase 2 | - | - | 4,000,000 | 4,000,000 | 1,000,000 |
| PC Health Academic Research | 4,000,000 | - | - | 4,000,000 | 2,000,000 |
| Sliger HVAC Capital Renewal/Deferred Maint | - | 4,000,000 | - | 4,000,000 | 3,000,000 |
| Turnbull Conference Center Remodel | - | 4,000,000 | - | 4,000,000 | 500,000 |
| Strozier Library Sub-basement | - | 4,000,000 | - | 4,000,000 | 500,000 |
| Bryan Hall Mechanical | - | - | 3,500,000 | 3,500,000 | 1,134,389 |
| UCD 1ST Floor Dining Modification | - | - | 3,500,000 | 3,500,000 | 400,000 |
| Jennie Murphree Restroom | - | - | 3,275,372 | 3,275,372 | 1,940,723 |
| Thrasher Capital Renewal/Deferred Maint | - | 3,000,000 | - | 3,000,000 | 1,300,000 |
| Carraway Capital Renewal/Deferred Maint | - | 3,000,000 | - | 3,000,000 | 1,325,000 |
| Mag Lab Capital Renewal/Deferred Maint | - | 3,000,000 | - | 3,000,000 | 1,600,000 |
| Dittmer Capital Renewal/Deferred Maint | - | 3,000,000 | - | 3,000,000 | 175,000 |
| Northwest Community | - | - | 3,000,000 | 3,000,000 | 3,000,000 |
| SW Campus Infrastructure | - | 3,000,000 | - | 3,000,000 | 1,000,000 |
| Sandels HVAC Improvement | - | - | 2,737,158 | 2,737,158 | 1,781,957 |
| Bio-Unit 1 First floor - Lab space/HVAC | - | 1,302,624 | 1,302,624 | 2,605,247 | 2,463,778 |
| Fuqua Research Complex - Sliger | - | - | 2,312,320 | 2,312,320 | 295,253 |
| Cawthon Hall Remaining Store Front | - | - | 2,250,000 | 2,250,000 | 250,000 |
| Mag Lab DC Power Upgrade | - | 2,139,685 | - | 2,139,685 | 2,139,685 |
| Central Utilities Plant 15KV U | - | - | 2,055,148 | 2,055,148 | 1,667,410 |
| Bryan Hall Shower Renovations & Finishes Upgrades | - | - | 2,050,000 | 2,050,000 | 150,000 |
| MEF - Indoor Tennis Finish Phase 2 - HVAC | - | 2,000,000 | - | 2,000,000 | 775,000 |
| Love Building | - | 1,594,978 | 405,022 | 2,000,000 | 27,647 |
| Strozier Library 3rd Floor Renovation | - | 2,000,000 | - | 2,000,000 | 1,993,670 |
| Diffenbaugh Capital Renewal/Deferred Maint | - | 2,000,000 | - | 2,000,000 | 500,000 |
| Fine Arts Building Renovation | - | 2,000,000 | - | 2,000,000 | 1,000,000 |
| Parking Garage Bookstore Renovation | - | - | 1,971,341 | 1,971,341 | 1,943,869 |
| Maryland Circle - Phase 1 | - | 1,007,000 | 944,580 | 1,951,580 | 306,316 |
| Longmire Waterproofing & Wind | - | 1,950,000 | - | 1,950,000 | 123,871 |

Summary of 2023-2024 Fixed Capital Outlay Budget

| Project | Project Funding Sources | | | Estimated Total Project Cost | FY24 Estimated Spend |
|--|-------------------------|-----------------------|-----------------------|---------------------------------|-------------------------|
| | State Appropriated | University E&G/CF | Non- Appropriated | | |
| Sliger Data Center Renovation | - | 1,943,081 | - | 1,943,081 | 62,911 |
| Jennie Murphree Hall | - | - | 1,800,000 | 1,800,000 | 1,672,803 |
| CUP Boiler Rebuild | - | - | 1,800,000 | 1,800,000 | 786,280 |
| Kellogg Re-roof | - | 1,750,000 | - | 1,750,000 | 1,530,175 |
| Mag Lab Network Upgrade | - | 1,140,138 | 600,000 | 1,740,138 | 440,998 |
| CAPS Medium Voltage Lab | - | - | 1,720,000 | 1,720,000 | 88,507 |
| Resurface Track | - | - | 1,602,865 | 1,602,865 | 1,602,865 |
| Love HVAC Capital Renewal/Deferred Maint | - | 1,600,000 | - | 1,600,000 | 1,594,524 |
| Ringling - Tibbals Learning Center | - | - | 1,539,635 | 1,539,635 | 647,826 |
| Circus Museum Renovation & Expansion | - | - | 1,536,723 | 1,536,723 | 1,496,523 |
| Rogers Building Basement Renovation | - | 1,500,000 | - | 1,500,000 | 948,621 |
| Rogers Building 5th Floor Abatement | - | 1,500,000 | - | 1,500,000 | 1,320,646 |
| Rogers Building Phase 2 Mechanical | - | 1,500,000 | - | 1,500,000 | 1,416,652 |
| Arts District | 1,467,202 | - | - | 1,467,202 | 1,467,202 |
| Marine Lab - Main Building | - | - | 1,460,000 | 1,460,000 | 100,547 |
| Mag Lab Exterior Siding | 46,655 | - | 1,400,000 | 1,446,655 | 755,900 |
| Carraway Building Auditorium | - | 1,131,165 | 247,956 | 1,379,121 | 118,835 |
| Doak Campbell Stadium LED Lights | - | - | 1,200,000 | 1,200,000 | 1,000,000 |
| Engineering - A & B Capital Renewal/Def Maint | - | 1,200,000 | - | 1,200,000 | 1,195,630 |
| Fire alarm repairs, CCTV, lot paving, & elevators | - | - | 1,100,000 | 1,100,000 | 1,100,000 |
| Marine Lab - Hatchery - Sea Water | - | - | 1,068,000 | 1,068,000 | 34,668 |
| Sandels Phase 2 | - | 1,000,000 | - | 1,000,000 | 1,000,000 |
| FSU Lab Theater | - | 1,000,000 | - | 1,000,000 | 1,000,000 |
| Azalea Hall Starbucks | - | - | 1,000,000 | 1,000,000 | 403,896 |
| Housewright Music Building Renovation | - | 1,000,000 | - | 1,000,000 | 959,587 |
| Mag Lab Replace Generator | - | 1,000,000 | - | 1,000,000 | 1,000,000 |
| 148 Consolidated Projects under \$1 Million | \$ 1,804,420 | \$ 22,551,912 | \$ 27,854,658 | \$ 52,210,991 | \$ 38,687,313 |
| Grand Total | \$ 456,275,797 | \$ 225,863,331 | \$ 674,773,272 | \$ 1,506,212,400 | \$ 367,830,215 |



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM I



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
Status Report on Purchase Orders \$1.0 million and 5+ Years' Service Contracts

In accordance with the January 24, 2003 FSU Board of Trustee Meeting, I am providing a listing of all purchases in excess of \$1.0 million and contracts or agreements that exceed 5 years in length made from July 2022 through June 2023.

I recommend approval of the Status Report on Purchase Orders over \$1.0 million and 5+ Years' Service Contracts.

KC

Attachments

**Suppliers with orders over \$1,000,000
and Service Contracts over \$1,000,000 or 5+ years
(July 2022 through June 2023)**

Purchase Orders

\$1M - \$1.5M (21 total)

| | |
|---|--|
| Belfor Usa Group Inc | \$1,061,096.00 Damage remediation for book collection in Strozier Library. ITN 1228LCSA for SUS Disaster Recovery. |
| CDW Government | \$1,282,463.60 Crowdstrike software for ITS. Contract: National IPA Technology Solutions Education (2018011-01) – OMNIA. |
| CDW Government | \$1,011,672.48 Cohesity data storage for ITS. Contract: E&I CNR01439 Catalog (CNR01439) – E&I. |
| CMC Steel US LLC | \$1,244,895.00 IRCB construction for Interdisciplinary Programs. Alternate source contract. |
| Cumming Management Group Inc | \$1,112,800.00 Project Management for FSU-TMH Academic Health Science/IRCB projects. Alternate source contract. |
| DSM Technology Consultants LLC | \$1,217,096.64 SDC DSM Colocation for NWRDC. GSA contract. |
| Ensono LLC | \$1,440,000.00 Mainframe as a Service for NWRDC. ITN 7001-6. |
| Ex Libris (USA) Inc | \$1,431,699.89 Alma yearly software subscription for FLVC. UWF ITN #18ITN-06AJ. |
| Millers Plumbing & Mechanical Inc | \$1,395,487.25 Fanwall units and AHU for Strozier Library. Alternate source contract. |
| OCLC - Online Computer Library Center | \$1,401,651.34 Cataloguing, ILL, and First Search for FLVC. Exempt – subscription. |
| Ram Construction & Development LLC | \$1,190,540.00 Design services for Doak Campbell Stadium improvements for Athletics. RFQ RFQ-00607-2022. |
| Ring Power Corporation | \$1,020,000.00 Generator for IRCB project. Alternate source contract. |
| Roofconnect Logistics Inc | \$1,293,103.45 Dittmer reroofing. OMNIA contract. |
| Roofconnect Logistics Inc | \$1,133,430.00 Pepper reroofing. OMNIA contract. |

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| Roofconnect Logistics Inc | \$1,085,725.00 University Center reroofing. OMNIA contract. |
| Secureworks Inc | \$1,219,213.83 Taegis Managed XDR and iSensor for NWRDC. NASPO contract. |
| Secureworks Inc | \$1,149,309.60 Taegis XDR and Incident Management Retainer for NWRDC. NASPO contract. |
| SHI International Corp | \$1,136,743.5 SQL Server, Win Remote Desktop Services, & Win Server DC Core for NWRDC. NASPO contract. |
| SHI International Corp | \$1,042,970.70 McAfee software for NWRDC. GSA contract. |
| Smyrna Ready Mix LLC | \$1,469,242.60 Materials for COB Legacy Hall project. Alternate source contract. |
| Weatherproofing Technologies Inc | \$1,125,000.00 Biomedical reroofing. OMNIA contract. |

\$1.5M+ (30 total)

| | |
|--------------------------------------|---|
| Albritton Williams | \$1,676,240.35 Florida Institute of Child Welfare building renovation. Alternate source contract. |
| BMC Software Inc | \$1,610,918.28 AMC software for NWRDC. GSA contract. |
| Bruker Biospin Corp | \$1,997,999.00 Continuous wave gyrotron and console for Magnet Lab. ITB 6479-3. |
| Carahsoft Technology Corp | \$1,657,380.84 eCare Vault consultation services for FL Institute of Child Welfare. E&I contract. |
| City Of Tallahassee | \$5,270,000.00 Campus bus service for Office of Business Services. ITN 5837-A. |
| Culpepper Construction Co Inc | \$122,602,839.91 Construction for Legacy Hall project. Alternate source contract. |
| E&H Steel Corporation | \$9,072,506.00 Structural steel for COB Legacy Hall project. Alternate source contract. |
| Ebsco Subscription Services | \$2,773,655.00 Electronic library for FLVC. ACE exemption #13: Memberships / Subscriptions. |
| Ensono LLC | \$9,722,328.00 Mainframe software for NWRDC. ITN 7001-6. |

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| Ensono LLC | \$8,916,000.00 Ensono monthly consumption (DMS) for NWRDC. ITN 7001-6 |
| Fieldturf Usa Inc | \$1,602,865.00 Track resurfacing project for Athletics. Sourcewell Contract # 031622-FTU. |
| Goody Clancy & Associates Inc | \$2,023,158.07 COB Legacy Hall design services contract. Request for Qualifications. |
| Hammel Green & Abrahamson Inc | \$2,127,778.48 Construction for IRCB. Request for Qualifications. |
| Hellmuth, Obata & Kassabaum Inc (HOK) | \$6,846,780.00 Design services for FSU/TMH Academic Health Center. RFQ-00689-2022 |
| Levin Professional Services Inc | \$2,009,359.00 A/V systems construction for Student Union. ITN 6421-A. |
| Mad Dog Design & Construction Company | \$2,951,355.73 Shower renovations for Murphree Hall. FSU CM Continuing Services Contract RFQ-00535-2021. |
| Mad Dog Design & Construction Company | \$2,237,066.77 HVAC improvements for Sandels Building. FSU CM Continuing Services Contract RFQ-00535-2021. |
| Mythics Inc | \$4,141,782.11 Oracle license and maintenance support for State Data Center and customers for NWRDC. Maricopa County Contract # 180233-002 (US Communities). |
| Nelson & Company, LLC | \$1,823,149.00 Air handling units, lab exhaust fans, & humidifiers for IRCB project. Alternate source contract. |
| Perspecta Enterprise Solutions LLC | \$1,870,117.92 Enterprise storage and remote replication software for NWRDC. GSA contract GSA-35F-146DA. |
| Remediation Services Inc | \$4,379,109.66 Excavation and transportation of low-level radiation waste (LLRW). Emergency. |
| Roofconnect Logistics Inc | \$1,875,000.00 Re-roofing for Housewright music building. OMNIA contract. |
| Secureworks Inc | \$1,638,473.27 Taegis XDR and ManagedXDR for NWRDC. State of Florida contract ACS NASPO #AR2472 FL. |
| SHI International Corp | \$2,000,000.00 Microsoft Azure for NWRDC. OMNIA contract #. 2018011-02. |
| Tanaka Kikinzolu International | \$1,610,686.15 Copper-silver alloy sheets for Magnet Lab. Sole source. |
| The Emmes Company LLC | \$1,763,286.00 Statistical data mgmt. lead for adolescent medicine trials network for HIV/AIDS scientific leadership center. Grant/Sole source. |

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|---|---|
| The Emmes Company LLC | \$1,739,796.00 Statistical data mgmt. lead for adolescent medicine trials network for HIV/AIDS scientific leadership center. Grant/Sole source. |
| The Whiting-Turner Contracting Company | \$100,156,772.21 IRCB construction. Alternate source contract. Request for Qualifications. |
| Thermal Tech Inc | \$1,627,651.00 Boiler maintenance for Central Utilities Plant. Alternate source contract. |
| Xello Inc | \$1,570,000.00 Career planning and work-based learning coordination tool. ITN 6343-6. |

Five Year + Service Contracts – Expense

Less than \$100K (116 total)

| | |
|---|---|
| Active Internet Technologies LLC | \$0 expense FYE 2023. Term: 6/30/2023 - 6/30/2028. Finals site CMS platform. |
| Adobe Systems INC | \$559.87 expense FYE 2023. Term: 9/29/2022 - 9/28/2025. Adobe Creative Cloud software. |
| Anser Advisory | \$0 expense FYE 2023. Effective date thru 6/30/25 plus 2 1-year periods. Provides Construction Cost Estimating Services ITN 6353-A. |
| Apogee Telecom INC | \$41,153.12 expense FYE 2023. Term: 6/10/2021 – 6/30/2024 plus three 1-year periods. Provides for Athletics Direct TV Services. ITN 6234-6 |
| Appirio, Inc. | \$0 expense FYE 2023. Term: 7/21/2019 – 6/6/2024. Implementation of Salesforce for Greeklife. Alternate source contract through University of Michigan. |
| Applied Biological Materials Inc. | \$0 expense FYE2022. Term: 9/18/2019 – 9/17/2029 and no renewal options. Material Transfer Agreement to use biological materials for research only for Human Sciences. Under Bid Limit. |
| Atelier 4 Inc. | \$51,706.35 expense FYE 2023. Term: 4/9/2020 – 4/6/2025 plus five additional 1-year renewal terms. Customs Brokerage & International Freight Forwarding Services. ITN 6091-3. |
| Audienceview Ticketing Corporation | \$36,374.00 expense FYE 2023. Term: 7/1/2016 – 6/30/2024 (extended due to ITN 6473-6 under evaluation). Provides subscription services to Fine Arts Ticket Office System. ITN5795-9. |

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| Axias FL LLC | \$0 expense FYE 2023. Effective date thru 6/30/25 plus 2 1-year periods. Provides Construction Cost Estimating Services ITN 6353-A. |
| Axon Enterprise Inc (Taser International) | \$0 expense FYE 2023. Term: 3/31/2021 – 3/31/2022 plus optional 5-year renewal term. Provides for cloud services for vehicle cameras for Public Safety. Exempt: Subscription Services. |
| Barnett Fronczak Barlowe & Shuler | \$55,758.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| B2B Environments Inc Dba | \$60,000.00 expense FYE 2023. Term: 10/14/2022 - no end date. Branding package for Legacy Hall. |
| Bellwether | \$53,305.88 expense FYE 2023. Term: 10/21/2019 – 9/30/2023. Provides FSU Graduation Event Ticketing, RSVP, and Seat Management. ITN 6073-6. |
| Bento Tally LLC | \$2,045.16 expense FYE 2023. Term: 9/26/2022 - no end date. Sponsorship agreement for FSU Homecoming. |
| Bevis Colonial Funeral Home | \$36,775.00 expense FYE 2023. Term: 3/1/2020 – 12/31/2023 plus two 1-year renewal options. Provides for Cremation Services for College of Medicine. ITB 6107-6. |
| Biodigital Inc | \$0 expense FYE 2023. Term: 12/20/2022 - 12/31/2027. E-resource materials for FLVC. |
| Blackboard Transact (software for OBS only) | \$0 expense FYE 2023. Term 07/01/2023 – 6/30/2028 plus two 1-year renewal options. Blackboard is the software application that handles the cash transactions for the FSU Card Dining, Vending, Laundry Services, and Pay-4-Print. NCPA master contract # 01-100. |
| Bliss & Nyitray, Inc. | \$32,872.50 expense FY2022. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Structural Engineering Continuing Services, RFQ-00248-2019. |
| Breakthrough Learning Inc | \$2,089.00 expense FYE 2023. Term: 3/22/2023 - no end date. Friday Night at the ER kit for College of Medicine. |
| Cal Closets Retail Inc | \$8,493.00 expense FYE 2023. Term: 9/10/2022 - no end date. Clothing closet for FSU Career Center. |
| Capital Transportation | \$0 expense FYE 2023. Term: 4/6/2023 - no end date. University Health Services contract for one-way transportation services for patients. |
| Cedar Mountain Software Inc | \$3,225.00 expense FYE 2023. Term: 12/9/2022 - 12/15/2027. Pantrysoft application for managing food pantries and food banks for Dean of Students. |

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| Centralcast LLC | \$26,038.36 expense FYE 2023. Term: 6/20/2023 - 6/20/2028 plus one 4-year renewal option. WFSU television master control services. |
| Clean All, LLC | \$0 expense FYE 2023. Term: 6-25-2018 – 6/30/2021 (plus two 1-year renewal options). Provides custodial services for Recreation Center and Wellness Center. ITN 5890-A. |
| Columbia Sportswear Co | \$1,240.10 expense FYE 2023. Term: 10/13/2022 – no end date. Textile testing for Jim Moran College of Entrepreneurship. |
| Creative Empire LLC DBA Mango Languages | \$21,331.19 expense FYE 2023. Term 6/10/2022-12/31/2027. Provides language subscription services for Florida Virtual Campus. Exempt – Subscription Group E-Resources. |
| Crowdstrike Inc | \$0 expense FYE 2023. Term: 6/21/2023 - 6/20/2024. Crowdstrike warranty agreement for ITS. |
| CSI Contracting | \$15,345.88 expense FYE 2023. Term: 7/1/22-6/30/25 plus two 1-year renewals. Provides Job Order Contracting services RFQ-00536-2021 |
| DAG Architects | \$47,970.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| David H Melvin Inc Consulting Engineers | \$31,580.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Civil Engineering Continuing Services, RFQ-00247-2019 and RFQ-00248-2019. |
| Department of the Navy | \$0 expense FYE 2023. Term: 8/11/20 – 8/10/25. Panama City Educational Services. Exempt Services. |
| DGP Development, Inc. | \$0 expense FYE 2023. Term: 1/30/2019 – 2/3/2027 plus two 4-year renewal options. Provides for Distributed Antenna System (DAS) Management for Athletics. ITN 5949-6. |
| Digital Theatre US LLC | \$18,919.40 expense FYE 2023. Term: 1/1/2023 - 12/31/2027. Platform and content (high-definition films of stage productions that can be streamed on demand) for FLVC. |
| DRMP, Inc | \$6,610.46 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Civil Engineering Continuing Services, RFQ-00247-2019. |
| EAB Global Inc | \$1,990.00 expense FYE 2023. Term: 5/4/2023 - 8/1/2027. Cloud-based online advising and academic support system. ITN 6418-4. |

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| EIP Holdings II LLC | \$450.00 expense FYE 2023. Term: 2/8/2023 - 2/28/2033. Lease agreement for tower in Mariana, FL for WFSU. |
| Emerald Publishing Limited | \$0 expense FYE 2023. Term: 5/22/2023 - no end date. Emerald eJournal Backfiles Premier for University Libraries. |
| Enscape, Inc. | \$0 expense FYE 2023. Term: 6/11/2020 – 5/29/2025. Software License Agreement for use with FSU Interior Architecture and Design within the College of Fine Arts. |
| Ellana, Inc. | \$45,711.76 expense FYE 2023. Effective date thru 6/30/25 plus 2 1-year periods. Provides Construction Cost Estimating Services ITN 6353-A. |
| Elliott Marchell Innes, PA | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Encyclopedia Britannica | \$20,825.19 expense FYE 2023. Term 1/1/2022-1/1/2027. Provides academic online database subscription for Florida Virtual Campus. Exempt – Subscriptions E-Resources. |
| Everbridge, Inc. | \$20,497.48 expense FYE2022. Term: 11/6/2019 – 6/30/2024. Contract with FLDEM, FLDEM supplier is Everbridge, Inc. for system of communications and warnings for developing emergency situations. State of Florida Division of Emergency Management Agreement. |
| Front Rush | \$25,677.00 expense FYE 2023. Term: 6/25/2020 – 6/30/2024 plus two 1-year renewal options. Provides for FSU Athletics Recruiting and Compliance Software. ITN 6130-6. |
| George & Associates Consulting Engineer | \$27,311.25 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Civil Engineering Continuing Services, RFQ-00247-2019. |
| GGI, LLC dba Genesis | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Civil Engineering Continuing Services, RFQ-00247-2019. |
| Gideon Taylor Consulting LLC | \$15,000.00 expense FYE 2023. Term: 3/2/2023 - 3/1/2028. PaymentTalk / PaymentWorks vendor software. Exemption 4 proprietary computer software, accessories and supplies, including expendable items from a single source for existing equipment and systems where no other manufacturer's product can be used. |
| Global Construction Estimating | \$0 expense FYE 2023. Effective date thru 6/30/25 plus two 1-year periods. Provides Construction Cost Estimating Services ITN 6353-A. |

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| Hicks Nation Architects Inc | \$72,548.05 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Hellmuth, Obata & Kassabaum Inc (HOK) | \$0 expense FYE 2023. Term: 6/6/2023 - no end date. Construction services for Academic Health Center. RFQ-00689-2022. |
| Hoy Stark Hagan Architects | \$0 expense FYE2022. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Hyland Software Inc | \$23,940.00 expense FYE 2023. Term: 6/15/2018 – 6/14/2024 (plus four 1-year renewal options). Provides for OnBase Installation, Document Management Solution and Conversion from Nolij for 16 Departments. TCPN/NIPA Contract #R140404. |
| IGI Global | \$10,378.00 expense FYE 2023. Terms: 1/1/2023 - 12/31/2027 and 2/15/2023 - no end date. eBooks and eJournals collections for FLVC. |
| IMAX Corporation | \$64,345.61 expense FYE 2023. Term: 1/30/2021 – 1/29/2026. IMAX projection system and trademark. Exempt Service. |
| International Fire Protection | \$93,700.00 expense FYE 2023. Term: 3/30/2018 – 3/29/2023. Provides maintenance for water-based fire protection system. ITN 5888-0. |
| John S James Co | \$14,790.23 expense FYE 2023. Term: 4/3/2020 – 4/6/2025 plus up to five additional 1-year renewal terms. Customs Brokerage & International Freight Forwarding Services. ITN 6091-3. |
| John Wiley & Sons, Inc. | \$76,188.10 expense FYE 2023. Term: 2/24/2021 – 12/31/2023. Wiley online journals database for University Libraries. Exempt Service. |
| Johnson-Laux | \$0 expense FYE 2023. Term: 7/1/22-6/30/25 plus two 1-year renewals. Provides Job Order Contracting services RFQ-00536-2021. RFQ-00536-2021 |
| Kaplan Inc. dba Kaplan Test Prep | \$3,168.00 expense FYE 2023. Term: 12/12/2019 – 12/11/2024. Educational Services Agreement – MCAT prep and course for College of Medicine. Exempt: Educational Services. |
| Kranos Corporation | \$23,333.02 expense FYE 2023. Term 2/11/2022-2/15/2027. Provides football helmets and reconditioning. ITN 0606-6. |
| Leaf Capital Funding LLC | \$0 expense FYE 2023. Term: 6/30/2023 - 6/30/2028. Lease agreement for Verkada Command cloud service & VX subscription provided by CDW. |

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| Local Coffee Co | \$0 expense FYE 2023. Term: 1/14/2022-6/30/2032. Provides local tea licensing. |
| Marpan Supply Co, Inc. | \$11,580.00 expense FYE 2023. Term: Effective Date - 6/30/27 (plus two 1-year renewal options). FSU Leases trash compactors for Oglesby Union |
| Maximus, Inc. | \$49,985.00 expense FYE 2023. Term: 7/1/2023 – 7/30/2026. Provides for maximus consulting services – webspace license agreement and CRIS License and Consulting Agreement for Sponsored Research Services. Exempt: Proprietary Computer Software. |
| Mazevo LLC | \$0 expense FYE 2023. Term: 8/1/2022 - 8/1/2028. Scheduling system and EMS data conversion for Oglesby Union. |
| McGinniss & Fleming Engineering | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| McKim & Creed, Inc. | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| Medigreen Waste Services | \$2,980.00 expense FYE 2023. Term: 2/1/2021 – 6/30/2024 plus one remaining 1-year renewal option. Provides for Laboratory Animal Resources Biomedical Waste Pickup Services. ITN6207-6. |
| Mid Florida Armored & ATM Services | \$49,734.88 expense FYE2022. Term: 7/1/2023 – 6/30/2025 plus three 1-year renewal options. Provides for Armored Car Services. RFQ. |
| Mitchell Gulledge Engineering | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| MLD Architects | \$0 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Moore Bass Consulting | \$26,578.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Civil Engineering Continuing Services, RFQ-00247-2019. |
| Morningstar Inc | \$0 expense FYE 2023. Term: 1/1/2023 - no end date. Investment advisory services for HR. |
| Noldus Information Technology Inc | \$11,043.00 expense FYE 2023. Term: 6/26/2023 - 6/25/2028. Additional Observer XT Coder license for College of Medicine. |

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| Northstar Church | \$0 expense FYE 2023. Term: 5/1/2023 - 4/30/2028 plus 2 5-year renewal options. Lease agreement for The Collegiate School at FSU Panama City. |
| Nuventive | \$93,220.00 expense FYE 2023. Term 3/27/18 – 3/26/2022 (plus five 1-year renewal options). Provides for Strategic Planning Software. Exempt Service in accordance with FSU-2.015 (9)(d)(14). |
| Ovid Technologies | \$0 expense FYE 2023. Term: 12/20/2022 - 12/31/2027. BioDigital services addendum for FLVC. |
| Penguin Random House LLC | \$37,600.00 expense for FYE 2023. Term: 6/1/2020 – Perpetual. Exempt: Copyright Agreement for Fine Arts. |
| Pennoni Associates Inc. | \$96,513.50 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Structural Engineering Continuing Services, RFQ-00248-2019. |
| Performance Engineering Groupo, Inc. | \$0 expense for FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| Preferred Construction Management | \$0 expense for FYE 2023. Effective date thru 6/30/25 plus two 1-year periods. Provides Construction Cost Estimating Services ITN 6353-A. |
| Pinnacle Engineering Group., PA | \$46,001.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| Pittman Law Group | \$40,000.00 expense FYE 2023. Term: 8/17/2022 – 6/30/2024 plus two 1-year renewal options. Provides governmental legal consulting services for SGA. ITN 6368-6. |
| Progressive Waste Solutions of FL, Inc. | \$0 expense FYE 2023. Term: 4/6/2020 – 4/1/2025 plus 5 additional renewal years. Provides for recycling services for Ringling/Aslo. Per Request for Quotes. |
| Purvis Gray & Co LLP | \$22,500.00 expense FYE 2023. Term: 5/11/2020 – 6/30/2024 plus one remaining 1-year renewal option. Provides for FSUS Professional Auditing Services. ITN6104-6. |
| Quadient Leasing | \$21,618.10 expense FYE 2023. Term: 12/3/2022 - 6/30/2028. Real-time integration UAT test results for new meter machine for OBS. |
| Respironics dba Philips Respironics Inc. | \$0 expense FYE 2023. Term: 2/18/2020 – 2/11/2025. Provides for medical devices, accessories, consumables and services for College of Medicine. |

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| Rogers Gunter Vaughn Insurance | \$0 expense FYE 2023. Term: 11/1/2017 – 11/1/2022 (plus one 5-year renewal option). Provides insurance for Florida High School. ITN5876-A. |
| SAE International | \$27,616.00 expense FYE 2023. Term: 5/19/2023 - no end date. EDGE reports purchase for University Libraries. Exempt - Subscriptions. |
| SCL Holdings Inc (SC Logic) | \$12,256.62 expense FYE 2023. Term: 6/20/2021 – 6/30/2024 (plus two 2-year renewal options). Provides for a postal campus mail delivery and tracking management system. ITN5781-4. |
| Sierra-Cedar, Inc. | \$55,000.00 expense FYE 2023. Term: 10/2/2019 – 6/30/2024 plus one remaining 1-year renewal term. IT Managed Services and Staff Augmentation. ITN 5981-1. |
| Signature Championship Rings | \$0 expense FYE 2023. Term: 11/3/2022 – 8/31/2025 plus three 1-year renewal options. Provides multiple sports award and championship rings, for the Athletic Department. ITN 6391-6. |
| Springer Nature America | \$660.60 expense FYE 2023. Term: 4/24/2023 - 12/31/2025. Journals subscription for University Libraries. Exempt - Subscriptions. |
| SurveyMonkey Com LLC | \$732.00 expense FYE 2023. Term: 8/28/2021 – 8/27/2024. Provides submission management software system services. Piggyback off RFP/ITN# KDC010821 App Management - UConn/Connecticut MSA. |
| Sweet Sparkman Architects | \$3,950.00 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Symplicity Corporation | \$22,362.50 expense FYE 2023. Term: 8/26/2019 – 1/31/2025. Software License Agreement for the Career Center. Exempt: Proprietary Computer Software. |
| T2 Systems Inc | \$99,224.90 expense FYE 2023. Term: 6/14/2021 – 6/30/2028. Provides Transportation Management System. ITN 6191-4. |
| Take 5 Oil Change | \$1,532.74 expense FYE 2023. Term: 10/4/2021 – 6/30/2023 (plus two 1-year renewal option). Provides for fleet maintenance services. ITN 6269-A. |
| Taylor Shaw | \$750.00 expense FYE 2023. Term: 9/16/2022 - 9/16/2027. Rights to use murals on Panama City campus in marketing and advertising campaigns. |
| Tallahassee Community College | \$61,531.73 expense FYE 2023. Term: 6/10/2020 – Until Termination. MOU for Masters in STEM (MST) Teaching Program clinical teaching internships and placement of MST graduate student teaching interns. |

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| Tango Card Inc | \$44,500.86 expense FYE 2023. Term: 2/14/2023 - no end date. Research Participant Rewards as a Service API and Rewards Genius dashboard, tools, and support for Research. |
| Taylor & Francis Group | \$15,585.15 expense FYE 2023. Term: 12/12/2022 - 12/31/2025. Online journals subscription for University Libraries. Exempt - Subscriptions. |
| Telaforce | \$0 expense FYE 2023. Term: 6/3/2019 – 6/30/2024 plus one remaining 1-year renewal option. Provides for NWRDC Service Desk. ITN6033-6. |
| The Chronicle of Higher Education | \$435.00 expense FYE 2023. Term: 1/1/2022-1/1/2027. Provides news and information access. Exempt – advertising. |
| The Emmes Co LLC | \$112,452.50 expense FYE 2023. Term: 2/13/2023 - 11/30/2023 plus six 1-year renewal options. Staffing for Nursing study. Sole source. |
| The Miriam Hospital | \$100.00 expense FYE 2023. Term: 3/8/2022-6/30/2027. Provides HIV viral load testing. Request-for-quotes. |
| The Spelman & Johnson Group | \$77,265.44 expense FYE 2023. Term: 9/23/2022 - no end date. Executive Search for University Housing Senior Associate Director. RFQ. |
| University of Delaware | \$0 expense FYE 2023. Term: 8/26/2019 – Until terminated. Software License Agreement to share Peoplesoft custom source code developed for the digital promotion and tenure solution for FSU's Oracle Peoplesoft HCM System. |
| University of West Florida | \$11,243.25 expense FYE2022. Term: 7/1/2019 – 6/30/2024. Letter of Intent for FSU Libraries to join a service agreement authored by the Florida Academic Library Services Cooperative, on behalf of their 40 institutional members, for a suite of services including interlibrary loan and cataloging access. |
| US Army Research Inst of Enviro Med | \$0 expense FYE 2023. Term: 7/13/2022 - no end date. Heat flux testing services by Jim Moran College of Entrepreneurship. |
| Vasp Software Gmbh | \$0 expense FYE 2023. Term: 2/17/2023 - no end date. VASP software license agreement for Department of Chemistry and Biochemistry. |
| Vias Academia LLC | \$6,172.30 expense FYE 2023. Term: 10/11/2022 - no end date. SIMULIA teaching suite for FAMU-FSU College of Engineering. |
| Voya Retirement Insurance And Ann Co | \$0 expense FYE 2023. Term: 2/4/2023 - no end date. 403(b) plan sponsorship for Human Resources. |

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| Wells Fargo | \$12,483.89 expense for banking services FYE 2023. \$863,714.00 revenue from PCard program rebates. Term (PCard): 9/28/2017 – 9/27/2027 currently in 5-year renewal, ITN in process. Term (Banking): 8/28/20 – 12/31/23 with one 5-year renewal. ITN 5824-A. |
| Wonderin LLC | \$1,960.00 expense FYE 2023. Term: 7/8/2022 - no end date. Student onboarding solution for Jim Moran College. |
| Yellow Cab (dba Capital Transportation) | \$202.32 expense FYE 2023. Term: 7/2/2022 – 6/30/2025 plus two 1-year renewal options to 6/30/2022. Yellow Cab provides late night taxi service to students for a fixed fee (\$12) in an agreed upon geographical area and a fixed fee (\$23) for transportation to the airport. Student Government pays 56% (\$5) of cost, and FSU pays 44% (4) of the cost for late night taxi service. |
| Collection Services (Multi-Award) | Term: 7/1/2018 – 6/30/2023 (plus two 2-year (15 vendors) renewal options extending to 6/30/2027). Provides unpaid account collection services for state university system. Discounts of 20-33% as negotiated. POs are not issued. ITN 5879-A (FSU utilized Conserve \$expense, General Revenue Corp \$27,627.14 expense, Schuerger \$14,550.44 expense, Radius Global (formerly Windham Professionals) \$8,329.79 expense, Williams and Fudge \$79,265.27 expense – FYE 23). |
| \$100K - \$1M (59 total) | |
| ABB Inc | \$604,127.10 expense FYE 2023. Term: 1/29/2021 - 12/31/2023. Research equipment upgrade for CAPS. Exemption – Federal grant. |
| Ace Contracting & Services | \$163,750.00 expense FYE2022. Term: 8/10/2022 – 6/30/2023 plus two 1-year and one 2-year renewal options for Doak Campbell stadium cleanup services (ITN 6370-6) and 1/14/2022 – 1/13/2023 plus two 2-year renewal options for Dick Howser baseball stadium cleanup Services (ITN 0603-6). |
| Affiliated Engineers SE, Inc. | \$292,132.50 expense FYE2022. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| Air Liquide (Airgas) | \$374,682.84 expense FYE 2023. Term: 7/1/2018 – 6/30/2025. Provides Industrial & Specialty Gases and Bulk Liquid Nitrogen & Liquid CO2. E&I Cooperative Contract #CNR-01362. |
| American Servco Inc. | \$507,616.88 expense FYE 2023. Term: 7/1/20-6/30/23 plus two 1-year renewal options. Provides Cleaning Services for FSU Athletics. FSU ITN 6167-A |

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| Architects Lewis + Whitlock PA | \$215,142.50 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Astro Travel and Annett Bus Lines | \$872,800.10 expense FYE 2023 for Astro Travel, \$167,051.00 expense FYE 2023 for Annett Bus Lines. Term: 7/01/2023 – 6/30/2027 plus two 2-year renewal options. Provides bus charter services. ITN 6503-6. |
| Atos | \$160,498.00 expense FYE 2023. Term: 12/21/2022 - 1/3/2024. Modernization of the Florida Automated System for Transferring Educational Records (FASTER). ITN 6401-6. |
| Avalanche Partnership LLP | \$529,931.64 expense FYE 2023. Term: 10/1/2022 - 9/30/2027 plus one 5-year renewal option. FLVC lease agreement. |
| BKJ INC | \$295,423.57 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| Bob S Auto Repair and Collision | \$115,067.39 expense FYE 2023. Term: 10/4/2021 – 6/30/2024 (plus two one 1-year renewal option). Provides for fleet maintenance services. ITN 6269-A. |
| Catapult Sports, dba XOS | \$355,844.00 expense FYE 2023. Term: 7/1/2019 – 6/30/2024 plus two 2-year renewal options. Provides for FSU Athletics Video Editing Software System. ITN6106-6. |
| Cengage Learning | \$769,522.37 expense FYE 2023. Term: 1/1/2023 - 12/31/2026 plus one 1-year renewal option. Master database subscription agreement for FLVC. Exempt – Subscription. |
| Clarivate Analytics US LLC | \$276,538.59 expense FYE 2023. Term: 12/20/2022 - 12/31/2026. Web of Science citation index for FLVC. Exemption - Memberships / Subscriptions. |
| Collier Health Services | \$502,474.11 expense FYE 2023. Term: 10/7/20 – 9/30/25 plus one 5-year renewal option. HCH Immokalee health services for COM. Exempt Services. |
| Comcast Inc | \$102,528.30 expense FYE 2023. Term 7/20/2021-7/20/2026. Provides internet service and equipment and enterprise services for ITS. |
| Command Corporation | \$182,929.91 expense FYE 2023. Term: 11/14/2022 – no end date. Beltpacks for RDCH house management for College of Music. RFQ. |
| Conference Technologies Inc | \$377,622.40 expense FYE 2023. Term: 6/21/2023 - 6/30/2028. Graphics system for WFSU. ITB 6335-A. |

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| Construction Solutions | \$289,256.20 expense FYE 2023. Term: 7/1/22-6/30/25 plus two 1-year renewals. Provides Job Order Contracting services RFQ-00536-2021. RFQ-00536-2021. |
| Cook Brothers | \$211,617.57 expense FYE 2023. Term: 7/1/22-6/30/25 plus two 1-year renewals. RFQ-00536-2021 Provides Job Order Contracting services RFQ-00536-2021. |
| Crown Castle Fiber LLC | \$151,629.05 expense FYE 2023. Term: 10/28/2022 - 10/30/2027. Fiber connectivity for WFSU master control. GSA contract number GS-35F-465DA. |
| Cumming Management Group Inc | \$350,595.63 expense FYE 2023. Term: 10/13/2022 – project completion. Consulting services for FSU Health/IRCB project management services. Alternate source contract. |
| Cyxtera Communications LLC | \$488,957.72 expense FYE 2023. Term: 2/25/2023 - no end date. Colocation services for NWRDC. Alternate source contract. |
| Dial Communications | \$218,072.37 expense FYE 2023. Term: 2/25/2023 - 2/25/2028. Installation and maintenance of fiber optic cable. Exempt – cabling services. |
| DocuSign Inc. | \$120,000.00 expense FYE 2023. Term: 8/1/2021 - 7/31/2024. Electronic Signature Agreement. |
| FedEx Corp | \$216,856.63 expense FYE2022. Term: 11/28/2021 – 11/27/2026. Provides small package and freight delivery through OBS Postal Services. |
| Fisher Scientific Company LLC | \$611,511.36 expense FYE 2023. Term: 4/28/2023 - 4/27/2028 plus two 5-year renewal options. University of Florida contract # UF ITN22JL-106. Primary supplier for lab supplies. |
| Florida Lambdarail LLC | \$818,098.50 expense FYE 2023. Term: 8/22/2019 – Upon Termination. Provides for Duo Security Phone Credits for ITS. |
| Framing Concepts Inc | \$130,877.48 expense FYE 2023. Term 7/3/2017- 11/30/2023. Provides diploma printing services. Per FSU Signed Contract #2017-PROV-00001 and per University of Alabama RFP/Contract Number T053217. |
| Gilchrist Ross Crowe Architects | \$308,243.50 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides Architect Services for Minor Construction Projects, RFQ-00240-2019. |
| H2Engineering, Inc. | \$398,864.79 expense FYE 2023. Term 7/1/19-6/30/22 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |

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| Hammel Green & Abrahamson Inc | \$401,039.82 expense FYE 2023. Term: 11/22/2022 - no end date. IRCB design services. Request for Qualifications. |
| Huron Consulting | \$545,851.41 expense FYE 2023. Term: 5/16/2018 – 12/31/2023. Negotiating new MSA to begin 1/1/2024. For Integrated Research Software consulting software licenses, implementation, hosting, and maintenance services. ITN5853-0. |
| Instructure Inc | \$620,298.05 expense FYE 2023. Term: 1/1/2021 - 12/31/2026. Canvas Higher Ed and Credentials software for ITS. ITN 5774-4. |
| Jaggaer | \$379,315.06 expense FYE 2023. Term: 12/15/2022 – 12/14/2023. Provides electronic procurement software-as-a-service (SpearMart). E&I Contract #CNR-01206. |
| Kaltura | \$365,451.33 expense FYE 2023. Term: 6/7/2019 – 6/06/2024 plus five 1-year renewal options. Video Platform – Office of Distance Learning. ITN 5955-4. |
| Mainline Information Systems, Inc | \$224,094.90 expense FYE 2023. Term: 1/26/2023 - no end date. VMware Consulting & Learning Vouchers for NWRDC. |
| Matheson Tri-Gas, Inc. | \$719,560.65 expense FYE 2023. Term: 7/7/2020 – 6/30/2024 (plus two 1-year renewal options). Provides bulk liquid nitrogen. ITN 6144-3. |
| McGraw-Hill Education | \$221,960.48 expense FYE 2023. Term: 12/20/2019 – 12/31/2024. Provides for web-based subscription services for related courses, content, and information for undergraduate studies. Exempt – training and education. |
| Medline Industries Inc | \$182,670.46 expense FYE 2023. Term: 7/1/2015 – 12/15/2023 (plus two 1-year renewal options). Provides Medical Supplies for Campus Departments/Labs. E&I Contract #CNR01385. |
| Microsoft Corporation | \$366,372.57 expense FYE 2023. Terms: 3/4/0023 - 3/23/2024 and 5/9/2023 - 12/31/2023 plus two 1-year renewal options. Work order for the 2023-24 Microsoft Enterprise Support Services for FLVC and Modernization and migration of FL DOE applications for NWRDC. State of Florida Contract 43230000-15-01. |
| Modo Labs Inc / Greyheller LLC | \$expense FYE 2023. Term 9/15/2015 – 9/14/2024 (plus three 1-year renewal options). Provides base mobile platform services. ITN5716-4 |
| Nalco Co | \$338,847.49 expense FYE 2023. Term 7/1/16 – 6/30/2021 (plus three 1-year renewal options). Provides water treatment chemicals, equipment and service. ITN5806-3. |

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| Opus Search Partners, Inc | \$109,332.58 expense FYE 2023. Term: 1/11/2023 - no end date. Executive search for Assoc. VP of Facilities, EH&S Director, and Executive Director of Maintenance & Operations. Alternate source contract and RFQ. |
| Oxford University Press USA | \$372,374.32 expense for FYE 2023. Term: 12/18/2019 – Until Terminated. Subscription and Perpetual Access Agreement for Music Therapy Journal for College of Music. Exempt: Subscription Services. |
| Paciolan | \$661,311.63 expense for FYE 2023. Term: 7/1/2023 – 6/30/2030 (plus two 1-year renewal options). Provides ticketing system for Athletics. ITN 6425-6. |
| PPM Sports Turf LLC | \$162,083.98 expense FYE 2023. Term: 9/12/2017 – 6/30/2020 plus three 1-year renewal options. Provides for FSU Intramurals Athletic Fields Weed and Pest Management. ITB5873-A. |
| Riddell | \$165,118.46 expense FYE 2023. Term: 2/10/2022-2/16/2027. Provides football helmets and reconditioning services. ITN 0606-6. |
| RJ Young Co Inc | \$422,488.52 expense; \$6,257.13 revenue rebate; FYE 2023. Term: 4/29/2018 – 4/28/2024 (plus four 1-year renewal options to 4/28/2028 and then a month to month option until 4/28/2029). Provides leased multifunctional document devices, which are sub-leased to departments and used to provide print and copy services to students for a fee. ITN 5914-4. |
| Sage Publications | \$585,373.21 expense FYE 2023. Term: 2/23/2021 – 12/31/2023. For subscriptions and publications. Exempt: Subscription Services. |
| Salesforce.com | \$593,772.90 expense FYE 2023. Term: 7/1/2022 – 6/30/2025. Provides for Software Licensing and Services for Information Technology Services. Alternate source contract. |
| Sentry Event Services, Inc. | \$784,763.30 expense FYE 2023. Term: 7/1/2022 – 6/30/2025 plus three 1-year renewal options. Event Staffing & Security Services. ITN 6369-6. |
| Shepard Exposition Services | \$113,097.90 expense FYE 2023. Term: 6/12/2019 – 6/30/2023 plus one remaining 1-year renewal option. Provides for Career Fair Expo Services – Seminole Futures. ITN6038-6. |
| Shorts Travel Management | \$506,845.96 expense FYE 2023. Term: 11/17/2020 – 1/31/2024 plus two 1-year renewal options. Provides for FSU Athletics Travel Management Services. ITN 6182-6. |

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| TK Elevator Corp | \$820,300.37 expense FYE 2023. Term: 9/8/21 – 8/31/2026 (plus one 5-year renewal option). Provides vertical transportation maintenance on elevators owned and operated by Florida State University. FSU ITN 6255-A. |
| Tomahawk Engineering & Consulting | \$86,325.50 expense FYE 2023. Term 7/1/2019-6/30/2022 plus two 1-year renewal options. Provides MEP Engineering Continuing Services, RFQ-00243-2019. |
| Willis A. Smith Construction Inc | \$645,523.96 expense FYE 2023. Term: 7/1/2022-6/30/2025 plus two 1-year renewals. Provides Construction Management Services. RFQ-00535-2021. |
| Workday Inc | \$269,966.50 expense FYE 2023. Term: 8/10/2021-8/9/2026. Provides financial planning software for the FSU Budget Office. Piggyback off the Iowa State University RFP# 63226 ERP Software System. |
| Zoom Video Communications Inc. | \$166,918.88 expense FYE 2023. Term: 9/24/2019 – 9/23/2024. Software Licensing and Services BAA (Zoom HIPPA). Alternate Contract through Internet 2. |
| \$1M+ (22 total) | |
| Avantor Performance Materials Inc (VWR) | \$2,063,598.64 expense FYE 2023. Term: 9/4/2015 – 1/31/2023. Provides laboratory equipment and supplies for the University. E&I Cooperative Contract. |
| Carahsoft Technology Corp. | \$2,380,596.66 expense FYE 2023. Various contract terms. Provides Proofpoint threat protection suite and ServiceNow vulnerability response deployment for NWRDC. GSA Schedule Contract #47QTCA20D0019 and GS-35F-0119Y. |
| Childers Construction Company | \$2,217,013.83 expense FYE 2023. Term: 7/1/22-6/30/25 plus two 1-year renewals. Provides Construction Management Services. RFQ-00535-2021 RFQ-00536-2021 |
| City of Tallahassee (StarMetro) | \$4,915,246.95 expense FYE 2023 for PO # FS23000404, FS22032863, FS23014282, FS22001697, & FS23014981. StarMetro bus service for students, faculty, and staff which includes the FSU campus and the entire Tallahassee metro area per ITN5837-A. Term: 8/6/2018 – 6/30/2028. |
| Ebsco Industries Inc | \$4,658,159.84 expense FYE 2023. Term: 1/1/2023 - 12/31/2023. Subscriptions for FLVC. ACE exemption #13: Memberships / Subscriptions. |
| Ensono | \$20,278,158.18 expense FYE 2023. Term: 7/1/2020 – 6/30/2025 plus five 1-year renewal options. Mainframe as a Service (MfaaS) for NWRDC. Per ITN 7001-6. |

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| Grainger Inc | \$3,387,516.84 expense FYE 2023. Term: 1/1/2020-12/31/2024. Provides Lease Agreement and Service Operations Agreement which cover the management of onsite Supply Store and purchase of MRO equipment/supplies. E&I Cooperative contract #CNR01496. |
| Mad Dog Design & Construction | \$3,744,952.32 expense FYE 2023. Term: 7/1/2022-6/30/2025 plus two 1-year renewals. Provides Construction Management Services. RFQ-00535-2021. |
| Mythics Inc | \$3,817,983.19 expense FYE 2023. Term: 6/26/2023 - 11/30/2023 plus one 5-year renewal option. Oracle products and services for NWRDC. Maricopa County Contract # 180233-002 (US Communities). |
| OCLC - Online Computer Library Center | \$1,419,865.01 expense FYE 2023. Term: 7/1/2023 - 6/30/2024 plus 1 1-year renewal option. Cataloguing & metadata, WorldShare ILL, Tisapa subscriptions for FLVC. Exempt – subscription. |
| Oracle Corp | \$2,189,425.96 expense FYE 2023; Term: 5/28/2018 – 5/24/2026. BOG Agreement that provides enterprise software support for mission-critical systems. Oracle agreement US-OMA-1375238. Exempt Service in accordance with FSU-2.015 (9)(d)(14) |
| ProQuest | \$2,289,941.70 expense FYE 2023. Terms 6/20/2022-12/31/2022 and 1/19/2022-1/9/2027. For FSU Libraries and FLVC subscription services. Exempt Service. |
| Ram Construction & Development LLC | \$1,839,278.78 expense FYE 2023. Terms: 7/1/22-6/30/25 plus two 1-year renewals and 2/9/2023 - no end date. Provides Job Order Contracting services RFQ-00536-2021 and Doak Campbell Stadium improvements. RFQ-00536-2021. |
| RELX Group (Elsevier) | \$1,931,207.82 expense FYE 2023. Terms: 6/27/22 – 12/31/25 plus two 1-year renewal options and 6/7/22 – 12/31/23 plus two 1-year renewal options. For FSU Libraries and FLVC Subscription Services. Exempt. |
| RGH Enterprises, Inc. | \$1,240,365.61 expense FYE 2023. Term: 3/22/2022-3/1/2028. Provides janitorial supplies and office supplies. Per Sourcewell agreement. |
| Rippee Construction | \$1,921,359.95 expense FYE 2023. Term: 7/1/2022-6/30/2025 plus two 1-year renewals. Provides Job Order Contracting and Construction Management Services. RFQ-00535-2021 and RFQ-00536-2021. |

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| Secureworks | \$6,316,720.43 expense FYE 2023. Term: 2/1/2021 - 1/31/2024. For cloud software for resale and network intrusion prevention system for NWRDC. State of FL contract NASPO #AR2472 FL Contract # 43230000-NASPO-16-ACS |
| SHI International Corp | \$7,762,211.83 expense FYE 2023. Various contract terms. Provides networking equipment, Microsoft Azure Services, McAfee Web Protection, Enterprise Vault Cloud Discovery, Personal Arch, and other software, hardware, and maintenance for Northwest Regional Data Center and ITS. ITN 5957-6, ITN 6321-4, Omnia Partners - IT Solutions Contract #: 2018011-02, NASPO Software VAR #: ADSPO16-130651 43230000-NASPO-16-ACS-Software VAR, GSA contract: GS-35F-0119Y, and Sourcewell Contract #: 081419-SHI. |
| Siemens AG | \$1,221,888.17 expense FYE 2023. Term: 6/29/2023 - 6/30/2028. Building controls retrofit for Leach center and NWRDC, Apogee system support for utilities, Desigo CC software subscription for Facilities, and fire alarm notification and device replacement for Wescott. State of Florida contract DMS-14/15-003C-02, Sourcewell Contract 030421-SIE, and Exempt – maintenance & support from OEM. |
| Southern Standard Construction LLC | \$4,034,891.76 expense FYE 2023. Term: 7/1/2022-6/30/2025 plus two 1-year renewals. Provides Job Order Contracting services and Construction Management Services RFQ-00536-2021 and RFQ-00535-2021. |
| World Wide Technologies Inc | \$1,133,578.72 expense FYE 2023. Various terms. Provides for Enterprise File and Object Storage Solution, Cisco computer equipment, VMware licensing, and Cloud Infrastructure Environment Replacement, and AptioOne Plus IT financial management software for NWRDC. ITN 6221-4, 43220000-NASPO19-ACS, and ITN5987-6. |
| Xello Inc. | \$1,075,000.00 expense FYE 2023. Term: 12/14/2022 - 12/13/2027 plus 1 renewal option. Career planning and work-based learning coordination tool for FLVC. ITN 6343-6. |

Five Year + Service Contracts – Revenue

Less than \$100K (9 total)

AT&T

\$72,576 annual revenue; third extension 2020-2025; Space lease for Bellamy Building distributed antenna system (DAS). Initial term 2/8/07 – 6/30/10 with three 5-year extension options.

\$57,960 annual revenue; first extension 2021 - 2026. Space lease for Doak Campbell distributed antenna system (DAS). Initial term: 8/24/2011 – 8/30/2021 with three 5-year extension options

\$50,400 annual revenue; Space lease for McCollum Hall distributed antenna system (DAS). Initial term: 11/12/2013 – 11/12/2023 with two 5-year extension options

\$50,400 annual revenue; Space lease for University Center A distributed antenna system (DAS). Initial term: 11/27/2013 – 10/31/2023 with two 5-year extension options.

\$50,400 annual revenue; Space lease for Williams Building distributed antenna system (DAS). Initial term: 5/20/2015 – 5/19/2025 with two 5-year extension options.

\$1,920 annual revenue. Fiber lease – UCA. Term: 11/27/2013 – 10/31/2023 with two 5-year extension options.

\$1,920 annual revenue. Fiber lease – Williams Building. Term: 5/20/2015 – 5/19/2025 with two 5-year extension options.

\$2,460 annual revenue. Fiber lease – Bellamy building. Term: 9/1/2021 – 6/30/25.

Captiveyes Group, Inc.

\$27,424.13 revenue FYE 2023. Term: 1/1/2020 – 12/31/2023 Sells static billboard advertisement inside the six garages on campus and pays the Parking Department 40% of gross sales.

FSView

\$12,000 revenue FYE 2023. Term 7/1/2001 - 6/30/2015 (Renewed to 6/30/2019).. FSView is a newspaper distributed free on campus and pays FSU a commission the greater of 30% of advertising revenues or \$12,000 per year.

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| Red Coach | \$18,000 revenue FYE 2023. Term 2/7/2019 – 6/30/2024. Provides point-to-point motor coach travel from FSU's Tallahassee campus to locations within Florida. |
| T-Mobile | <p>\$41,472 annual revenue; Space lease for Bellamy Hall cell site. Initial Term: 1/1/2003 – 12/31/2008 with seven 5-year extension options. Currently in third extension that ends 12/31/23.</p> <p>\$50,820 annual revenue; Space lease for McCollum Hall cell site. Initial term: 6/12/1998 – 6/11/2008 with three 5-year extension options. Currently in third extension that ends 6/11/23. (formerly Sprint Nextel)</p> |
| Uniti Fiber, LLC | <p>\$2,952 annual revenue; Fiber lease – Thrasher Building. Term: 9/1/2018 – 6/30/2022 with three 1-year extension options.</p> <p>\$5,904 annual revenue; Fiber lease – Love Building. Term: 3/1/2017 – 6/30/2021 with three 1-year extension options. Currently in first extension that ends 6/30/2022.</p> <p>\$17,712.00 annual revenue; Fiber lease – UCA. Term: 9/1/2017 – 6/30/2021 with three 1-year extension options. Currently in first extension that ends 6/30/2022.</p> <p>\$5,904 annual revenue; FYE 2022. Fiber lease – UCD. Term: 3/1/2017 – 6/30/2021 with three 1-year extension options. Currently in first extension that ends 6/30/2022.</p> <p>\$3,840 annual revenue; Fiber lease – McCollum Hall. Term: 6/30/2016 – 6/30/2019 with three 1-year extension options. Third extension ended 6/30/2022.</p> |
| University of Florida | \$0 FYE 2022. Collaboration with UF Health Shands Children's Hospital in connection with Children's Miracle Network Hospitals through DM at FSU which accurately reflects the Shands/FSU COM relationship to the community and creates a positive situation for both UF Health Shands Children's Hospital and FSU COM; Term: 8/24/20 to 6/30/23 plus renewal option at same term as original. |
| UPS Store (Millenium Eagle Enterprises) - 2 | \$7,618.00 revenue FYE 2023. Term: July 8, 2010 – July 31, 2016, plus renewals extending to 7/9/2023 UPS Store rents 819 square feet for \$10 per square foot payable to Postal Services, plus proportional share of utilities paid to Facilities for space in the E&G building on Madison Street not included in revenue. |

Verizon

\$72,576 annual revenue; Space lease for University Center A (UCA) cell tower cite. Initial Term: 11/1/2011 – 10/31/2016 with three 5-year extension options. Currently in second extension that ends 10/31/2026.

\$43,200 annual revenue; Space lease for WFSU-TV Tower cell site. Initial Term: 12/6/2009 – 12/6/2014 with four 5-year extension options. Currently in second extension that ends 12/6/2024.

\$21,400 annual revenue; Space lease for Med School Monopole cell site. Initial Term: 6/16/2017 – 6/16/2027 with three 5-year extension options.

\$21,400 annual revenue; Space lease for Fine Arts Monopole (Palm Court) cell site. Initial Term: 6/16/2017 – 6/16/2027 with three 5-year extension options.

\$100K - \$1M (4 total)

Gilly National

\$148,859.68 revenue FYE 2023. Term: 1/11/2016 – 12/31/2023 (plus three 1-year renewals to 12/31/2025). Gilly provides snack vending on the FSU campus. Gilly pays 26% commission on revenues with an annual guarantee of \$92,000, plus a 10% of sales above \$400,000. The commission is reduced by the 7.5% sales tax Gilly National pays on behalf of FSU. ITN #5769-2.

Park Mobile

\$97,476 revenue FYE 2023. Term 5/15/2018 – 5/14/2020 with three (3) consecutive one (1) year renewal terms; provides solutions for the management of all parking related matters, including providing a system for the payment of street parking by mobile telephone.

UPS Store (Millenium Eagle Enterprises) - 1

\$130,410.70 revenue FYE 2023. Term: 7/10/2009 - 7/9/2019 (plus a 5-year renewal option to 12/31/2023). The UPS Store provides mailbox services & package mailing and printing services for students and pays OBS Postal Services 10% of agreed upon sales.

Truist Bank

\$400,000.00 annual contribution space lease revenue FYE 2023. SunTrust and BBT merged to create Truist Bank, SunTrust contract effective 7/1/2010 until 9/14/2021, Truist Bank awarded ITN: 6222-6. Term: 9/15/2021 -6/30/ 2026 (plus three (3) 1-year renewal options). Provides banking services for FSU Students, faculty and staff, plus space lease.

\$1M+ (6 total)

A-L Tier II LLC (Learfield)

\$11,250,000.00 revenue FYE 2023. \$510,125.00 expense. Term: 6/25/2020 – 7/1/2030. ITN 6532-6. FSU Athletics website design and maintenance – Seminoles.com.

Aramark

\$23,333,108.97 revenue FY2023. Term: 12/18/2020 – 6/30/2031. Food Service Provider overseeing all Seminole Dining operation; contract provides for a quality and affordable food service program in all aspects of the operation. Contract includes capital investments, guaranteed commissions, annual equipment, maintenance, repair, marketing, scholarships, In-Kind and meal plan funding.

Coca-Cola, Inc.

\$2,961,333 revenue FYE 2023. Term: 8/01/2017 – 7/31/2027). Coca-Cola operates the beverage vending machines and has exclusive pouring rights on campus. ITN #5546-2

Follett Higher Education

\$3,330,145 revenue FYE 2023. Term: 7/17/2018 – 6/30/2028 plus one 5-year renewal option. Follett operates the campus bookstore, the Sport Shops at the stadium, Civic Center, and the Panama City campus bookstore. Revenue includes escalating variable commission guarantees throughout the initial term of the agreement. Solicitation of Competition SOC 5881-2

Global Spectrum, LP

\$8,932,084 gross revenue (\$881,59 net operating income) FYE 2023. Term: 10/5/2020 – 6/30/2030 and one three-year renewal option. Global Spectrum is a professional arena management company that manages the Donald L. Tucker Civic Center. Alternate Source Contract through Cumberland County Recreation Center, dba The Cross Insurance Arena.

Nike

\$2,200,000 revenue FYE2023. \$124,501.19 expense. Term: 5/31/2019 - 7/31/2029. Nike all-sport agreement for Athletics.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM J



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
Technical Amendment to BOT Resolution Approving Tax Exempt Debt to Fund
a Portion of the Dunlap Football Center and to Refund the FSU Financial
Assistance, Inc. Outstanding Bonds

In compliance with the Board of Governors Debt Management Guidelines, The Board of Trustees, during their June 2023 meeting, adopted a formal resolution requesting the Board of Governors approval to issue debt in an amount not to exceed \$116,000,000 for the purpose of financing a portion of Dunlap Football Center Project. The Division of Bond Finance is requiring a minor amendment to the Resolution, which enhances the pledge revenue description and adds new language clarifying that Athletics' internal university loans are subordinate to the new credit. In addition, they are removing language regarding legislative authorization "will be obtained" now that the Governor has signed the 2024 state budget.

I recommend approval of the attached amended resolution, authorizing the FSU Athletics Association to issue debt not to exceed \$116,000,000 for Dunlap Football Center.

KC

Attachments

AN AMENDED RESOLUTION AUTHORIZING THE ISSUANCE OF DEBT AND REQUESTING THE FLORIDA BOARD OF GOVERNORS TO APPROVE THE ISSUANCE OF SUCH DEBT TO FINANCE THE CONSTRUCTION OF A FOOTBALL OPERATIONS FACILITY FOR FLORIDA STATE UNIVERSITY ON ITS MAIN CAMPUS; AND PROVIDING AN EFFECTIVE DATE.

BE IT RESOLVED BY THE FLORIDA STATE UNIVERSITY BOARD OF TRUSTEES:

Section 1. The Florida State University Board of Trustees (the “Board of Trustees”) hereby authorizes the issuance of tax-exempt debt by the Division of Bond Finance on behalf of Florida State University Athletics Association, Inc. (“FSUAA”), a University direct support organization (“DSO”), and requests the State University System Board of Governors (the “Board of Governors”) to approve the issuance of tax-exempt debt in an amount not to exceed \$116,000,000 (the “Bonds”) for the purpose of financing (i) the construction of a football operations facility (the “Project”) on the main campus of Florida State University (the “University” or “FSU”) to be operated by the University; (ii) a debt service reserve, if necessary; and (iii) certain costs relating to the issuance of the Bonds.

Section 2. Additionally, the Board of Trustees authorizes FSUAA to refund all or a portion of any outstanding bonds previously issued by FSU Financial Assistance, Inc. (“FSUFA”) and requests the Board of Governors to approve the vesting of such authority in FSUAA. The requisite approval will facilitate the University’s plan to further integrate its athletics financials and stakeholders by utilizing FSUAA as its primary financing platform.

Section 3. The Project will consist of an approximately 150,000 gross square foot facility that will serve as the new day-to-day home of FSU football operations. The facility is expected to include features such as offices for coaches and staff, a locker room, meeting rooms, strength training and conditioning space, nutrition stations, and recovery and rehabilitation resources. The Project is reflected on the approved master plan for the University and is consistent with the mission and strategic plan of the University because it will provide additional space and resources to meet the needs of FSU student-athletes. Project construction is expected to commence in September 2023 and is expected to be completed in July 2025. Proceeds of the Bonds will not pay for all the costs of construction of the Project; as of February 12, 2023, approximately \$28.6 million in private capital gifts to the University and/or Seminole Boosters, Inc. (“Seminole Boosters”) have been received, with another \$4.3 million expected by June 30, 2023. FSU also projects receiving additional donations in Fiscal Years 2024 through 2028

totaling \$22.1 million, which are expected to be pledged to pay debt service on the Bonds. Approval of the Board of Governors will be obtained. Proceeds of the Bonds will not be used to finance operating expenses of the University or its athletics DSOs.

The Board of Trustees hereby expresses its intention for the University to be reimbursed from proceeds of this tax-exempt financing for capital expenditures to be paid by the University in connection with the incurrence of debt for the purpose of acquiring, constructing, equipping, and installing the Project. The University expects to use legally available funds to pay such costs, including, but not limited to, capital expenditures, costs of design, engineering, retrofitting, and other costs associated with the incurrence of debt. It is reasonably expected that the total amount of debt to be incurred, in one or more financings, by the University with respect to the Project will not exceed \$116,000,000. This Resolution shall constitute a “declaration of official intent” within the meaning of Treas. Reg. § 1.150-2 (Proceeds of bonds used for reimbursement) promulgated pursuant to the Internal Revenue Code of 1986, as amended, with respect to the debt incurred, in one or more financings, to finance the Project.

Section 4. The Bonds will be secured by certain revenue streams contractually pledged to FSUAA by FSU’s athletics department and Seminole Boosters, including athletic conference distribution revenue, recurring annual Seminole Booster membership fees, Project-specific donations received within 5 years of issuance, sponsorships and advertising money, proceeds from ticket sales, and game guarantees (collectively, the “Pledged Revenues”). FSUAA is legally authorized to secure the Bonds with the Pledged Revenues pursuant to Section 1010.62, Florida Statutes. The University is committed to ensuring that sufficient revenue will be generated to fulfill FSUAA’s debt service obligations with respect to the Bonds.

Section 5. It is expected that the Bonds will be sold through a competitive sale. The Bonds will mature not more than 30 years after issuance, including any extensions or renewals thereof. The Project has an estimated useful life of 50 years, which exceeds the anticipated final maturity of the Bonds. It is expected that the Bonds will bear interest at a fixed interest rate.

Section 6. The Board of Trustees will comply with all requirements of federal and state law relating to the Bonds, including, but not limited to, laws relating to maintaining any exemption from taxation of interest payments on the Bonds and continuing secondary market disclosure of information regarding the Bonds, if necessary. The University will promptly notify the Division of Bond Finance of the State Board of Administration (the “Division”) of any information required to be disclosed pursuant to the Continuing Disclosure Agreement for the Bonds and will respond to requests for information from the Division in a timely manner.

Section 7. The University and FSUAA will comply with the Board of Governors' Debt Management Guidelines and the debt management policy of the University.

Section 8. The Chair and Chief Executive Officer of FSUAA, the University President, the University Vice President, the Senior Vice President for Finance and Administration, and other authorized representatives of FSUAA, the University, and the Board of Trustees are hereby authorized to take all actions and steps, to execute all instruments, documents, and contracts, and to take all or actions, as they may deem necessary or desirable in connection with the execution, sale, and delivery of the Bonds.

Section 9. The Board of Trustees hereby declares that the Bonds shall have a first lien on the Pledged Revenues and such lien shall be senior in priority to any obligations created by that certain internal loan agreement between the University and the University's athletics department dated March 31, 2016, including any amendments or modifications to the agreement.

Section 10. In making the determination to finance the Project, the Board of Trustees has reviewed the information attached to Appendix A, attached hereto.

Section 11. This Resolution shall become effective immediately upon its adoption, subject to approval of the Board of Governors.

ADOPTED this ____ day of _____, 2023.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM K



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
Report on Florida State University Employee Bonus Plan

Section 1012.978, F.S. authorizes a university Board of Trustees to develop and maintain an employee bonus plan for work performance or employee recruitment and retention.

Board of Governors Regulation 9.015, University Bonus Plans delegates the oversight of the individual institution's bonus plan to the Board of Trustees. The Regulation requires an annual report be submitted to the Board of Trustees, certifying that bonuses paid during the reporting period complied with the criteria in the university bonus plan and were paid from funds contained within the university's budget as approved by the Board of Trustees.

University Policy 4-OP-C-7-D7, Employee Bonus Plan, authorizes university departments to provide a salaried employee with a one-time monetary award (bonus) as an incentive to recruit and retain key talent or to reward employee work performance.

In accordance with Section 1012.978, F.S., BOG Regulation 9.015, and University Policy 4-OP-C-7-D7, I am providing a report of all employee bonus types for work performance or employee recruitment and retention paid to Faculty and Staff during the initial reporting period July 1, 2022 through June 30, 2023 for your approval.

I recommend approval of the Florida State University Employee Bonus Plan Report and certify that bonuses paid within the reporting period, July 1, 2022 through June 30, 2023, comply with criteria outlined in the University Policy 4-OP-C-7-D7.

KC

Attachments

4-OP-C-7-D7 Employee Bonus Plan (See also 4-OP-C-7-A3.7)

Responsible Executive: Finance and Administration

Approving Official: Vice President of Finance and Administration

Effective Date: Approval of BOG 9.015 (November 4, 2021); Approved by FSU BOT 9-24-21

Last Revision Date: 9/24/21

I. INTRODUCTION

- This policy provides guidance on awarding individual bonus or incentive payments to recruit and retain employees and to reward superior work performance.
- Eligible categories of employees include Faculty, Executive Service (AEX), Administrative and Professional (A&P), and University Support Personnel System (USPS). Employees must be active and in good standing with the University at the time a bonus payment is made.

II. POLICY

- Departments may provide a salaried employee a one-time monetary award (bonus) as an incentive to recruit and retain key talent or to reward employee work performance.

A. Recruitment

Offered to prospective employees who possess skills, experience, and/or qualifications that are in high market demand or are highly specialized. May also be used to recruit for a position that would otherwise be difficult to fill. The amount of the recruitment bonus may not exceed 15% of the employee's base salary. A recruitment bonus request that exceeds the 15% threshold may be awarded only after approval by the President or designee. See also Policy 4-OP-C7-B12 Recruiting Incentives.

B. Retention

Offered to a current employee possessing valuable or unique knowledge, skills, or abilities that are deemed critical to the mission of the University in order to retain key talent. May be used to acknowledge successful completion of career development, professional training, or certification programs that are beneficial to the University and the employee. The amount of the retention incentive is dependent on the

nature and complexity of the role, as well as the availability of funds. The amount of this incentive may not exceed 15% of the employee's base salary. A retention bonus request that exceeds the 15% threshold may be awarded only after approval by the President or designee.

C. Work Performance

Recognizes and rewards employees for exceptional performance and contributions over a specified period of time. Frequently awarded for the completion of a special project or assignment going beyond an employee's regularly assigned duties. These may include, but are not limited to, the following:

- Contributions that substantially advance the initiatives of the department, division, college, or University and are typically project-based.
- Extraordinary efforts during times of critical need, such as achieving vital objectives or deliverables that could have negatively impacted operations or major projects.
- Innovative work ideas that significantly improve operational efficiencies, workflow, or customer service and may include the introduction or modification of business practices.

D. Incentive Program

A department-specific program based on an approved plan with clearly defined objectives. These programs are used to recognize and reward employees for significant performance and contribution following a specified time-period based on pre-established goals. The incentive program must define eligible employees and be provided to FSU Human Resources in advance, with final approval for any such payments by the Chief Human Resources Officer. Faculty Practice Plans must operate in accordance with State University System of Florida Board of Governors Regulation 9.017 and are authorized upon approval by the Board of Trustees.

E. Procedures

When an employee's supervisor determines that a bonus may be warranted, an Additional Pay Form containing justification/documentation appropriate for the requested bonus type should be prepared and submitted. All bonus and incentive payments are subject to approval of the Chief Human Resources Officer or designee. The effective date of the increase will be the beginning of the pay period following the completion of the process. Requests to establish a new college or administrative unit incentive plan should be submitted to Compensation at HR-Compensation@fsu.edu.

III. LEGAL SUPPORT, JUSTIFICATION, AND REVIEW OF THIS POLICY

- Section 1012.978, F.S.
- Florida Board of Governors Regulation 9.015
- Florida State University Board of Trustees Regulations FSU-4.001
- This policy shall be reviewed by the Chief Human Resources Officer every seven years for its effectiveness. The Office of Human Resources shall make recommendations to the Vice President for Finance and Administration for any modification.
- Revisions to this policy require FSU BOT approval in accordance with Florida Statutes and BOG Regulation.

9.015 University Bonus Plans

(1) Notwithstanding section 215.425, Florida Statutes, each board of trustees may establish and implement one or more plans that authorize the award of bonuses based on employee work performance or for purposes of recruitment and retention.

- (a) Each university plan must set forth the categories of employees who are eligible to receive bonuses and the evaluation criteria by which bonuses may be awarded. Evaluation criteria for plans based on employee work performance may include, but are not limited to, documented work performance involving increased duties/responsibilities, successful completion of a special project, attainment of established goals, superior performance, or specific achievements or assignments of significance. For plans developed for recruitment, evaluation criteria may include, but are not limited to, candidates with desirable specialized skills and exceptional experience, or where market conditions or departmental structure merit such a recruitment award. For plans developed for purposes of addressing retention, evaluation criteria may include, but are not limited to, circumstances to address verified offers of competing employment, to address market conditions which are significantly higher than the current salary, to ameliorate salary compression or inversion, or to acknowledge successful completion of career development, training, or certification programs that are in the best interests of the university or support the mission of the university.
- (b) Each university may authorize the inclusion of provisions that award bonuses in collective-bargaining agreements that are duly ratified by the board of trustees. Any bonus provisions in such agreements must be based upon standards appropriate to institutions of higher education or relevant industry standards.

(2) Any university bonus plan that is consistent with the provisions set forth herein may be implemented upon approval by the university board of trustees. Any plan approved by a university board of trustees that deviates from this authority shall not be implemented until submitted to and approved by the Board of Governors. This regulation applies to bonus plans created under section 1012.978, Florida Statutes.

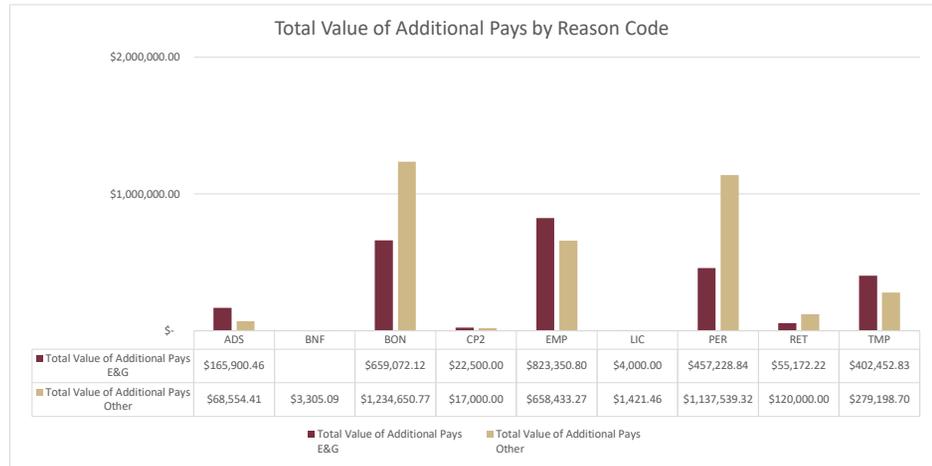
(3) Comprehensive incentive-based compensation programs implemented for services related to the delivery of clinical care through a university Faculty Practice Plan approved by the Board of Governors and operating in accordance with Regulation 9.017 or another health-care related program are authorized upon approval by the university board of trustees.

(4) Each year, on a schedule established by the university board of trustees, the President shall submit a report to the board of trustees. The report shall contain the following: the President's certification that any bonuses paid during the reporting period complied with the criteria in the university's bonus plan and were paid from funds contained within the university's budget as approved by the board of trustees; and the total amount paid during the reporting period for performance, recruitment and retention bonuses.

Authority: Section 7(c), Art. IX, Fla. Const.; section 1012.978, Fla. Stat.; History:
New_____

| Type of Additional Pay | Count of Additional Pays E&G | Total Value of Additional Pays E&G | Count of Additional Pays Other | Total Value of Additional Pays Other | Count of Additional Pays All | Total Value of Additional Pays All |
|------------------------|---------------------------------|---------------------------------------|-----------------------------------|---|---------------------------------|---------------------------------------|
| ADS | 24 | \$ 165,900 | 5 | \$ 68,554 | 29 | \$ 234,455 |
| BNF | | | 2 | \$ 3,305 | 2 | \$ 3,305 |
| BON | 310 | \$ 659,072 | 309 | \$ 1,234,651 | 619 | \$ 1,893,723 |
| CP2 | 14 | \$ 22,500 | 8 | \$ 17,000 | 22 | \$ 39,500 |
| EMP | 164 | \$ 823,351 | 178 | \$ 658,433 | 342 | \$ 1,481,784 |
| LIC | 2 | \$ 4,000 | 1 | \$ 1,421 | 3 | \$ 5,421 |
| PER | 139 | \$ 457,229 | 132 | \$ 1,137,539 | 271 | \$ 1,594,768 |
| RET | 15 | \$ 55,172 | 5 | \$ 120,000 | 20 | \$ 175,172 |
| TMP | 429 | \$ 402,453 | 230 | \$ 279,199 | 659 | \$ 681,652 |
| Grand Total | 1097 | \$ 2,589,677 | 870 | \$ 3,520,103 | 1967 | \$ 6,109,780 |

| Earning Code | Earning Code Description |
|--------------|---|
| ADS | Faculty Admin Supplement - Addl Duties - COVID (Work Performance) |
| | Faculty Admin Supplement - Development (Retention) |
| | Faculty Admin Supplement - Interim Appointment (Work Performance) |
| | Faculty Admin Supplement - Temporary Duties (Work Performance) |
| BNF | Bonus (Incentive/Work Performance) |
| BON | Bonus (Incentive/Retention) |
| CP2 | Catastrophe Pay - COVID (Work Performance) |
| EMP | Employment Incentive (Recruitment) |
| LIC | License & Certification (Retention) |
| PER | Performance Bonus (Work Performance) |
| RET | Retention Bonus (Retention) |
| TMP | Temporary Out of Class Pay (Work Performance) |





FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM L



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
Regulation Amendment FSU-2.009, Parking and Traffic

The proposed amendment eliminates temporary parking permits as temporary parking authorization for a different vehicle may now be obtained by adding that vehicle to the user's virtual permit.

The reference to parking "meters" is replaced by reference to "hourly" parking. Traditional parking meters have been removed. Similarly, short term parking rates will be available in the referenced parking payment app.

I recommend your approval of this amendment.

KC
Attachment

FSU-2.009 Parking and Traffic Regulations.

(1) General Information.

(a) Applicability of Traffic Regulation. This regulation shall be applicable to all vehicles operated or parked on the Florida State University (FSU) campus at any time, including examination periods, semester breaks, and registration periods. The fines, penalties and other sanctions provided herein may be imposed against any person who shall cause, allow, permit or suffer any vehicle registered in any state or at the Office of Transportation and Parking Services in the name of, or operated by such person to be parked or operated in violation of any provision of this Regulation. It is the policy of FSU to enforce the provisions of this Regulation and seek to impose the fines, penalties or other sanctions provided herein:

1. In the case of a vehicle registered with the Office of Transportation and Parking Services, against the person in whose name such vehicle is so registered.
2. In the case of a vehicle not so registered, if it is determined that the operator at the time of the violation is affiliated with FSU and, in fact, should have registered the vehicle with the Office of Transportation and Parking Services, against the person affiliated with FSU.
3. In the case of a vehicle not so registered and whose operator at the time of the violation cannot be identified, against the title holder of said vehicle.

(b) Applicability of Florida Statutes and Ordinances of the City of Tallahassee. All ordinances of the City of Tallahassee relating to traffic which are not in conflict or inconsistent with this Regulation shall extend and be applicable to the grounds of the University. A copy of said ordinances shall be available for inspection at the Office of Transportation and Parking Services. In addition, the provisions of Chapter 316, Florida Statutes, shall extend and be applicable to the grounds of the University.

(c) Responsibility for Implementation. Unless otherwise noted, the Director of Transportation and Parking Services shall be responsible for the supervision and implementation of this Regulation. All requests for individual consideration with regard to the parking and traffic regulations contained in this Regulation must be directed to that person at the Office of Transportation and Parking Services.

(d) Definitions. The following words and phrases, when used in this Regulation, shall have the meanings respectively ascribed to them in this section, except where the context otherwise requires:

1. Access Lane. Any area that is not designated as a parking space, and that provides an avenue for traffic flow and emergency vehicles.
2. Automobile. Any motor vehicle having three (3) or more wheels.
3. Back-in Parking. Parking a vehicle so that the front-end of the vehicle is pointing toward the drive aisle. It does not matter if the vehicle actually backed into the parking space or drove through an adjacent space.
4. Commuter Lot. Designated lots/facilities that prohibit the parking of vehicles between the hours of midnight and 5:45 AM, except on Friday and Saturday evenings or as posted on the entrance of the lot.
5. Commuter Student. Any person not classified as faculty, administrative and professional personnel or University support personnel system staff that is enrolled and carrying 1 or more credit hours of undergraduate or graduate work at FSU that does not pay for on-campus housing and does not reside in an on-campus FSU residential hall.
6. Designated Parking Space. Areas governed by FSU parking Regulations with parking spaces delineated by red, white, yellow, green or blue striping, ~~an parking meter~~ hourly parking sign ~~or~~, or other physical barriers to include, but not be limited to railroad ties and bumper blocks intended to delineate parking parameters.

7. Director of Transportation and Parking Services. An FSU employee who has been assigned the specific duties of supervising and managing the Office of Transportation and Parking Services.

8. Employee. Any employee of FSU including (but not limited to) executive staff, faculty, administrative and professional personnel, University support personnel system staff, and OPS staff.

9. Employees of Recognized FSU Organizations or Contracted Services. Personnel who work on campus, but who are not University employees (including, but not limited to: bookstore employees, beauticians, barbers, food service personnel, credit union employees, golf course employees, postal/shipping employees, staff of religious houses, event personnel, and employees of the Greek houses).

10. Financial Aid Disbursement. The period of time defined each semester by the Controller's Office for the disbursement of financial aid funds.

11. Fire Lanes. Those areas of campus that must be kept clear of all obstructions so as not to interfere with the movement of fire-fighting equipment and which are marked as fire lanes by signs and red painted curbing or fluorescent red and white painted areas, or both.

12. Loading Dock. Areas specifically designated for the sole purpose of loading or unloading materials or equipment at the delivery entrance or designated location to a building. Properly identified service vehicles, commercial vehicles, or vehicles properly displaying loading dock permits issued by the Office of Transportation and Parking Services are authorized to use loading docks. Loading docks are delineated by signs and/or pavement markings. Vehicles parked without proper authorization will be issued a citation and/or towed at owner's expense.

13. Loading Zones. Areas specifically designated for the sole purpose of loading or unloading

materials or equipment. Properly identified service vehicles, commercial vehicles, vehicles registered for valid FSU virtual permits, or vehicles properly displaying a valid loading zone parking credential issued by the Office of Transportation and Parking Services are authorized to use loading zones. Loading zones are delineated by signs and/or pavement markings. Use of these areas is limited to 20 minutes. Vehicles exceeding the 20-minute maximum period may be issued a parking citation. Additional citations may be issued every hour after the original citation and/or vehicles may be towed at owner's expense.

14. Motorcycle, Moped, or Motor Scooter. Any motor vehicle having less than three (3) wheels.

15. Overnight Lot. Designated lots/facilities that allow parking twenty-four (24) hours a day.

16. Parking. The standing of a vehicle, whether occupied or not and whether the engine is running or not., as may be permitted by law under the State Uniform Traffic Control Law, Chapter 316, Florida Statutes, or this Regulation pursuant to Section 1006.66.

17. Parking Credential. A virtual parking permit, parking placard, parking hang-tag, or other designated pass/permit that authorizes parking in one or more campus parking lots/facilities.

18. Parking Hang-Tag. A parking hang-tag is a physical parking permit that is hung from an automobile's rearview mirror. A parking hang-tag authorizes parking in the lots, facilities, and/or spaces as shown on the hang-tag. The parking hang-tag does not authorize parking in any lots, facilities, or spaces not noted on the hang-tag.

19. Parking Placard. A parking placard is a physical parking permit that is placed on an automobile's dashboard. A parking placard authorizes parking in the lots, facilities, and/or spaces as shown on the placard. The parking placard does not authorize parking in any lots, facilities, or spaces not noted on the placard.

20. Permit Registration Year. The period from August 15 of one year to August 15 of the succeeding year

21. Persons Affiliated with FSU. Employees or students of FSU or employees of recognized FSU on-campus organizations or contracted services.

22. Reserved Space. A parking space that is reserved for a specific user, user group, event/function, or vehicle. The space will be marked with signage, pavement markings, and/or temporary barricades. Any parking space on campus may be reserved for events or other University functions.

23. Resident Student. Any person not classified as faculty, administrative and professional personnel or University support personnel system staff that is enrolled and carrying 1 or more credit hours of undergraduate or graduate work at FSU that also pays for on-campus housing and resides in an on-campus FSU residential hall.

24. Restricted Hours. Between 7:30 AM and 10:00 PM, Monday through Friday on all class days, examination periods, semester breaks, and registration periods.

25. Service Vehicle Area. Areas reserved for properly identified service or emergency vehicles performing maintenance or repair of University owned or leased equipment or facilities, commercial vehicles, or vehicles bearing proper authorization from the Office of Transportation and Parking Services. Non-Service State vehicles are prohibited from parking in service vehicle spaces. Service vehicle areas are reserved during restricted hours and are delineated by signs and/or pavement marking. Vehicles without proper authorization will be issued a citation and/or towed at owner's expense for parking in a reserved space without authorization (fine code – 01 if the space is not reserved for a specific vehicle or fine code – 06 if the space is reserved).

26. Short Term Parking. Those spaces designated by signage with a two-hour maximum stay. An appropriate parking placard or hang-tag must be obtained from the Office of Transportation and Parking Services and appropriately displayed on the vehicle.

27. Transportation Violations Appeals Board. The University traffic authority established pursuant to Section 1006.66, Florida Statutes, to review disputes regarding citations and to render decisions regarding the appropriate penalty to be imposed, including the restriction, removal, or restoration of driving or parking privileges on campus. The Transportation Violations Appeals Board will consist of 2 or more divisions of equal authority. Each shall be composed of 4 members appointed for a period of 1 year. There shall also be appointed a pool of alternate members who shall be eligible to serve when called upon by the Board Coordinator, when a regular member is unavailable. All appointments shall be made by the Vice President for Finance and Administration. The positions on each division of the Board shall be occupied by faculty, staff (A&P or USPS) and student members. The Chairperson shall be elected annually from among the members of the Board and shall have full voting rights. This Board shall function on a year-round basis. A quorum shall consist of at least 2 members of the Board. When a quorum is not available, and the appellant has arrived on time for their scheduled hearing, the citation(s) will be dismissed.

28. Vehicle. Any automobile, motorcycle, moped or motor scooter as defined. Motorized scooters and micromobility devices governed by s. 316.2128, F.S., have certain rights of bicycles and are governed by that law, University regulation and policy including those governing bicycles, city ordinance and the provisions of any vendor contract.

29. Virtual Permit. Vehicle registration which allows the registered vehicle to be parked on the grounds of the University, as set out in this Regulation. A virtual permit is not a physical permit. Instead, the registered vehicle's license plate is used to determine whether or not the

30. vehicle is properly registered with the Office of Transportation and Parking Services. Up to five automobiles may be registered to a single virtual permit. However, a vehicle may not be registered to more than one virtual permit at a time. Automobile virtual permits are only issued to vehicles with three (3) or more wheels and motorcycle virtual permits are only issued to vehicles with fewer than three (3) wheels.

31. Visitors. Persons who are not employees or students of FSU and who do not work on campus for other organizations.

32. Working Day. Any day that the University is officially open. This does not include official holidays or winter break.

(2) Virtual Permits, Parking Placards, and Parking Hang-Tags.

(a) All vehicles parked on the campus by persons affiliated with FSU must be registered for a valid virtual permit or display the appropriate placard or hang-tag as instructed. The following, however, are excepted:

1. Board of Trustees. Vehicles bearing a valid "Board of Trustees" parking placard may be parked in any designated, unreserved parking space on campus.

2. "State" Tag Vehicles. Vehicles owned by or assigned to an FSU department or organization and bearing a duly issued "State" license tag must be registered for a valid virtual permit, but are not required to pay hourly parking meter fees. Such vehicles may be parked in any designated, unreserved parking space, short-term space (2-hour maximum) or loading zone (20-minute maximum) on campus. Vehicles bearing a duly issued "State" license tag but are not owned or assigned to an FSU department or organization must either purchase a virtual permit, purchase a visitor parking placard or hang-tag, park in an hourly parking space at a parking meter and pay the appropriate fee, or park in a designated visitor parking lot/facility and pay the appropriate fee.

3. News Media Vehicles. Press representatives, reporters, correspondents, and other representatives of the news media not otherwise affiliated with FSU, who are on campus on official news or press business, may park in any designated, unreserved space, short-term space (2-hour maximum) and loading zone (20-minute maximum). A virtual permit is not required if a valid press identification is prominently displayed on the vehicle(s). Students, faculty and staff are not eligible for this exemption.

4. Commercial Representatives in Commercial Vehicles. Marked delivery trucks, telephone and power service vehicles, limousine service automobiles, taxis, and buses making brief stops (less than 10 minutes) at 1 or more points on campus are not required to register for a virtual permit or display a parking placard or hang-tag. Vehicles used by persons required to perform service or regular maintenance on University-owned or leased equipment or facilities must have a valid FSU parking hang-tag displayed. These vehicles may be parked in any designated, unreserved parking space. Hourly parking meter and visitor lot/facility fees must be paid.

5. Contractors. Contractors and contractor personnel engaged in FSU construction projects may park within the fenced enclosure of the construction site. Other parking must be off campus or other on-campus locations specifically designated by the Office of Transportation and Parking Services. Construction placards or hang-tags must be displayed in the windshield of each parked vehicle, whether or not the vehicle is parked in a parking lot/facility or within a fenced enclosure.

6. Vehicles Transporting Disabled Individuals; Disabled Veterans.

a. In accordance with Florida Statutes, a vehicle bearing a disabled parking permit issued pursuant to Sections 320.0848, 320.0842, 320.0843, and 320.0845, Florida Statutes, or a disabled license plate issued pursuant to Section 320.084 or Section 320.0848, Florida Statutes (disabled veterans and veterans confined to wheelchairs), may park in designated accessible

b. spaces if such vehicle is transporting a person eligible for such parking permit or license plate. Any person who is chauffeuring a disabled person shall be allowed momentary parking in any such parking space for the purpose of loading or unloading a disabled person. No penalty shall be imposed upon the driver for such momentary parking. Such vehicles shall not, however, be parked in a reserved space, bus loading zone, fire zone, disabled space access aisle, service vehicle space, non-designated parking area or any other area posted as a "No Parking" zone. All employee and student affiliates are required to purchase the appropriate virtual permit in order to park on campus. Vehicles appropriately registered for a valid virtual permit and displaying a disabled permit issued by the state may park in ~~hourly metered~~, loading zone, short-term, and other unreserved permit designated spaces as long as time restrictions are observed. Visitors displaying a disabled permit issued by the state may park in designated accessible spaces, ~~hourly parking space meters~~ (at no charge), and/or visitor parking lots/facilities (provided the regular rate/fee is paid).

c. Any person who fraudulently obtains or unlawfully displays a disabled parking permit that belongs to another person while occupying a disabled parking space or an access aisle as defined in s.553.5041 while the owner of the permit is not being transported in the vehicle or who uses an unauthorized replica of such a disabled parking permit with the intent to deceive is guilty of a misdemeanor of the second degree, punishable as provided in s.775.082 or s. 775.083.

d. Transportation and Parking services will immobilize any vehicle displaying a fraudulent disabled permit and contact the FSU Police Department.

7. Visitors may park in ~~hourly metered~~ parking spaces or in any designated visitor parking

8. lot/facility provided appropriate fees are paid and time limits are not exceeded. All vehicles must be parked with the flow of traffic.

(b) The virtual permit year begins on August 15 and ends the following August 15. All permits, placards, and hang-tags will expire on August 15 each year.

(c) Permit Information: All persons affiliated with FSU that park on University property are required to register for a virtual permit and pay all related charges/fees.

(d) The Office of Transportation and Parking Services reserves the right to deny, restrict or revoke parking privileges to any individual who is in violation of the provisions of this Regulation. The fraudulent acquisition of a permit by giving incorrect information, falsified proof of status, or by any other means shall result in the issuance of violation(s), false registration -- fine code 05, to the individual(s) involved.

(e) Replacement Gate Access Cards and Virtual Permit Refunds. A replacement gate access card, if applicable, will be issued when a gate card is no longer serviceable. The original gate card must be returned to the Office of Transportation and Parking Services to qualify the holder for a replacement gate card due to defect. No refunds will be issued for returned temporary permits, gate cards or remote gate openers.

(f) Virtual Permit Classifications.

1. Faculty, Administrative and Professional personnel, and University Support Personnel System staff are eligible to register for "RP" virtual permits. Faculty, Administrative and Professional personnel, University Support Personnel System staff, Non-Student OPS employees of recognized FSU affiliated organizations or contracted services are eligible to register for "R" virtual permits. Both the "RP" and "R" virtual permits authorize parking only in designated "R" parking areas (as identified by red stall lines and/or entrance signage) or in areas specified for shared parking (as identified by alternating red and white stall lines and/or

2. entrance signage). In order to be appropriately registered for an "RP" or "R" virtual permit, the employee must provide the make, model, color, year, and license plate of each vehicle registered to the virtual permit (up to five vehicles per permit) and pay all required fees.

3. Visitors are eligible to purchase a "V" parking hang-tag, authorizing parking only in designated "W" and non-gated "R" parking areas. Faculty, staff and student affiliates, as well as employees of FSU affiliated organizations or contracted services, are not eligible to purchase a "V" hang-tag.

4. Students and Non-Student OPS employees are eligible to register for "VW" virtual permits. Vehicles that are registered to a "VW" virtual permit are authorized to park in designated "W" parking areas (identified by white stall lines and/or entrance signage) between the hours of 5:45 AM and 12:00 a.m. on all class days in areas designated for commuter parking and 24-hours per day in areas designated for overnight parking. "VW" virtual permits can also park in areas specified for shared parking (as identified by alternating red and white stall lines and/or entrance signage).

5. Students are also eligible to register for a "VRES" virtual permit which allows 24/7 access to a designated reserved lot or area. To acquire this optional permit, students must provide the make, model, color, year, and license plate of each vehicle registered to the virtual permit and pay all required fees (\$325 – Academic Year or \$415 – Annual). . ~~This permit does not provide any other parking privilege.~~

6. Persons with FSU retired status who are no longer receiving any form of financial compensation for active employment may purchase an Emeritus or "E" virtual permit. The "E" virtual permit authorizes parking in any designated non-reserved faculty/staff parking area.

7. Individuals operating motorcycles, mopeds or motor scooters may purchase a "VMC" virtual permit authorizing parking in motorcycle parking spaces only.

~~8.~~ A temporary parking permit must be obtained when a substitute vehicle is parked on campus in lieu of an appropriately permitted vehicle. Temporary parking permits provide the same parking and driving restrictions as do virtual permits, based on the parking access provided to the virtual permit registrant. Except as otherwise stated, temporary permits are issued for a maximum of 10 working days per academic year. Anyone requesting a temporary permit for more than 10 working days must file a written statement certifying the extraordinary circumstances for the extension and certifying that the temporary permit and the registered virtual permit will not be used on campus simultaneously during the period. There is no charge for a temporary permit issued to virtual permit registrant for use on a substitute vehicle for a maximum of 10 working days per year.

~~9.~~ Commercial vendors and sales and service representatives are eligible to purchase commercial ("C") hang-tags. Vehicles bearing "C" hang-tags may park in any designated, ~~non-gated~~ unreserved parking space on campus. Commercial hang-tag holders may also utilize designated loading areas for 20-minute periods only, short-term parking spaces (2 hour maximum), and unreserved service vehicle spaces, as well as hourly parking spaces ~~meters~~ and visitor parking lots/facilities (provided appropriate fees are paid).

~~10.8.~~ Loading Zone hang-tags may be purchased on an individual basis to afford access to designated loading zones for loading or unloading of materials or equipment. "LZ" hang-tags are not valid in any other parking spaces on campus.

~~11.9.~~ Service vehicle hang-tags may be purchased by eligible service and technical support representatives. Vehicles bearing a valid "SV" hang-tag are eligible to park in designated unreserved service vehicle spaces with no time restriction and loading zones for a maximum of twenty (20) minutes. "SV" hang-tags are not valid in any other parking spaces on campus.

~~12.10.~~ Departmental hang-tags may be purchased by eligible FSU departments for use by

employees to conduct departmental business. Vehicles bearing a valid departmental hang-tag are eligible to park in unreserved "R" parking spaces and loading zones for a maximum of twenty (20) minutes.

~~13.11.~~ 13.11. Back-in hang-tags may be purchased by individuals with valid FSU virtual permits.

Vehicles bearing a valid back-in hang-tag are authorized to park in appropriate campus parking lots a back-in style. Back-in hang-tags are not valid in parking garages or in parking lots with angled parking spaces.

~~14.12.~~ 14.12. Temporary disabled parking placards or hang-tags will be issued by the Office of Transportation and Parking Services, upon determining eligibility, for a period not to exceed 21 calendar days. To be eligible to apply for a temporary disabled parking permit, the individual must have properly registered and paid for a valid virtual permit. Extension of the eligibility of a temporary permit for more than 21 calendar days will only occur upon receipt of a duly executed Florida Department of Highway Safety and Motor Vehicles Form 83039 S, which is incorporated herein by reference which contain "Disabled Person's Parking Permit a Physician's Statement of Certification", for issuing disabled parking permits at which time a placard or hang-tag will be issued for an additional period not to exceed 35 calendar days. This temporary disabled parking permit is non-renewable.

(g) Virtual permits, parking placards and hang-tags are issued to specific individuals or departments/organizations and are not transferable. The registered owner of the virtual permit, parking placard or parking hang-tag accepts responsibility of all fines when the permit is used by or displayed on any vehicle.

(h) An individual may purchase and maintain only 1 automobile virtual permit and 1 motorcycle virtual permit at a time during each permit year. This excludes any replacement permits issued.

(i) On the day preceding a home football game (including the spring football game) or as designated on lot/facility entrance signage, all vehicles must be removed by 11:59 PM in designated football lots. A map of football parking lots and facilities will be available on the Office of Transportation and Parking Services website.

(3) Parking Fees and Penalties.

(a) "VW" Student Transportation Access Fee. To be assessed each semester to all registered students. At the beginning of each academic year or upon the first registered semester for the academic year a virtual permit can be obtained by each student who has registered for classes. Each student who registers for a virtual permit and pays all related fees/rates shall be granted a "VW" virtual permit for their automobile or a "VMC" virtual permit for their motorcycle, scooter or moped. If a student owns both an automobile and a motorcycle, they shall have the option to purchase both a virtual permit for their automobile and a virtual permit for their motorcycle. It is the responsibility of the student to properly register their vehicle(s) for a virtual permit from the designated point of distribution. All annual permits shall expire on August 15 of each year.

(b) Fees for Transportation Services. The fees assessed for each type of parking credential, with the exception of the Student Transportation Fee and departmental charges, are subject to a sales tax mandated by the State Legislature. All transportation fees shall be posted on appropriate websites. Any fee increase/decrease to the Student Transportation Fee shall be approved by the Board of Trustees. The University President or designee shall have the authority to regulate all other fees associated with Transportation and Parking Services not addressed in this regulation.

(c) Fees for Visitor Parking Spaces/Lots/Facilities, Contractor Parking, and Special Event Parking. Fees for visitor, contractor, and event parking passes, hourly parking meters,

designated visitor parking lots/facilities, and campus special event reservations shall be determined by the Director of Transportation and Parking Services. All visitor, contractor and event parking rates will be posted ~~on parking meters~~ in the parking payment app, at the entrance of each visitor lot/facility, and on the Transportation and Parking Services website, as appropriate.

(d) Refund of Fees.

1. The Student Transportation Access Fee refund policy will be in accordance with University refund guidelines for local fees.

2. Virtual permits, parking placards, and parking hang-tags purchased on an annual or semester basis will not be refunded/canceled unless student has withdrawn from the University or employee is no longer employed by the University. In these cases, refunds will be made on a pro-rated basis on a monthly scale for unused parking and/or payroll deductions will cease at separation from the University.

3. No refunds will be issued for temporary permits or payroll deducted permits.

(e) Towing and Related Charges. If a vehicle is towed from University property, the standard towing fees will be paid by the owner or user of the vehicle directly to the commercial towing companies providing services authorized at the request of the University.

(4) Operation of Vehicles. Persons who drive vehicles on campus are subject at all times to the motor vehicle laws of the State of Florida, the Regulations of Florida State University and to the ordinances of the City of Tallahassee, where applicable.

(5) Parking of Vehicles.

(a) FSU reserves the right to regulate the use of any or all parking facilities, including the right to deny or revoke vehicle parking privileges to an individual or groups of individuals and to reserve parking facilities for the exclusive use of selected and designated individuals.

(b) The responsibility of locating a legal parking space rests with the operator of the motor vehicle. Lack of space will not be considered a valid excuse or reason for violating any parking regulation.

(c) Wrecker Services. Due to the nature of the University's on and off-street parking control activities the University utilizes local wrecker services on a rotational basis.

(d) Vehicles parked in violation of the provisions of this Regulation, abandoned on campus, deemed as a safety hazard by the FSU Police Department or Environmental Health and Safety, or failing to be registered for a valid virtual permit or display a current and valid parking placard or hang-tag shall be towed away and placed in commercial or University storage. Towing and storage charges, and any appropriate University fines, will be borne by the vehicle owner and must be paid before the vehicle will be released.

(e) All parking and traffic regulations apply 24 hours a day, 7 days a week except as follows:

1. "R" parking areas are reserved for the use of vehicles registered for "R", "RP", and "E" virtual permits, or vehicles displaying placards and hang-tags that provide parking in "R" parking areas, between the hours of 7:30 AM and 4:30 PM on all class days (or as otherwise noted by signage and/or gate equipment), examination periods, semester breaks and registration periods. "V" hang-tags may utilize ungated "R" parking areas only. These areas are delineated by signs and/or red parking lines. After 4:30 PM Monday through Friday, all valid FSU virtual permits, placards, and hang-tags are honored unless otherwise noted by signage.

2. "W" parking areas are reserved for the use of vehicles registered for valid "VW" virtual permits, or vehicles displaying placards and hang-tags that provide parking in "W" parking areas, between the hours of 7:30 AM and 4:30 PM Monday through Friday. These parking areas are delineated by signs and/or white painted parking lines.

3. Shared parking areas are reserved for the use of vehicles registered for valid FSU virtual

permits, or vehicles displaying placards and hang-tags that provide parking in shared parking areas, between the hours of 7:30 AM and 4:30 PM Monday through Friday. These parking areas are delineated by signs and/or alternating red and white painted parking lines.

4. Between 4:30 PM and 10:00 PM, Monday through Friday, all parked vehicles must be registered for a valid FSU virtual permit or display a valid parking credential and may park in any marked space in any unreserved parking area without regard to permit designation and may park in ~~general metered or~~ hourly parking spaces provided applicable fee has been paid. Reserved and disabled parking regulations are still enforced.

5. Between 10:00 PM and 7:30 AM, Monday through Friday and all day on weekends, no virtual permit or valid parking credential is required to park in any marked space in any unreserved parking area. ~~Metered and H~~ourly spaces may be used without charge. Reserved and disabled parking regulations are still enforced.

(f) General disabled spaces are restricted 24 hours a day, 7 days a week to vehicles bearing valid State disabled parking permits as provided in section (2)(a)6 of this Regulation, or temporary disabled parking permit as provided in section (2)(f)11.

(g) General disabled spaces may be designated as time limited. The time limitation will be posted on the sign. Vehicles parked in the time limited disabled space for longer than the maximum time are subject to the issuance of a fine code (01) citation. Accessible spaces in gated lots shall be designated for faculty, staff or student affiliates whose vehicle is properly registered to a valid FSU virtual permit and valid Department of Motor Vehicle Disabled Parking Permit. Vehicles without a valid FSU virtual permit are not authorized to park in the restricted disabled spaces.

(h) Spaces reserved for individuals, University/State vehicles or specific University facilities are

restricted 24 hours per day, 7 days a week, unless otherwise posted.

(i) Motorcycle, moped, or motor scooter spaces are restricted to motorcycles, mopeds or motor scooters 24 hours per day, 7 days a week. Motorcycles, mopeds, or motor scooters may park in ~~hourly metered~~ spaces as long as all fees are appropriately paid. Motorcycles may not park in non-~~hourly metered~~ automobile spaces and may not park in any gated lot or facility.

(6) Fine Structure.

(a) The following practices are specifically prohibited. The fine for each infraction shall be as follows:

1. Parking illegally on University property to include but not limited to: parking without a valid virtual permit, parking placard, or parking hang-tag in restricted lots; parking multiple vehicles on campus that are assigned to a single virtual permit; back-in parking without authorization; back-in parking in a campus parking garage or parking lot with angled parking; parking in an access lane; blocking access to spaces, lots, facilities, drive aisles, or streets; parking without the appropriate virtual permit, parking placard, or parking hang-tag for the space, lot, or facility used; obstructed license plate; virtual permit vehicle information entered incorrectly; improper parking in a loading zone; parking on lawns, landscape or sidewalks; parking in a "No Parking" or non-designated parking area; overtime parking in ~~a metered space~~, hourly spaces or time limited spaces -- fine code 01. The fee assessed for this violation: \$30.00.

2. Boot Fee. Administrative charge for vehicle that is immobilized for unpaid parking citations. Citation is placed on identified vehicle and the payment must be paid with other outstanding citations before the boot is removed from the vehicle. Fine code 02 violation. The fee assessed for this violation: \$50.00.

3. Parking in a fire lane or any area designated and marked as a fire lane -- fine code 03. The fee assessed for this violation: \$100.00.

4. Parking in a disabled space without authorization, blocking disabled spaces or access aisles, or with a disabled permit being used fraudulently -- fine code 04. The fee assessed for this violation: \$250.00.

5. False registration. Falsification of proof of status to obtain an FSU virtual permit, motorcycle permit, parking placard, or parking hang-tag or purchase of a virtual permit, motorcycle permit, parking placard, or parking hang-tag by an authorized individual for use by or resale to an unauthorized individual. Failure to provide correct vehicle information within seven working days. Use of a parking permit, placard, or hang-tag listed as stolen or lost. Use of an altered or forged parking permit, placard, or hang-tag. Misuse and fraudulent use of a virtual permit, motorcycle permit, parking placard, or parking hang-tag or unauthorized use or possession of a gate opening device -- fine code 05. The fee assessed for this violation: \$100.00.

6. Parking in a designated reserved space, reserved lot/facility, or ~~bagged~~ hourly spacemeter -- fine code 06. The fee assessed for this violation: \$100.00.

7. Parking in designated bus loading zone during operating hours -- fine code 07. The fee assessed for this violation: \$100.00

(b) Late Fee. A \$10.00 late fee is assessed on all parking citations that are unpaid or uncontested after thirty (30) calendar days from issuance.

(7) Disposition of University Parking Citations.

(a) Uncontested. Persons wishing to pay the fine for any University Parking Citation shall do so at Student Financial Services or designated point of payment, in accordance with the schedule of fines.

(b) Contested. Any person wishing to contest a University Parking Citation shall proceed as follows:

1. Notice. Such person shall, within 30 calendar days from the date on which the citation was issued, file a written notice of election to contest the citation with the Office of Transportation and Parking Services.

2. The Florida State University Parking Violations Appeal Form, identified as FSU Form No. MP-03, Eff. 8-89, and the instructions contained therein are adopted by reference. Copies of the form may be obtained from the Florida State University Office of Transportation and Parking Services, Tallahassee, Florida.

3. Disposition by Director. The Director or designee shall review timely received written appeals or completed Form MP-03, and as soon thereafter as practicable, issue a written finding that the person charged is either in violation or not in violation of the University parking Regulation designated on the citation. Any person found to be in violation shall within 14 calendar days of issuance of the Director's written findings, either pay the applicable fine or give notice of his or her intent to seek review by the Transportation Violations Appeals Board. Such notice shall be given by completing a Transportation Violations Appeals Board Form MP-01 and filing it with the Board Coordinator. At the time of filing Form MP-01, if applicant wishes to have the issuing officer present at the Appeal Board hearing they must specifically indicate this request on Form MP-01. This is the only time the request can be made.

4. The Florida State University Transportation Violations Appeal Board Form, identified as FSU Form No. MP-01, Eff. 8-89, and the instructions contained therein are adopted by reference. Copies of the form may be obtained from the Florida State University Office of Transportation and Parking Services, Tallahassee, Florida.

5. Transportation Violations Appeals Board. Any person for whom an appearance before the Board has been scheduled may appear personally, or submit a written presentation, or both. Any person making a written submission only, must submit it to the Board Coordinator at least

1 working day prior to the date on which the appearance is scheduled. A person appearing in person before the Board desiring to have the presence of the issuing officer at the hearing must request the presence of the officer at the time of scheduling the date and time of hearing. This request will be indicated on the filed Form MP-01. If an individual indicates a desire to appear personally, the Coordinator will schedule an appearance and give the person written notice of the date, time, and place thereof. A person appearing in person before the Board may also introduce witnesses but shall be responsible for securing the presence of such witnesses. In any appearance before the Board, whether in person or in writing, a person may raise any matter relevant to the Board's decision. Any person who is unable to appear personally at the time scheduled, but wishes to do so, can reschedule an appearance by contacting the Board Coordinator at least 3 working days prior to the originally scheduled appearance and showing good cause why the appearance should be rescheduled. The Board shall have the authority to continue any person's appearance to a subsequent date, time, and place, whenever the Board Chairperson determines that such a continuance is necessary to dispose of the matter. The Appellant may only cancel and have rescheduled one Board

hearing. After one such cancellation the Board will proceed with the rescheduled hearing and in the absence of the Appellant, will consider the Appellant's completed Transportation Violations Appeal Form MP-03 as the Appellant's appeal presentation. After the conclusion of a proceeding before the Board, the Board shall issue in writing its decision to either affirm the Director's findings, affirm the Director's decision and reduce the fine, or reverse the Director's decision and dismiss the citation. The decision of the Board shall be final. The proper initiation of a proceeding to contest a citation shall serve to suspend the 14-working day deadline for timely payment of fines for the period that the proceeding is pending.

(c) Automatic Adjudication. All persons are subject to an automatic adjudication of guilt for failure to respond to a citation within 30 calendar days following the violation. In such case, the appropriate fine, plus an additional penalty, shall be imposed. Any person who is automatically adjudicated guilty may appeal in writing to the Transportation Violations Appeals Board for waiver of the automatic adjudication of guilt and the additional penalty. This appeal must be made within 180 calendar days from the date of the issuance of the citation. If the Board determines that there are extenuating circumstances justifying a waiver, the individual shall be given the prerogative of appealing the citation itself to the Board.

(d) Confidentiality. In any case in which a student is the alleged violator, the records of proceedings before the Director and the Board shall be disclosed only in accord with Sections 1002.22 and 1006.52, Florida Statutes.

(e) Non-Compliance, Sanctions. In addition to the obligation to pay the appropriate fine and penalty, the following additional actions shall be taken, and sanctions imposed in the following circumstances:

1. In the case of a person who fails to either pay the applicable fine or give notice of his or her election to contest a University Parking Citation, within 30 calendar days of the date of issuance of such citation; or who fails to pay the applicable fine within 30 calendar days of the date of issuance of written decision of the Transportation Violations Appeals Board, affirming the individual's adjudication of violation, the Director of Transportation and Parking Services is authorized to revoke, suspend, or restrict the on-campus driving and parking privileges of such individual and take such further action as necessary to enforce the revocation or restriction of privileges and shall cause the matter to be referred as appropriate to the University Controller, the Dean of Students or the University Personnel Relations Department, or some combination thereof, for further action.

2. All matters so referred to the University Controller shall be deemed to be accounts receivable and the Controller shall take the necessary action to collect such debts. In the case of students, such necessary action shall include: refusal of permission for such students to register and withholding of transcripts and diplomas from such students until the debt has been paid. In the case of employees such necessary action shall include: involuntary payroll deductions, pursuant to Regulation FSU-2.022, F.A.C., until the debt has been paid.

3. All matters involving faculty employees shall be referred to the Office of the Dean of the Faculties for appropriate action taken in accordance with applicable provisions of the Florida Statutes, University Regulations governing faculty employment, and any applicable faculty collective bargaining agreement. All matters involving non-faculty employees shall be referred to the Assistant Vice-President and Chief Human Resources Officer or designee for appropriate action taken in accordance with applicable provisions of Florida Statutes, Regulation FSU-4.070, and any applicable collective bargaining agreement.

4. Following revocation, suspension or restriction of on-campus driving and parking privileges, the Director shall lift said revocation, suspension or restriction once the applicable fines, charges, and penalties have been paid and all other requirements for registration have been met.

5. Either the Director of Transportation and Parking Services or the Parking Violations Appeals Board, shall, for good cause shown, provide for a longer period of time in which to pay the applicable fine. Good cause shall include, but not be limited to: (1) compelling personal or family financial obligations or inability to pay; or (2) percent of fine in relation to an individual's available income exceeds 25%. In such cases, no further sanction or penalty as described herein shall be imposed on account of the outstanding fine, until such time period has elapsed without full payment being made.

6. Immobilization; "Booting". A motor vehicle parked upon the University campus may, at any time, by or under the direction of an officer or staff member of the Department of Public Safety or an employee of the Office of Transportation and Parking Services, be immobilized in such a manner as to prevent its operation. A vehicle will be considered "bootable" in accordance with due process and based on a citation history, when 3 or more parking citations are outstanding against a responsible individual or if pending parking citations total \$90.00 or more.

a. Upon immobilization of such motor vehicle, the officer or employee shall cause to be placed on such vehicle, in a conspicuous manner, sufficient notice to warn any individual that such vehicle has been immobilized and that any attempt to move such vehicle might result in damage to the vehicle and is grounds for criminal charges for grand theft.

b. The individual responsible for the vehicle shall have the right to a probable cause hearing before the chairperson of the Transportation Violations Appeals Board or his or her designee, provided such a hearing is requested within 15 calendar days from the date the notice of immobilization is received. The purpose of the hearing is to determine if there is probable cause for continued detention of the vehicle. No hearing will be held unless requested in writing by the individual responsible for the vehicle or his or her agent at the Office of Transportation and Parking Services. The hearing shall be held within 72 hours from receipt of said written request, and the decision shall be issued in writing within 24 hours from the close of the hearing. In lieu of the probable cause hearing, or pending such hearing, where probable cause is found at such hearing, the individual responsible for the vehicle or his or her agent may obtain release of the vehicle by depositing security in the amount of immobilization charges and all delinquent fines and penalties to the Director of Transportation and Parking Services, or his/her designee.

c. If the chairperson or his or her designee finds probable cause to immobilize a vehicle, upon request of the individual responsible for the motor vehicle, a date shall be set for full evidentiary hearing before the Transportation Violations Appeals Board. Pending this hearing, the vehicle may be released as provided in (6) (b) above.

d. If no probable cause is found to impound a motor vehicle, it shall be released without requiring the individual responsible for the vehicle to pay the administrative charge for immobilization. If the motor vehicle was previously released upon payment of security, such payment shall be refunded.

e. Failure to request a probable cause hearing within 15 calendar days from the date of the notice of impoundment is received constitutes a waiver of said hearing and the vehicle shall be released only upon payment of the impoundment charges and delinquent fines or penalties.

f. The immobilization device or mechanism shall remain in place for 48 hours, unless the individual responsible for the vehicle has complied with subsection (b) above. If such compliance has not occurred within 48 hours, the vehicle shall be towed and impounded. This subsection does not preclude the towing in the first instance of the vehicle which, because of the number of outstanding parking citations against it, is subject to towing and impoundment pursuant to the other provisions of this Regulation.

Specific Authority Specific Authority: Art. IX, Sec 7, Florida Constitution, , Florida Board of Governors Regulations 1.001(3)(j), (7)(k), 7.003(9), (10), Florida Board of Governors Regulation Procedure, 7-21-07, Law Implemented 1006.66, 1009.24(14)(r), FS History--New 9-30-75, Amended 3-2-77, 8-28-79, 8-12-85, 4-16-86, Formerly 6C2-2.09, Amended 7-14-87, 8-1-88, 8-1-89, 4-24-90, 11-4-91, 8-17-92, 9-27-93, 12-14-93, 10-28-94, 9-17-95, 8-25-98, 7-20-99, 8-17-00, 8-3-05, 6-9-06, 2-11-2007, 6-13-2008, 6-25-2010, 9-9-2011, 6-7-2013, 10-9-2015, 6-7-2019, 8-13-2020, 6-22-2022, _____



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM M



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
Regulation Amendment FSU-2.02414, Waivers and Exemptions of Tuition
and Fees

Note: This amendment was approved as an Emergency Regulation amendment at the June 15, 2023, Board Meeting. Per Board of Governors procedures, such Emergency Regulations are adopted prior to full notice and are temporary for 90 days. The permanent amendment now requires approval after full notice.

The Florida Legislature and, in turn, the Florida Board of Governors periodically amend the laws regarding tuition and fee waivers. The Legislature generally creates new mandatory waiver categories which are automatically adopted under the FSU Regulation. Sometimes discretionary waiver categories are created, and this category of waivers have previously been addressed on an individual basis.

In the latest session, the legislature has created a specific new permissive waiver, for “intercollegiate athlete receiving an athletic scholarship.” The proposed amendment, already adopted as a temporary emergency regulation, will allow adoption of all such permissive waivers when approved by the President subject to stated criteria. Such approved waivers would have to be consistent with university mission, financial resources and subject to any specific legal requirements or restrictions for that waiver category. Such procedure and practice are consistent with our peer SUS institutions.

I recommend your approval of this amendment.

KC

Attachment

FSU-2.02414 Waivers and Exemptions of Tuition and Fees

(1) The Florida State University Board of Trustees may waive tuition and fees for purposes which support and enhance the mission of the university not otherwise in conflict with applicable law or regulation for specific defined categories of students by board approval.

(2) Tuition and fees are waived as provided below:

(a) Tuition and fees will be waived by the president or president's designee for participants in sponsored institutes and programs consistent with BOG 8.002(3).

(b) Tuition and fees are waived for the following where mandated in sections 112.19, 112.191, 112.1915, 1009.26, 1009.25, 1009.26, 1009.265, Florida Statutes and Board of Governors Regulation 7.007, 7.008, including any restrictions or qualifications provided therein. The President may waive tuition and/or fees where Florida Statute or Board of Governors Regulation permits the waiver as optional, stating the university may waive, consistent with university mission and financial considerations and including any applicable restrictions or qualifications.

(c) Unless provided otherwise through a university scholarship, full-time university employees who meet academic requirements may receive waivers of up to 6 credit hours of tuition-free courses per term on a space available basis. When applicable, the non-resident tuition fee is also waived.

(d) Non-resident students who are non-degree seeking are entitled to waiver of the non-resident fee if the hours generated by such students are non-fundable and the cost of the program of study is recovered from the fees charged to the students.

(e) Intern Supervisors – Persons who supervise interns for institutions with the State University System shall receive one non-transferable certificate (tuition and fee waiver) for each full academic term during which the person serves as an intern supervisor. This certificate will define what portion of tuition and fees are to be waived.

(f) Florida residents 60 years of age or older are entitled to waiver of tuition and fees as provided by Regulation FSU-2.0245, F.A.C., and Section 1009.26(4), F.S. and BOG 7.008(4).

(g) A student enrolled through the Florida Linkage Institutes Program within limits provided by BOG 7.008. pursuant to Section 288.8175(5)(b), (6), F.S.

(h) Out-of-state per credit hour fees for qualified graduate students from the Alabama and Georgia counties listed below may be granted waivers for attendance at the Panama City Campus, provided those students pay a \$20.00 differential out-of-state fee per credit hour: in Alabama-Baldwin, Barbour, Clarke, Coffee, Conecuh, Covington, Crenshaw, Dale, Escambia, Geneva, Henry, Houston, Mobile, Monroe, Pike and Washington; in Georgia- Baker, Decatur, Early, Miller and Seminole.

(i) Up to 100% of the out-of-state per credit hour fees for undergraduate students whose enrollment will ensure the continued progress of preeminence, performance, and other established academic metrics. These waivers shall be determined by the University Provost for the following categories-

1. Students in fine and performing arts programs (ex: Art, Dance, Music, and Theater);
2. Undergraduate students that demonstrate outstanding academic achievement upon admission; and
3. Students completing the First Year Abroad program requirements.

(j) Any tuition or fees waived or excepted by applicable Florida Statute or Board of Governors Regulation.

The university shall waive the activity and service, health, athletic, and material and supply fees assessed on a per credit hour only if a student's tuition is waived for all credit hours. If a student pays a portion of the assessed tuition and fees, that student shall pay in full, the activity, health, athletic, and material and supply fees assessed on a per credit hour basis.

Specific Authority BOG Regulation 1.001(3)(j); Reg. Procedure July 21, 2005. Law Implemented 112.19, 112.191, 112.1915, 1009.24(4), (5), 1009.25, 1009.26, 1009.265 FS., BOG 7.007, 7.008, 8.002, History--New 5-5-03, Amended 10-21-04, 11-20-20. Amended _____



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM N



MEMORANDUM

TO: Richard McCullough, President

FROM: Amy Hecht
Vice President for Student Affairs

DATE: August 21, 2023

SUBJECT: Approval of Student Conduct Regulations Amendments

FSU-3.004 Student Conduct Code
FSU-3.0041 Student Organization Conduct Code

These amendments bring the Regulations in closer conformance with current Office of Civil Rights advice and also clarify the provisions based on experience and changes since the last revisions.

1. FSU-3.004 Student Conduct Code

Summary

The following are significant changes to the Student Conduct Code, please refer to text for exact detail:

- * Clarifies definition of admitted student to include online student
- * Expands amnesty provisions to include sexual misconduct cases
- * Exclude legitimate athletic contests from the definition of hazing and defines circumstances not considered defenses to hazing
- * Revision of offenses for on-campus possession or use of firearms, destructive devices, or other weapons consistent with current aw
- * Includes trespass within offense of unlawful entry
- * Includes unlawful entry into opposite sex restroom as a property offense



FLORIDA STATE UNIVERSITY
DIVISION OF STUDENT AFFAIRS

- * Sets deadline for review of reconsideration of interim action and allows the scheduling of a review meeting
- * Includes “mind altering drugs” within scope of offense related to “Alcohol, Controlled Substances, and Illegal Drugs”
- * Includes student representation in periodic review of Code

2. FSU-3.0041 Student Organization Conduct

Summary

- * Applicable changes parallel to Student Conduct Code as above

I recommend the Board approve these amendments.

Approved for Agenda

President



Florida State University
Student Conduct Code
3.004

Table of Contents

| | |
|--|----|
| I. Definitions..... | 4 |
| II. Authority | 9 |
| III. Scope..... | 10 |
| IV. Amnesty..... | 11 |
| V. Violations..... | 12 |
| A. Sex Discrimination and Sexual Misconduct | 12 |
| B. Endangerment..... | 16 |
| C. Harassment..... | 17 |
| D. Invasion of Privacy..... | 17 |
| E. Hazing | 17 |
| F. Weapons and Dangerous Substances | 18 |
| G. Fire and Safety | 19 |
| H. Alcohol, Tobacco, Controlled Substances, and Illegal Drugs..... | 20 |
| I. Disruption and Obstruction | 21 |
| J. Falsification and Misrepresentation | 22 |
| K. Property | 22 |
| L. Computers | 22 |
| M. Gambling..... | 23 |
| N. Other Violations | 23 |
| O. Title IX Compliance Policy..... | 23 |
| VI. Procedural Standards | 25 |
| A. Advisors | 25 |
| B. Reports | 26 |
| C. Review and Investigation..... | 26 |
| D. Notice of Alleged Violation(s)..... | 29 |
| E. Information Session..... | 30 |
| F. Resolutions | 30 |
| G. Outcomes..... | 39 |
| H. Appeal Procedures..... | 41 |
| I. Record Keeping Practices | 44 |
| J. Amendments..... | 45 |

INTRODUCTION

The Student Conduct Code (further referred to as "Code") emphasizes Florida State University's (further referred to as "University") commitment to a campus community which exercises the responsible engagement of student freedoms. The pursuit of responsible freedom is consistent with the tenets of the Seminole Creed and efforts to promote civility at the University, as students balance their pursuit of excellence and exploration with consideration to the impact of behavior on themselves and others.

The Student Conduct Authority at the University embraces the University's commitment to an educational experience that provides students with an understanding of the complex moral issues inherent in human life and develops the knowledge and skills for effective and responsible participation in the world. The Code reemphasizes the dignity and worth of each person and substantiates the need for an inclusive environment to support the betterment of all persons associated with the University. "The University is a compassionate community. In its treatment of students, it recognizes the wisdom both of letting students experience the consequences of their actions and of providing the opportunity to learn and grow in ways that can overcome past difficulties" (General Bulletin, Florida State University, 2016).

The University fully recognizes and values the right of all students and individuals to seek knowledge, debate ideas, form opinions, and freely express views in accordance with the expectations set forth in this Code. The University supports the principles of free speech and civil discourse outlined in the Board of Governors' "Statement of Free Expression" ("Statement of Free Expression", Florida Board of Governors, 2019). This right must be exercised in a manner which will not interfere with the same rights and freedoms of others in their enjoyment of the benefits of the programs offered by this University, or their lawful use of University facilities, including ingress and egress (for more information, see the University's Freedom of Expression Rights and Responsibilities regulation). Additional expectations for student organizations are outlined in the Student Organization Conduct Code and other University rules, regulations, and/or policies.

The student conduct process is designed to be educational in nature and promotes the University's mission. Being a member of the University community is a privilege, and the conduct process will determine if a student's conduct warrants modification of or restriction upon that privilege.

I. DEFINITIONS

Terms specific to conduct prohibited by the Sex Discrimination and Sexual Misconduct Policy (FSU Policy 2-2 supplemented by 2-2a relating to Title IX specific requirements, also referenced as Title IX Compliance Policy) are defined in Appendix D of 2-2: Definitions and accessible at <https://regulations.fsu.edu/policies/office-president>

- A. **Advisor** - Any one person, who may also be an advocate or legal representative, chosen by a respondent, complainant, or witness to provide guidance throughout the student conduct process, and who may be permitted to participate fully during a disciplinary proceeding. Individuals are highly encouraged to select an advisor with reasonable availability. The advisor serves at the individual's own expense and may present at any proceeding. An involved party may permit their advisor to directly participate in all aspects of a proceeding, including the presentation of relevant information and questioning of witnesses.
- B. **Allegation** - An assertion that someone has engaged in behavior that may be a violation of the Student Conduct Code.
- C. **Administrative Measure** - Actions taken by the University to address or remedy a behavior separate and apart from a Conduct outcome. Actions include but are not limited to holds on student accounts, No Contact Orders, and additional non conduct University Directives.
- D. **Administrative Panel** - A group of students in addition to faculty or staff selected and trained by Student Conduct and Community Standards who serve as a hearing body with responsibility for adjudicating student conduct cases. Students shall comprise at least one-half of the membership.
- E. **Consent** - Consent to sexual activity must be: knowing, intelligent, unambiguous, and voluntary. Consent is active, not passive. This means there must be clear and willing participation, through words or actions, for each sexual act.
 - I. Consent to one type of sexual activity does not imply consent to other types of sexual activity. There must be consent at every stage of the sexual encounter
 - II. Past consent to sexual activity does not imply consent to future sexual activity.
 - III. Consent can be withdrawn at any time, including in the middle of a sexual encounter, if the withdrawal of consent is clearly indicated by words or actions. Meaning any indication of unwillingness, including but not limited to the following, terminates consent.
 - a. Any verbalization of no, stop, don't; I do not want, I am not sure, that hurts, etc.
 - b. Ceasing participation in sexual activity (e.g. freezing, or not actively engaging), pulling away, pushing someone away, removing someone's touch from a specific area, blocking someone from touching a specific area, etc.

IV. Individuals who are not of legal age, are incapacitated, or are forced cannot give consent to sex (no matter what they say or do); see definition of incapacitation.

V. Consent cannot be obtained by force. Force includes the use of coercion, intimidation, physical violence, and/or threats.

a. Coercion. Using an unreasonable amount of pressure, including alcohol or drugs, to have sexual contact with someone. Coercion is more than an effort to persuade, entice, or attract another person to have sexual contact. When a person makes clear a decision not to participate in a particular sexual activity, continued pressure can be coercive. In evaluating whether coercion was used, the University will consider frequency of the application; intensity; duration of the pressure and the degree of isolation imposed upon the individual being pressured.

b. Intimidation. An implied threat that menaces or causes reasonable fear in another person. A person's size alone does not constitute intimidation; however, it may be a contributing factor (e.g., blocking access to an exit.)

c. Physical violence. Use of physical violence and/or imposing on someone physically to control and engage in sexual contact or intercourse. Physical violence includes but is not limited to hitting, punching, slapping, kicking, restraining, choking, and brandishing or using any weapon.

d. Threats. Words or actions that would compel a reasonable person to engage in unwanted sexual activity. Examples include threats to harm a person physically, to reveal private information to harm a person's reputation, or to cause a person academic or economic harm.

F. **Incapacitation** - A state where a person cannot make knowing, intelligent, unambiguous, and voluntary decisions and therefore cannot give consent (e.g. cannot understand the who, what, when, where, why, or how of the sexual interaction). An individual can be incapacitated by voluntary or involuntary use of drugs (legal, illegal, or prescription) or alcohol, illness, mental impairment/disability, or by a state of being asleep or unconscious.

I. Incapacitation is a state beyond drunkenness or intoxication. The impact of drug and alcohol use varies from person to person. Whether an individual was incapacitated by substance use will be assessed by the totality of the information. Relevant factors include but are not limited to: stumbling or otherwise exhibited loss of equilibrium; slurred speech or word confusion; combativeness or emotional volatility; vomiting; incontinence; being disoriented or confused as to time, place, etc.; and/or loss of consciousness. In matters of accountability/culpability, the University will consider whether a Respondent knew or should have known that the Complainant was incapacitated. However, the use of drugs or alcohol by the person initiating the sexual activity is not an excuse for failing to obtain consent.

II. **Legal age.** The legal age of consent in Florida is 18; however, this Policy recognizes exceptions as defined by section 794.05, Florida Statutes. Legal age of consent may differ in various jurisdictions.

- G. **Day** - Any weekday Monday through Friday in which the University is in operation. This includes days when the University is in operation, but classes are not in session.
- H. **Hearing** - Any informal or formal disciplinary proceeding, conducted by a hearing body in accordance with the Code, following which determinations on responsibility and/or outcomes are made with regard to alleged Code violations and outcomes are assigned as appropriate. Alternative resolutions, restorative resolutions, information sessions, investigation meetings, or other meetings conducted by the University are not considered to be a disciplinary proceeding.
- I. **Hearing Body** - Any person or persons authorized by the Code to conduct hearings, to make a finding of whether a student has violated the Code, and recommend or assign outcomes as appropriate.
- J. **On-Campus** - All land, buildings, facilities, and other property in the possession of or owned, used, or controlled by the University, including adjacent streets, sidewalks, and parking lots. See also the definition of "University" below.
- K. **Policy** - The written statements governing the University as found in, but not limited to, the State of Florida Board of Governors regulations, the University's Board of Trustees regulations, policies adopted by the President or Vice Presidents, the Student Conduct Code, the Undergraduate General Bulletin, the Graduate General Bulletin, the Student Policy Handbook, the Registration Guide, the University Housing Guide to Residence Living, the Anti-Sexual Misconduct Policy, the Title IX Compliance Policy, and other written requirements of departments, organizations, and clubs.
- L. **Preponderance of the Information** - The standard of evidence upon which a determination of "responsible" or "not responsible" is made and is used in adjudicating all hearings under this Code. It means that the information, as a whole, demonstrates it is more likely than not that the fact sought to be proved is true. The individual bearing the burden of proof must present evidence/information which is more credible and convincing than that presented by the other individual or which shows that the fact to be proven is more probable than not.
- M. **Complainant** - Any individual who is alleged to be the victim of conduct that could constitute one or more violation(s) of the Code. The complainant is the individual who is affected and files a report or formal complaint or on whose behalf a report or formal complaint is filed.
- N. **Non-Sexual Consent** - As related to alleged violations of the Code that do not involve sex discrimination or sexual misconduct, consent is the voluntary, informed, and freely given agreement, through words and/or actions, to participate in mutually agreed upon behavior or activity.

- O. **Respondent** - A student who has been reported to be the perpetrator of conduct that could constitute one or more violation(s) of the Code.
- P. **Report** - Information submitted to a Student Conduct Authority alleging conduct that could constitute one or more violation(s) of the Code.
- Q. **Formal Complaint** - Information from a complainant or a University official alleging conduct that could constitute one or more violation(s) of the Code by a respondent.
- R. **Student** - Any individual meeting one or more of the criteria below. The term applies to all campuses, sites, locations and delivery methods of credit-bearing course offerings.
 - I. **Admitted.** Any person, regardless of academic career, who is admitted to the University and ~~accepts an offer of admission to participate~~ ~~is present on campus for the purpose of participating~~ in any University program, course, or activity leading to enrollment, including but not limited to online or in-person orientation, graduate student orientation, teaching assistant orientation, or workshops.
 - II. **Enrolled.** Enrolled in any credit-bearing course or program offered by Florida State University at the time any alleged violation(s) occurred.
 - III. **Active student.** Any person who has been enrolled at the University and continues to be associated with the University in order to complete the course or program in which the student was enrolled. "Active" status is determined by academic policy and is enforced by the Registrar's Office. This can include periods of non-enrollment during which the student is still eligible to enroll in classes. The term also includes any student who has been issued an Interim Health and Safety Action (IHSA) pending the outcome of a student conduct proceeding.
 - IV. **Dual enrollment.** Any student enrolled in a credit-bearing course on a dual-enrollment basis. Jurisdiction over a dual-enrollment student's conduct will be determined in consultation with appropriate officials at the student's home institution.
- S. **Student Conduct Authority** - An individual or administrative unit whose administrative duties include the administration of the student conduct process, including formal or informal action. Please see the section on "Authority" for more information. This definition includes, but is not limited to, the Office of the Vice President for Student Affairs, the Department of Student Conduct and Community Standards, University Housing, and International Programs or their successors.
- T. **University** - Florida State University, each of the programs and activities under its control, and all property owned, leased, used, or controlled by the University, including all branch campuses, study centers, facilities, and University International Programs' locations and property.

Commented [AC1]: The language in the scope section 2. would adequately limit the cases that we would pursue as a policy violation regardless of "student" definition change.

- U. **University Community** - Any person who is a student, faculty member, University official, visitor, contractor, volunteer, representative of the University, or any person employed by the University.
- V. **University Official** - Any person assigned to engage in teaching, research, administrative, professional, or other responsibilities while acting within the scope of their employment, appointment, or volunteer role with the University.
- W. **Student Conduct Board** - A group of currently enrolled students in good conduct standing selected and trained by the Department of Student Conduct and Community Standards to adjudicate student conduct cases as a hearing body excluding cases of alleged violations of the Anti-Sexual Misconduct policy (2-2) or Title IX Compliance Policy (2-2a) and cases that may result in a respondent's separation from the University.
- X. **Single Hearing Administrator** - Any University Official designated and trained by a Student Conduct Authority to facilitate meetings or information sessions and administer alternative resolutions, or to serve as the hearing body for informal or formal hearings.
- Y. **Residential Conduct Board** - A group of currently enrolled students in good conduct standing who each reside in University Housing and are selected and trained by University Housing to adjudicate student conduct cases for students residing in University Housing, excluding cases of alleged violations of the Anti-Sexual Misconduct policy (2-2) or Title IX Compliance Policy (2-2a) and cases that may result in a respondent's separation from the University.
- Z. **Student Organization** - An organization that has been approved by the Student Activities, as designee of the Vice President for Student Affairs, to function at the University. Further stipulations regarding recognition are outlined in FSU-3.0015 Student Organizations and Activities. For purposes of the Code, the term "student organization" also refers to a student group which is defined as any number of persons who are associated with the University and each other, but who have not registered, or are not required to register, as a student organization that conducts business or participates in University-related activities. This includes, but is not limited to, student organizations that are no longer recognized by the University and/or (inter)national organization.
- AA. **Law Enforcement Statement** - A sworn statement or report by a duly authorized law enforcement officer that may be relied upon by a hearing body in a student conduct proceeding.
- BB. **University Official Report** - A narrative or document prepared by a University employee in the course of their employment that provides information about an incident. Examples include, but are not limited to, Office of Title IX investigation reports and University Housing Incident Reports.

CC. Witness Statement - A narrative or document that is not part of a law enforcement statement or university official report and that is prepared and submitted as a part of the reporting of an incident or in lieu of a witness's live appearance at a conduct proceeding, which provides the information that the witness has regarding an alleged violation of the Code.

DD. Informal Resolution - The process by which a student may accept responsibility and outcomes for an alleged violation of the Student Conduct Code. This resolution is noted as a finding of responsibility and results in a student conduct record for the respondent.

EE. Notice - Notice is considered given to a student when it is sent to the student's official University email address, is hand-delivered to the student or current residence, or upon the University's receipt of a certified mail return receipt when communication is sent to the local address on file with the Office of the University Registrar or to the permanent address on file if a local address has not been provided.

FF. University Program or Activity - Locations, events, or circumstances over which the University exercised substantial control over both the respondent and the context in which the conduct occurs, and also includes any building owned or controlled by a student organization that is recognized by the University. A program or activity may include events, programs, and circumstances that occur in person, on a virtual platform, or via electronic communication or publication including but not limited to phone, email, text, or social media.

II. AUTHORITY

- A. Authority for student conduct ultimately rests with the Florida State University Board of Trustees which has delegated such authority to the President of Florida State University (hereinafter "President"). The Board further assigns authority through this Code, a Board Regulation. The President has delegated direct authority to the Vice President for Student Affairs (hereinafter "Vice President"). The Vice President delegates this authority to the Dean of Students and to the Executive Director of University Housing. Under the direction of the Dean of Students and the Executive Director of University Housing, the Associate Dean(s) of Students/Director of the Office of Student Conduct and Community Standards, the Assistant Dean(s) of Students, directors/program leaders of International Programs, and appropriate University Housing staff are responsible for implementing the student conduct system. Implementation includes, but is not limited to, selection and training of hearing bodies.
- B. The President, Vice President, Dean of Students, Executive Director of University Housing or their designees, or directors/program leaders in International Programs or their designees may take direct jurisdiction of any case when it is determined by the immediate circumstances that taking direct jurisdiction is in the best interest of the University.

- C. The President, Vice President, and Dean of Students or designee have the authority to designate individuals internal or external to the University as advisors or hearing or appellate officers, when appropriate.
- D. All hearing bodies have the authority to consult with other appropriate University officials in order to effectively resolve a student conduct case.
- E. The initial decision or recommendation of a hearing body is considered a hearing decision. If a hearing decision is not appealed as provided within the Code, the hearing decision becomes final agency action.
- F. The authority of appellate officers is further enumerated in the Code section on "Appeal Procedures." Appellate decisions are considered recommendations to the Vice President or designee and become final agency action upon approval by the Vice President or designee.
- G. Any reference in the Code to the role or responsibilities of a specific University official may be delegated by the University official to an appropriate designee.

III. SCOPE

Florida State University may address the alleged misconduct of any student as specified in the "Violations" section of this Code pursuant to the following:

- A. In any proceeding to determine whether a student has violated the Code, the University will apply the substantive Code provisions defining conduct violations that are in effect on the date the alleged conduct occurred. The University will apply the procedural standards, outlined in section [VIVIII](#), "Procedural Standards", that are in effect at the time the student is provided notice of the specific allegation(s) of code, regulation, or other policy violations, regardless of the date of the alleged violation.
- B. The Code will apply to student conduct that occurs on University premises, at University-sponsored activities and off-campus as determined by the Student Conduct Authority. Factors that will be considered when determining whether to address off campus conduct include, but are not limited to, whether the incident is documented by a verifiable source, adversely affects the University community, occurs at a University program or activity, or endangers the health or safety of a student or others.
- C. The Code applies to the University as defined in this Code. Non-substantive procedural [modifications that](#) reflect the particular circumstances of each campus or international program are permitted as approved by the Student Conduct Authority.
- D. The Code includes procedural standards that apply specifically to the resolution of violations of the Student Conduct Code that are not encompassed under Sexual Harassment as defined in, or that fall outside of the jurisdiction of the Title IX Compliance Policy. The University reserves the authority to determine what level of procedural standards will apply to a report

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or formal complaint and whether application of the appropriate procedural standards should change based on new or evolving information regarding a specific case. The University may, in its discretion, address conduct that has been dismissed during or as a result of the Title IX investigation process if the conduct or circumstances fall outside of the jurisdiction of the Title IX Compliance Policy but would fall within the other jurisdictions and provisions of the Code.

- E. Student conduct proceedings may be initiated for alleged conduct that potentially violates both law and University policy without regard to the pendency of civil or criminal litigation in court or criminal arrest and prosecution. Proceedings under these procedural standards may be carried out prior to, concurrently with, or following civil or criminal proceedings at the discretion of the Student Conduct Authority. Determinations made or outcomes imposed will not be subject to change because criminal charges or civil complaints arising out of the same facts giving rise to violation of University policy were dismissed, reduced, or resolved in favor of the respondent.
- F. The University may adopt the finding of fact in a criminal or civil proceeding with a similar or higher standard of proof and conduct an outcomes-only proceeding if appropriate.
- G. The University has up to 180 calendar days to resolve an alleged violation(s) of the Code with a respondent upon receipt of a report of a possible violation that includes enough substantive information to conduct an investigation by the Student Conduct Authority or upon receipt of an investigation report from the Office of Title IX . However, the University has discretion to extend this time period if deemed necessary to perform a thorough investigation, preserve fundamental due process, or due to other extraordinary circumstances.
- H. The University may restrict a student's contact with specified individuals when determined appropriate based on the facts or information and circumstances of each unique incident. The Student Conduct Authority can administratively issue such a restriction to any individuals involved in a conflict or incident, regardless of whether a determination of alleged violations has been made. Such restrictions are valid and enforceable only with respect to individuals who are students at the University.
- I. The University may determine what University personnel have an educational need-to- know regarding the status and/or outcome of conduct processes and to provide notice to relevant University personnel as determined by the Student Conduct Authority.

IV. AMNESTY

- A. An element of promoting safety is providing clear, responsible methods of reporting and addressing incidents of misconduct. Therefore, in order to remove potential barriers to reporting, the Student Conduct Authority, may in its discretion, not charge a complainant with a violation for conduct originating from the same incident if reported by that student in good faith to a University official, or otherwise discovered in investigation

B. The University's highest priority is the physical and mental health and safety of students and members of the University community. Therefore, no student seeking assistance for themselves or others as a result of a hazing incident, sexual misconduct, intoxication, or medical emergency from alcohol or other drugs will be charged with violation of the alcohol, controlled substances, and illegal drug or hazing provisions of the Code if:

1. The student calls local or University law enforcement or medical assistance;
2. The student cooperates fully with University, law enforcement, and medical personnel as applicable; and
3. The student remains at the scene with the person in need until assistance has arrived.

C. The University recognizes that during times of a public health emergency as declared by local, state, or national authorities the priority of gathering information regarding contact and exposure to contagion may be greater than resolution of a violation of the Student Conduct Code. Therefore, the University has discretion over whether a student will be charged with a violation of the Student Conduct Code if information is a result of providing important contact tracing information to University or public health officials.

Commented [CM4]: Added sexual misconduct to reflect that we would not pursue violations of substance use, if student in good faith was reporting potential sexual misconduct violations.

V. VIOLATIONS

Each student is expected to abide by these rules of conduct and to be accountable for their behavior. Lack of familiarity with the Code is not a justification for violating any provision of this Code. Unless specifically noted, intent is not a required element to establish a Code violation. Intoxication or impairment from alcohol, drugs, or other substances is not a justification for violating any provision of this Code. These rules of conduct should be read broadly and are not designed to define prohibited acts in exhaustive terms. See section O for Title IX Compliance Policy violations.

A. Sex Discrimination and Sexual Misconduct

1. Sex/Gender-based Discrimination

- a. Disparate treatment toward a person based on sex, gender, sexual orientation, gender identity, or gender expression which adversely impacts academic, employment, or other decisions related to University programs and activities.
- b. Maintaining seemingly neutral policies, practices, or requirements that have a disparate impact on academic or employment opportunities without a valid academic or business reason.

2. Sex/Gender-based Harassment. Conduct toward a person based on sex, gender, sexual orientation, gender identity, or gender expression that is so severe, pervasive, and objectively offensive that it creates a hostile work or educational environment for the person; and

- a. Unreasonably denies, interferes with, or limits an individual's ability to participate in or benefit from University programs, opportunities, or activities; or
- b. Alters the terms, conditions, or privileges of the person's University employment.

The totality of the circumstances will be considered in determining whether conduct is harassment, including frequency of the conduct, its severity, whether it is physically threatening or humiliating, or merely offensive. These circumstances are considered from both subjective and objective viewpoints, considering not only the effect the conduct had on the person, but also the impact it likely would have had on a reasonable person in the same situation. Repeated incidents, where each would not, on its own, constitute harassment, may collectively constitute harassment. Harassment may also be found in a single severe incident, as well as a pattern of behavior.

- 3. Sexual Harassment includes unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal, or physical conduct of a sexual nature when:
 - a. Submission to such conduct is made an explicit or implicit term or condition of employment, academic status, receipt of University services, or participation in University programs or activities, or submission to or rejection of such conduct is used as a factor in, or the basis for, an academic or employment decision; or
 - b. The conduct is so severe, pervasive, and objectively offensive that it creates a hostile work or educational environment for the person; and
 - i. Unreasonably denies, interferes with, or limits an individual's ability to participate in or benefit from University programs, opportunities, or activities; or
 - ii. Alters the terms, conditions, or privileges of the person's University employment.

The totality of the circumstances will be considered in determining whether conduct is harassment, including frequency of the conduct, its severity, whether it is physically threatening or humiliating, or merely offensive. These circumstances are considered from both subjective and objective viewpoints, considering not only the effect the conduct actually had on the person, but also the impact it likely would have had on a reasonable person in the same situation. Repeated incidents, where each would not, on its own, constitute sexual harassment, may collectively constitute sexual harassment.

- c. Sexual Harassment may also be found in a single severe incident, as well as a pattern of behavior. Examples of behavior that could constitute sexual

harassment when it meets the standard set forth above include, but are not limited to:

- i. Verbal Conduct: sexual teasing, sexual jokes, sexual innuendoes, sexual remarks about a person's body or sexual attractiveness, unwelcome demands for sexual favors, continuing unwelcome sexual advances or flirting, and sexual whistling (cat-calling).
 - ii. Non-Verbal Conduct: staring at someone's sexual body parts (breasts, buttocks, groin), sexual gestures, and inappropriate display of sexual graffiti, posters, pictures, cartoons, drawings, emails, texts, body parts, or objects.
 - iii. Physical Conduct: unwelcome touching of another's body, not otherwise defined by Non-Consensual Sexual Intercourse or Non-Consensual Sexual Contact, such as massaging, patting, hugging, rubbing, etc.
4. Sexual Violence. Includes any sexual act performed without the consent of the Complainant (or when the Complainant is unable to give consent), whether referred to as sexual violence, rape, sexual battery, or sexual assault. For purposes of this policy, sexual violence includes:
- a. Non-Consensual Sexual Contact. Any unwelcome, intentional contact of a sexual nature either under or over clothing, without consent with a person's breasts, buttocks, groin, genitals, mouth, or other intimate parts. This includes: touching of any of these intimate body parts; touching another with any of these body parts; forcing a person to touch you, or themselves, or another with any of these body parts; or any other intentional bodily contact in a sexual manner with any other body part.
 - b. Non-Consensual Sexual Intercourse. Any vaginal or anal penetration by a penis, tongue, finger, or object, or any mouth to genital contact, no matter how slight the penetration or contact, without consent.
5. Dating/Domestic Violence (Intimate Partner Violence). Is a single severe incident or pattern of abusive behavior in a relationship that is used by one partner to maintain power and control over another current or former intimate partner. Dating/Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes but is not limited to any behavior that intimidates, manipulates, humiliates, isolates, frightens, terrorizes, coerces, threatens, hurts, inures, wounds someone, prevents an individual from doing what they wish, or forces them to behave in ways they do not want, or property damage. It can also include abuse through the use of technology.
- a. Dating Violence. Violence between an individual who is or recently has been in a continuing and significant relationship of a romantic or sexual nature and

the other party. The existence of such a relationship shall be determined based on a consideration of the following factors: the length of the relationship; the type of relationship; and the frequency of interaction between the persons involved in the relationship.

- b. Domestic Violence. Violence between family or household members. Family/household members are, or are similarly situated to, spouses, former spouses, persons related by blood or marriage, persons who are presently residing together as if a family or who have resided together in the past as if a family, and person who are legal guardians of a child in common regardless of whether they have been married. With the exception of persons who have a child in common, the family or household members must be currently residing or have in the past resided together in the same single dwelling unit.

Dating/Domestic Violence also includes assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal violation.

- 6. Stalking. Engaging in a course of conduct (i.e. more than one act) directed at a specific person which would cause a reasonable person (under similar circumstances and with similar identities to the Affected Individual), to fear for the person's safety or the safety of others; or suffer substantial emotional distress. Acts that together constitute stalking may be direct actions or may be communicated by a third party, and can include, but are not limited to, threats of harm to self, another, or property; pursuing or following; non-consensual communication by any means; unwanted gifts; trespassing; and surveillance or other related types of observation. Stalking also includes cyber-stalking through electronic means including electronic mail, social media, cell phones, text messages, other communication applications, or the internet.
- 7. Sexual Exploitation. Any act where one person violates the sexual privacy of another or takes unjust or abusive sexual advantage of another without their consent for their own benefit or for the benefit of anyone other than the person being exploited. Sexual exploitation includes but is not limited to:
 - a. Causing or attempting to cause the incapacitation of another person for the purpose of gaining sexual advantage;
 - b. Prostituting another person (i.e., personally gaining money, privilege or power from the sexual activities of another) or sex trafficking;
 - c. Where there is a reasonable expectation of privacy, or without consent, the videotaping photographing or audio-recording of intimate, nude or sexual activity and/or distribution of these materials via media such as, but not limited to, the internet and other electronic/digital media;

- d. Exceeding the boundaries of consent. Including but not limited to: deviation from the agreed upon sexual contact with regards to use of a birth control method/option or other medication for prevention of pregnancy and sexually transmitted disease/infection transmission; knowingly exposing another to a sexually transmitted disease/infection without their knowledge or consent; or other omissions or falsifications that would imminently endanger the health or safety of the other party.
 - e. Engaging in indecent exposure (i.e. intentionally exposing one's genitals in public, or via electronic communication) with the intention of alarming, distressing, and/or offending others.
 - f. Soliciting a minor, or creation, possession, transmission, or distribution of child pornography.
 - g. Voyeurism, such as, watching a person undressing, using the bathroom, or engaging in sexual acts without the consent of the person being observed.
8. Retaliation. Any creation of a hostile environment or adverse action threatened or taken against an individual because they: make a report pursuant to this Policy; assist another person in making a report; participate in the investigation or resolution of such a report; in good faith and in a reasonable manner opposes conduct that they believe constitutes a violation of this Policy. An individual filing a good faith complaint, in and of itself is not retaliatory.
9. Complicity. Engaging in any action or behavior with the intent of aiding, facilitating, promoting, or encouraging the commission of an act of sexual misconduct.

B. Endangerment

- 1. Use of physical violence or unwelcome force against a person or the property of any person or group.
- 2. Action(s) that imminently endanger the health, or safety of another person or group.
- 3. Interference with the freedom of another person to move about in a lawful manner by force, threat, intimidation, or other means without consent.
- 4. Intentionally or negligently inserts or causes ingestion of a foreign substance into the body of another person without their consent. This includes, but is not limited to, drugs and substances not meant for human consumption.
- 5. Action(s) that endanger the health, safety, or well-being of an animal. This includes, but is not limited to, intentionally or unintentionally torturing or in a cruel manner killing or causing serious bodily injury to an animal; failing to provide necessary food, water, or care for an animal; unreasonably abandoning an animal in the student's custody;

transporting or confining an animal in a cruel manner; causing one animal to fight with another animal; or inappropriately overworking an animal. This provision does not prohibit any activity conducted as part of an approved academic or research program within the University.

C. Harassment

1. Conduct, not of a sexual nature, including any gesture, written, verbal or physical act, or any electronic communication (includes text messages and postings on web-sites or social media), that places a person in reasonable fear of harm to their person or damage to their property, infringes upon rights of personal privacy, has the effect of substantially interfering with a reasonable person's academic performance or ability to participate in opportunities or benefits provided by the University, or has the effect of substantially interfering with the orderly operation of the University.
2. Stalking, not of a sexual nature, defined as a course of conduct (i.e. more than one act) directed at a specific individual which would cause a reasonable person to experience substantial emotional distress, or to fear for their safety or the safety of another.

D. Invasion of Privacy

1. Unauthorized intrusion upon a person's private property or communications.
2. Unauthorized appropriation and/or use of someone's identifying or personal data or documents.
3. Using electronic or other means to make a video or photographic record of any person where there is a reasonable expectation of privacy without the person's consent. This includes, but is not limited to, taking video or photographic images in shower /locker rooms, residence hall rooms, private bedrooms, and restrooms. The sharing and/or distributing of such unauthorized records by any means is also prohibited. This section is not intended to restrict recordings of those expressive activities protected under s.1004.097, F.S. or other specific provisions of law.
4. Using electronic or other means to make an oral record of any person where there is a reasonable expectation of privacy without the person's consent. Such oral communications include, but are not limited to, recordings made using any device and any wire, oral, or electronic communication.

E. Hazing

1. Any individual action or situation, which occurs on or off University property, that intentionally, recklessly, or negligently endangers the mental or physical health or safety of a student for purposes including, but not limited to, initiation or admission into or affiliation with any University student organization or other group whether officially recognized by the University, or the perpetuation or furtherance of a tradition

or ritual of any such student organization or group. Hazing includes, but is not limited to:

- a. brutality of a physical nature, such as whipping, beating, branding, exposure to the elements, forced consumption of food, liquor, drug, or other substance;
- b. subjecting a person to extreme mental stress, such as sleep deprivation, forced exclusion from social contact, forced conduct that could result in extreme embarrassment, or other forced activity that could adversely affect the mental health or dignity of a reasonable person;
- c. pressuring or coercing a person into violating local, state, federal law and/or University policy;
- d. interfering with or impeding a person's academic pursuits, employment, religious observances, or affiliation with other individuals, groups, or activities; or
- e. otherwise infringing upon a person's personal or property rights or substantially interfering with a reasonable person's ability to participate in or benefit from the services, activities, or privileges provided by the University.

Hazing does not include customary athletic events or other similar contests or competitions or any activity or conduct that furthers a legal and legitimate objective.

- 2. Soliciting another or aiding or assisting another to engage in any act of hazing as defined in this Code, or active involvement in the planning of such action.
- 3. Observing or participating in any conduct defined as hazing pursuant to the Code by a member of the student organization or group who is not themselves a complainant, without reporting the incident to a University official.

The following circumstances do not constitute a defense to allegations of hazing:

- a. the consent of the victim had been obtained;
- b. the conduct or activity that resulted in the death or injury of a person was not part of any official organizational event or otherwise sanctioned or approved by the student organization or group; or
- c. the conduct or activity that resulted in the death or injury of a person was not done as a condition of membership into a student organization or group.

Florida State University Hazing Policy, BOG 6.021, and Section 1006.63, Florida Statutes are considered part of this Code and incorporated as applicable.

F. Weapons and Dangerous Substances

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1. On-campus possession or use of firearms, destructive devices, or other dangerous articles or substances not permitted under state or federal law, including but not limited to non-lethal weapons such as pellet guns, ~~BB.B.~~ guns, paintball markers, slingshots, crossbows, ~~stun guns, Tasers, metallic knuckles, -Tasers,~~ archery equipment, or any dangerous chemical or biological agent. This section shall not apply to:
 - a. any law enforcement officer who is a student or to any student ROTC member acting under the supervision of an ROTC unit in a manner proscribed by military regulations of the United States Government; or
 - b. any student whose possession of a weapon as described above is approved by the FSU Police Department for a bona fide educational purpose; or
 - c. a concealed firearm or other weapon kept for lawful purposes with or without a license by persons 18 years or older within the interior of a private vehicle, provided that such a firearm is not carried on the person and provided that a firearm or other weapon must be kept securely encased; or otherwise not readily accessible for use, consistent with section 790.25(5), Florida Statutes; or
 - d. a student ~~who possesses a concealed weapon or firearm license and is in possession of a stun gun or non-lethal electric weapon or device designed solely for defensive purposes and which weapon does not fire a dart or projectile as provided in Section 790.06(12)(a)-13-;~~ Florida Statutes; or-
 - e. Pepper spray/mace for the purpose of personal protection where permitted by local, state, or federal law.
2. On-campus possession or use of unauthorized knives. Bladed instruments or objects with longer than a four-inch blade are prohibited and include, but are not limited to, swords, hunting knives, daggers, dirks, stiletto knives, machetes, axes, hatchets, and switchblades are not permitted. This also includes items that may be considered decorative in manner, such as sword-canes, ornamental daggers, and swords.
 - a. Culinary knives used in designated areas for their intended purpose and common pocket knives with blades ~~s~~ of less than four inches are permitted
3. On-campus possession or use of fireworks, sparklers, and any item designed with the primary intention of exploding, including but not limited to: firecrackers, skyrockets, rockets, roman candles, and cherry bombs.
4. Off-campus, unlawful, or unauthorized possession or use of firearms, explosives, or other weapons or dangerous articles or substances in violation of state or federal law.

This section is authorized by Section 790.115, Florida Statutes. In accordance with Section 790.33, Florida Statutes, nothing in this section is intended to prohibit or

regulate the lawful possession of a weapon or firearm as defined in Section 790.0012, Florida Statutes, except as permitted by law.

G. Fire and Safety

1. Inappropriate activation of any emergency warning equipment or the false reporting of any emergency.
2. Unauthorized possession, or removal of, damage to, or tampering with fire, safety, or other emergency warning equipment.
3. Failure to evacuate a University building or facility within a reasonable amount of time after a fire alarm is sounded.
4. Setting or attempting to set any unauthorized fire or creating a safety hazard.
5. Obstructing the egress of an emergency exit or leaving exit, fire, and/or smoke doors propped open, or entering or exiting buildings through emergency-only doors or egresses during non-emergencies.
6. Presence on the roofs of University buildings, fire escapes, ledges, service elevators, balconies, and other areas that are designated as closed or where access is prohibited.
7. Unauthorized on-campus use of any remote-controlled aircraft or vehicle (i.e., drones) or failure to comply with established guidelines for authorized use of remote-controlled aircraft on or off-campus.

H. Alcohol, Tobacco, Controlled Substances, and Illegal Drugs

1. Unlawful possession, purchase or attempted purchase, misuse, or misappropriation of controlled substances, including prescription medication.
2. Possession, purchase or attempted purchase, or use of illegal drugs.
3. Actual or intended distribution, delivery, manufacture, or sale of illegal drugs or controlled substances.
4. Possession or use of drug paraphernalia.
5. Students must comply with all federal, state, and local laws pertaining to alcohol and tobacco. No person under the legal age may possess, purchase, attempt to purchase, consume, be under the influence of, distribute, sell, provide, or be provided alcoholic beverages or tobacco products.
6. Control or operation of a wheeled conveyance while under the influence of alcohol or any controlled substances or illegal drugs.

7. Disrupting the campus or off-campus community or engaging in any law or policy violation while under the influence of alcohol, [mind-altering substances](#), controlled substances, or illegal drug.
8. Hosting by owners, residents, or others in control of the event or property where the underage consumption of alcohol, illegal use of controlled substances, or illegal drug use occurs, including in a residence hall room, residence hall common area, or off-campus personal residence or any space that is occupied by, under the control of, or reserved for the use of a student or student organization.
9. Any other violation of the University Alcohol Policy, FSU Regulation FSU-6.012.

I. Disruption and Obstruction

1. Failure to comply with the lawful order or reasonable request of an identified University official, any non-University law enforcement official, any non-University emergency responder, or any protective order.
2. Providing false or misleading information to a University official, law enforcement official, paramedics, or other medical staff. This may include allowing an advisor, advocate, or legal representative to submit false or misleading information on behalf of the student.
3. Commercial solicitation on campus without prior written approval from appropriate University officials.
4. Acts that disrupt the University student conduct process or other University investigation, adjudication, or resolution process. Examples may include but are not limited to: attempting to coerce or influence a person regarding the reporting of a student conduct violation or a person's participation in any student conduct proceeding; avoiding or impeding communication in regard to a conduct proceeding; or actively disrupting a meeting or proceeding.
5. Urination or defecation in a space not designated for such use.
6. The unauthorized sale or attempted sale of University provided resources or facilities, including but not limited to University-issued student tickets, seats in a class, etc.
7. Any disruption of normal University operations caused by a student's guest or animal.
8. Behavior which disrupts or obstructs student learning, instruction, research, administrative or other University operations or previously scheduled or reserved on-campus activities.

9. Obstruction of free flow of pedestrian or vehicular traffic.
10. Unreasonable disruption of peace, academic study, or sleep of others on or off campus.
11. Retaliation against another for making a report of conduct that may be in violation of this Code or other University policy, or for participating in an investigation, process, or hearing. Making a report that is not made in good faith may be considered retaliation. See the Title IX Compliance Policy or Anti-Sexual Misconduct Policy for prohibited conduct defined as retaliation in that policy.
12. Interfering or attempting to interfere with an individual's attempt to contact law enforcement, emergency responders, or other form of aid.

J. Falsification and Misrepresentation

1. Engaging in the falsifications or misrepresentation of identity, including but not limited to:
 - a. Possession, ownership, or use of false identification or another person's identification.
 - b. Impersonating or misrepresenting the authority to act on behalf of another individual, organization, group, or the University.
 - c. Manufacture, distribution, delivery, sale, or purchase of false identification.
 - d. Permitting another person to use any form of the student's identification.
2. Forgery, alteration, unauthorized duplication, or misuse of identification, documents, communications, event tickets, records, keys, or access codes.
3. Falsifying, or being party to the falsification of, any official identification card, record (including oral or written communication), or document. This includes providing false information in report, investigation, or University conduct resolution meeting or proceeding.

K. Property

1. Defacement, damage, or destruction of property.
2. Theft, defined as removing, relocating, or using the property or services of another person, off-campus entity, or of the University.

3. Receipt, possession, sale, or purchase of property or services that are known or reasonably should have been known to have been stolen or obtained through unlawful means.

4. Entering or using the property or facilities of another person(s) or entity without consent or authorization or refusing to depart when directed by a university official.

~~5. Willfully entering a restroom or changing facility designated for the opposite sex on campus, and refusing to depart when directed by a university official with the exception of the following circumstances:~~

~~a. to accompany a person of the opposite sex for the purpose of assisting or chaperoning a child under the age of 12, an elderly person, or a person with a disability or developmental disability;~~

~~b. For law enforcement or governmental regulatory purposes;~~

~~c. For the purpose of rendering emergency medical assistance or to intervene in any other emergency situation where the health or safety of another person is at risk;~~

~~d. For custodial, maintenance, or inspection purposes, provided that the restroom or changing facility is not in use; or~~

~~e. If the appropriate designated restroom or changing facility is out of order or under repair and the restroom or changing facility designated for the opposite sex contains no person of the opposite sex.~~

For purposes of this violation only, "sex" is defined as under the provisions of ~~Section~~ 553.865, Florida Statutes.

L. Computers

1. Unauthorized access or entry into a computer, computer system, network, database account, software, or data.
2. Unauthorized alteration of computer equipment, software, network, or data.
3. Unauthorized downloading, copying, or distribution of computer software or data.
4. Any other act that violates Florida law or the Florida State University Policies and Responsibilities for Use of Campus Computer and Network Resources.

M. Gambling

1. Engaging in or offering games of chance for money, property, goods, services, or other gain in violation of Florida law.

N. Other Violations

1. Violation of federal or state law, local ordinance, or laws of other national jurisdictions.

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2. Violation of any Florida Board of Governors Regulation.
3. Aiding, abetting, furthering, conspiring, soliciting, inciting, or attempting to commit any other violation of University policy, federal law, state law, local ordinance, or laws of other national jurisdictions.
4. Violation of any other University regulation or policy as defined in “Definitions” in this Code.
5. Violation of the Academic Honor Policy when the student is not currently enrolled in the related course or when the incident cannot otherwise be processed under the Academic Honor Policy. Refer to the Academic Honor Policy for violations and descriptions.

O. Title IX Compliance Policy Violations

The alleged conduct listed below will be resolved under the jurisdiction of the Title IX Compliance Policy and applicable procedural standards if the conduct occurred within a University program or activity within the United States

Sexual Harassment. Conduct on the basis of sex that satisfies one or more of the following:

1. A student employee of the University conditioning the provision of aid, benefit, or service of the University on an individual's participation in unwelcome sexual conduct; or
2. Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the University's education program or activity (may include sexual exploitation that also meets this definition); or
3. Sexual Assault: an offense classified as a forcible or nonforcible sex offense under the uniform crime reporting system of the Federal Bureau of Investigation:
 - a. Forcible Rape. Penetration, or attempted penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the complainant, or
 - b. Forcible Sodomy. Oral or anal sexual intercourse or attested intercourse with another person, forcibly and/or against that person's will or not forcibly or against the person's will (non-consensually) in instances where the complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity; or

- c. Sexual Assault With An Object. To use or attempt to use an object or instrument to penetrate, however slightly, the genital or anal opening of the body of another person, forcibly and/or against that person's will or not forcibly or against the person's will (non-consensually) in instances where the complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity; or
 - d. Forcible Fondling. The touching or attempted touching of the private body parts of another person (buttocks, groin, breasts) for the purpose of sexual gratification, forcibly and/or against the person's will (non-consensually), or not forcibly or against the person's will in instances where the complainant is incapable of giving consent because of age or because of temporary or permanent mental or physical incapacity; or
 - e. Incest: Nonforcible sexual intercourse between persons who are related to each other within degrees wherein marriage is prohibited by state law; or
 - f. Statutory Rape: Nonforcible sexual intercourse with a person who is under the statutory age of consent.
- 4. Dating Violence: violence, not limited to sexual or physical abuse or the threat of sexual or physical abuse, committed by a person who is or has been in a social relationship of a romantic or intimate nature with the complainant; and where the existence of such a relationship shall be determined based on a consideration of the following factors: i) the length of the relationship, ii) the type of relationship, and iii) the frequency of interaction between the persons involved in the relationship; or
 - 5. Domestic Violence: includes felony or misdemeanor crimes of violence committed by a current or former spouse or intimate partner of the complainant, by a person with whom the complainant shares a child in common, by a person who is cohabitating with or has cohabitated with the complainant as a spouse or intimate partner, by a person similarly situated to a spouse of the complainant under the domestic or family violence laws of the jurisdiction, 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 their jurisdiction; or
 - 6. Stalking: engaging in a course of conduct directed at a specific person that would cause a reasonable person to fear for his or her safety or the safety of others; or suffer substantial emotional distress.

VI. PROCEDURAL STANDARDS

A. Advisors

- 1. An advisor may participate in any disciplinary proceedings or speak on behalf of the respondent, complainant, or witness. Advisors will conduct themselves in compliance

with Rules of Decorum. In Title IX hearings only, the advisor must conduct questioning as described in the Title IX Compliance Policy.

2. Consultation with an advisor during a meeting, proceeding or hearing must take place in a manner that is not disruptive.
3. Identity of an advisor is required to be reported to the Student Conduct Authority at least three business days prior to a meeting, proceeding, or hearing.
4. Advisors may not be individuals who serve other roles in the process as outlined in this Code (i.e. hearing administrator, witness, etc.), or if service in an advisory capacity would unreasonably conflict with the fair administration of the student conduct process as determined by the appropriate Student Conduct Authority.
5. The University is not responsible for selecting or compensating an advisor for any student navigating the student conduct process. If a student does not have access to an advisor for purposes of student conduct procedural standards, a list of trained University community members is available upon request for the student to utilize if desired. In a process falling under the Title IX Compliance Policy, if a student does not have access to an advisor for purposes of the student conduct hearing, the University will provide a University representative to serve as an advisor.
6. The availability of an advisor to attend a student conduct meeting, proceeding, or hearing will not unreasonably interfere with or delay the student conduct process. For Title IX hearing proceedings, if a student's advisor does not appear the University will assign an advisor or delay proceedings as outlined in the Title IX Compliance Policy.
7. Once a meeting, proceeding, or hearing has been scheduled it will rarely be rescheduled due to unavailability of an advisor.
8. A representative from the University's Office of the General Counsel may also be present at any meeting, proceeding, or hearing.
9. An advisor will be required to comport with the expectations and guidelines outlined in the Rules of Decorum Policy to participate in any administrative meeting, investigation meeting, alternative resolution process, or disciplinary proceeding at the University.

B. Reports

1. Anyone may file a report with the University alleging that a student has violated the Code. Any report should be submitted as soon as possible after the incident takes place, preferably within 60 calendar days. When there is significant delay, the Student Conduct Authority's ability to resolve an incident may be difficult due to access to reliable information and witnesses. Therefore, the Student Conduct Authority has discretion whether to pursue resolution of a report and will only pursue a significantly delayed report when:

- a. The behavior falls under the Anti-Sexual Misconduct Policy (2-2) or Title IX Compliance Policy (2-2a); or
 - b. the conduct or respondent are deemed to pose a potential threat to the health or safety of an individual or the University community or other exceptional circumstances.
2. The Student Conduct Authority may receive reports or information pertaining to criminal or civil cases from the FSU Police Department, Tallahassee Police Department, Leon County Sheriff's Office, Division of Alcoholic Beverages and Tobacco, other law enforcement agency, or any municipal, state, or federal court.
 3. Reports may be accepted through alternate reporting mechanisms at the discretion of the Student Conduct Authority including but not limited to written communication, published information, or referral from another University department.
 4. For reports alleging sex discrimination or sexual misconduct, the reporting process can be found in the Anti-Sexual Misconduct Policy and/or the Title IX Compliance Policy. If a report alleges sexual misconduct and is reported via report.fsu.edu, the Student Conduct Authority will report the matter to the appropriate Office of Title IX authority, in accordance with the University's Anti-Sexual Misconduct Policy and/or Title IX Compliance Policy. The Office of Title IX will evaluate the report pursuant to the policy before it will be referred to Student Conduct and Community Standards to review for possible violations of the Code.

C. Review and Investigation

1. All reported information will be reviewed by the Student Conduct Authority to determine appropriate next steps.
2. Interim Health and Safety Actions may be issued pursuant to the Administrative Measures section of the Code.
3. Investigation
 - a. Upon receipt of a report, except for reports that are referred to the Office of Title IX, a prompt, thorough, and impartial investigation may be conducted by the Student Conduct Authority, other designated staff, or FSUPD if further information is required to determine appropriate resolution by the Student Conduct Authority.
 - b. Investigations will include a review of the submitted report, and other additional information, such as that gathered from investigation meetings with involved individuals or groups. Any involved individuals or groups will be interviewed and asked to share information they have regarding the incident including

documents (text messages, emails, photos, etc.) and identification of any additional witnesses who may provide direct information regarding the incident.

- c. Students may be accompanied by an advisor of their choice. Individuals are highly encouraged to participate in the process in order to allow for as thorough an investigation as possible; however, an individual may decline to participate in the investigation process.
- d. At the conclusion of an investigation, the investigating office or designated staff will produce an incident/investigation report and forward to the Student Conduct Authority for determination of appropriate referral, resolution or dismissal in accordance with University policy.

4. Administrative Measures

- a. Interim Health and Safety Actions. Interim actions may be initiated to protect the health or safety of individuals involved in an incident or investigation or in circumstances when a student is alleged to have engaged in conduct that poses a substantial risk to the University community or operations. IHSA's may be issued in conjunction with, or pending the outcome of, an investigative or adjudicative process of the Student Conduct Code, Student Organization Conduct Code, Anti-Sexual Misconduct policy, or Title IX Compliance Policy. For cases falling under the jurisdiction of the Title IX Compliance Policy, an interim health and safety action temporarily separating a student from the University or precluding participation in a course or courses must only be assigned when there is an immediate threat to physical health or safety of an individual that arises out of a report or formal complaint, or other aspect of the procedures described in the Title IX Compliance Policy. Other supportive measures and remedies may be instituted as described in the Title IX Compliance Policy.

- i. Interim action(s) will be communicated in writing consistent with the notice provisions of this Code.
- ii. Interim action(s) are temporary measures applied through the duration of an investigation and/or resolution process and do not replace a resolution process as outlined in this Code.
- iii. A student may request a review of an interim action in writing to the Department of Student Conduct and Community Standards. The scope of the request is limited to whether the interim action(s) should remain in place, based on the information available. The respondent in an IHSA is afforded an opportunity to request a review of the allegations or information presented by the University as the basis for the Interim Health and Safety Action. The Dean of Students, or designee, will review the reconsideration request and any other materials provided by the respondent within three business days of receiving the written request. ~~will~~

~~schedule a review meeting with the requesting student within three business days of receiving the written request.~~ The requesting student may provide information including reports, witness statements, communications, or other documentation in the meeting. When applicable, a complainant may provide information to the Department of Student Conduct and Community Standards for purposes of this review. The Dean of Students, or designee, may schedule a meeting to review submitted materials and to hear directly from the student why they believe the University Directive is not necessary or appropriate. Interim actions may be affirmed, modified, or lifted as a result of a requested review or as new information becomes available. The Dean of Students or designee will communicate the final decision in writing within one business day of the review meeting.

- iv. Interim Action(s) may include any actions deemed appropriate to mitigate the threat to health, safety, or welfare of the University community or individuals involved in an incident, ranging from interim suspension to restrictions on participation in university-sponsored programs or activities or presence on campus.
- b. Termination or reassignment of housing. Removal or reassignment of an individual in University housing after a specific date and for a specified period of time. If removed, the student may be restricted from entering all University residence halls. This status constitutes a disciplinary record that will remain on file with the Student Conduct Authority in a manner consistent with University records retention policies.
- c. No contact directive/extension of existing no contact directive. A no contact directive is an official University directive that serves as notice to an individual that they must not have physical contact with or proximity to, or direct verbal, electronic, written, and/or indirect communication intentionally made through another individual for a specified period of time. This may be a new directive, extension of an existing directive, or include altered or additional parameters or instructions to an existing directive. No contact directives may only be removed prior to the specified period of time at the discretion of the Student Conduct Authority and at the written request of all involved individuals.
- d. University Directive. As an administrative measure, the University, at its discretion, may adopt the terms and conditions of a court order or other similar directive, with reasonable modification to apply to the University setting. The University Directive may be issued independently, preceding, or concurrent with the University conduct process. For the duration of the directive, an involved individual may submit documentation of any modifications issued by the originating source. The University may adjust the University Directive as new information becomes available.

- i. An individual may request reconsideration of the University Directive. The Dean of Students, or designee, will review the reconsideration request and any other materials provided by the respondent within three business days of receiving the written request, schedule a review meeting with the requesting individual within three business days of receiving the written request. The requesting individual may provide information including reports, witness statements, communications, or other documentation in the meeting. When applicable, a complainant may provide information to the Department of Student Conduct and Community Standards for purposes of this review. The Dean of Students, or designee, may schedule a meeting to review submitted materials and to hear directly from the student why they believe the University Directive is not necessary or appropriate. The University Directive may be affirmed, modified, or lifted as a result of a requested review. The Dean of Students, or designee, will communicate the final decision in writing within one business day of the review meeting of submitted material or scheduled review meeting.
- ii. University Directives issued as a result of a signed Restorative Resolution Agreement signed by all necessary parties are considered final and are not subject to any further review or appeal.

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D. Notice of Alleged Violation(s)

1. Written notice given to any complainant(s) or respondent(s) will include the following:
 - a. Sufficient detail to allow the individual to prepare a response (including source of information if possible, description of the alleged behavior(s), and specific alleged Code violation(s)); and the date, time, and location of a disciplinary proceeding to address the allegations. Absent exigent circumstances, the Student Conduct Authority will notify a respondent of any alleged Code violation(s) a minimum of within seven business days before a disciplinary proceeding.
 - b. The date, time, and location of an information session, during which the complainant or respondent may review all known inculpatory or exculpatory information related to the allegation, a listing of all known witnesses who have or will provide information in a proceeding, receive instruction regarding the student conduct process and the student's rights, and discuss the type of resolution process to be utilized.
 - c. The identity of the hearing body and a listing of all relevant known witnesses will be made available a minimum of five business days in advance of the disciplinary proceeding.
 - d. Applicable deadlines for submissions by the individuals including, but not limited to, impact statements, information, objections, and witness identification where

not otherwise specified will be specified in the notice letter. The University may adjust these deadlines with written notice in a reasonable amount of time prior to the disciplinary proceeding.

2. Legal Guardians of any student under the age of eighteen at the time of the alleged violation(s) may also be notified of pending alleged violation(s).

E. Information Session

1. During the information session the complainant or respondent may view all materials related to the case, review procedural standards, and discuss available options for resolution.
2. The Student Conduct Authority will determine what resolution process is appropriate after considering the expressed preferences of any complainants and respondents, and the totality of the circumstances.
3. If a respondent elects to resolve the allegation and the Student Conduct Authority deems appropriate, the administrator conducting the information session may immediately facilitate a resolution or schedule the resolution to take place within a reasonable time. Options for resolution will be scheduled no sooner than five days after the information session, unless a student waives their right for a resolution to be scheduled sooner.
4. A formal hearing process will be utilized if elected by the respondent or if determined by the Student Conduct Authority to be the appropriate resolution process based on the totality of the circumstances of the case. If selected, a single hearing administrator is the only option for a formal hearing if the incident alleges violations of the Sex Discrimination and Sexual Misconduct policy.
5. In cases involving a complainant, the administrator will gather the necessary information and conduct an appropriate resolution within a reasonable time.
6. When a respondent has two or more outstanding incidents, those incidents may be heard as a single case at the discretion of the Student Conduct Authority.

F. Resolutions

1. Alternative Resolution
 - a. If deemed appropriate by the Student Conduct Authority a student may agree to resolve their student conduct process with an Alternative Resolution. Factors that the University will consider when determining whether a student is eligible for an Alternative resolution include, but are not limited to, the following:

- i. Whether the respondent has a previous conduct record.
 - ii. Whether the respondent has previously resolved an allegation with an alternative resolution or restorative resolution.
 - iii. The number and severity of the alleged violations.
- b. In an Alternative Resolution, the respondent accepts responsibility for the behaviors and agrees to complete the assigned outcomes. Once the Alternative Resolution Agreement is signed by the respondent, it constitutes a University Directive.
- c. A respondent may be charged with a violation of the Code or have a hold placed on their account for failure to adhere to the required outcomes of an Alternative Resolution.
- d. Cases resolved through an Alternative Resolution are not categorized as a student conduct record at the University but may be referred to as an aggravating factor in assigning outcomes if a future violation occurs.

2. Restorative Resolution

- a. Participation is voluntary and both the Responsible Party and the Impacted Party must consent in writing to participate in a Restorative Resolution via the Restorative Resolution Opt-In Form.
- b. The Restorative Resolution process is used for incidents which allege behavior that violates a specific University policy.
- c. The Restorative Resolution process will not be used for incidents that allege violence against a member of a vulnerable population, the use of a dangerous weapon, or significant physical injury.
- d. The Responsible Party must acknowledge responsibility for having violated the alleged policy to participate in a Restorative Resolution.
- e. The University will not pressure or compel any party to participate in any form of Restorative Resolution.
- f. The Restorative Resolution process is not a disciplinary proceeding and therefore, a Supporting Party may not speak on behalf of the Responsible Party, Impacted Party, or Affected Party.

- g. Any party may withdraw from the Restorative Resolution process until the signing of the Restorative Resolution Agreement.
- h. In the event that any party withdraws from the Restorative Resolution or if parties are not able to reach an agreement through the Restorative Resolution Agreement, the incident will be referred back to the Student Conduct Authority, Office of Title IX, or other relevant University department based on the nature of the allegation, for further action.
- i. Information obtained through the Restorative Resolution process may not be utilized in any other form of investigation or resolution. Additionally, information obtained through the Restorative Resolution will be kept confidential except when otherwise required by the University.
- j. Separate meetings in the Restorative Resolution process may be merged by the Facilitator based on their discretion and the needs of the students or University.
- k. A Restorative Resolution concludes with the drafting of a Restorative Resolution Agreement detailing the agreed upon outcomes for the Responsible Party. Restorative Resolution Agreements must be signed by both the Responsible Party and the Impacted Party as well as the Facilitator. Restorative Resolution Agreements signed by all necessary parties are considered final and are not subject to any further review or appeal. Upon signing, the outcomes agreed upon in the Agreement constitute a University Directive.
- l. Cases resolved by a signed Restorative Resolution Agreement through the Restorative Resolution process are not categorized as a student conduct record at the University but may be referred to as an aggravating factor in assigning outcomes if a future violation occurs. Further, parties agreeing to a final resolution waive the ability to utilize a formal investigation and disciplinary proceeding through the University to resolve the same matter.
- m. Involved Parties may be accompanied by a Supporting Party at any meeting during the alternative resolution process.
- n. The Responsible Party may be charged with a violation of the Code or have a hold placed on their account for failure to adhere to the requirements agreed upon in the signed Restorative Resolution Agreement.

3. No-Contest Resolution

- a. A respondent may elect to resolve an outstanding violation(s) through a no-contest resolution in lieu of a hearing if deemed appropriate by the Student Conduct Authority and if the student accepts the finding of responsibility for the alleged violation(s).

- b. In a no-contest resolution, because the student accepts the finding of responsibility, the proceeding will be focused on potential appropriate outcomes.
- c. No-contest resolutions may take place during the information session or scheduled within a reasonable time thereafter.
- d. No-contest resolutions are noted as a finding of responsibility for violation(s) of the Code and are considered a student conduct record.
- e. No-contest resolutions are not permitted for cases falling under the jurisdiction of the Title IX Compliance Policy.

4. Informal Hearing

- a. A respondent may elect to resolve an outstanding violation(s) through an informal hearing if deemed appropriate by the Student Conduct Authority. Informal hearings are typically utilized when there is not conflicting, complex, or additional information that would be best examined through a formal hearing setting.
- b. Informal hearings may take place as an element of the information session or scheduled within a reasonable time.
- c. The respondent may provide information including reports, witness statements, communications, or other documentation in the hearing.
- d. A hearing administrator may temporarily adjourn the informal hearing if the administrator determines that further review of clarification is necessary including, but not limited to interviewing the complainant or witnesses.
- e. A hearing administrator may utilize information gathered from information sessions, investigation meetings, or other proceedings involving students from the same incident in making a determination on responsibility. If such information is under consideration, a respondent will be informed of the information and have an opportunity to respond.
- f. Informal hearings are not permitted for cases falling under the jurisdiction of the Title IX Compliance Policy.

5. Formal Hearing

- a. A formal hearing may be heard by a single hearing administrator, Student Conduct Board, Administrative Hearing Panel, or Residential Conduct Board. For cases that include allegations of sex discrimination or sexual misconduct either under the Student Conduct Code or the Title IX Compliance Policy, if a formal hearing is selected, the hearing will be conducted by a single administrator.

b. Notice of a formal hearing, including the identity of the hearing administrator or body, will occur at least five business days prior to the hearing. Any objection regarding selected hearing administrator or hearing body must be submitted by the deadline specified in the notice.

c. Formal Hearing Guidelines

- i. Private hearing. A formal hearing is conducted in private. The complainant(s) (if applicable), respondent(s), and advisor(s) are allowed to attend the entire portion of the hearing at which information is presented. Admission of any other individual to the hearing is at the discretion of the Student Conduct Authority.
- ii. Scheduling. Formal hearings are scheduled based on the availability of the complainant(s) (if applicable), respondent(s), person providing information on behalf of the University, and the hearing body. Student availability is determined based on academic class schedules and requirements. Absent exigent circumstances, lack of availability based upon personal matters, employment schedules, or the availability of an advisor, advocate, or legal representative are not considered in scheduling a formal hearing. A student should select as an advisor a person whose schedule reasonably allows attendance at the scheduled date and time for the hearing.
- iii. Witnesses. Appropriate witnesses identified by the Student Conduct Authority, complainant(s), or respondent(s) may be invited to the hearing to provide information in support of, or challenging responsibility of the alleged violation(s). Absent extraordinary circumstances, any witnesses must be identified at the information session or by the date otherwise given in a notice of allegations or other communication from the Student Conduct Authority. Potential witnesses who could have been reasonably known or identified during the course of the University investigation, but who were not otherwise provided by the individual afforded the opportunity to do so, will not be invited to a Formal Hearing. Only witnesses providing relevant and permissible information will be invited. Witnesses identified solely on the basis of character reference will not be allowed to participate in the fact-finding portion of a hearing. In identifying appropriate witnesses, individuals shall supply the name, email and a summary of information the witness will provide to address the student conduct code allegations. Witnesses will be invited by the Student Conduct Authority. Formal hearings will be scheduled within a timeframe to allow witnesses reasonable notice to participate, but a proceeding will not be unreasonably delayed or disrupted based on the availability of witnesses. The University will make reasonable efforts to secure in-person testimony from law enforcement officers in cases where a student conduct charge results from an incident that was reported to law enforcement, and any University personnel who

were involved in investigating a matter. However, sworn statement of law enforcement officers and official university reports may be considered by a hearing body in the absence of in-person testimony of the law enforcement officer or appropriate University employee(s), provided that the hearing body reasonably finds that the statement or report is otherwise reliable, and the respondent has an adequate opportunity to respond to all facts alleged in the statement. If the witness does not attend, other written witness statements will be accepted for review in a formal hearing at the discretion of the hearing administrator or body. However, such statements will not be considered as having equal weight as witness information presented in a hearing and cannot be used as the sole information supporting a finding of responsibility.

- iv. Questions. The hearing administrator or body may pose questions directly to any individual providing information in the hearing. The complainant(s) (if applicable), respondent(s), and/or advisors may propose questions to be answered by any individual providing information during a disciplinary proceeding. At their discretion, the hearing administrator or chair will retain the responsibility to determine whether questions or potential information are appropriate for review as part of the formal hearing at their discretion. In formal cases falling under the jurisdiction of the Title IX Compliance Policy, questioning of participants in the hearing and determinations of relevancy will be made as described in the Title IX Compliance Policy.
- v. Information
 2. Additional information, including, but not limited to, reports, witness statements, communications, or other documentation may also be reviewed in a hearing. Any such documentation that was reasonably available during a University investigation, but which was not provided during the course of the investigation by individuals afforded an opportunity to do so, will not be considered. Any additional information must be submitted to the Student Conduct Authority immediately upon discovery of such information.
 3. Individuals may decline to provide information or answer questions posed in a hearing. However, the hearing body will make a decision on responsibility after considering the information that is shared as a part of the formal hearing.
 4. Past behavior of the respondent(s) or complainant(s) will be excluded from the hearing unless deemed relevant by the administrator or chair of the hearing body.

5. Past behavior of a respondent may be reviewed as an aggravating or mitigating factor for consideration in assigning appropriate outcomes if the respondent is found responsible for a violation.
6. Complainants and respondents may submit an impact statement to the appropriate Student Conduct Authority by the deadline set in the notice letter. Impact statements are considered an element of the hearing record and accessible for review by a complainant and respondent in the event there is a finding of responsibility. If applicable, the complainant and respondent may review the impact statement and provide a response within a reasonable time and by such method as determined by the Student Conduct Authority.
7. Consideration of information for a determination regarding responsibility is limited to that information presented in the formal hearing. Information that is discovered in a separate hearing or proceeding originating from the same reported incident may be introduced in a formal hearing.

6. Asynchronous Hearing

- a. At the discretion of the Student Conduct Authority, hearings may be conducted asynchronously by written statements. This format is generally only offered in cases where a court order or other protective order prevents contact between one or more of the involved parties or key witnesses. Other possible circumstances may be reviewed upon request.
- b. To resolve the allegation through an asynchronous hearing, the respondent, and complainant if applicable, must agree to participate in writing and waive their ability to conduct live questioning. The respondent, and complainant if applicable, may submit their questions for the other involved parties and witnesses by the specified deadline.
- c. All relevant individuals will be given the opportunity to submit written statements in lieu of live hearing participation. The respondent, and complainant if applicable, will be given the opportunity to review and submit a response to the hearing officer about the received statements and hearing record.

7. Outcomes-Only Hearing

- a. The Student Conduct Authority may determine that an outcomes-only hearing is appropriate to resolve a case in the following scenarios:
 - i. where a student is found guilty or at fault in a criminal or civil court based on a preponderance of the evidence or higher standard; or

- ii. there has been a determination by another investigation/disciplinary proceeding at Florida State University for the same or comparable policy violation based on a preponderance of information or higher standard.
- b. Outcomes-only hearings may take place as an element of the information session, be scheduled within a reasonable time, or be conducted in writing with the consent of the student. If a student does not participate in the hearing, the Student Conduct Authority will issue the appropriate outcomes based on the information available.
- c. The respondent may provide information, including an impact statement, for consideration.
- d. An outcomes-only hearing is not permitted for violations charged under the jurisdiction of the Title IX Compliance Policy.
- e. An outcomes-only decision is not eligible for appeal on the basis of information review.

8. General Guidelines

- a. Basis for decision(s). The basis for any decision of responsibility in an informal or formal hearing will be whether upon a preponderance of the information, it is more likely than not that a violation or violations of the Code occurred. The burden to demonstrate that this standard has been met rests with the University, and all respondents are considered to be not responsible for a violation until and unless a hearing body makes a finding of responsibility.
- b. Informal procedural standards. Formal rules of process, procedure, and/or technical rules of evidence such as are applied in criminal or civil court are not used in student conduct proceedings.
- c. Personal health and safety accommodations. The Student Conduct Authority may accommodate individuals with concerns for their personal health or safety during a proceeding or hearing by providing separate facilities or physical dividers, and/or by permitting participation by video conference or other viable means as determined by the Student Conduct Authority as appropriate and do not infringe upon fundamental due process.
- d. Accommodations for qualified individuals with a disability. Any student with a qualified disabling condition may work with the Office of Accessibility Services (OAS) to request a reasonable accommodation in order to equally participate in the student conduct process. All requests for reasonable accommodations must be made either through the Student Conduct Authority or the OAS. All accommodation requests must be made in a timely manner and coordinated with the student's appropriate disability specialist within the OAS. Non-students may

make a reasonable request for accommodation with the Student Conduct Authority.

- e. Decision in absentia. If a complainant, respondent, or witness does not appear for a proceeding or hearing after notice, the Student Conduct Authority or hearing body may postpone the proceeding or review any information in support of or challenging the violations in the individual's absence and determine a finding regarding responsibility and any related outcomes based upon the available information.
- f. Status pending conduct proceedings.
 - i. A respondent will remain eligible to attend classes and university activities pending the final outcome of a student conduct matter with the exception of when a Student Conduct Authority determines that an Interim Health and Safety Action, restricting a respondent from classes or activities is necessary to preserve the health, safety, or welfare of the community.
 - ii. If a respondent's eligibility to attend classes or university activities are temporarily suspended as noted above, but are subsequently found not responsible for any violation of the Student Conduct Code, the University will correct any record of enrollment status and refund a pro rata portion of any charges for tuition and out-of-state fees as appropriate.
 - iii. An individual who leaves the University before a conduct matter or assigned outcomes are resolved or completed may be prohibited from future enrollment or obtaining University records until the matter is resolved. Degrees, credentials, transcripts, enrollment certifications, diplomas, or other academic records may be withheld until the matter is resolved including completion of any assigned outcomes or suspension period. Final determination in a case that occurs after the awarding of an academic degree or credential with a result of expulsion may result in revocation of the academic degree or credential.
- g. Any question of application of or objection to procedural standards, authority, scope or other provisions of the Code must be referred to the Director of Student Conduct and Community Standards by the deadline specified in the notice letter.
- h. A hearing body or the Student Conduct Authority may impose other reasonable procedural requirements for the orderly administration of student conduct proceedings, provided that such requirements are not inconsistent with this Code and do not infringe upon a student's procedural due process rights.
- i. Joint hearing. In cases involving more than one respondent, whether a formal or informal hearing, the hearing body may permit the hearing concerning each student to be conducted either separately or jointly.

- j. Hearing audio record. There will be a single record, such as a digital audio recording of all disciplinary proceedings. Deliberations will not be recorded. This recording will be the property of the University but will be made available for the complainant(s) or respondent(s) to review upon request. Any recordings of the hearing without the acknowledgement and permission of involved individuals is prohibited.
- k. The decision of any hearing or resolution must be presented to the respondent and complainant (if applicable) in writing and within a reasonable period of time after the conclusion of the proceeding.

G. Outcomes

Outcomes are status designations or education assignments that alone or in any combination are assigned to a student as a final outcome at the conclusion of a resolution process.

The purpose of outcomes through the student conduct process is to facilitate student accountability, learning, and overall wellness. The outcomes listed below are not intended to serve as an exhaustive list of all outcomes the University may be able to utilize regarding a given student conduct concern.

1. Status Outcomes.

- a. Reprimand. A notice in writing to the student that the student is violating or has violated University expectations for behavior and that further violations may result in more severe disciplinary action.
- b. Housing Probation. This status is assigned to a student for a specified period of time. While on this status, any further violation(s) may result in termination or reassignment of housing. In addition, this status constitutes a disciplinary record that will remain on file in a manner consistent with University records retention policies.
- c. Disciplinary Probation. This status is assigned to a student for a specified period of time. While on this status, any further violations may result in suspension or expulsion from the University. Other restrictions may apply when a student is on disciplinary probation including but not limited to: participation in University or student activities, representation of the University on athletic teams or in other leadership positions, entrance into University facilities or campus areas, or contact with any specified individual(s). In addition, this status constitutes a disciplinary record that will remain on file in a manner consistent with University records retention policies.
- d. Suspension. Separation from the University after a specific date and for a specified period. Through the duration of the suspension period the individual

may be restricted from University property and may be required to provide prior notice and receive approval from the Student Conduct Authority for the purpose of conducting University business. In addition, this status constitutes a disciplinary record that will remain on file indefinitely. The University will withdraw the student from any current courses and cancel any future enrollment. Whether an individual is eligible for a refund upon withdrawal or cancellation is dependent upon the University's refund schedule. Depending on the length of the suspension, a suspended student may be subject to University policies and requirements regarding readmission. If a student is required to apply for readmission, readmission is not guaranteed after a period of suspension is completed; and the student is responsible for communicating with the Office of Admissions to identify appropriate process(es) for re-entry at the expiration of the suspension period and when any terms of suspension or other outcomes are satisfied.

- e. Expulsion. Separation from the University without the possibility of readmission. The University will withdraw the student from any current courses and cancel any future enrollment. Whether an individual is eligible for a refund upon withdrawal or cancellation is dependent upon the University's refund schedule. In addition, the individual may be restricted from University property. This status will be noted on the individual's academic transcript and will constitute a disciplinary record that will remain on file indefinitely.
- f. Degree Withdrawal or Revocation. A degree may be withdrawn or revoked when a student has graduated and an incident occurred before graduation in the following circumstances:
 - i. The student has a pending conduct hearing that was scheduled before or as the student graduated; or
 - ii. At any time after the student has graduated or received a degree, the University becomes aware of an incident involving an alleged violation of this Code that took place before the student graduated or received a degree from the University.

The student will receive the degree once the matter is resolved and any outcomes (when applicable) are completed unless the outcome is expulsion, in which case the degree may be revoked.

2. Educational Outcomes

- a. Reflective Outcomes. Assignments, essays, presentations, research projects, conduct contracts, or other discretionary assignments.
- b. Restorative outcomes. Completion of service or work assignments under the supervision of a University or outside agency.

- c. Educational Plan. Develop an educational plan with the aid of the Student Conduct Authority and assigned mentor with continuous evaluation and support for a specified period of time.
- d. Counseling Assessment. Referral for assessment at University Counseling Center for alcohol/drug concerns, general mental health, or other wellness concerns.

3. Administrative Directive Outcomes

- a. Restitution. Compensation for loss, damage, or injury to University property. This may take the form of appropriate service, monetary, or material replacement.
- b. Termination or reassignment of housing. Removal or reassignment of an individual in University housing after a specific date and for a specified period of time. If removed, the student may be restricted from entering all University residence halls. This status constitutes a disciplinary record that will remain on file with the Student Conduct Authority in a manner consistent with University records retention policies.
- c. Restrictions. Denial or modification of any specified privilege for a specified period of time. Examples include, but are not limited to: guest privileges, restriction from a University event or program, or restriction from an area or building.
- d. Guardian notification. Notification may be sent to family, guardians, or the emergency contact of a student who is under 18 years of age, or financially dependent on their legal guardians, depending on the circumstances surrounding the incident. Legal guardians may also be notified of alcohol and other drug incidents for students under 21 years of age, regardless of financial dependency or resulting outcome.
- e. Behavioral Plan. This is a directive to the student from the Student Conduct Authority and/or in consultation with another appropriate office (including, but not limited to Housing, Title IX, etc.) which outlines expected behaviors to aid in a student's success.

H. Appeal Procedures

- 1. Student appeal. Both a complainant (if applicable) and a respondent are afforded a single opportunity to appeal decisions and/or any outcomes issued by a hearing body within five business days of the date of the written decision and outcomes. Only complainants who are students are eligible to submit an appeal request with the exception of cases of sex discrimination or sexual misconduct or Title IX Compliance Policy violations in which a complainant may submit an appeal regardless of student

status. Any interim actions will remain in effect at the discretion of the Student Conduct Authority, however any outcome(s) resulting from the original hearing decision will be held in abeyance pending the conclusion of the Florida State University appeal process. A complainant (when applicable) and a respondent will be notified of an appeal submission by the other individual, given the opportunity to review the submitted appeal request, and given the opportunity to submit a response.

2. **Required Format.** All appeal requests must be in writing using the appropriate form, identify the basis or bases for appeal, and include any supporting documentation the appealing individual or student wishes to be considered.
3. **Scope of Review.** Deference is given to the original hearing body's findings of fact and decision on responsibility and/or any outcomes; therefore, the burden is on the individual filing an appeal request to sufficiently demonstrate cause to alter the decision of the hearing body or any outcomes. An appeal review will generally be limited to a review of the record of the hearing and supporting documents for one or more of the bases of appeal listed below, provided however, that under extraordinary circumstances the appeal administrator may request additional information or clarification from the University, investigator(s), hearing body, Student Conduct Authority, complainant, respondent, or witnesses for purposes of this review.
4. **Appellate Administrator(s).** The Vice President for Student Affairs designates University administrators to facilitate policies and procedural standards as outlined in this Code, including appellate review. All intermediate appellate reviews are considered recommendations for review and action for the Vice President for Student Affairs' final agency action on behalf of Florida State University.
 - a. Decisions of the Administrative Hearing Panel, Student Conduct Board, or hearing administrators appointed by Student Conduct and Community Standards may be appealed to the Dean of Students.
 - b. Decisions of the Residential Conduct Board or administrators appointed by University Housing may be appealed to the Executive Director of University Housing.
 - c. Decisions of the Dean of Students may be appealed to the Vice President.
5. **Bases for Appeal.** Appeal reviews are not a "re-hearing" of a student conduct matter, rather, a review of process and submitted information to ensure stated procedural standards were followed. Appeal considerations are limited to one or more of the following bases:
 - a. **Process Review.** That the proceeding was not conducted in accordance with established procedural standards. Such procedural errors must have substantially affected the outcome of the hearing.

- b. Bias Review. That the proceedings were not conducted without bias or prejudice on the part of the hearing body. May include but is not limited to demonstration of a conflict of interest, or failure to objectively evaluate all relevant information.
- c. Information Review. That the information presented in a proceeding does not support the finding of the hearing body that a violation of Code exists.
- d. Outcome Review. That the outcomes are extraordinarily disproportionate given the nature of the violations and any aggravating or mitigating circumstances presented.
- e. New Information. That new information exists that was not known to the individual appealing and could not reasonably have been know or discovered at the time of the original proceeding, and which would have substantially affected the outcome of the proceeding. This does not include statements from a complainant or respondent who did not appear for a proceeding or hearing.

For cases falling under the jurisdiction of the Title IX Compliance Policy, the appeal grounds are limited to those identified in the policy.

- 6. Appeal Decision. An appeal administrator reviewing an appeal request may make one of the following recommendations:
 - a. Affirm. The administrator may affirm the decision and/or outcomes of the original hearing body.
 - b. Alter outcome. The administrator may alter the outcome(s) issued by the original hearing body. Alteration in the outcome may include reducing or increasing the severity of outcome(s) or requirements.
 - c. New hearing. The administrator may determine a new hearing by a different hearing body is warranted to correct procedural irregularity or to consider new information. A student may appeal any decision by a hearing body assigned to adjudicate a new hearing.
 - d. Remand. The administrator may direct the original hearing body to review their original decision subject to any instructions from the appeal administrator, including the requirement of further clarification of the rationale supporting the decision. The hearing body may affirm its original decision or render a new decision consistent with those instructions. A student may appeal a decision made on remand; however, if a hearing body affirms its original decision, a student may not appeal the decision on the same grounds as in the previous appeal.
- 7. Final Agency Action. The appeal administrator will forward findings and recommendations to the Vice President for Student Affairs for review. The Vice President's review and decision is considered the final decision of the University and

will be communicated in writing within fifteen business days to the respondent and if applicable, simultaneously to the complainant. This timeline may be extended if necessary, in consideration of the record on appeal. Final agency action decisions are only appealable by writ of certiorari to the Second Judicial Circuit in and for Leon County, Florida.

I. Record Keeping Practices

1. **File maintenance.** A student who participates in a student conduct process as a complainant, respondent or witness has a file created and maintained by the Department of Student Conduct and Community Standards or University Housing respectively. Files are maintained in a manner consistent with University record retention policy and in compliance with Florida Public Record Law. Files regarding cases resulting in a respondent's suspension or expulsion are maintained indefinitely.
2. **Access to and Copies of Records.** Students are permitted access and review of their records pursuant to FERPA for the purpose of reviewing information that is subject to consideration as part of a student conduct proceeding.
3. **Transcriptions of hearings.** Any student desiring a transcript of a recorded hearing that is a part of their education record should contact the Office of the General Counsel, which will arrange for the preparation of the transcript by a court reporting service. The court reporting service will provide the transcript to the Office of the General Counsel, which will perform a confidentiality review of the transcript and redact any confidential or exempt information pursuant to state or federal law. The requester shall bear the cost of the transcript preparation and confidentiality review.
4. **Petition for clearing a disciplinary record.** Student conduct records may be cleared upon review and approval by the Dean of Students, or designee. When a record is cleared, the information it contains is no longer considered a disciplinary record. However, the University may be required to produce the record regardless of its status in order to comply with a subpoena or other information request consistent with federal or state law. The University is required by law and policy to retain student education records for specified periods of time, and for certain purposes. Clearing a record affects only information maintained by the Department of Student Conduct and Community Standards and University Housing, respectively. Copies of letters distributed by or to other University departments, incident reports, police reports, and the results of previous background checks reported outside of the Student Conduct Authority are not affected by this process.

Petitions for clearing a record may be made no sooner than one year after the date of the respondent's last finding of responsibility from the student conduct process or one calendar year prior to their anticipated graduation, whichever is later. The request must be made in writing to the Dean of Students and will not be granted for conduct that resulted in suspension or expulsion from the University. A petition may also be denied

for any records related to conduct that [involved a student complainant](#), posed a threat to a member of the University community or serious damage to University property.

J. Amendments

1. This Code will be reviewed in its entirety every two years [by a committee that includes student representation](#). Any substantive changes will be reviewed by the Vice President for Student Affairs and presented to the Board of Trustees for approval. Any amendments can be proposed by University community members for review by submitting to the Vice President for Student Affairs.
2. If any portion of state or federal statute or regulation is stayed or held invalid by a court of law, any impacted elements of this policy will be deemed revoked as of the publication date of the opinion or order.

Law implemented 1011.48 FS History-New 9-30-75, Formerly FSU-3.04, Amended 9-4-86, 3-20-88, 7-18-96, 7-20-99, 11-13-00, 5-9-2007, Substantially Rewritten, 6-9-2012, Amended 3-4-2016, Substantially rewritten 2-22-2017, Amended 6-8-2018, Substantially Rewritten 9-20-2019, Amended 9-11-2020, 9-24-2021, 9-23-2022

Commented [AC8]: BOG requirement.(10) "Each university shall establish a committee, which shall include student representation, for the periodic evaluation of its student disciplinary system"



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM O



MEMORANDUM

TO: Richard McCullough, President

FROM: Amy Hecht
Vice President for Student Affairs

DATE: August 21, 2023

SUBJECT: Approval of Student Conduct Regulations Amendments

FSU-3.004 Student Conduct Code
FSU-3.0041 Student Organization Conduct Code

These amendments bring the Regulations in closer conformance with current Office of Civil Rights advice and also clarify the provisions based on experience and changes since the last revisions.

1. FSU-3.004 Student Conduct Code

Summary

The following are significant changes to the Student Conduct Code, please refer to text for exact detail:

- * Clarifies definition of admitted student to include online student
- * Expands amnesty provisions to include sexual misconduct cases
- * Exclude legitimate athletic contests from the definition of hazing and defines circumstances not considered defenses to hazing
- * Revision of offenses for on-campus possession or use of firearms, destructive devices, or other weapons consistent with current aw
- * Includes trespass within offense of unlawful entry
- * Includes unlawful entry into opposite sex restroom as a property offense



FLORIDA STATE UNIVERSITY
DIVISION OF STUDENT AFFAIRS

- * Sets deadline for review of reconsideration of interim action and allows the scheduling of a review meeting
- * Includes “mind altering drugs” within scope of offense related to “Alcohol, Controlled Substances, and Illegal Drugs”
- * Includes student representation in periodic review of Code

2. FSU-3.0041 Student Organization Conduct

Summary

- * Applicable changes parallel to Student Conduct Code as above

I recommend the Board approve these amendments.

Approved for Agenda

President



Florida State University
Student Organization Code of
Conduct
3.0041

Table of Contents

| | | |
|-------|--|----|
| I. | Introduction..... | 3 |
| II. | Definitions..... | 4 |
| III. | Authority | 8 |
| IV. | Scope..... | 9 |
| V. | Amnesty | 10 |
| VI. | Student Organization Responsibility..... | 11 |
| VII. | Violations..... | 12 |
| | A. Sex Discrimination and Sexual Misconduct | 12 |
| | B. Title IX Compliance Policy..... | 13 |
| | C. Endangerment..... | 13 |
| | D. Harassment..... | 14 |
| | E. Invasion of Privacy..... | 14 |
| | F. Hazing..... | 14 |
| | G. Alcohol, Controlled Substances, and Illegal Drugs | 15 |
| | H. Disruption and Obstruction..... | 17 |
| | I. Property..... | 18 |
| | J. Gambling..... | 18 |
| | K. Other Violations | 18 |
| VIII. | Procedural Standards..... | 19 |
| | A. Advisors | 19 |
| | B. Reports..... | 20 |
| | C. Review and Investigation | 20 |
| | D. Notice of Alleged Violation(s)..... | 23 |
| | E. Information Session | 24 |
| | F. Resolutions..... | 24 |
| | G. Outcomes..... | 33 |
| | H. Appeal Procedures | 35 |
| | I. Record Keeping Practices | 38 |

I. INTRODUCTION

The Student Organization Conduct Code (further referred to as “Code”) emphasizes Florida State University’s (further referred to as “University”) commitment to a campus community which exercises the responsible engagement of student freedoms. The pursuit of responsible freedom is consistent with the tenets of the Seminole Creed and efforts to promote civility at the University, as students balance their pursuit of excellence and exploration with consideration to the impact of behavior on themselves and others.

The University is proud of the plethora of student organizations thriving on campus. Student organizations play a key role in the campus culture at the University and are valuable in upholding the values of the University. Student organizations are the backbone of student engagement at the University. Students can select academic, social, service, honorary, sports clubs, political, religious and many other organizations to connect with during their time at the University.

Student organizations at the University are actively involved in leading, supporting, and serving the University community. Student organizations foster interpersonal relationships, explore educational opportunities, develop professional skills, and enhance academic experiences. Student organizations provide student spaces to develop skills for life after graduation as active citizens.

The Student Conduct Authority at the University embraces the University’s commitment to an educational experience that provides students with an understanding of the complex moral issues inherent in human life. The *Student Code of Conduct* and *Student Organization Code of Conduct* reemphasize the dignity and worth of each person and substantiates the need for an inclusive environment to support the betterment of all persons associated with the University. “The University is a compassionate community. In its treatment of students, it recognizes the wisdom both of letting students experience the consequences of their actions and of providing the opportunity to learn and grow in ways that can overcome past difficulties” (*General Bulletin*, Florida State University, 2016).

The University fully recognizes the values and right of all students and individuals to seek knowledge, debate ideas, form opinions, and freely express views in accordance with the expectations set forth in this Code. The University supports the principles of free speech and civil discourse outlined in the Board of Governors’ “Statement of Free Expression” (“Statement of Free Expression”, Florida Board of Governors, 2019). This right must be exercised in a manner which will not interfere with the same rights and freedoms of others in their enjoyment of the benefits of the programs offered by this University or their lawful use of University facilities, including ingress and egress (for more information see the University’s Freedom of Expression Rights and Responsibilities regulation). Additional expectations for student organizations are outlined in University rules, regulations, and/or policies.

The student conduct process is designed to be educational in nature and promotes the University’s mission. Being a member of the University community is a privilege, and the conduct process will determine if a student organization’s conduct warrants modification of or restriction upon that privilege.

II. DEFINITIONS

Terms specific to conduct prohibited by the *Sex Discrimination and Sexual Misconduct* policy (FSU Policy 2-2 supplemented by 2-2a relating to Title IX specific requirements, also referenced as Title IX Policy) are defined in Appendix D of 2-2: Definitions and accessible at <https://regulations.fsu.edu/policies/office-president>

- A. **Advisor** - Any one person, which may also be an advocate or legal representative, chosen by a complainant, student organization representative any one person chosen by a complainant, student organization representative, or witness to provide guidance throughout the student organization conduct process and may be permitted to participate fully during a disciplinary proceeding. Individuals are highly encouraged to select an advisor with reasonable availability. The advisor serves at the student's or student organization's own expense and may present at any proceeding. An involved party may permit their advisor to directly participate in all aspects of a disciplinary proceeding, including the presentation of relevant information and questioning of witnesses.
- B. **Allegation** - An assertion that someone has engaged in behavior that may be a violation of the Student Conduct Code.
- C. **Administrative Measure** - Actions taken by the University to address or remedy a behavior separate and apart from a Conduct outcome. Actions include but are not limited to holds on student accounts, No Contact Orders, and additional non-conduct University Directives.
- D. **Administrative Panel** - A group of students in addition to faculty or staff selected and trained by Student Conduct and Community Standards who serve as a hearing body with responsibility for adjudicating student conduct cases. Students shall comprise at least one-half of the membership.
- E. **Day** - Any weekday, Monday through Friday, in which the University is in operation. This includes days when the University is in operation, but classes are not in session.
- F. **Hearing** - An informal or formal disciplinary proceeding, conducted by a hearing body in accordance with the Code, following which determinations of "responsible" or "not responsible" are made with regard to alleged Code violations and outcomes are assigned as appropriate. Alternative dispute resolution proceedings, information sessions, investigation meetings, or other meetings conducted by the University are not considered to be a disciplinary proceeding.
- G. **Hearing Body** - Any person or persons authorized in the Code to conduct hearings, make a finding of whether or a Student Organization has violated the Code, and recommend or assign outcomes as appropriate.

- H. **On-Campus** - All land, buildings, facilities, and other property in the possession of or owned, used, or controlled by the University, including adjacent streets, sidewalks, and parking lots. See also the definition of 'University' below.
- I. **Organization Facility** - The location where organization events occur. This may include a live-in component for members.
- J. **Organization Event** - An organization event is defined as any event consisting of prospective, new, active, recently active, and alumni members (or some combination thereof) that a reasonable observer would associate with the Student Organization, or was sponsored, financed, or endorsed by the Student Organization, or required advanced planning on behalf of the Student Organization.
- K. **Policy** - The written statements governing the University as found in, but not limited to, the State of Florida Board of Governors regulations, the University's Board of Trustees regulations, policies adopted by the President or Vice Presidents, the *Student Organization Conduct Code*, the *Undergraduate General Bulletin*, the *Graduate Bulletin*, the *Student Policy Handbook*, the *Registration Guide*, the *Guide to Resident Living*, the *Sex Discrimination and Sexual Misconduct* policy, and other written requirements of departments, organizations and clubs.
- L. **Preponderance of the Information** - The standard of evidence upon which a determination of 'responsible' or 'not responsible' is made and is used in adjudicating all hearings under this Code. It means that the information, as a whole, demonstrates it is more likely than not that the fact sought to be proved is true. The individual bearing the burden of proof must present evidence/ information which is more credible and convincing than that presented by the other individual or which shows that the fact to be proven is more probable than not.
- M. **Student Organization** - A Student Organization that has been approved by Student Activities, as designee of the Vice President for Student Affairs, to function at the University. Further stipulations regarding recognition are outlined in FSU-3.0015 Student Organizations and Activities. In this Code, the term 'student organization' also refers to a student group which is defined as any number of persons who are associated with the University and each other, but who have not registered, or are not required to register, as a student organization that conducts business or participates in University-related activities. This includes, but is not limited to, student organizations that are no longer recognized by the University and/or (inter)national organization.
- N. **Complainant** - Any individual or student organization who is alleged to be the victim of conduct that could constitute one or more violation(s) of the Code. The complainant is the individual or student organization who is affected, and files a report or formal complaint, or on whose behalf a report or formal complaint is filed.
- O. **Responding Student Organization** - A student organization that has been reported to be the perpetrator of conduct that could constitute one or more violation(s) of the Code.

P. **Report** - A Student Conduct Authority alleging conduct that could constitute one or more violation(s) of the Code.

Q. **Formal Complaint** - A complaint or a University official alleging conduct that constitute one or more violation(s) of the Code by a responding student organization.

R. **Student** - Any individual meeting one or more of the criteria below. The term applies to all campus, sites, locations, and delivery methods of credit-bearing course offerings.

1. Admitted. Any person, regardless of academic career, who is admitted to the University and accepts an offer of admission to participate ~~is present on campus for the purpose of participating~~ in any University program, course, or activity leading to enrollment, including but not limited to online or in-person orientation, graduate student orientation, teaching assistant orientation, or workshops.
2. Enrolled. Enrolled in any credit-bearing course or program offered by Florida State University at the time any alleged violation(s) occurred.
3. Active Student. Any person who has been enrolled at the University and continued to be associated with the University in order to complete the course or program in which the student was enrolled. 'Active' status is determined by academic policy and is enforced by the Registrar's Office. This can include periods of non-enrollment during which the student is eligible to enroll in classes. The term also includes any student who has been issued an Interim Health and Safety Action (IHSA) pending the outcome of a student conduct proceeding.
4. Dual Enrollment. Any student enrolled in a credit-bearing course on a dual-enrollment basis. Jurisdiction over a dual-enrollment student's conduct will be determined in consultation with the appropriate officials at the student's home institution.

S. **Student Conduct Authority** - An individual or administrative unit whose administrative duties include the administration of the student conduct process, including formal, informal action, or alternative resolution. See the section on 'Authority' for more information. This definition includes, but is not limited to, the Office of the Vice President of Student Affairs, Student Conduct and Community Standards, University Housing, and International Programs or their successors.

T. **Student Organization Representative** - A student designated by a Student Organization to serve as its representative through any Student Organization conduct proceedings. Typically, this individual serves on the executive board of a Student Organization and may particularly serve in the role of president. In some cases, a representative of the (inter)national headquarters or leadership may be designated by a(n) (inter)national organization to represent the Student Organization, however this role is separate and apart from that of an advisor, including but limited to legal counsel. The Student Conduct Authority may choose

to require a Student Organization to designate a non-student representative or designate a different student representative when deemed necessary.

- U. **University** - Florida State University, each of the programs and activities under its control and all property owned, leased, used, or controlled by the University, including all branch campuses, facilities, and University International Programs' locations and property
- V. **University Community** - Any person who is a student, faculty member, University official, visitor, contractor, volunteer, representative of the University, or any person employed by the University. It also includes student organizations and their members (active or inactive), officers, guests, contractors, and agents.
- W. **University Official** - Any person assigned to engage in teaching, research, administrative, professional, or other responsibilities while acting within the scope of their employment or volunteer role with the University.
- X. **Student Conduct Board** - A group of currently enrolled students in good conduct standing selected and trained by the Student Conduct and Community Standards to adjudicate student organization conduct cases as a hearing body excluding cases of alleged violations of the Anti-Sexual Misconduct policy (2-2) or Title IX Compliance Policy (2-2a) and cases that may result in a responding student organization's suspension or loss of recognition.
- Y. **Single Hearing Administrator** - Any University Official designated and trained by Student [Conduct](#) Authority to facilitate meetings or information sessions and administer alternative resolutions, or to serve as the hearing body for informal or formal hearings.
- Z. **Residential Conduct Board** - A group of currently enrolled students in good conduct standing who each reside in University Housing and are selected and trained by University Housing to adjudicate student conduct cases for students residing in University Housing, excluding cases of alleged violations of the Anti-Sexual Misconduct policy (2-2) or Title IX Compliance Policy (2-2a) and cases that may result in a respondent's separation from the University.
- AA. **Non-Sexual Consent** - As related to alleged violations of the Code not involving sex discrimination or sexual misconduct, consent is the voluntary, informed, and freely given agreement, through words and/or actions, to participate in mutually agreed-upon behavior or activity.
- BB. **Law Enforcement Statement** - A sworn statement or report by a duly authorized law enforcement officer that may be relied upon by a hearing body in a student organization conduct proceeding
- CC. **University Official Report** - A narrative or document prepared by a university employee in the course of their employment that provides information about an incident. Examples include, but are not limited to, Office of Title IX investigation reports and University Housing Incident Reports.

DD. Witness Statement - A narrative or document that is not part of a law enforcement statement or university official report and that is prepared and submitted as a part of the reporting of an incident or in lieu of a witness's live appearance at a conduct proceeding, which provides the information that the witness has regarding an alleged violation of the Code.

EE. Student Organization Member - A University student currently enrolled in classes who participates in a Student Organization. Student Organization participation may include, but is not limited to, paying dues, being listed on a roster, participating in activities or meetings, or receiving communication from the Student Organization.

FF. Informal Resolution - The process by which a student organization may accept responsibility and outcomes, or not contest responsibility for an alleged violation of the Student Organization Conduct Code. This resolution is noted as a finding of responsibility and results in a conduct record for the responding student organization.

GG. Notice - Notice is considered given to an organization when it is sent to the student organization representative's official University email address, is hand-delivered to the student organization representative or current residence, or upon the University's receipt of a certified mail return receipt when communication is sent to the local address on file with the Office of the University Registrar, to the permanent address on file if a local address has not been provided, or to the address of the national organization when applicable.

HH. University Program or Activity - Locations, events, or circumstances over which the University exercised substantial control over both the respondent and the context in which the conduct occurs, and also includes any building owned or controlled by a student organization that is recognized by the University. A program or activity may include events, programs, and circumstances that occur in person, or a virtual platform, or via electronic communication or publication including but not limited to phone, email, text, or social media.

III. AUTHORITY

A. Authority for student organization conduct ultimately rests with the Florida State University Board of Trustees which has delegated such authority to the President of Florida State University (hereinafter "President"). The Board further assigns authority through this Code, a Board Regulation. The President has delegated direct authority to the Vice President for Student Affairs (hereinafter "Vice President"). The Vice President delegates this authority to the Dean of Students and the Director of Student Conduct and Community Standards.

- B. The President, Vice President, and Dean of Students have the authority to designate individuals internal and external to the University as hearing or appellate officers when appropriate.
- C. All hearing bodies have the authority to consult with other appropriate University officials in order to effectively resolve a Student Organization conduct case.
- D. The hearing decision or recommendation of a hearing body is considered a hearing decision. If a hearing decision is not appealed as provided within the Code, the hearing decision becomes final agency action.
- E. The authority of appellate officers is further enumerated in the Code section on "Appeal Procedures." Appellate decisions are considered recommendations to the Vice and become final agency action upon approval by the Vice President.
- F. Any reference in the Code to the role or responsibilities of a specific University official may be delegated by the University official to an appropriate designee.

IV. SCOPE

Florida State University may address the alleged misconduct of any Student Organization specified in "Violations" section of this Code pursuant to the following:

- A. In any proceeding to determine whether a student organization has violated the Code, the University will apply the substantive code provisions defining conduct violations that are in effect on the date the alleged conduct occurred. The University will apply the procedural standards outlined in section VI. "Procedural Standards", that are in effect at the time the student organization is provided notice of the specific allegation(s) of code, regulation or other policy violations, regardless of the date of the alleged violation.
- B. The Code will apply to student organization conduct that occurs on university premises, at university-sponsored activities and off-campus as determined by the Student Conduct Authority. Factors that will be considered when determining whether to address off campus conduct include, but are not limited to, whether the incident is documented by a verifiable source, adversely affects the University community, occurs at a university program or activity, or endangers the health or safety of a student or others
- C. The Code applies to the University as defined in this Code. Non-substantive procedural modifications that reflect the particular circumstances of each campus or international program are permitted as approved by the Student Conduct Authority.
- D. The Code includes procedural standards that apply specifically to the resolution of violations of the Student Organization Conduct Code that are not encompassed under Sexual Harassment as defined in, or that fall outside of the jurisdiction of the Title IX Policy. The University reserves the authority to determine what level of procedural standards will apply to a report or formal complaint and whether application of the appropriate procedural

standards should change based on new or evolving information regarding a specific case. The University may, in its discretion, address conduct that has been dismissed during or as a result of the Title IX investigation process if the conduct or circumstances fall outside of the jurisdiction of the Title IX Policy but would fall within the other jurisdictions and provisions of the Code.

- E. Student Organization conduct proceedings may be initiated for alleged conduct that potentially violates both law and University policy without regard to the pendency of civil or criminal litigation in court or criminal arrest and prosecution. Proceedings under these procedural standards may be carried out prior to, concurrently with, or following civil or criminal proceedings at the discretion of the Student Conduct Authority. Determinations made or outcomes imposed will not be subject to change because criminal charges or civil complaints arising out of the same facts giving rise to violation(s) of University policy were dismissed, reduced, or resolved in favor of an individual or student organization.
- F. The University may adopt the finding of fact in a criminal or civil proceeding with a similar or higher standard of proof and conduct an outcomes-only proceeding if appropriate.
- G. The University has up to 180 calendar days to resolve an alleged violation(s) of the Code with a responding student organization upon receipt of a report of a possible violation that includes enough substantive information to conduct an investigation by the Student Conduct Authority or upon receipt of an investigation report from the Title IX Office. However, the University has discretion to extend this time period if deemed necessary to perform a thorough investigation, preserve fundamental due process, or due to other extraordinary circumstances.
- H. Student Organization decisions and outcomes may be published by the University.
- I. The University may restrict a student's or student members of a student organization's contact with specified individuals when determined appropriate based on the facts or information and circumstances of each unique incident. The Student Conduct Authority can administratively issue such restrictions to any individuals involved in a conflict or incident, regardless of whether a determination of alleged violations has been made. Such restrictions are valid and enforceable only with respect to individuals who are students at the University.
- J. The University may determine what University personnel have an educational need-to-know regarding the status and/or outcome of student organization conduct processes and to provide notice to relevant University personnel as determined by the Student Conduct Authority.

V. Amnesty

- A. An element of promoting safety is providing clear, responsible methods of reporting and addressing incidents of misconduct. Therefore, in order to remove potential barriers to reporting, the Student Conduct Authority may in its discretion, not charge a complainant with a violation for conduct originating from the same incident if reported by that student in good faith to a University official, or otherwise discovered in investigation.

B. The University's highest priority is the physical and mental health and safety of students and members of the University community. Therefore, no student seeking assistance for themselves or others as a result of a hazing incident, sexual misconduct, intoxication, or medical emergency from alcohol or other drugs will be charged with violation of the alcohol, controlled substances, and illegal drug or hazing provisions of this Code if:

1. That student calls local or University law enforcement or medical assistance;
2. That student cooperates fully with University, law enforcement, and medical personnel, as applicable; and
3. That student remains at the scene with the person in need until assistance has arrived

C. Amnesty provisions may extend beyond individual students to a student organization at the discretion of the Student Conduct Authority.

D. The University recognizes that during times of a public health emergency as declared by local, state, or national authorities the priority of gathering information regarding contact and exposure to contagion may be greater than resolution of a violation of the Student Organization Conduct Code. Therefore, the University has discretion over whether a student organization will be charged with a violation of the Student Organization Conduct Code if information is a result of providing important contact tracing information to the University or public health officials.

Commented [CM1]: Add to reflect that we would not pursue violations of substance abuse policy in the event student was in good faith report allegations of sexual misconduct.

VI. Student Organization Responsibility

A Student Organization may be held responsible for the actions of those affiliated with the organization, including but not limited to one or more of its members (active or inactive), new members, former members, alumni, guests, contractors, and agents if action on behalf of, in the interest of, or as affiliates of the student organization. Every Student Organization has the duty to take all reasonable steps to prevent violations of university regulations and state laws growing out of or related to the activities of the Student Organization. Each Student Organization is expected to educate its member regarding their risk management policy and all applicable University policy and all applicable University policies and state laws.

A. In determining whether a Student Organization may be held collectively responsible for the individual actions of its members, guests, contractors, and/or agents, all the available factors and circumstances surrounding the specific incident will be reviewed and evaluated. There is no minimum number of student organization members who must be involved in an incident to determine group responsibility. A Student Organization may be subject review under the provisions of this Code for activities not sponsored by the Student Organization where persons present or responsible for the activity are members or guests of members of the Student Organization.

B. Misconduct on the part of the Student Organization may be addressed when factors including, but not limited to the following are found:

1. Members of the Student Organization (active or inactive), new members, alumni, former members, agents, contractors, or guests act together to violate the Student Conduct Code or Student Organization Conduct Code; or
2. Officers or members of a Student Organization are present at a student organization - sponsored, financed, or otherwise supported activity or event; or
3. Student Organization leadership had knowledge or should have had knowledge of the event, or planned unlawful conduct and/or conduct in violation of the Student Conduct Code or the Student Organization Conduct Code before it occurred and failed to take preventative or corrective action or failed to stop unlawful behavior as it occurred at such event; or
4. An event or conduct in violation of the Student Conduct Code or the Student Organization Conduct Code occurred on premises and/or transportation owned, operated, controlled, or rented by the Student Organization; or
5. A pattern of individual violation(s) occurred and/or continues to occur without adequate control, response, or discipline on the part of the Student Organization or its leaders; or
6. The Student Organization or members interfere with the investigation or conduct proceedings; of any individuals who are members (active or inactive), new members, alumni, former members, agents, contractors, guests, of the Student Organization.

C. Other Student Organization Privileges and Expectations

1. There are many privileges and expectations associated with being a Recognized Student Organization (RSO) at Florida State University. Refer to Student Activities regarding the privileges afforded RSO's on campus and refer to the RSO Handbook for expectations of an RSO.

VII. Violations

Each Student Organization is expected to abide by these rules of conduct and to be accountable for the behavior of student organization members. Lack of familiarity with University policy is not a justification for violating any provision of this Code. Unless specifically noted, intent is not a required element to establish a Code violation. Intoxication or impairment from alcohol, drugs, or other substances is not a justification for violating any provision of this Code. These rules of conduct should be read broadly and are not designed to define prohibited acts in exhaustive terms.

A. Sex Discrimination and Sexual Misconduct

The Student Organization will not participate in, tolerate, or condone any actions defined as "prohibited conduct" in the Anti -Sexual Misconduct Policy.

B. Title IX Compliance Policy Violations

The Student Organization will not participate in, tolerate, or condone any actions defined under "sexual harassment" in the Title IX Compliance Policy. Title IX Compliance Policy violations are resolved through specific procedural standards outlined in the Title IX Compliance Policy as well as applicable standards in the Student Organization Conduct Code not in conflict with specific Title IX Policy provisions. Alleged conduct will be resolved under the jurisdiction of the Title IX Compliance Policy and applicable procedural standards if:

1. The alleged conduct may meet one or more of the violations defined as sexual harassment in the Title IX Compliance Policy, and
2. The conduct occurred within the context of a University program or activity within the United States.

C. Endangerment

1. The Student Organization will not participate in, tolerate, or condone any of the following actions:
 - a. Physical violence or unwelcome force against a person or the property of any person or group.
 - b. Action(s) that imminently endanger the health, or safety of another person or group.
 - c. Interference with the freedom of another person to move about in a lawful manner by force, threat, intimidation, or other means without consent.
 - d. Intentionally or negligently inserts or causes ingestion of a foreign substance into the body of another person without their consent. Includes, but not limited to, drugs, substances not meant for human consumption.
 - e. Action(s) that endanger the health, safety, or well-being of an animal. This includes, but is not limited to, intentionally or unintentionally torturing or in a cruel manner killing or causing serious bodily injury to an animal; failing to provide necessary food, water, or care for an animal; unreasonably abandoning an animal in the student's custody transporting or confining an animal in a cruel manner; causing one animal to fight with another animal; or inappropriately overworking an animal. This provision does not prohibit any activity conducted as part of an approved academic or research program within the University.

D. Harassment

1. The Student Organization will not participate in, tolerate, or condone any of the following actions:
 - a. Physical Conduct, not of a sexual nature, including any gesture, written, verbal or physical act, or any electronic communication (includes text messages and postings on web-sites or social media), that places a person in reasonable fear of harm to their person or damage to their property, infringes upon rights of personal privacy or property, has the effect of substantially interfering with a reasonable person's academic performance or ability to participate in opportunities or benefits provided by the University, or has the effect of substantially interfering with the orderly operation of the University.
 - b. Stalking, not of a sexual nature, defined as a course of conduct (i.e. more than one act) directed at a specific individual which would cause a reasonable person to experience substantial emotional distress, or to fear for their safety or the safety of another.

E. Invasion of Privacy

1. The Student Organization will not participate in, tolerate, or condone any of the following actions:
 - a. Unauthorized intrusion upon a person's private property or communications.
 - b. Unauthorized appropriation and/or use of someone's identifying or personal data or documents.
 - c. Using electronic or other means to make a video or photographic record of any person where there is a reasonable expectation of privacy without the person's consent. This includes, but is not limited to, taking video or photographic images in shower/locker rooms, residence hall rooms, private bedrooms, and restrooms. The sharing and/or distributing of such unauthorized records by any means is also prohibited.

F. Hazing

The Student Organization will not participate in, tolerate, or condone any Student Organization or individual action or situation, which occurs on or off University property, that intentionally, recklessly, or negligently endangers the mental or physical health or safety of a student for purposes including, but not limited to, initiation or admission into or affiliation with any University student organization or other group whether or not

officially recognized by the University, or the perpetuation or furtherance of a tradition or ritual of any such student organization or group.

1. Hazing includes, but is not limited to:
 - a. Brutality of a physical nature, such as whipping, beating, branding, exposure to the elements, forced consumption of food, liquor, drug, or other substance;
 - b. Subjecting a person to extreme mental stress, such as sleep deprivation, forced exclusion from social contact, forced conduct that could result in extreme embarrassment, or other forced activity that could adversely affect the mental health or dignity of a reasonable person;
 - c. Pressuring or coercing a person into violating state or federal/national law and/or University policy;
 - d. Interfering with or impeding a person's academic pursuits, employment, religious observances, or affiliation with other individuals, groups, or activities; or
 - e. Otherwise infringing upon a person's personal or property rights or substantially interfering with a reasonable person's ability to participate in or benefit from the services, activities, or privileges provided by the University.

Hazing does not include customary athletic events or other similar contests or competitions or any activity or conduct that furthers a legal and legitimate objective.

A student may commit an act of hazing whether the student is a prospective, current, or former member of the organization or group. The actions of active, associate, new and/or prospective members, former members, or alumni of a student organization or group may be considered hazing under this Code. The following circumstances are not a defense to a violation of this provision: express or implied consent of a victim, the conduct or activity was not part of any official organizational event or otherwise sanctioned or approved by the student organization, or the conduct or activity was not a condition of membership into a student organization.

2. Soliciting another or aiding or assisting another to engage in any act of hazing as defined in this Code, or active involvement in the planning of such action.
3. Observing or participating in any conduct defined as hazing pursuant to the Code by a member of the Student Organization or group who is not themselves a complainant, without reporting the incident to a University official.
4. The following circumstances do not constitute a defense to allegations of hazing:
 5. a. the consent of the victim had been obtained;
 6. b. the conduct or activity that resulted in the death or injury of a person was

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- not
part of any official organizational event or otherwise
sanctioned or approved
by the student organization or group; or
7. c. the conduct or activity that resulted in the death or injury of a person was
not
done as a condition of membership into a student
organization or group.

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Florida State University Hazing Policy, BOG 6.021, and Section 1006.63, Florida Statutes, are considered part of and incorporated as applicable.

G. Alcohol, Controlled Substances, and Illegal Drugs

1. The Student Organization, members, and guests must comply with all federal, state, and local laws pertaining to alcohol. No person under the legal drinking age may possess, consume, provide, or be provided alcoholic beverages.
2. The Student Organization, members, and guests must follow federal, state, and local laws regarding illegal drugs, controlled substances, other mind-altering substances and drug paraphernalia. No person may possess, use, purchase, provide, distribute, sell, and/or manufacture illegal drugs, other controlled substances, other mind-altering substances or drug paraphernalia while on the premises of or premises under the control of the Student Organization, while attending an organization event, or engaging in Student Organization activities or business, or acting within the scope of membership. The Student Organization maybe held responsible for the distribution of illegal drugs, other mind-altering substances and controlled substances in or adjacent to any organization facility or any facility operating as the organization's facility or in the control of the organization.
3. Alcoholic beverages must either be
 - a. Provided and sold on a per-drink basis by a licensed and insured third-party vendor (e.g., restaurant, bar, caterer, etc.); or
 - b. Brought by individual members and guests through a bring your own beverage ("BYOB") system. The presence of alcohol products above 15% by volume ("ABV") is prohibited at any organization event, except when served by a licensed and insured third-party vendor.
4. Common sources of alcohol, including bulk quantities, which are not being served by a licensed an insured third-party vendor, are prohibited (i.e., amounts of alcohol greater than what a reasonable person should consume over the duration of an event).

5. Alcoholic beverages must not be purchased with student organization funds or funds pooled by members or guests (e.g., admission fees, cover fees, collecting funds through digital apps, etc.)
6. A Student Organization must not co-host or co-sponsor an organization event with a bar, event promoter or alcohol distributor; however, a student organization may rent a bar, restaurant, or other licensed and insured third-party vendor to host an organization event.
7. Attendance by non-members at any event where alcohol is present must be by invitation only, and the student organizations must utilize a guest list and identification/banding system. Attendance at events with alcohol is limited to a reasonable guest-to-member ratio and must not exceed local fire or building code capacity of the student organization facility or host venue.
8. The Student Organization, members, and guests must not permit, encourage, coerce, or participate in any activities involving the rapid consumption of alcohol, including, but not limited to, drinking games and rapid consumption.
9. Any organization event or activity related to the new member joining process (e.g., recruitment, intake, rush) must be substance free. No alcohol, illegal drugs, [other mind-altering substances](#), or controlled substances may be present if the organization event or activity is related to new member activities, meetings, or initiation into the Student Organization, including, but not limited to, "bid night," "Big/Little" events or activities, "family" events or activities, and any ritual or ceremony.
10. Hosting by owners, residents, student organization members, or others in control of the organization event where the underage consumption of alcohol, illegal use of controlled substances, or illegal drug use occurs, including in a residence hall room, residence hall common area, or off-campus personal residence or any space that is occupied by, under the control of, or reserved for the use of a Student Organization.
11. Failure of a Student Organization to take all necessary steps to ensure no person under the legal drinking age possesses alcoholic beverages at organization events or within any property or transportation it owns, operates, occupies, and/or rents, or is in control of is a violation of this policy.
12. Any violation of the University Alcohol Policy, FSU Regulation FSU-6.012.

H. Disruption and Obstruction

1. Student Organizations and student organization members must comply with the lawful order or reasonable request of an identified University official, any non-University law enforcement official, any non-University emergency responder, or any protective order.

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2. The Student Organization will not engage in, tolerate, or condone:

- a. Providing false or misleading information by members of the Student Organization, or on behalf of the Student Organization to a University official, law enforcement official, paramedics, or other medical staff. This may include allowing an advisor, advocate, or legal representative to submit false or misleading information on behalf of the student organization.
- b. Providing false or misleading information in a University and/or law enforcement investigation or hearing process.
- c. Acts that disrupt the University student organization or student conduct process or other University investigation, adjudication, or resolution process. Examples may include but are not limited to: attempting to coerce or influence a person regarding the reporting of a student or Student Organization conduct violation, or a person's participation in any conduct proceeding; avoiding or impeding communication in regard to a conduct proceeding; or actively disrupting a meeting or proceeding.
- d. Informed participation in an event with another student organization and failing to take necessary actions to determine whether a Student Organization is currently on disciplinary probation, recognition is suspended with restrictive conditions, or the student organization has lost recognition
- e. Unreasonable disruption of peace, academic study, or sleep on or off campus
- f. Behavior which disrupts or obstructs student learning, research, administrative, or other University operations or previously scheduled or reserved on-campus activities
- g. Retaliation against another for making a report of conduct that may be in violation of this Code or other University policy, or participating in an investigation, process, or hearing. Making a report that is not made in good faith may be considered retaliation. See the Anti-Sexual Misconduct policy for prohibited conduct defined as retaliation in that policy.
- h. Interfering or attempting to interfere with an individual's attempts to contact law enforcement, emergency responders, or other form of aid.

I. Property

1. The Student Organization will not engage in, tolerate, or condone:

- a. Defacement, damage, or destruction of property.

- b. Theft, defined as removing, relocating or using the property or services of another person, off-campus entity, or of the University without authorization.
- c. Receipt, possession, sale, or purchase of property or services that are known or reasonably should have been known to have been stolen or obtained through unlawful means.
- d. Entering or using the property or facilities of another person or entity without the consent or authorization or refusing to depart when directed by a university official.

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J. Gambling

1. Engaging in or offering games of chance for money, property, goods, or services or other gain in violation of Florida law.

K. Other Violations

1. Student Organizations will not engage in, tolerate, or condone the violation of; or the aiding, abetting, furthering, conspiring, soliciting, inciting, or attempting to commit any of the following:
 - a. Violation of Federal or State Law, local ordinance, or laws of other national jurisdictions.
 - b. Violation of any Florida Board of Governors Regulation.
 - c. Violation of any other University regulation or policy as defined in section II. Definitions, J. Policy in this Code.
 - d. Violation of the Academic Honor Policy when the student is not currently enrolled in the related course or when the incident cannot otherwise be processed under the Academic Honor Policy. Refer to the Academic Honor Policy for violations and descriptions.
 - e. Violation of policy of local or (inter)national governing entities including but not limited to member councils and (inter)national organizations.

VIII. Procedural Standards

A. Advisors

1. An advisor may be present to advise a student organization, complainant, or witness and may participate in all aspects of any disciplinary proceedings but shall not testify on behalf of the student organization. In Title IX hearings only, an advisor must conduct the questioning as described in the Title IX-Compliance Policy.

2. Consultation with an advisor during a meeting, proceeding or hearing must take place in a manner that is not disruptive.
3. Identity of an advisor is required to be reported to the Student Conduct Authority at least three business days prior to a meeting, proceeding, or hearing.
4. Advisors may not be individuals who serve other roles in the process as outlined in this Code {i.e. hearing administrator, witness, etc.}, or if service in an advisory capacity would unreasonably conflict with the fair administration of the student conduct process as determined by the appropriate Student Conduct Authority.
5. The University is not responsible for selecting or compensating an advisor, for any student organization navigating the student conduct process.
6. The availability of an advisor, advocate, or legal representative to attend a student conduct meeting, proceeding, or hearing will not unreasonably interfere with or delay the student organization conduct process. For Title IX hearing proceedings, if a student organization's advisor does not appear the University will assign an advisor or delay proceedings as outlined in the Title IX Policy.
7. Once a meeting, proceeding, or hearing has been scheduled it will rarely be rescheduled due to later unavailability of an advisor, advocate, or legal representative.
8. A representative from the University's Office of the General Counsel may also be present at any meeting, proceeding, or hearing.

B. Reports

1. Anyone may file a report with the University alleging that a student organization has violated the Code. Any report should be submitted as soon as possible after the incident takes place, preferably within 60 calendar days. When there is significant delay, the Student Conduct Authority's ability to resolve an incident may be difficult due to access to reliable information and witnesses. Therefore, the Student Conduct Authority has discretion whether or not to pursue resolution of a report and will only pursue a significantly delayed report when the conduct or responding student organization are deemed to pose a potential threat to the health or safety of an individual or the University community, or other exceptional circumstances.
2. The Student Conduct Authority may receive reports or information pertaining to criminal or civil cases from the FSU Police Department, Tallahassee Police Department, Leon County Sheriff's Office, Division of Alcoholic Beverages and Tobacco, other law enforcement agency, or any municipal, state, or federal court.

3. Reports may be accepted through alternate reporting mechanisms at the discretion of the Student Conduct Authority including but not limited to written communication, published information, or referral from another University department.
4. For reports alleging sex discrimination or sexual misconduct, the reporting process can be found in the Anti-Sexual Misconduct policy and/or Title IX Compliance Policy. If a report alleges sexual misconduct and is reported via report.fsu.edu, the Student Conduct Authority will report the matter to the appropriate Title IX Office authority, in accordance with the University's Anti-Sexual Misconduct Policy and/or Title IX Compliance Policy. The Office of Title IX will evaluate the report pursuant to the policy before it will be referred to the Department of Student Conduct and Community Standards to review for possible violations of this Code.

C. Review and Investigation

1. All reported information will be reviewed by an appropriate Student Conduct Authority to determine appropriate next steps.
2. Interim Health and Safety Actions may be issued pursuant to section the Administrative Measures section of this Code.
3. Investigation
 - a. Upon receipt of a report, except for reports that are referred to the Office of Title IX, a prompt, thorough, and impartial investigation may be conducted by the Office of Investigations and Assessment or FSUPD if further information is required to determine appropriate resolution by the Student Conduct Authority.
 - b. Investigations will include a review of the submitted report, and other additional information, such as that gathered from investigation meetings with involved individuals or groups. Any involved individuals or groups will be interviewed and asked to share information they have regarding the incident including documents (text messages, emails, photos, etc.) and identification of any additional witnesses who may provide direct information regarding the incident.
 - c. Students and student organization representatives may be accompanied by an advisor of their choice. Individuals are highly encouraged to participate in the process to allow for as thorough an investigation as possible; however, an individual may decline to participate in the investigation process.
 - d. At the conclusion of an investigation, the Office of Investigations and Assessment will produce an investigation report and forward to the Student

Conduct Authority for determination of appropriate referral, resolution, or dismissal in accordance with University policy.

4. Administrative Measures

a. Interim Health and Safety Actions. Interim actions may be initiated to protect the health or safety of individuals involved in an incident or investigation or in circumstances when a student is alleged to have engaged in conduct that poses a substantial risk to the University community or operations. IHSA's may be issued in conjunction with, or pending the outcome of, an investigative or adjudicative process of the Student Conduct Code, Student Organization Conduct Code, Anti-Sexual Misconduct policy, or Title IX Compliance Policy. For cases falling under the jurisdiction of the Title IX Compliance Policy, an interim health and safety action temporarily separating a student from the University or precluding participation in a course or courses must only be assigned when there is an immediate threat to physical health or safety of an individual that arises out of a report or formal complaint, or other aspect of the procedures described in the Title IX Compliance Policy. Other supportive measures and remedies may be instituted as described in the Title IX Compliance Policy.

- i. Interim action(s) will be communicated in writing consistent with the notice provisions of this Code.
- ii. Interim action(s) are temporary measures applied through the duration of an investigation and/or resolution process and do not replace a resolution process as outlined in this Code.
- iii. A student organization may request a review of an interim action in writing to the Department of Student Conduct and Community Standards. The scope of the request is limited to whether the interim action(s) should remain in place, based on the information available. The student organization representative of an responding student organization on an IHSA is afforded an opportunity to request a review of the Interim Health and Safety Action. The Dean of Students, or designee, will ~~schedule a review~~ the materials provided by the student organization within meeting with the requesting student within a reasonable timeframe of receiving the written request. The requesting student may provide information including reports, witness statements, communications, or other documentation in the meeting. When applicable, a complainant may provide information to the Department of Student Conduct and Community Standards for purposes of this review. The Dean of Students, or designee, may schedule a meeting with the student organization upon receipt of the written request to review the request or to gather additional information. Interim actions may be affirmed, modified, or lifted as a result of a requested review or as new information becomes available.

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The Dean of Students or designee will communicate the final decision in writing within a reasonable timeframe of the review meeting.

- iv. Interim Action(s) may include any actions deemed appropriate to mitigate the threat to health, safety, or welfare of the University community or individuals involved in an incident, ranging from interim suspension to restrictions on participation in university-sponsored programs or activities or presence on campus.
- b. Termination or reassignment of housing. Removal or reassignment of an individual in University housing after a specific date and for a specified period of time. If removed, the student may be restricted from entering all University residence halls. This status constitutes a disciplinary record that will remain on file with the Student Conduct Authority in a manner consistent with University records retention policies.
- c. No contact directive/extension of existing no contact directive. A no contact directive is an official University directive that serves as notice to an individual that they must not have physical contact with or proximity to, or direct verbal, electronic, written, and/or indirect communication intentionally made through another individual for a specified period of time. This may be a new directive, extension of an existing directive, or include altered or additional parameters or instructions to an existing directive. No contact directives may only be removed prior to the specified period of time at the discretion of the Student Conduct Authority and at the written request of all involved individuals.
- d. University Directive. As an administrative measure, the University, at its discretion, may adopt the terms and conditions of a court order or other similar directive, with reasonable modification to apply to the University setting. The University Directive may be issued independently, preceding, or concurrent with the University conduct process. For the duration of the directive, an involved student organization may submit documentation of any modifications issued the originating source. The University may adjust the University Directive as new information becomes available.
 - i. A student organization may request reconsideration of the University Directive. The Dean of Students, or designee, will ~~schedule a review meeting with the requesting~~ review the materials provided by the student organization within a reasonable timeframe of receiving the written request. The requesting student may provide information including reports, witness statements, communications, or other documentation in the meeting. When applicable, a complainant may provide information to the Department of Student Conduct and Community Standards for purposes of this review. The Dean of Students, or designee, may schedule a meeting with the student

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organization upon receipt of the written request to review the request or to gather additional information. The University Directive may be affirmed, modified, or lifted as a result of a requested review. The Dean of Students, or designee, will communicate the final decision in writing within a reasonable timeframe following the review meeting.

University Directives issued as a result of a signed Restorative Resolution Agreement signed by all necessary parties are considered final and are not subject to any further review or appeal.

D. Notice of Alleged Violations

1. Written notice given to any reporting individual(s) or responding student organizations will include the following:
 - a. Sufficient detail to allow a student organization representative to prepare a response (including source of information, description of the alleged behavior(s), specific alleged Code violation(s); and date, time, and location of a disciplinary proceeding to address the allegations. Absent exigent circumstances, this notice will be provided a minimum of seven business days before the disciplinary proceeding.
 - b. The date, time, and location of an information session, during which the complainant or responding student organization may view all exculpatory or exculpatory information related to the allegation, receive instruction regarding the student organization conduct process and the student organization's rights, and discuss the type of resolution process to be utilized. Absent exigent circumstances, the information session will be scheduled a minimum of five business days prior to the disciplinary proceeding.
 - c. The identity of hearing body and a listing of all relevant witnesses will be sent a minimum of five business days in advance of the disciplinary proceeding. This information may alternatively be included in the written notice.
 - d. Applicable deadlines for submissions by the involved parties including, but not limited to, impact statements, information, objections, and witness identification where not otherwise specified. For cases involving a complainant, these deadlines will typically be required further in advance to allow both parties adequate notice to prepare for the disciplinary proceeding. The University may adjust these deadlines with written notice in a reasonable amount of time prior to the disciplinary proceeding.

E. Information Session

1. During the information session the complainant or responding student organization representative may view all materials related to the case, review procedural standards, and discuss options for resolution. The Student Conduct Authority will determine what resolution process is appropriate after considering the expressed preferences of any complainants and responding student organization, and the totality of the circumstances.

If a responding student organization elects to resolve the allegation and the Student Conduct Authority deems appropriate, the administrator conducting the information session may immediately facilitate a resolution or schedule the resolution to take place within a reasonable time. Options for resolution will be scheduled no sooner than five days after the information session, unless a student organization waives their right for a resolution to be scheduled sooner.

2. In cases involving a complainant, the administrator will gather the necessary information and conduct a appropriate resolution within a reasonable time.
3. When a responding student organization has two or more outstanding incidents, those incidents may be heard as a single case at the discretion of the Student Conduct Authority.

F. Resolutions

1. Alternative Resolution

- a. In an Alternative Resolution, the responding student organization accepts responsibility for the behaviors and agrees to complete assigned outcomes. Once the Alternative Resolution Agreement is signed by the student organization representative, it constitutes a University Directive. By agreeing to resolve the allegation with an alternative resolution the responding student organization waives their right to resolve the allegation through a hearing and the signed agreement constitutes final agency action.
- b. Failure to complete the agreed upon outcomes by their specified deadline may result in a violation of this Code other administrative restriction.
- c. Alternative Resolution Agreements are not categorized as a student organization conduct record at the University but may be referred to as an aggravating factor in assigning outcomes if a future violation occurs.
- d. If deemed appropriate by the Student Conduct Authority a student organization may agree to resolve an allegation violation with an Alternative Resolution. Factors that the University will consider when determining whether a student is eligible for an Alternative resolution include, but is not limited to, the following:
 - i. Whether the pending student organization has recent conduct record.

- ii. Whether the responding student organization has recently resolved an allegation with an alternative resolution.
 - iii. The number and severity of the alleged violations.
- e. Allegations involving an identified complainant will not be eligible for an Alternative Resolution.

2. Restorative Resolution

- a. Participation is voluntary and both the Responsible Organization Representative and the Impacted Party must consent in writing to participate in a Restorative Resolution via the Restorative Resolution Opt-In Form.
- b. The Restorative Resolution process is used for incidents which allege behavior that violates a specific University policy.
- c. The Restorative Resolution process will not be used for incidents that allege violence against a member of a vulnerable population, the use of a dangerous weapon, or significant physical injury.
- d. The Responsible Organization must take responsibility for having violated the alleged policy to participate in a Restorative Resolution.
- e. The University will not pressure or compel any party to participate in any form of Restorative Resolution.
- f. The Restorative Resolution process is not a disciplinary proceeding and therefore, an advisor may not speak on behalf of the Responsible Organization Representative, Impacted Party, or Affected Party.
- g. Any party may withdraw from the Restorative Resolution process until the signing of the Restorative Resolution Agreement.
- h. In the event that any party withdraws from the Restorative Resolution or if parties are not able to reach an agreement through the Restorative Resolution Agreement, the incident will be referred back to the Student Conduct Authority or Office of Title IX, based on the nature of the allegation, for further action.
- i. Information obtained through the Restorative Resolution process may not be utilized in any other form of investigation or resolution. Additionally, Information obtained through the Restorative Resolution will be kept confidential except when otherwise required by the University.

- j. Separate meetings in the Restorative Resolution process may be merged by the Facilitator based on their discretion and the needs of the students or University.
- k. A Restorative Resolution concludes with the drafting of a Restorative Resolution Agreement detailing the agreed upon outcomes for the Responsible Organization. Restorative Resolution Agreements must be signed by both the Responsible Organization and the Impacted Party as well as the Facilitator. Restorative Resolution Agreements signed by all necessary parties are considered final and are not subject to any further review or appeal. Upon signing, the outcomes agreed upon in the Agreement constitute a University Directive. Cases resolved by a signed Restorative Resolution Agreement through the Restorative Resolution process are not categorized as a student conduct record at the University but may be referred to as an aggravating factor in assigning outcomes if a future violation occurs.

The Responsible Organization may be charged with a violation of the Code for failure to adhere to the requirements agreed upon in the signed Restorative Resolution Agreement.

3. No-Contest Resolution

- a. A responding Student Organization may elect to resolve an outstanding violation(s) through a no contest-resolution in lieu of a hearing if deemed appropriate by the Student Conduct Authority and if the student organization representative accepts the finding of responsibility for the alleged violation(s).
- b. In a no-contest resolution, because the student organization accepts the finding of responsibility, the proceeding will be focused on potential appropriate outcomes.
- c. No-contest resolutions may take place during the information session or scheduled within a reasonable time thereafter.
- d. No-contest resolutions are noted as a finding of responsibility for violation(s) of the Code and are considered a student organization conduct record.
- e. No-contest resolutions are not permitted for cases falling under the jurisdiction of the Title IX Compliance Policy.

4. Informal Hearing

- a. A responding Student Organization may elect to resolve an outstanding violation(s) through an informal hearing if deemed appropriate by the Student Conduct Authority. Informal hearings are typically utilized when there is not

conflicting, complex, or additional information that would be best examined through a formal hearing setting.

- b. Informal hearings may take place as an element of the information session or scheduled within a reasonable time.
- c. The responding student organization representative may provide information including reports, witness statements, communications, or other documentation in the hearing.
- d. A hearing administrator may temporarily adjourn the informal hearing if the administrator determines that further review or clarification is necessary including, but not limited to interviewing the complainant or witnesses.
- e. A hearing administrator may utilize information gathered from information sessions, investigation meetings, or other proceedings involving individuals associated with the incident in making a determination on responsibility. If such information is under consideration, a responding student organization representative will be informed of the information and have an opportunity to respond.
- f. Informal hearings are not permitted for cases falling under the jurisdiction of the Title IX Compliance Policy.

5. Formal Hearing

- a. A formal hearing may be heard by a single hearing administrator or Administrative Hearing Panel. For cases that include allegations of sex discrimination or sexual misconduct either under the Sex Discrimination and Sexual Misconduct Policy or the Title IX Compliance Policy, if a formal hearing is selected, the hearing will be conducted by a single administrator.
- b. Notice of a formal hearing, including the identity of the hearing administrator or body, will occur at least five business days prior to the hearing. Any objection regarding selected hearing administrator or hearing body must be submitted by the deadline specified in the notice
- c. Formal Hearing Guidelines
 - i. Private hearing. A formal hearing is conducted in private. The complainant(s) (if applicable), responding student organization representative, and advisor(s) are allowed to attend the entire portion of the hearing at which information is presented. Admission of any other individual to the hearing is at the discretion of the Student Conduct Authority.

- ii. Scheduling. Formal hearings are scheduled at the earliest availability of the complainant(s) (if applicable), responding student organization representative, person providing information on behalf of the University, and the hearing body. Student availability is determined based on academic class schedules and requirements. Absent exigent circumstances, lack of availability based upon personal matters, employment schedules, or the availability of an advisor, advocate, or legal representative are not considered in scheduling a formal hearing. A student or student organization should select as an advisor a person whose schedule reasonably allows attendance at the scheduled date and time for the hearing.

- iii. Witnesses. Appropriate witnesses identified by the Student Conduct Authority, reporting individual(s), or the responding student organization representative may be invited to the hearing to provide information in support of, or challenging responsibility of the alleged violation(s). Absent extraordinary circumstances, any witnesses must be identified at the information session or by the date otherwise given in a notice of allegations or other communication from the Student Conduct Authority. Witnesses will be invited by the Student Conduct Authority. Potential witnesses who could have been reasonably known or identified during the course of the University investigation, but who were not otherwise provided by the organization or individual afforded the opportunity to do so, will not be invited to a Formal Hearing. Only witnesses providing relevant and permissible information will be invited. Witnesses identified solely on the basis of character reference will not be allowed to participate in the fact-finding portion of a hearing. In identifying appropriate witnesses, the student organization representative or complainant shall supply the name, email and a summary of information the witness will provide to address the student conduct code allegations. Witnesses will be invited by the Student Conduct Authority. Hearings will be scheduled within a timeframe to allow witnesses reasonable notice to participate, but a proceeding will not be unreasonably delayed or disrupted based on the availability of witnesses. In the case of a formal hearing, the University will make reasonable efforts to secure in-person testimony from law enforcement officers in cases where a student conduct charge results from an incident that was reported to law enforcement, and any University personnel who were involved in investigating a matter. However, sworn statements of law enforcement officers and official university reports may be considered by a hearing body in the absence of in-person testimony of the law enforcement officer or appropriate University employee(s), provided that the hearing body reasonably finds that the statements or report is otherwise reliable, and the responding student has an adequate opportunity to respond to all facts alleged in the statement. Other written witness statements will be

accepted for review in a formal hearing if the witness does not attend at the discretion of the hearing administrator or body. However, such statements will not be considered as having equal weight as witness information presented in a hearing and cannot be used as the sole information supporting a finding of responsibility.

- iv. Questions. The hearing administrator or body may pose questions directly to any individual providing information in the hearing. The complainant(s) (if applicable) and responding student organization representative may propose questions to be answered by one another, but questions must be directed to the hearing administrator or chair of the hearing body rather than to the individual directly. The advisor may propose questions to be answered by a complainant, responding student organization, or witness on behalf of the student organization they are representing, but questions must be directed to the hearing administrator or chair of the hearing body rather than to the individual directly. The hearing administrator or chair will determine whether questions or potential information are appropriate for review as part of the formal hearing at their discretion. In formal hearings falling under the jurisdiction of the Title IX Compliance Policy, questioning of participants in the hearing and determinations of relevancy will be made as described in the Title IX Compliance Policy.
- v. Information.
 - a. Additional information, including, but not limited to, reports, witness statements, communications, or other documentation may also be reviewed in a hearing. Any such documentation that was reasonably available during a University investigation, but which was not provided during the course of the investigation by the student organization representative or other individuals afforded an opportunity to do so, will not be considered. Any additional information must be submitted to the Student Conduct Authority immediately upon discovery of such information.
 - b. Individuals may decline to provide information or answer questions posed in a hearing. However, the hearing body will make a decision on responsibility after considering the information that is shared as a part of the formal hearing.
 - c. Past violations of the responding student organizations, witnesses, or reporting individual(s) will be excluded from the hearing unless deemed relevant by the administrator or chair of the hearing body.

- d. Past behavior of a responding student organization may be reviewed as an aggravating or mitigating factor for consideration in assigning appropriate outcomes if the responding student organization is found responsible for a violation.
- e. Complainants and responding student organization representatives may submit an impact statement to the appropriate Student Conduct Authority by the deadline specified in the notice letter. Impact statements are considered an element of the hearing record and accessible for review by a complainant and responding student organization in the event there is a finding of responsibility. If applicable, the complainant and responding student organization representative may review the impact statement and provide a response within a reasonable time and by such method as determined by the Student Conduct Authority.
- f. Consideration of information for a determination regarding responsibility is limited to that information presented in the mishearing. Information that is discovered in a separate 1-mtgor proceeding originating from the same reported incident may be introduced in a formal hearing.

6. Asynchronous Hearing

- a. At the discretion of the Student Conduct Authority, hearings may be conducted asynchronously by written statements. This format is generally only offered in cases where a court order or other protective order prevents contact between one or more of the involved parties or key witnesses. Other possible circumstances may be reviewed upon request.
- b. To resolve the allegation through an asynchronous hearing, the responding student organization, and complainant if applicable, must agree to participate in writing and waive their ability to conduct live questioning. The responding student organization, and complainant if applicable, may submit their questions for the other involved parties and witnesses by the specified deadline.
- c. All relevant individuals will be given the opportunity to submit written statements in lieu of live hearing participation. The responding student organization, and complainant if applicable, will be given the opportunity to review and submit a response to the hearing officer about the received statements and hearing record.

7. Outcomes-Only Hearing

- a. The Student Conduct Authority may determine that an outcomes-only hearing is appropriate to resolve a case in the following scenarios:
 - i. where a student organization as an entity is found guilty or at fault in a criminal or civil court based on a preponderance of the evidence or higher standard; or
 - ii. there has been a determination by another investigation/disciplinary proceeding at Florida State University for the same or comparable policy violation.
- b. Outcome resolutions may take place as an element of the information session or be scheduled within a reasonable time. If a student organization representative does not participate in the hearing, the Student Conduct Authority will issue the appropriate outcomes based on the information available.
- c. In cases involving an identified complainant, the Outcome Resolution may not be conducted as a part of the information session.
- d. The responding student organization representative and complainant(s) may provide information, including an impact statement, for consideration.
- e. An outcomes-only hearing is not permitted for violations charged under the jurisdiction of the Title IX Compliance Policy.
- f. An outcomes-only decision is not eligible for appeal on the basis of information review.

4. General Guidelines

- a. Basis for decision(s). The basis for any decision of responsibility in an informal or formal hearing will be, whether upon a preponderance of the information, it is more likely than not that a violation or violations of the Code occurred. The burden to demonstrate that this standard has been met rests with the University, and all responding student organizations are considered to be not responsible for a violation until and unless a hearing body makes a finding of responsibility.
- b. Informal procedural standards. Formal rules of process, procedure, and/or technical rules of evidence such as are applied in criminal or civil court are not used in student organization conduct proceedings.
- c. Personal Health and Safety Accommodations. The Student Conduct Authority may accommodate individuals with concerns for their personal health or

safety during a proceeding or hearing by providing separate facilities or physical dividers, and/or by permitting participation by video conference or other viable means as determined by the Student Conduct Authority as appropriate and do not infringe upon fundamental due process.

- d. Accommodations for qualified individuals with a disability. Any student with a qualified disabling condition may work with the Office of Accessibility Services (OAS) to request a reasonable accommodation in order to equally participate in the student or student organization conduct process. All requests for reasonable accommodations must be made either through the Student Conduct Authority or the OAS. All accommodation requests must be made in a timely manner and coordinated with the student's appropriate disability specialist within the OAS. Non-students may make a reasonable request for accommodation with the Student Conduct Authority.
- e. Decision in absentia. If a complainant, responding student organization representative, or witness does not appear for a proceeding or hearing after notice, the Student Conduct Authority or hearing body may postpone the proceeding or review any information in support of or challenging the violations in the individual's absence and determine a finding regarding responsibility and any related outcomes based upon the available information.
- VI. Holds. The Student Conduct Authority may place a hold on the privileges of recognition of any student organization who fails to resolve allegations of a violation(s) of the Code in a timely manner.
- f. Holds. The Student Conduct Authority may place a hold on the privileges of recognition of any student organization who fails to resolve allegations of a violation(s) of the Code in a timely manner.
- g. Any question of application of or objection to procedural standards, authority, scope or other provisions of the Code must be referred to the Student Conduct Authority by the deadline specified in the notice letter.
- h. A hearing body or the Student Conduct Authority may impose other reasonable procedural requirements for the orderly administration of student conduct proceedings, provided that such requirements are not inconsistent with this Code and do not infringe upon a student organization's procedural due process rights.
- i. Joint hearing. In cases involving more than one responding student organization, whether in a formal or informal hearing, the hearing body may permit the hearing concerning each student organization to be conducted either separately or jointly.
- j. Hearing record. There will be a single record, such as a digital audio recording of all disciplinary proceedings. Deliberations will not be recorded. This

recording will be the property of the University but will be made available for the complainant(s) or responding student organization representatives to review upon request. Any recordings of the hearing without the acknowledgement and permission of involved individuals are prohibited.

- k. The decision of any hearing or resolution must be presented to the respondent and complainant (if applicable) in writing and within a reasonable period of time after the conclusion of the proceeding.

G. Outcomes

Outcomes are status designations or education assignments that alone or in any combination are assigned to a student organization as a final outcome at the conclusion of a resolution process. The purpose of outcomes through the student organization conduct process is to facilitate accountability, learning, and overall wellness. The outcomes listed below are not intended to serve as an exhaustive list of all outcomes the University may be able to utilize regarding a given student conduct concern.

1. Status Outcomes

The outcomes listed below are not intended to serve as an exhaustive list of all outcomes the University may be able to utilize regarding a given student conduct concern.

- a. Reprimand. A notice in writing to the student organization that the group is violating or has violated University expectations for behavior and that further violations may result in more severe disciplinary action.
- b. Disciplinary Probation. This status is assigned to a student organization for a specified period of time. While on this status, any further violations may result in suspension or loss of recognition from the University. Other restrictions that may be placed upon a student organization on disciplinary probation may include, but are not limited to the following:
 - i. Participation in University or student activities,
 - ii. Representation of the University in leadership positions or eligibility for awards or honors,
 - iii. Use or entrance into university facilities or campus areas,
 - iv. Contact with any specified individual(s), and/or
 - v. Student Organization events under the auspices of the Student Organization such as organization social events and tailgates.

c. Suspension of recognition. Suspension of recognition with the University after a specific date and for a specified period. Through the duration of the suspension period the student organization will be prohibited from utilizing the support and services afforded by a recognized student organization and will be restricted from the following:

- i. Participation in University or student activities,
- ii. Representation of the University in leadership positions or eligibility for awards or honors,
- iii. Use or entrance into university facilities or campus areas,
- iv. Student organization events under the auspices of the student organization such as organization social events, and tailgates.

To regain recognition at the conclusion of the suspension period, a student organization must demonstrate compliance with any terms of the suspension and meet requirements of any applicable recognition processes(es) through Student Activities and fraternity and sorority life governing councils (if applicable).

d. Loss of recognition. Loss of recognition from the University after a specific date and for an indefinite period of time. During which time, the student organization will be prohibited from utilizing the support and services afforded a recognized student organization and privileges as outlined under the "suspension of recognition" section. The University may set a designated timeframe during which the organization will not be eligible to apply for re-recognition. This timeframe may be extended if there are further violations of university policy by the student organization or student organization members.

2. Educational Outcomes

- a. Service Hours. Completion of service under the supervision of a University department or outside agency.
- b. Discretionary outcomes. Work assignments, essays, presentations, research projects, conduct contracts, or other discretionary assignments.

3. Administrative Directive Outcomes

- a. Restitution. Compensation for loss, damage, or injury to University property. This may take the form of appropriate service, monetary, or material replacement.

- b. No contact directive/extension of existing no contact directive. A no contact directive is an official University directive that serves as notice to an individual or individual(s) that they must not have physical contact with or proximity to, or direct verbal, electronic, written, and/or indirect communication intentionally made through another individual with an identified individual for a specified period of time. This may be a new directive, extension of an existing directive, or include altered or additional parameters or instructions to an existing directive. No contact directives may only be removed prior to the specified period of time at the discretion of the Student Conduct Authority and at the written request of all involved individuals.
- c. Loss of privilege. Denial of any specified privilege for a specified period of time.
- d. Behavioral Plan. This is a directive to the student organization from the Office of Student Conduct and Community Standards and/or in consultation with another appropriate office (including, but not limited to Student Activities, Fraternity and Sorority Life, Housing, Title IX, etc.) which outlines expected behaviors.

H. Appeal Procedures

1. Both a complainant (if applicable) and a responding student organization are afforded a single opportunity to appeal decisions and/or any outcomes issued by a hearing body within five business days of the date of the written decision and outcomes. Only complainants who meet the definition of a student are eligible to submit an appeal request with the exception of cases of sex discrimination or sexual misconduct in which a complainant may submit an appeal regardless of student status. Any interim actions will remain in effect at the discretion of the Student Conduct Authority, however any outcome(s) resulting from the original hearing decision will be held in abeyance pending the conclusion of the Florida State University appeal process. A complainant (when applicable) and a responding student organization will be notified of an appeal submission by the other, given the opportunity to review the submitted appeal request, and given the opportunity to submit a response.
2. Required Format. All appeal requests must be in writing, identify the basis or bases for appeal, and include any supporting documentation the appealing individual or student organization wishes to be considered.
3. Scope of Review. Deference is given to the original hearing body's findings of fact and decision on responsibility and/or any outcomes; therefore, the burden is on the individual or Student Organization filing an appeal request to sufficiently demonstrate cause to alter the decision of the hearing body or any outcomes. An appeal review will generally be limited to a review of the record

of the hearing and supporting documents for one or more of the bases of appeal listed below, provided however, that under extraordinary circumstances the appeal administrator may request additional information or clarification from the University, investigator(s), hearing body, Student Conduct Authority, reporting individual, responding student organization, or witnesses for purposes of this review.

4. Appellate Administrator(s). The Vice President designates University administrators to facilitate policies and procedural standards as outlined in this Code, including appellate review. All intermediate appellate reviews are considered recommendations for review and action for the Vice President for Student Affairs' final agency action on behalf of Florida State University.
 - a. Decisions of the Administrative Hearing Panel, Student Conduct Board, or hearing administrators appointed by the Office of Student Conduct and Community Standards may be appealed to the Dean of Students.
 - b. Decisions of the Dean of Students may be appealed to the Vice President.
5. Bases for Appeal. Appeal reviews are not a "re-hearing" of a student organization conduct matter, rather a review of process and submitted information to ensure stated procedural standards were followed. Appeal considerations are limited to one or more of the following bases:
 - a. Process Review. That the proceeding was not conducted in accordance with established procedural standards. Such procedural errors must have substantially affected the outcome of the hearing.
 - b. Bias Review. That the proceedings were not conducted without bias or prejudice on the part of the hearing body. May include but is not limited to demonstration of a conflict of interest, or failure to objectively evaluate all relevant information.
 - c. Information Review. That the information presented in a proceeding does not support the finding of the hearing body that a violation of Code occurred.
 - d. Outcome Review. That the outcomes are extraordinarily disproportionate given the nature of the violations and any aggravating or mitigating circumstances presented.
 - e. New Information. That new information exists that was not known to the individual or student organization appealing and could not reasonably have been known or discovered at the time of the original

proceeding, and which would have substantially affected the outcome of the proceeding. This does not include statements from a complainant or responding student organization representative who did not appear for a proceeding or hearing.

6. Appeal Decision.

An appeal administrator reviewing an appeal request may make one of the following recommendations for final agency action:

- a. Affirm. The administrator may affirm the decision and/or outcomes of the original body.
- b. Alter outcome. The administrator may alter the outcome(s) issued by the original hearing body. Alteration in the outcome may include reducing or increasing severity of outcome(s) or requirements.
- c. New hearing. The administrator may determine a new hearing by a different hearing body is warranted to correct procedural irregularity or to consider new information. An individual or student organization may appeal any decision by a hearing body assigned to adjudicate a new hearing.
- d. Remand. The administrator may direct the original hearing body to review their original decision subject to any instructions from the appeal administrator, including the requirement of further clarification of the rationale supporting the decision. The hearing body may affirm its original decision or render a new decision consistent with those instructions. An individual or student organization may appeal a decision made on remand; however, if a hearing body affirms its original decision, an individual or student organization may not appeal the decision on the same grounds as in the previous appeal.

7. Final Agency Action

- a. The appeal administrator will forward findings and recommendations to the Vice President for Student Affairs for review. The Vice President's review and decision is considered the final decision of the University and will be communicated in writing within fifteen business days to the responding Student Organization and if applicable, simultaneously to the complainant. This timeline may be extended if necessary, in consideration of the record on appeal. Final agency action decisions are only appealable by writ of certiorari to the Second Judicial Circuit in and for Leon County, Florida.

I. Record Keeping Practices

1. File Maintenance. Records of all Student Organization conduct cases will be maintained in the Student Conduct and Community Standards indefinitely.
2. Release of Records. The release of Student Organization conduct records will be governed by applicable federal and state laws regarding the privacy of education records. General information regarding the outcome of Student Organization conduct proceedings (without identifying information) may be released to the public.
3. Access to and Copies of Records. A student organization representative is permitted access and review of information in the conduct file for the purpose of reviewing information that is subject to consideration as part of a student organization conduct proceeding.
4. Transcriptions of hearings. Any student organization representative or a student desiring a transcript of a recorded hearing that is a part of their education record should Contact the Office of the General Counsel which will arrange for the preparation of the transcript by a court reporting service. The court reporting service will provide the transcript to the Office of the General Counsel, which will perform a confidentiality review of the transcript and redact any confidential or exempt information pursuant to state or federal law. The requester shall bear the cost of the transcript preparation and confidentiality review.

J. Amendments

1. This Code will be reviewed in its entirety every two years by a committee that includes student representation. Any substantive changes will be reviewed by the Vice President for Student Affairs and presented to the Board of Trustees for approval. Any amendments can be proposed by University community members for review by submitting to the Vice President for Student Affairs.
2. If any portion of state or federal statute or regulation is stayed or held invalid by a court of law, any impacted elements of this policy will be deemed revoked as of the publication date of the opinion or order.

Law implemented 1011.48 FS History-New 9-30-75, Formerly FSU-3.04, Amended 9-4-86, 3-20-88, 7-18-96, 7-20-99, 11-13-00, 5-9-2007, Substantially Rewritten, 6-9-2012, Amended 3-4-2016, Substantially rewritten 2-22-2017, Amended 6-8-2018, Substantially Rewritten 9-20-2019, Amended 9-11-2020, September 24, 2021, September 23, 2022

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FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

CONSENT ITEM P



MEMORANDUM

TO: Richard McCullough, President
FROM: Amy Hecht
Vice President for Student Affairs
DATE: August 21, 2023
SUBJECT: Approval of Regulations Amendments

FSU - 3.0045 Involuntary Medical Withdrawal

The amendment substantially rewrites the prior regulation. The regulation provides the condition and the procedures under which a student may be involuntarily withdrawn. That the action shall be based on actual conduct or behavior and not on any discriminatory basis. A student may be involuntarily withdrawn from the university if determined that a student's conduct, actions, or statements in totality may present a significant risk of harm to the health or safety of another person or poses a significant disruption to university operations. Such withdrawn student may have a hold placed on re-enrollment but may receive a refund of tuition and fees.

The regulation has been re-written to provide clarity of the current policy and procedural standards. Note the following highlighted substantive changes:

- The regulation now refers to the Student Behavior Intervention Structure policy approved by Cabinet, linking the complementing policy, procedural standards and structure that has been a source of confusion in the past.
- The procedural standards clarify the process for a student to challenge an interim involuntary withdrawal action.
- The procedural standards clarify the non-interim involuntary withdrawal action from the interim action and outlines an additional opportunity to respond to the action if there is additional information.
- The regulation includes information and procedural standards for undergoing a required mental health and risk assessment, which was not in the regulation previously. Including a provision if the student's health insurance will not cover the cost of the assessment that the student may request the university consider covering the cost on a case-by-case basis.

I recommend the Board approve these amendments.

Approved for Agenda

President

FSU – 3.0045 Involuntary Medical Withdrawal

(1) Introduction

Florida State University is committed to ensuring equality of education opportunity while cultivating an environment that is supportive of student learning and safe for all community members. The university has a comprehensive student behavior intervention structure that reviews, plans appropriate intervention and support, and monitors reports of concerning student behavior. The involuntary medical withdrawal process is reserved for those interventions when a student's behavior may present a significant risk of harm to the health or safety of another person or poses a significant disruption to university operations.

(2) Policy

(a) A student may be involuntarily withdrawn from the university if determined that a student's conduct, actions, or statements in totality may present a significant risk of harm to the health or safety of another person or poses a significant disruption to university operations.

(b) This policy will be applied in a nondiscriminatory manner, and determinations will be based on consideration of reported student conduct, actions, or statements in totality and not on knowledge or belief that a student has a disability. The university remains committed to reasonable accommodations for students with disabilities, and nothing in this policy should override or interfere with a student's right to reasonable accommodations under the Americans with Disabilities Act.

(c) An involuntary medical withdrawal should only be considered when any other administrative actions have been considered and are inapplicable, incompatible, or ineffective.

(d) A student subject to an involuntary medical withdrawal may receive a refund of tuition and fees.

(e) A student subject to involuntary medical withdrawal will have a hold placed on their records and enrollment pending fulfillment of any identified conditions for re-enrollment or re-admission.

(f) When a student's conduct, actions, or statements in totality are determined to pose a possible significant risk of harm to the health or safety of another person the student is subject to an immediate interim involuntary withdrawal.

(3) Procedural Standards

(a) Interim Involuntary Withdrawal.

1. The Dean of Students or designee makes this determination in consultation with members of the Behavior Intervention Team or Threat Assessment Team after an individualized assessment of information available as outlined in the Student Behavior Intervention policy.

2. The Dean of Students or designee will send the student written notification of the interim involuntary withdrawal status that includes the basis for the determination and

the opportunity to respond in writing to the action. The student has the responsibility of sharing information or justification that demonstrates that the basis of the determination does not support the action.

3. The Vice President for Student Affairs or designee will review the student's response within 3 business days and may rescind, modify, or affirm the interim involuntary withdrawal action pending further review as outlined in the next section for an involuntary medical withdrawal. The Dean of Students or designee will notify the student of the outcome in writing.

(b) Involuntary Medical Withdrawal. When a student's conduct, actions, or statements in totality are determined to pose a possible significant risk of harm to the health or safety of another person or a significant disruption to university operations the student is subject to an involuntary medical withdrawal.

1. The Dean of Students or designee makes this determination in consultation with members of the Behavior Intervention Team or Threat Assessment Team after an individualized assessment of information available as outlined in the Student Behavior Intervention policy.

2. The Dean of Students or designee will send the student written notification of the intention to involuntarily withdraw the student pending the outcome of the procedural standards outlined in this regulation. This notice may be included in the outcome of the review of an interim involuntary withdrawal outlined in the previous section, or as an independent notice without an interim action. Notice will include the basis for the determination and the opportunity to respond in writing to the action within ten business days of the notice. (If the student was subject to an interim involuntary withdraw review, they may provide any additional information available for review within the ten-day period.) Failure of a student to take the opportunity to respond to the notice by the deadline and in the manner instructed will not delay or negate any procedural standards or determinations.

3. The student's written response will be reviewed by the Dean of Students or designee in consultation with the Behavior Intervention Team or Threat Assessment Team as outlined in the Student Behavior Intervention policy.

4. A student will be notified in writing of the determination of the response review.

a. If the involuntary withdrawal is rescinded, the notice may include referral to other appropriate university processes such as student conduct or application for readmission, or university support resources. In addition, the student may be subject conditions for continued enrollment at the university.

b. If the involuntary withdrawal is affirmed, the notice will include any restrictions and requirements for readmission.

5. An involuntary withdrawal includes the following restrictions:

a. The student is not permitted to access or attend any university courses online or in person.

b. The student is not permitted to hold membership in any registered student organization, employment, or participation in university activity, event, or program.

c. The student is not permitted on any university property including residential assignment or place of employment.

d. Any communication is limited to the Dean of Students or designee regarding the involuntary withdrawal or in designated cases, FSUPD.

e. The student may not contact or approach any university personnel in person or come within 1000 feet of any personnel or personnel's residence.

6. Any relevant information will be shared with FSUPD and/or Student Conduct and Community Standards for review and any potential action at the appropriate time.

(c) Conditions for readmission.

1. The university may impose conditions for readmission, including but not limited to one or more of the following:

a. Requiring the student to provide the Dean of Students or designee a complete written assessment and recommendations from an independent, licensed mental health provider selected by the university, with competency in the relevant area of psychological or psychiatric assessment.

b. A written agreement from the student to attend and participate in any treatment, programs, or meetings to the extent recommended by the mental health provider retained by the university.

c. A determination by the Dean of Students or designee with consultation with the Behavior Intervention Team, Threat Assessment Team, and/or other university personnel that the student has met conditions for readmission and that the university has appropriate resources to support and meet any ongoing needs of the student.

2. Required assessment.

a. In cases that require a written assessment and recommendations from an independent, licensed mental health provider, the provider is identified and retained by a representative of Counseling and Psychological Services (CAPS).

b. The Director of CAPS or designee will work with the student to identify an appropriate provider and assessment specific to the circumstances that have led to the administration of the involuntary withdrawal process. All efforts will be made to identify an appropriate provider and assessment that is covered by the student's health insurance.

c. A signed authorization for the release of information (ROI) is required to grant permission of the exchange of clinical information between the Director of CAPS or designee and the provider.

d. The provider will be supplied all relevant information and circumstances leading to the administration of the involuntary withdrawal as well as a scope document that includes questions to be addressed or recommendations sought.

e. The student retains the responsibility for making all necessary arrangements with the provider including scheduling and payment agreement. (In situations in which a student does not have health insurance that covers the course of recommended assessment the student may request that the university consider whether the student's circumstances are such that the cost of the assessment will be covered by the university).

e. At the conclusion of the assessment, the provider will share a comprehensive report and recommendations with the student. That assessment must be released to the Director of CAPS or designee for review. The Director of CAPS or designee will review and interpret any recommendations outlined in the report to the Dean of Students and relevant university personnel to determine a student's eligibility to return to the university including any required participation in meetings, programs, or treatment.

f. The university retains the authority to require additional assessment, continued treatment, or the resolution of any pending university processes such as student conduct or application for admission before a student is eligible to return.

Authority: BOG Regulation 1.001, 6.001; Florida Statutes 1006.60, 1001.61

History: ~~Established~~ New 6/12/2014. Substantial Rewrite: September XX, 2023.



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

Athletics Action Item I



TO: Presidents/Chancellors of the Atlantic Coast Conference Member Institutions

FROM: James J. Phillips, Ph.D.
Commissioner

DATE: June 1, 2023

SUBJECT: 2023-24 ACC Governing Board Certification Form

Please find attached a copy of the 2023-24 Atlantic Coast Conference Governing Board Certification form. The form is to be completed annually by the Chair of the Governing Board in order for a member institution to enter a team or individual competitors in an ACC Championship as indicated in ACC Bylaw 2.11.2.

Please review this policy with your Governing Board and return the signed form to Tracey Haith at the Conference office by **October 13, 2023**.

Thank you and best regards.

Attachment

JP/BH:th

cc: Faculty Athletics Representatives
Athletics Director
Compliance Director





**Governing Board Certification Form
Academic Year 2023-24**

As Chair of the Governing Board at Florida State University,
(institution name)

I attest that:

- 1) Responsibility for the administration of the athletics program has been delegated to the CEO/President/Chancellor of the Institution.
- 2) The CEO/President/Chancellor has the mandate and support of the board to operate a program of integrity in full compliance with NCAA, Conference and all other relevant rules and regulations.
- 3) The CEO/President/Chancellor, in consultation with the Faculty Athletics Representative and the Athletics Director, determines how the institutional vote shall be cast on issues of athletics policy presented to the NCAA and the Conference.

Date Presented to the Governing Board: September 8, 2023

Signed: _____
(Chair of the Governing Board)

Signed: _____
(CEO/President/Chancellor of Member Institution)

Please mail or email completed form before **October 13, 2023** to:

Tracey Haith
thaith@theacc.org
Atlantic Coast Conference
4512 Weybridge Lane
Greensboro, NC 27407



FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES

Finance & Business Information Item I



FLORIDA STATE UNIVERSITY
FINANCE AND ADMINISTRATION
Office of the Vice President for Finance & Administration

MEMORANDUM

TO: Richard McCullough, President

FROM: Kyle Clark, Sr. Vice President for Finance & Administration

DATE: September 08, 2023

SUBJECT: Request for Approval
BOT Resolution Approving FSU Athletics Association, Inc. Debt Financing to
Fund a Portion of the Doak Campbell Football Stadium Premium Seating Project

In compliance with the Board of Governors Debt Management Guidelines, The Board of Trustees must adopt a formal resolution(s) requesting the Board of Governors approval to issue debt for the purpose of financing a portion of the Doak Campbell Stadium Improvement Project.

I recommend approval of the attached resolution, authorizing the FSU Athletics Association to issue debt for the Doak Campbell Stadium Improvement Project.

KC

Attachments

A RESOLUTION AUTHORIZING THE ISSUANCE OF DEBT AND REQUESTING THE FLORIDA BOARD OF GOVERNORS TO APPROVE THE ISSUANCE OF SUCH DEBT TO FINANCE THE RENOVATION OF DOAK S. CAMPBELL STADIUM ON THE MAIN CAMPUS OF FLORIDA STATE UNIVERSITY; AND PROVIDING AN EFFECTIVE DATE.

BE IT RESOLVED BY THE FLORIDA STATE UNIVERSITY BOARD OF TRUSTEES:

Section 1. The Florida State University Board of Trustees (the “Board of Trustees”) hereby authorizes the issuance of taxable and/or tax-exempt debt by the Division of Bond Finance of the State Board of Administration of Florida (the “Division”) on behalf of Florida State University Athletics Association, Inc. (“FSUAA”), a University direct support organization (“DSO”), and requests the State University System Board of Governors (the “Board of Governors”) to approve the issuance of taxable and/or tax-exempt debt in an amount not to exceed \$255,000,000 (the “Bonds”) for the purpose of financing (i) the renovation of the west side and south endzone of Doak S. Campbell Stadium (the “Project”), a football stadium located on the main campus of Florida State University (the “University” or “FSU”); (ii) a debt service reserve, if necessary; (iii) capitalized interest, if any; and (iv) certain costs relating to the issuance of the Bonds.

Section 2. The Project will result in a full renovation of the west side of Doak S. Campbell Stadium, removing approximately 27,000 seats and adding back over 16,000 seats. Improvements to the west side of the stadium will include new club seating, a commissary and kitchen, suites, lounges, and upgrades to antiquated infrastructure. The Project will also result in a renovation of the south endzone of the stadium, which will include the addition of loge boxes and the installation of breathable mesh seats. The Project is reflected on the approved master plan for the University and is consistent with the mission and strategic plan of the University because it will benefit the University’s athletics program. Project construction is expected to commence in November 2023 and is expected to be completed by September 2025. Proceeds of the Bonds will not pay for all the costs of construction of the Project; as of August 9, 2023, approximately \$8.0 million in private capital gifts to the University and/or Seminole Boosters, Inc. (“Seminole Boosters”) have been received. FSU also projects receiving additional donations in Fiscal Years 2024 through 2028 totaling \$22.0 million, which are expected to be pledged to pay debt service on the Bonds. The Project received legislative approval in the 2023-24 General Appropriations Act. Proceeds of the Bonds will not be used to finance operating expenses of the University or its athletics DSOs.

The Board of Trustees hereby expresses its intention for the University to be reimbursed from proceeds of this tax-exempt financing for capital expenditures to be paid by the University in connection with the incurrence of debt for the purpose of

acquiring, constructing, equipping, and installing the Project. The University expects to use legally available funds to pay such costs, including, but not limited to, capital expenditures, costs of design, engineering, retrofitting, and other costs associated with the incurrence of debt. It is reasonably expected that the total amount of debt to be incurred, in one or more financings, by the University with respect to the Project will not exceed \$255,000,000. This Resolution shall constitute a “declaration of official intent” within the meaning of Treas. Reg. § 1.150-2 (Proceeds of bonds used for reimbursement) promulgated pursuant to the Internal Revenue Code of 1986, as amended, with respect to the debt incurred, in one or more financings, to finance the Project.

Section 3. The Bonds will be secured by certain revenue streams contractually pledged to FSUAA by FSU’s athletics department and Seminole Boosters, including athletic conference distribution revenue, recurring annual Seminole Booster membership fees, Project-specific donations received within 5 years of issuance, sponsorships and advertising money, proceeds from ticket sales, and game guarantees (collectively, the “Pledged Revenues”). The University is committed to ensuring that sufficient revenue will be generated to fulfill FSUAA’s debt service obligations with respect to the Bonds.

Section 4. It is expected that the Bonds will be sold through a competitive sale. The Bonds will mature not more than 30 years after issuance, including any extensions or renewals thereof. The Project has an estimated useful life of 80 years, which exceeds the anticipated final maturity of the Bonds. It is expected that the Bonds will bear interest at a fixed interest rate.

Section 5. The Board of Trustees will comply with all requirements of federal and state law relating to the Bonds, including, but not limited to, laws relating to maintaining any exemption from taxation of interest payments on the Bonds and continuing secondary market disclosure of information regarding the Bonds, if necessary. The University will promptly notify the Division of any information required to be disclosed pursuant to the Continuing Disclosure Agreement for the Bonds and will respond to requests for information from the Division in a timely manner.

Section 6. The University and FSUAA will comply with the Board of Governors’ Debt Management Guidelines and the debt management policy of the University.

Section 7. The Chair and Chief Executive Officer of FSUAA, the University President, the University Vice President, the Senior Vice President for Finance and Administration, and other authorized representatives of FSUAA, the University, and the Board of Trustees are hereby authorized to take all actions and steps, to execute all instruments, documents, and contracts, and to take all or actions, as necessary or desirable in connection with the execution, sale, and delivery of the Bonds.

Section 8. The Board of Trustees hereby declares that the Bonds shall have a first lien on the Pledged Revenues and such lien shall be senior in priority to any obligations created by that certain internal loan agreement between the University and the University's athletics department dated March 31, 2016, including any amendments or modifications thereto.

Section 9. In making the determination to finance the Project, the Board of Trustees has reviewed the information attached to Appendix A, attached hereto.

Section 10. This Resolution shall become effective immediately upon its adoption.

ADOPTED this 8th day of September, 2023.

APPENDIX A

The following documents have been reviewed by the Board of Trustees prior to the execution of this Resolution:

- (a) The Project program, feasibility study, or consultant report.
- (b) A draw schedule for the Project.
- (c) Sources and uses of funds for the Project.
- (d) An estimated debt service schedule.
- (e) A description of the security supporting repayment of the Bonds and the lien position the Bonds will have on that security.
- (f) A five year projection of the Pledged Revenues and the debt service coverage.
- (g) Statement of legislative approval for the Project.
- (h) A competitive versus negotiated sale analysis.
- (i) Analysis of the Project's expected return on investment.

DOAK CAMPBELL STADIUM MARKET & FINANCIAL FEASIBILITY STUDY UPDATE

MAY 26, 2020

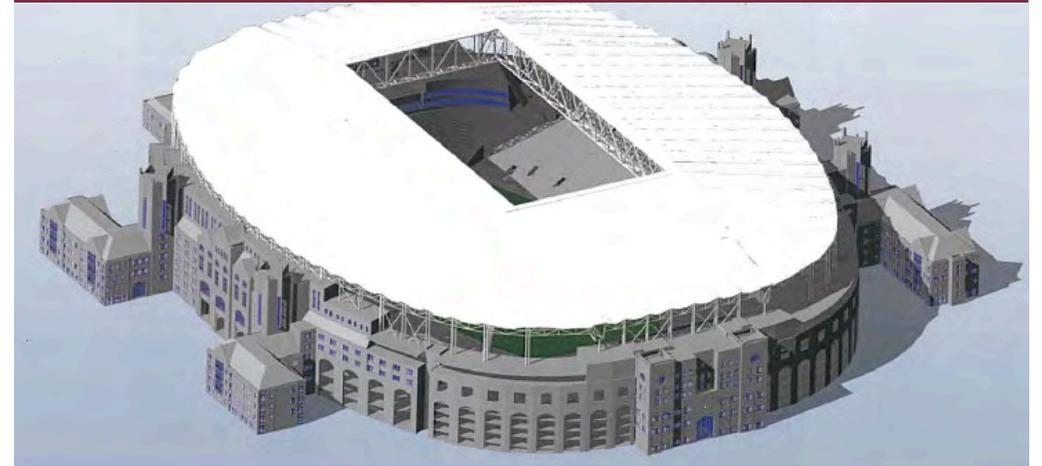




EYES TO THE FUTURE GOALS STADIUM MASTER PLAN

- Participation & Maximize Attendance From Constituent Groups
- Maximize Amenities & Comfort Level Of Stadium
- Maximize Donor & Customer Experience
- Design Stadium To Respond To Current & Future Opportunities
- Address Football Operational Needs
- Activate Stadium Beyond Football
- Identify and Maximize Untapped Revenue Streams
- Increase Net Operating Income
- Mitigate Financial Risk

ROOF STRUCTURE



CHAIRBACK SEATING





EYES TO THE FUTURE GOALS STADIUM MASTER PLAN

- Participation & Maximize Attendance From Constituent Groups
- Maximize Amenities & Comfort Level Of Stadium
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- Design Stadium To Respond To Current & Future Opportunities
- Address Football Operational Needs
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- Identify and Maximize Untapped Revenue Streams
- Increase Net Operating Income
- Mitigate Financial Risk

SOCIAL GATHERING SPACES



SEATING DIVERSIFICATION





EYES TO THE FUTURE GOALS STADIUM MASTER PLAN

- Participation & Maximize Attendance From Constituent Groups
- Maximize Amenities & Comfort Level Of Stadium
- Maximize Donor & Customer Experience
- Design Stadium To Respond To Current & Future Opportunities
- Address Football Operational Needs
- Activate Stadium Beyond Football
- Identify and Maximize Untapped Revenue Streams
- Increase Net Operating Income
- Mitigate Financial Risk

ENHANCED CONCOURSE SPACES



OUTSIDE THE STADIUM ACTIVATION





2012 DOAK CAMPBELL STADIUM MASTER PLAN

| | Original Project Costs | 2020 Dollars Project Costs ¹ |
|---|--------------------------|---|
| East Sideline Cost | \$65M - \$70M | \$82M - \$89M |
| West Sideline Cost | \$70M - \$80M | \$89M - \$101M |
| South End Zone Cost* | \$38M - \$50M | \$38M - \$63M |
| Unfinished Master Plan Cost | \$135M - \$150M | \$171M - \$190M |
| + Roof Canopy | \$25M - \$47M | \$32M - \$60M |
| Unfinished Master Plan + Roof Cost | \$160M - \$197M | \$203M - \$250M |

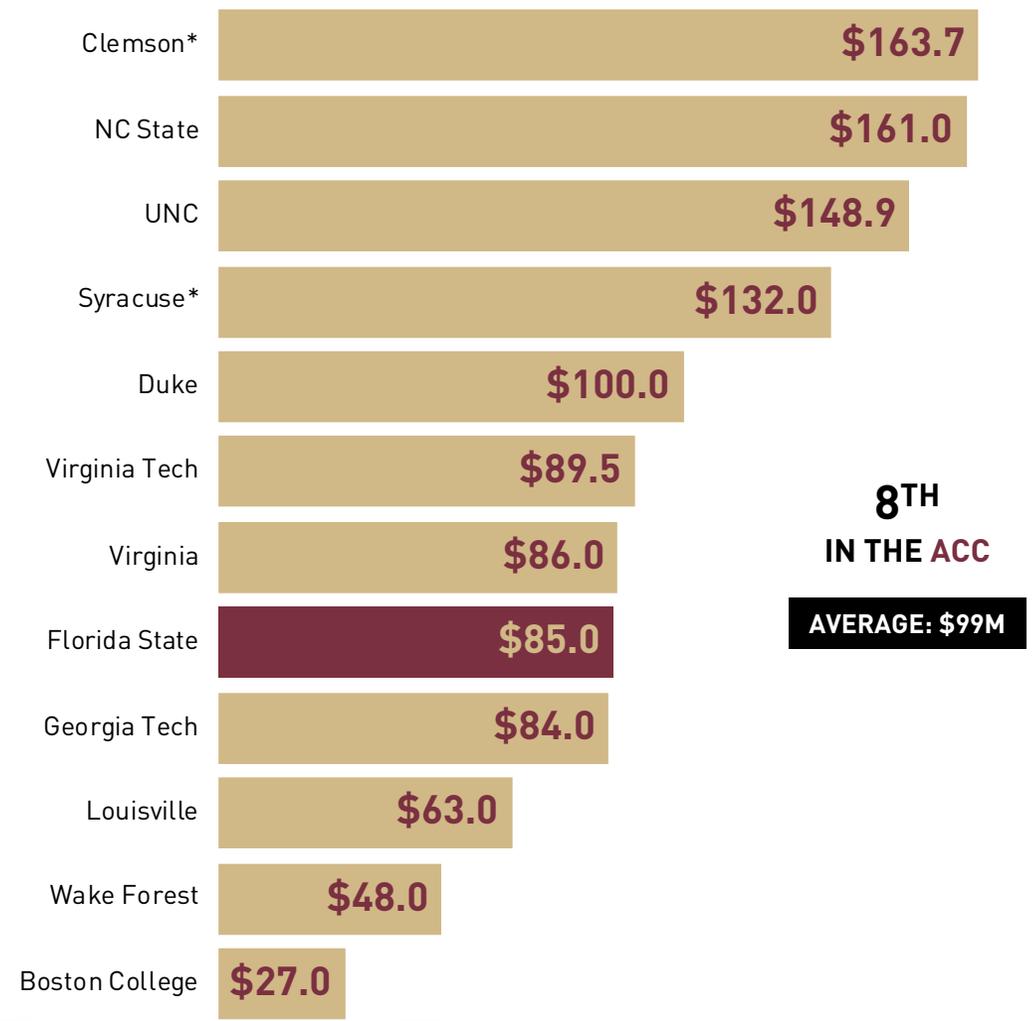
¹ -3% Cost Escalation per Year

AN \$85 MILLION SOUTH END ZONE RENOVATION WAS COMPLETED IN 2016.

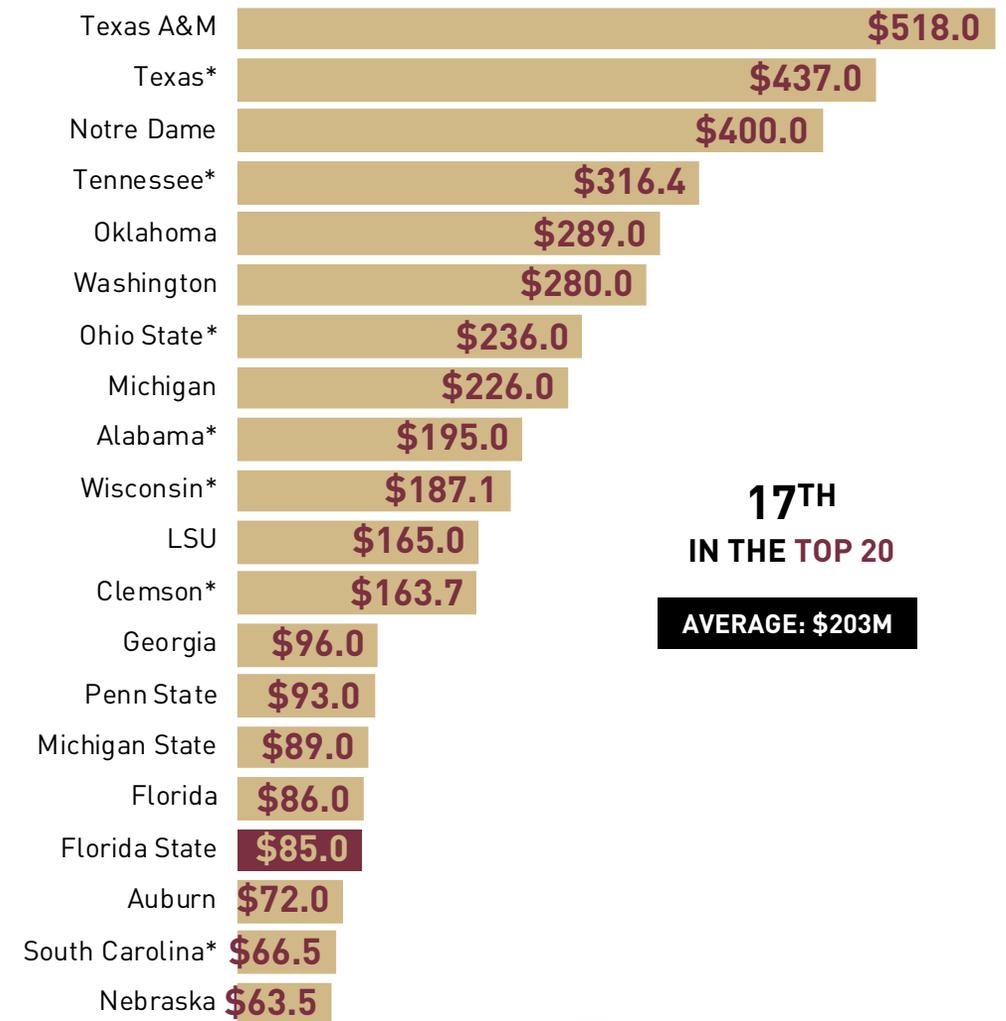


STADIUM INVESTMENT PAST 20 YEARS

ACC INSTITUTIONS (IN \$M)



TOP 20 ATTENDANCE INSTITUTIONS (IN \$M)



*Includes projects under construction/planned



MARKET STUDY GOALS & OBJECTIVES



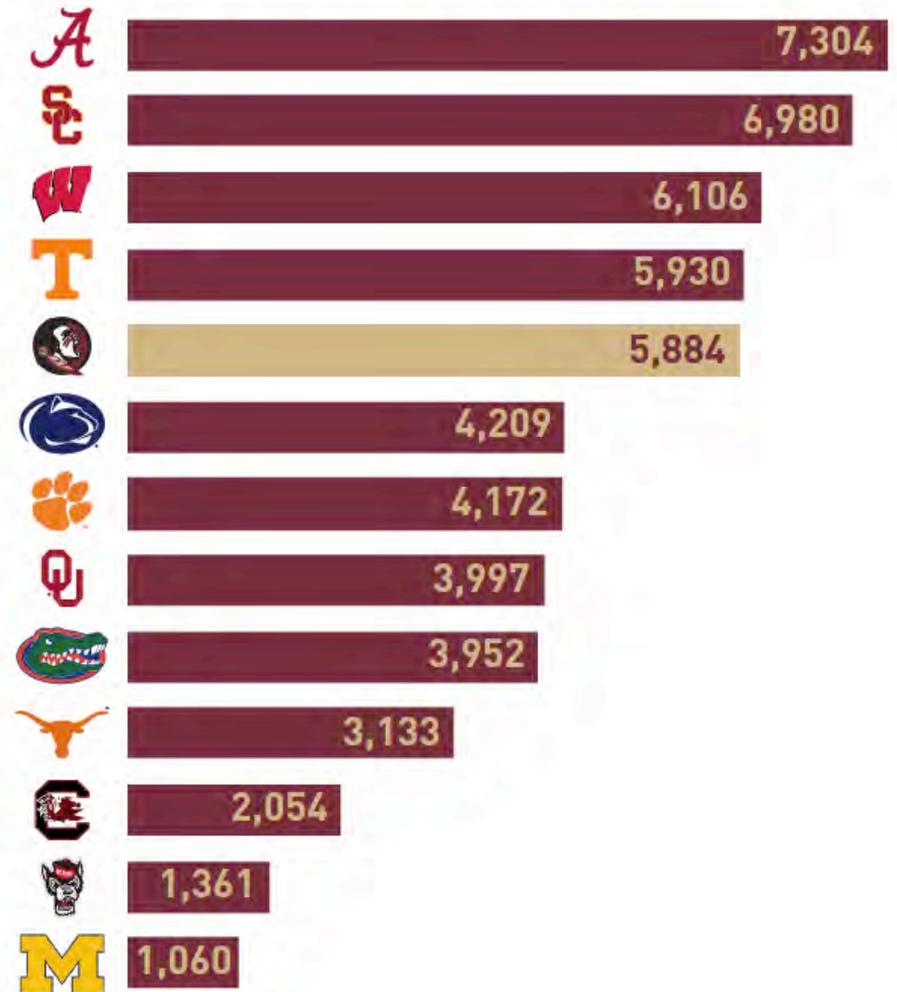
- 1 **COLLABORATE WITH FSU** to develop new and enhanced seating concepts
- 2 Ensure **DONOR AND FAN ENGAGEMENT** in decision-making process
- 3 **TEST THE FEASIBILITY** of a variety of new and enhanced seating concepts and quantify demand in the market
- 4 Understand appetite for donor seating and **ESTIMATE POTENTIAL INCREMENTAL REVENUE FROM A RE-PRICED SEATING BOWL**
- 5 **IDENTIFY OTHER REVENUE** opportunities to help cover capital costs and increase net operating income
- 6 Project **INCREMENTAL OPERATING REVENUE & EXPENDITURES** associated with a renovated stadium
- 7 **RECOMMEND PHASING** of market-supportable renovation projects
- 8 Evaluate **PROJECT FUNDING CAPACITY**
- 9 Ensure best **RETURN ON INVESTMENT**



SURVEY RESPONSE OVERVIEW

| SURVEY GROUP | POPULATION | COMPLETED SURVEYS | % OF POPULATION SURVEYED |
|--|----------------|-------------------|--------------------------|
| Seminole Boosters & Season Ticket Holders | 16,359 | 2,860 | 17.5% |
| Football Occasional Ticket Buyers (Non-Donors) | 69,582 | 1,681 | 2.4% |
| Other | 153,997 | 1,343 | 0.9% |
| TOTAL | 239,938 | 5,884 | 2.5% |

TOTAL SURVEYS COMPLETED COMPARISON



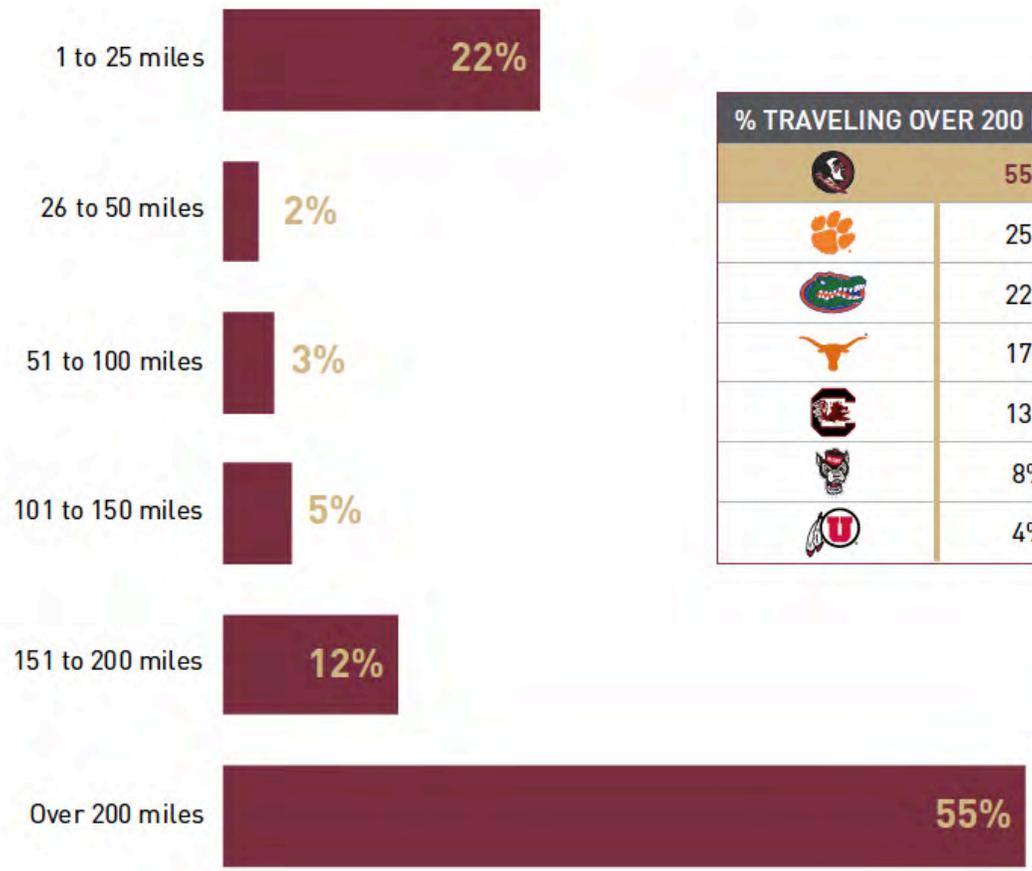
5,884 RESPONDENTS COMPLETED THE SURVEY, REPRESENTING A STATISTICALLY SIGNIFICANT SAMPLE SIZE FROM WHICH TO ASSESS INTEREST & DEMAND

MARGIN OF ERROR: +/-1.3%

*99% of surveys were completed prior to the widespread implementation of COVID-19 social distancing measures on March 16th



DISTANCE TRAVELED ON GAME DAY (ONE WAY)

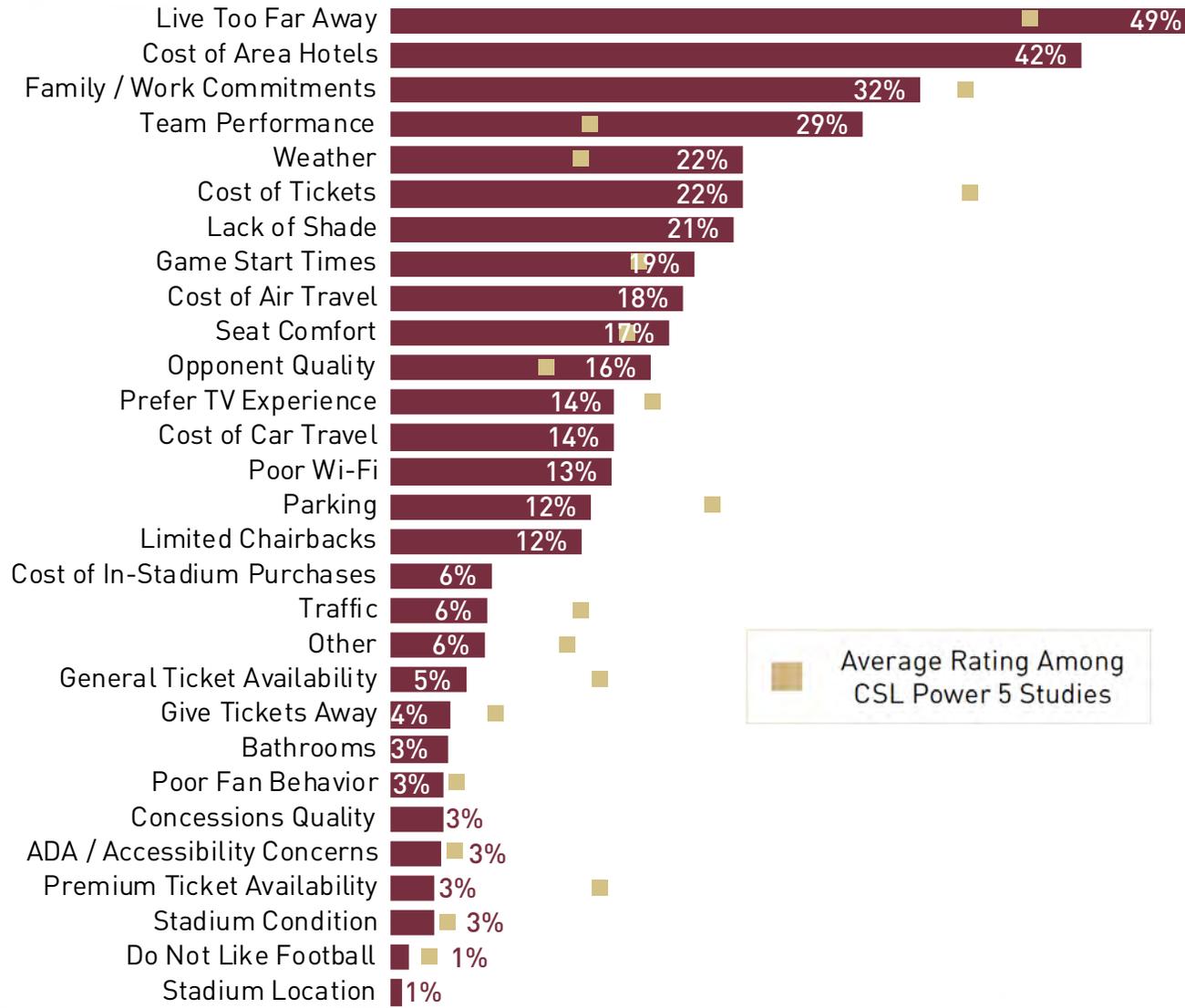


| % TRAVELING OVER 200 MILES | |
|----------------------------|-----|
| | 55% |
| | 25% |
| | 22% |
| | 17% |
| | 13% |
| | 8% |
| | 4% |





REASONS FOR NOT ATTENDING MORE GAMES



BARRIERS SIGNIFICANTLY GREATER

- LIVE TOO FAR AWAY
- TEAM PERFORMANCE
- WEATHER
- OPPONENT QUALITY

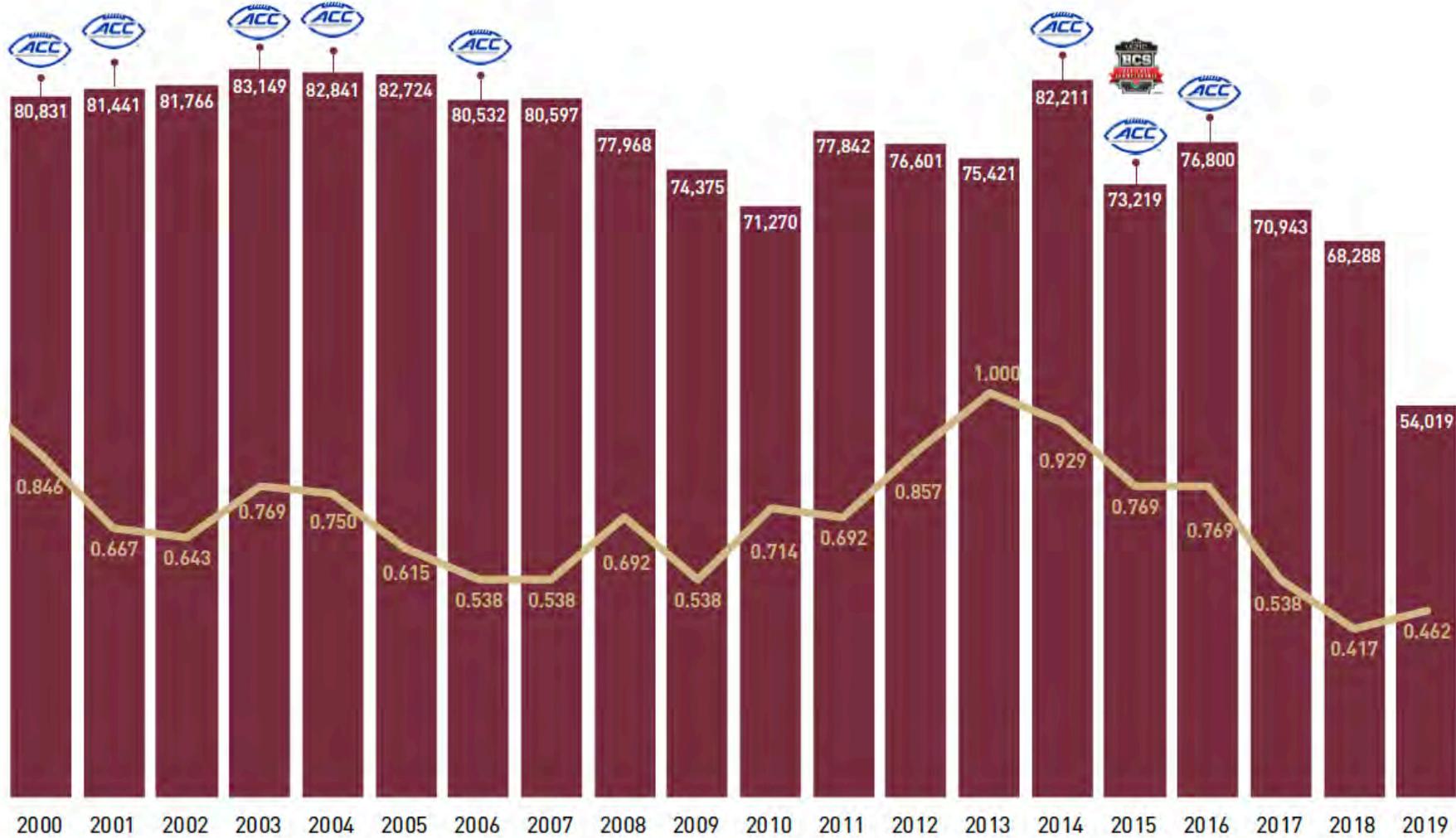
BARRIERS SIGNIFICANTLY LESS

- COST OF TICKETS
- PARKING
- TRAFFIC
- TICKET AVAILABILITY

Note: Asked of those respondents attending less than four home games per year; multiple responses accepted



20-YEAR REPORTED ATTENDANCE HISTORY



| AVERAGE ATTENDANCE | |
|--------------------|--------|
| 2000-09: | 80,622 |
| 2010-19: | 72,661 |

| AVERAGE WINNING PERCENTAGE | |
|----------------------------|-----|
| 2000-09: | 66% |
| 2010-19: | 72% |

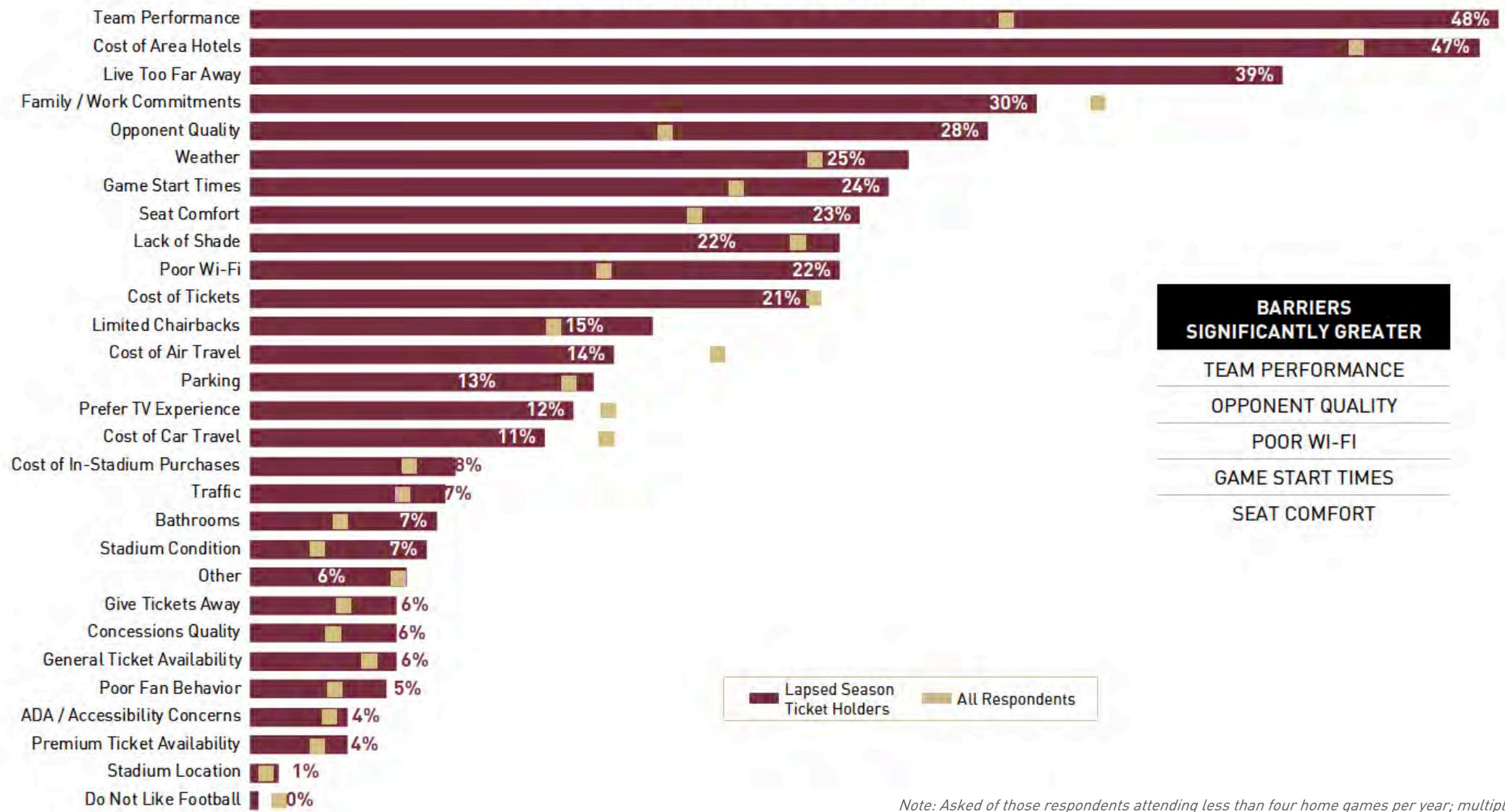


Source: NCAA.



LAPSED SEASON TICKET HOLDERS

REASONS FOR NOT ATTENDING MORE



BARRIERS SIGNIFICANTLY GREATER

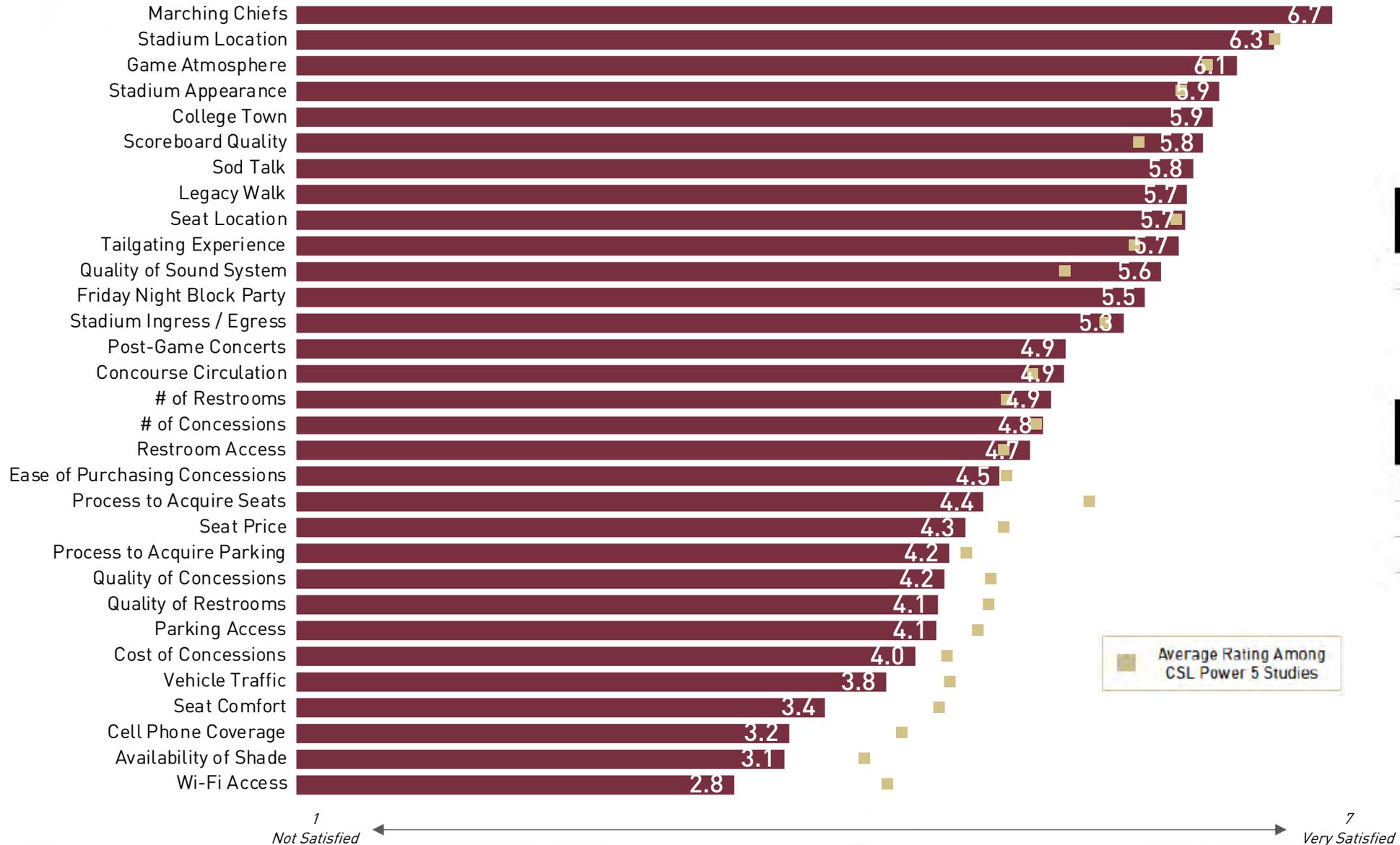
- TEAM PERFORMANCE
- OPPONENT QUALITY
- POOR WI-FI
- GAME START TIMES
- SEAT COMFORT

Legend: Lapsed Season Ticket Holders (dark red), All Respondents (gold)

Note: Asked of those respondents attending less than four home games per year; multiple responses accepted



CURRENT STADIUM SATISFACTION



AREAS OVER PERFORMING VS. POWER 5

QUALITY OF SOUND SYSTEM

SCOREBOARD QUALITY

AREAS UNDER PERFORMING VS. POWER 5

PROCESS TO ACQUIRE SEATS

SEAT COMFORT

CELL PHONE / WIFI ACCESS

AVAILABILITY OF SHADE

■ Average Rating Among CSL Power 5 Studies

1 ← Not Satisfied | → Very Satisfied 7



SATISFACTION BY SEAT LOCATION

| | Seat Location | Stadium Appearance | Scoreboard Quality | Entry / Exiting | Quality of Sound System | Concourse Circulation | # of Restrooms | # of Concessions | Restroom Access | Process to Acquire Seats | Ease of Purchasing Concessions | Seat Price | Quality of Restrooms | Quality of Concessions | Seat Comfort | Availability of Shade | Cost of Concessions | Cell Phone Coverage | WI-Fi Access |
|----------------|---------------|--------------------|--------------------|-----------------|-------------------------|-----------------------|----------------|------------------|-----------------|--------------------------|--------------------------------|------------|----------------------|------------------------|--------------|-----------------------|---------------------|---------------------|--------------|
| Average | 6.2 | 6.0 | 5.7 | 5.5 | 5.4 | 5.1 | 5.0 | 5.0 | 4.8 | 4.8 | 4.6 | 4.3 | 4.2 | 4.2 | 4.0 | 3.8 | 3.8 | 3.0 | 2.7 |
| Suites | 6.3 | 6.5 | 6.1 | 6.4 | 6.5 | 6.5 | 5.8 | 5.8 | 5.8 | 5.1 | 5.4 | 5.0 | 5.3 | 4.9 | 4.8 | 4.1 | 4.5 | 4.3 | 3.4 |
| Dunlap | 6.2 | 6.1 | 5.7 | 6.0 | 6.2 | 5.2 | 5.6 | 5.5 | 5.4 | 4.9 | 5.2 | 4.6 | 4.8 | 5.1 | 4.7 | 3.9 | 4.4 | 3.6 | 3.6 |
| End Zone | 6.7 | 6.5 | 5.4 | 6.0 | 5.5 | 5.7 | 4.9 | 5.4 | 4.9 | 4.7 | 5.0 | 5.4 | 4.0 | 4.6 | 4.6 | 3.8 | 4.1 | 2.5 | 2.4 |
| West Sideline | 6.1 | 5.9 | 5.6 | 5.4 | 5.1 | 4.9 | 5.0 | 4.9 | 4.8 | 4.7 | 4.5 | 4.2 | 4.2 | 4.1 | 3.9 | 4.0 | 3.5 | 3.0 | 2.7 |
| East Sideline | 5.9 | 5.8 | 5.5 | 5.1 | 5.5 | 4.9 | 4.4 | 4.7 | 5.0 | 5.2 | 4.0 | 4.3 | 3.5 | 3.8 | 3.8 | 3.1 | 4.0 | 1.8 | 1.8 |

Materially Over-Indexes Stadium Average
 Materially Under-Indexes Stadium Average

More Satisfied ↑
↓ Less Satisfied

← More Satisfied Less Satisfied →

PATRONS SITTING IN PREMIUM SEAT LOCATIONS ARE GENERALLY MORE SATISFIED WITH STADIUM ELEMENTS

PATRONS SITTING ALONG THE EAST SIDELINE ARE GENERALLY LESS SATISFIED WITH STADIUM ELEMENTS

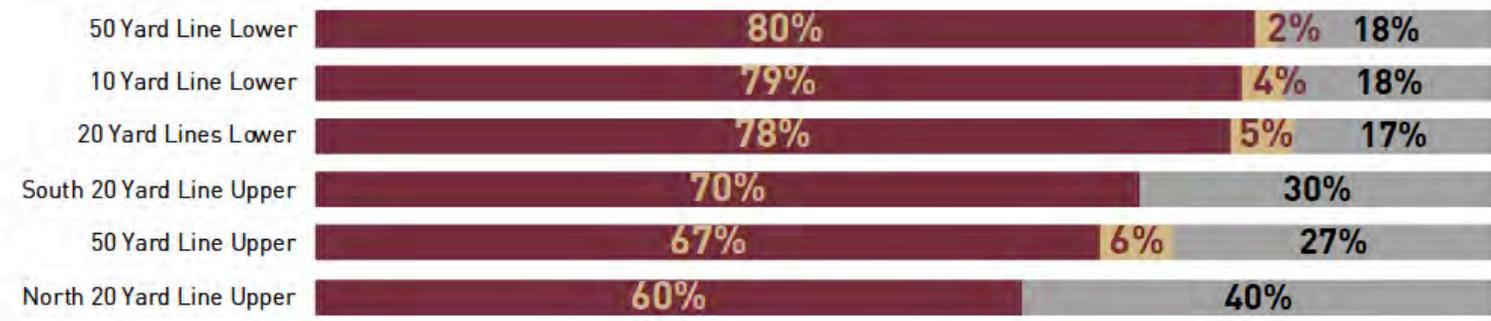


SEASON TICKET HOLDER RENEWAL INTENT

WEST SIDELINE



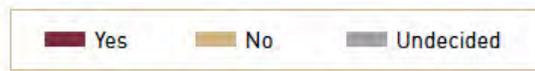
EAST SIDELINE



END ZONE



PREMIUM SEATING



| % INTENDING TO RENEW | |
|----------------------|-----|
| | 97% |
| | 90% |
| | 81% |
| | 78% |
| | 77% |

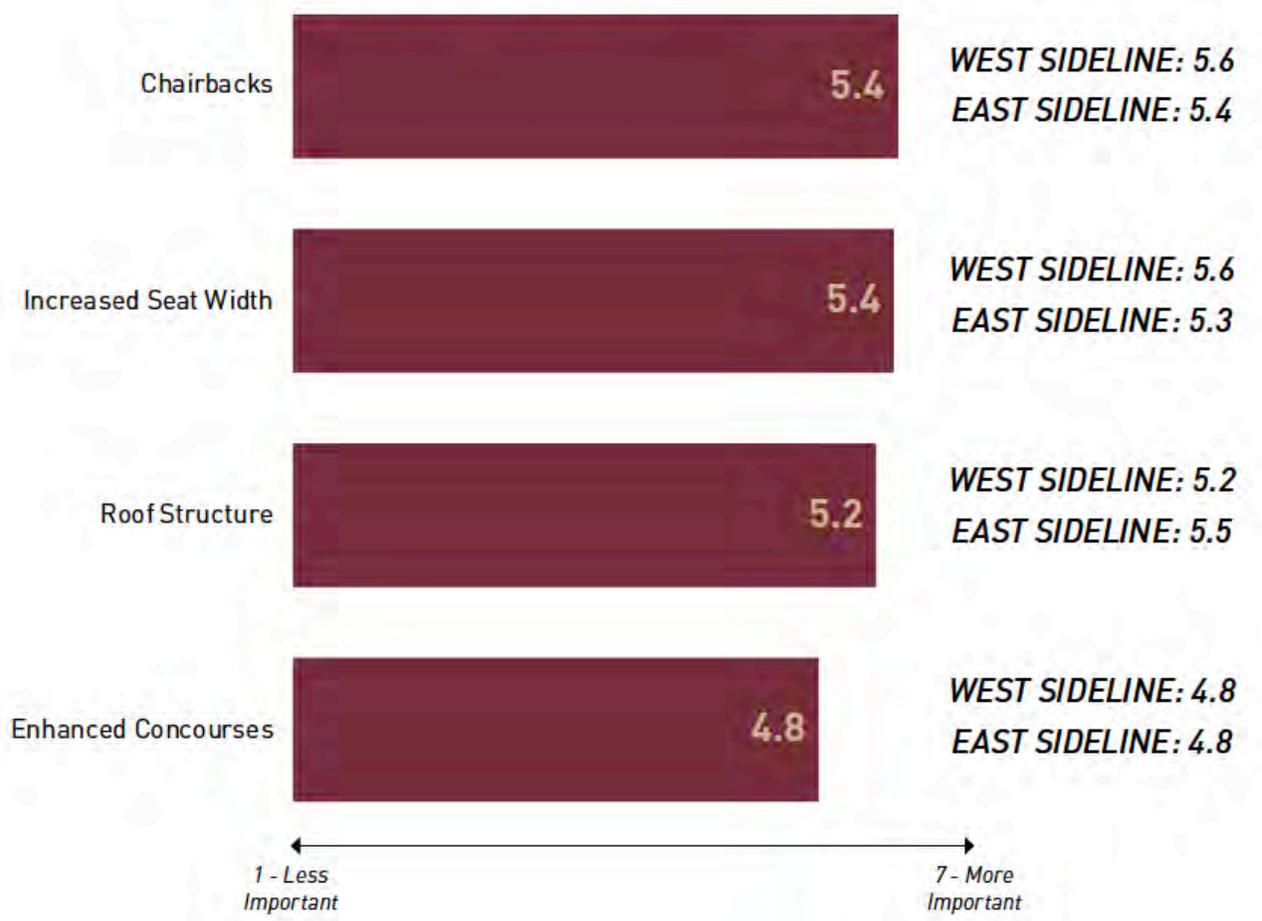
RENEWAL UNCERTAINTY DRIVEN BY:

- > Team Performance
- > Lack of Patron Comfort
- > Poor Heat Mitigation

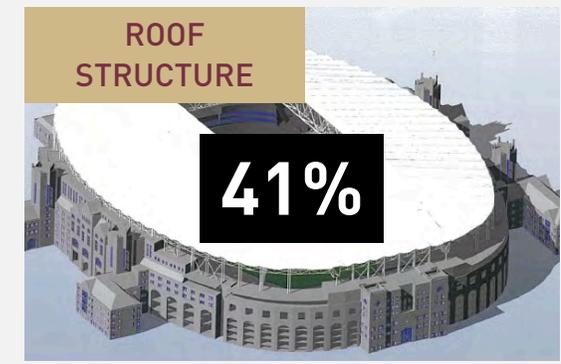


KEY STADIUM ENHANCEMENT PRIORITIES

IMPORTANCE OF POTENTIAL ENHANCEMENTS

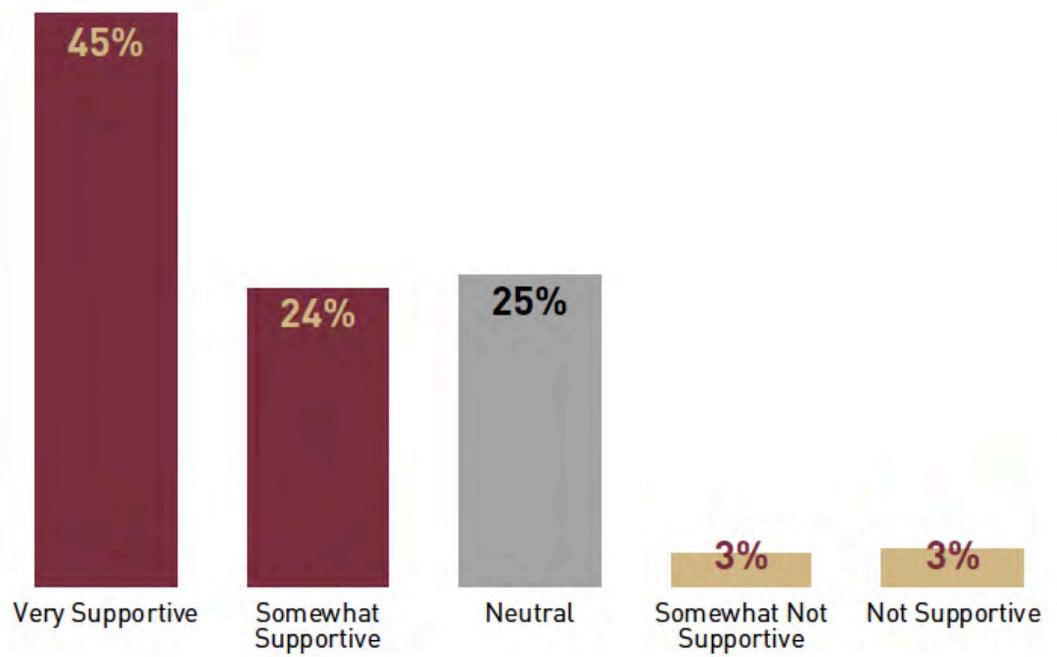


SINGLE MOST IMPORTANT ENHANCEMENT





ENHANCEMENT SUPPORT IF RE-SEAT REQUIRED

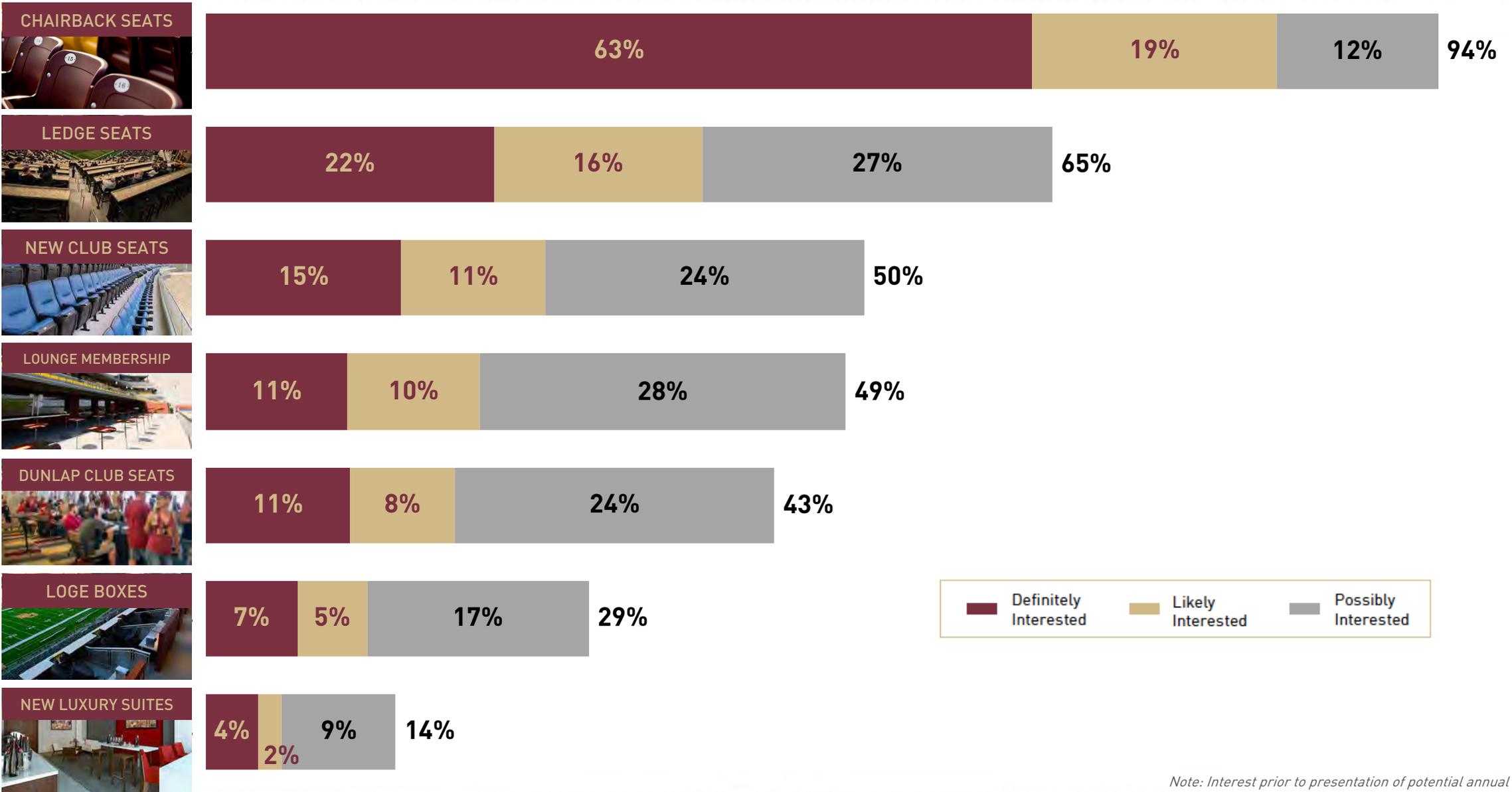


94%
**OF RESPONDENTS WOULD NOT
 OPPOSE STADIUM ENHANCEMENTS
 IF A STADIUM RE-SEAT IS REQUIRED**





INITIAL SEATING CONCEPT INTEREST



Note: Interest prior to presentation of potential annual price points



DEMAND SUMMARY

| | DEMAND | | PRICE POINTS | | |
|----------------------------|---------------|-----------------|--------------|------------|--|
| Chairback Seats | 8,200 | - 12,500 | \$1,000 | - \$1,500 | → APPETITE FOR ENHANCED GENERAL SEAT EXPERIENCE |
| Lounge Membership | 370 | - 1,030 | \$500 | - \$1,500 | |
| Ledge Seats | 690 | - 1,400 | \$1,000 | - \$2,000 | → INTEREST IN DIVERSE PREMIUM PRODUCT TYPES AT VARIETY OF PRICE POINTS |
| Dunlap Club Seats | 1,200 | - 1,600 | \$1,825 | - \$2,725 | |
| New Club Seats | 420 | - 710 | \$3,000 | - \$5,000 | |
| Loge Boxes | 30 | - 80 | \$12,000 | - \$20,000 | |
| New Luxury Suites | 7 | - 18 | \$45,000 | - \$75,000 | |
| Total Premium Seats | 11,112 | - 17,848 | | | |

\$

↑

↓

\$\$\$\$



IDENTIFIED STADIUM ENHANCEMENTS

Eyes To The Future Goals

| | Maximize Attendance From Constituent Groups | Maximize Amenities & Comfort Level Of Stadium | Maximize Donor & Customer Experience | Design Stadium To Respond To Current & Future Opportunities | Address Football Operational Needs | Activate Stadium Beyond Football | Identify and Maximize Untapped Revenue Streams | Increase Net Operating Income | Mitigate Financial Risk |
|--|---|---|--------------------------------------|---|------------------------------------|----------------------------------|--|-------------------------------|-------------------------|
|--|---|---|--------------------------------------|---|------------------------------------|----------------------------------|--|-------------------------------|-------------------------|

NEAR-TERM ENHANCEMENTS

| | | | | | | | | | |
|-------------------------|---|---|---|---|--|---|---|---|-----|
| Social Gathering Spaces | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | ✓ | TBD |
|-------------------------|---|---|---|---|--|---|---|---|-----|

MID-TERM ENHANCEMENTS

| | | | | | | | | | |
|----------------|---|---|---|---|--|---|---|---|-----|
| Roof Structure | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | ✓ | TBD |
|----------------|---|---|---|---|--|---|---|---|-----|

LONG-TERM ENHANCEMENTS

| | | | | | | | | | |
|--------------------------------------|---|---|---|---|--|---|---|---|-----|
| Dunlap Club / South End Zone Premium | ✓ | ✓ | ✓ | ✓ | | ✓ | ✓ | ✓ | TBD |
|--------------------------------------|---|---|---|---|--|---|---|---|-----|

| | | | | | | | | | |
|-----------------------|---|---|---|---|---|---|---|---|-----|
| East & West Sidelines | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | TBD |
|-----------------------|---|---|---|---|---|---|---|---|-----|



REVENUE FUNDING OPPORTUNITIES

| | REQUIRES CAPITAL INVESTMENT | UPFRONT REVENUE | ANNUAL REVENUE |
|------------------------------------|-----------------------------|-----------------|----------------|
| 1. Premium Seating | YES | | ✓ |
| 2. Capital Seat Gifts | YES | ✓ | |
| 3. Founders Program | YES | ✓ | |
| 4. Title Naming Rights | NO | | ✓ |
| 5. Presenting Sponsor | NO | | ✓ |
| 6. Donor Recognition Opportunities | YES/NO | ✓ | |
| 7. Seating Bowl Donation Lift | NO | | ✓ |
| 8. Ticket Surcharge/Fee | NO | | ✓ |
| 9. Non-Game Day Rentals/Events | YES/NO | | ✓ |
| 10. Game-Day Alcohol Sales | NO | | ✓ |
| 11. University Club | YES | | ✓ |
| 12. Hotel / Condo Licenses | YES | ✓ | ✓ |
| 13. Stadium Chairbacks | YES | | ✓ |
| 14. Student Fees | YES/NO | | ✓ |
| 15. IMG Media Rights | YES | ✓ | ✓ |
| 16. Parking | YES/NO | ✓ | ✓ |

Revenue Identified

Requires Further Investigation

Not Applicable



PRELIMINARY FUNDING CONSIDERATIONS

| | Low | High | Mid |
|---|-----------------|-----------------|-----------------|
| Annual Revenues | | | |
| Net Incremental Premium & Ticket Revenue ⁽¹⁾ | \$8.0M | \$8.0M | \$8.0M |
| Presenting Sponsor Naming Rights | \$1.5M | \$2.0M | \$1.8M |
| Ticket Surcharge (\$4 to \$5 increment) | \$1.4M | \$1.7M | \$1.6M |
| Club Rentals & Other Events | \$1.0M | \$1.4M | \$1.2M |
| Concessions Optimization | \$0.3M | \$0.3M | \$0.3M |
| Net Annual Incremental Income | \$12.2 M | \$13.4 M | \$12.8 M |
| Funding Potential | | | |
| Net Annual Incremental Income ⁽⁴⁾ | \$159M | \$175M | \$167M |
| Donor Recognition | \$25M | \$30M | \$28M |
| Capital Seat Gifts | \$12M | \$19M | \$15M |
| 30-Year Funding Potential | \$196M | \$224M | \$210M |

⁽¹⁾Annual ticket revenues are incremental, net of existing revenues, inclusive F&B costs and increased operating costs

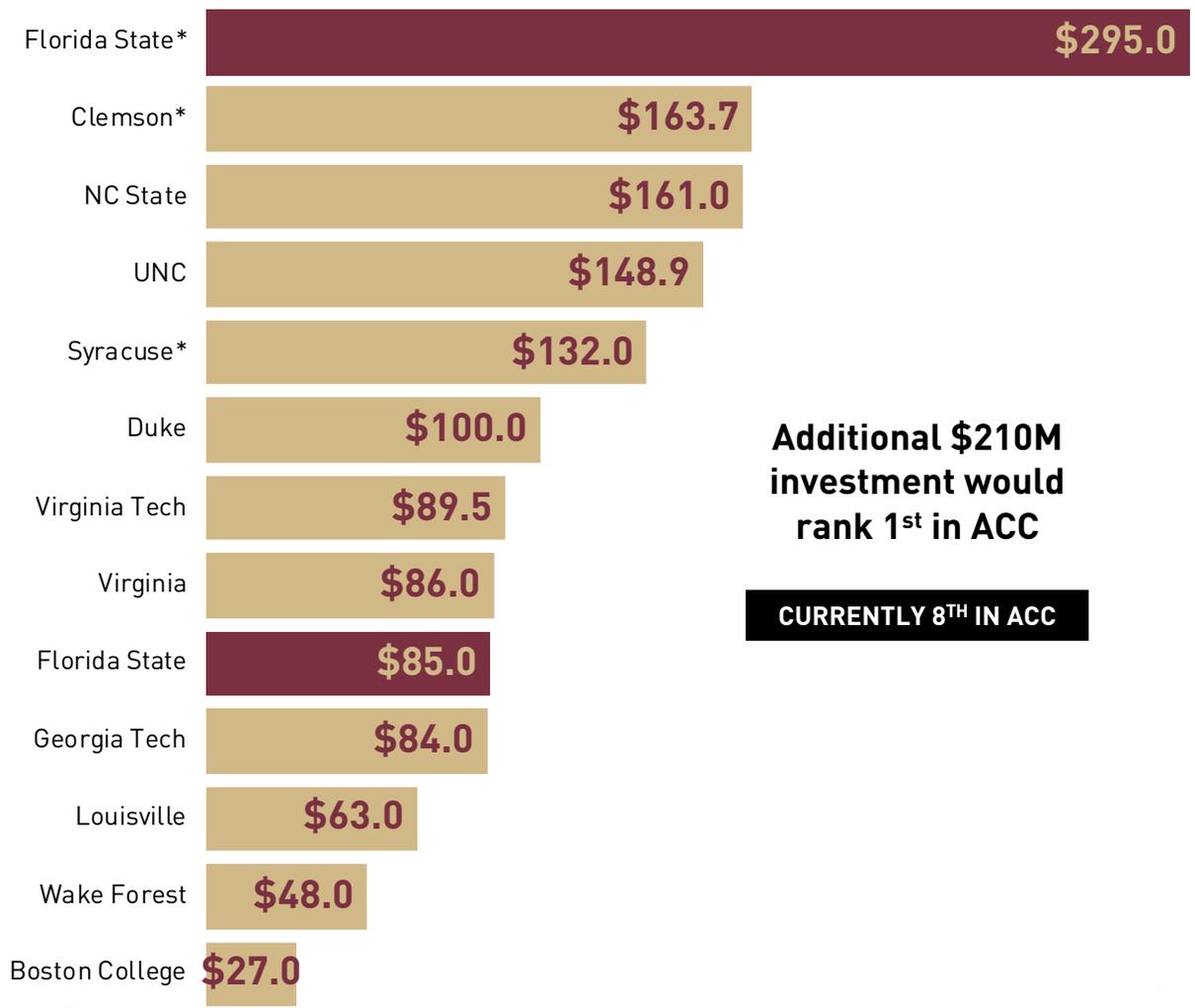
⁽³⁾Eyes to the Future Campaign estimates provided by University representatives

⁽⁴⁾Assumes 4.5% rate and 1.25x debt coverage over a 30-year period



STADIUM INVESTMENT PAST 20 YEARS

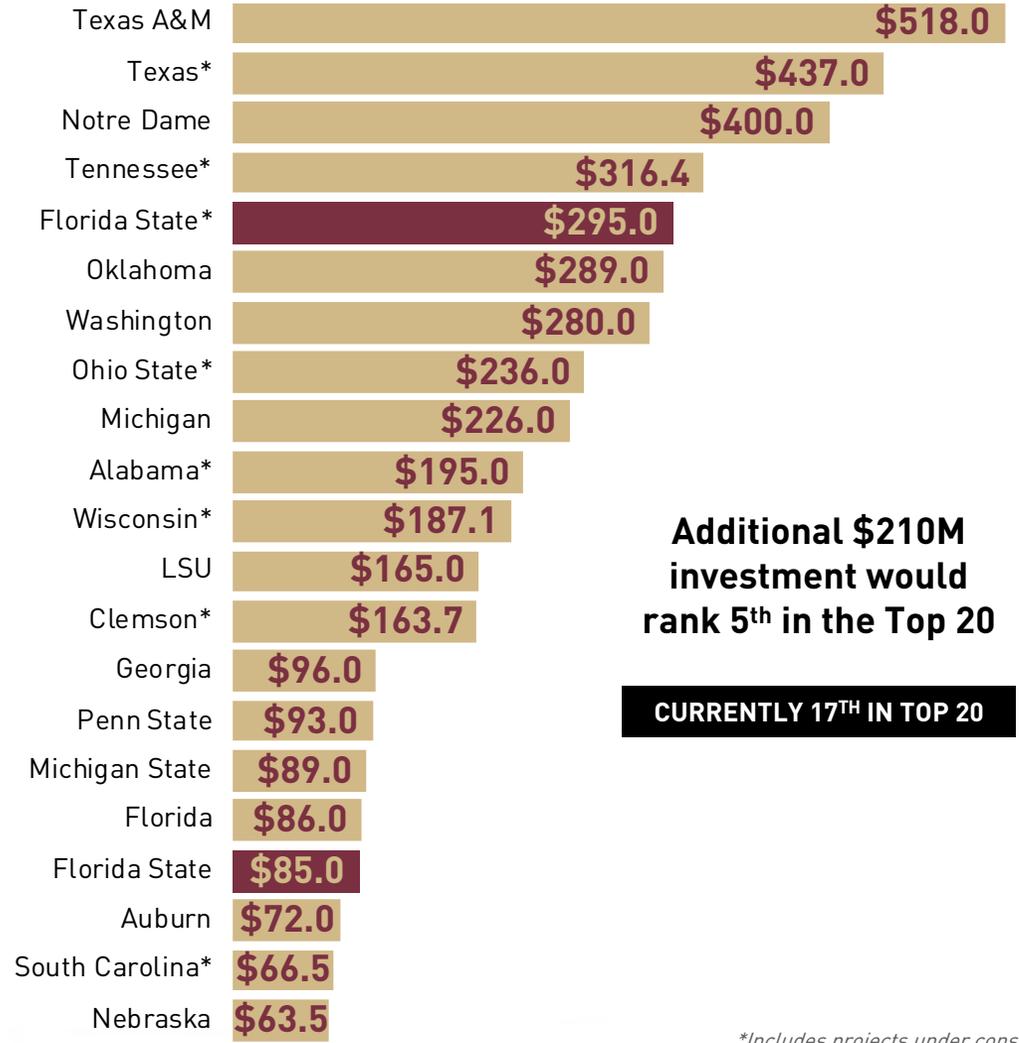
ACC INSTITUTIONS (IN \$M)



Additional \$210M investment would rank 1st in ACC

CURRENTLY 8TH IN ACC

TOP 20 ATTENDANCE INSTITUTIONS (IN \$M)



Additional \$210M investment would rank 5th in the Top 20

CURRENTLY 17TH IN TOP 20

**Includes projects under construction/planned*



UPDATE MASTER PLAN

UPDATE COST ESTIMATES

ASSESS RETURN ON INVESTMENT

DETERMINE PROJECT PHASING

Construction Costs

The total estimated cost for the project is \$233,305,705, consisting of \$60,969,000 of soft costs and \$172,336,705 of construction costs. The project is expected to start construction in November 2023 and be completed in August 2025. The estimated useful life of the facility is 80 years. The estimated draw schedule is provided below.

| Month | Total Monthly Draw | % of Total |
|---------------|---------------------------|-------------------|
| Nov-22 | \$185,750 | 0.08% |
| Dec-22 | 0 | 0.00% |
| Jan-23 | 0 | 0.00% |
| Feb-23 | 351,346 | 0.15% |
| Mar-23 | 410,548 | 0.18% |
| Apr-23 | 60,000 | 0.03% |
| May-23 | 610,256 | 0.26% |
| Jun-23 | 715,160 | 0.31% |
| Jul-23 | 647,756 | 0.28% |
| Aug-23 | 848,239 | 0.36% |
| Sep-23 | 1,964,239 | 0.84% |
| Oct-23 | 2,501,739 | 1.07% |
| Nov-23 | 2,991,489 | 1.28% |
| Dec-23 | 3,765,989 | 1.61% |
| Jan-24 | 4,162,891 | 1.78% |
| Feb-24 | 5,486,151 | 2.35% |
| Mar-24 | 6,170,152 | 2.64% |
| Apr-24 | 6,629,584 | 2.84% |
| May-24 | 9,141,648 | 3.92% |
| Jun-24 | 9,958,713 | 4.27% |
| Jul-24 | 12,602,983 | 5.40% |
| Aug-24 | 14,088,506 | 6.04% |
| Sep-24 | 14,188,506 | 6.08% |
| Oct-24 | 13,528,083 | 5.80% |
| Nov-24 | 12,444,946 | 5.33% |
| Dec-24 | 11,350,925 | 4.87% |
| Jan-25 | 12,100,448 | 5.19% |
| Feb-25 | 12,100,448 | 5.19% |
| Mar-25 | 12,012,948 | 5.15% |
| Apr-25 | 12,112,948 | 5.19% |
| May-25 | 12,562,948 | 5.38% |
| Jun-25 | 12,312,948 | 5.28% |
| Jul-25 | 9,635,057 | 4.13% |
| Aug-25 | 6,541,985 | 2.80% |
| Sep-25 | 5,446,900 | 2.33% |
| Oct-25 | 3,142,028 | 1.35% |
| Nov-25 | 531,448 | 0.23% |
| Totals | \$233,305,705 | 100.00% |

**STATE OF FLORIDA, BOARD OF GOVERNORS
FLORIDA STATE UNIVERSITY ATHLETICS ASSOCIATION
REVENUE BONDS, SERIES (to be determined)**

Estimated Sources and Uses of Funds

Sources of Funds

| | | | |
|---------------------------------------|----|-----------------------|---|
| Bond Par Amount | \$ | 255,000,000 | <i>Estimated bond sale amount based on an interest rate of 5.25% for 30 years</i> |
| Stadium Improvement Donations on Hand | | 8,019,593 | <i>Donations on Hand as of August 9, 2023</i> |
| Investment Earnings on Project Fund | | 4,918,136 | <i>Estimated investment earnings at 2% assuming equal monthly draws</i> |
| Total Sources of Funds | | \$ 267,937,729 | |

Basis for Amounts

Uses of Funds

| | | | |
|----------------------------|----|-----------------------|---|
| Project Cost | \$ | 233,305,705 | <i>Planning, Design, Construction & Equipment (includes \$25.0 million of budgeted owner's contingency)</i> |
| Capitalized Interest | | 21,780,347 | <i>Estimated for long-term portion of debt through October 1, 2025</i> |
| Underwriter's Discount | | 5,100,000 | <i>Estimated at 2% of par</i> |
| Costs of Issuance | | 293,723 | <i>Estimated Costs of Issuance provided by DBF</i> |
| Contingency | | 7,457,954 | <i>Contingency for project cost, bond sizing and donations on hand</i> |
| Total Uses of Funds | | \$ 267,937,729 | |

**State of Florida, Board of Governors
Florida State University Athletics Association
Revenue Bonds, Series (to be determined)**

Estimated Debt Service Schedule

Assumptions

Par Amount: \$ 255,000,000

Interest Rate: 5.25%

Term: 30 yrs

Structure: The bonds are structured with two components: an accelerated piece based on estimated receipt of donations for the Stadium project over the next 5 years, and a piece amortized over 30 years with level debt service.

| Fiscal Year | 5-year Accelerated Component | | | 30-year Level Debt Service Component | | | Total | | |
|--------------|------------------------------|---------------------|----------------------|--------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | Principal | Interest | Debt Service | Principal | Interest ¹ | Debt Service | Principal | Interest | Debt Service |
| 2024 | \$ - | \$ 235,397 | \$ 235,397 | \$ - | \$ - | \$ - | \$ - | \$ 235,397 | \$ 235,397 |
| 2025 | 5,315,000 | 871,828 | 6,186,828 | - | - | - | 5,315,000 | 871,828 | 6,186,828 |
| 2026 | 5,095,000 | 595,678 | 5,690,678 | - | 6,222,956 | 6,222,956 | 5,095,000 | 6,818,634 | 11,913,634 |
| 2027 | 3,675,000 | 346,828 | 4,021,828 | 3,860,000 | 12,395,250 | 16,255,250 | 7,535,000 | 12,742,078 | 20,277,078 |
| 2028 | 2,205,000 | 173,184 | 2,378,184 | 4,065,000 | 12,189,909 | 16,254,909 | 6,270,000 | 12,363,094 | 18,633,094 |
| 2029 | 1,645,000 | 64,772 | 1,709,772 | 4,280,000 | 11,973,675 | 16,253,675 | 5,925,000 | 12,038,447 | 17,963,447 |
| 2030 | | | | 4,510,000 | 11,745,956 | 16,255,956 | 4,510,000 | 11,745,956 | 16,255,956 |
| 2031 | | | | 4,745,000 | 11,506,097 | 16,251,097 | 4,745,000 | 11,506,097 | 16,251,097 |
| 2032 | | | | 5,000,000 | 11,253,638 | 16,253,638 | 5,000,000 | 11,253,638 | 16,253,638 |
| 2033 | | | | 5,265,000 | 10,987,659 | 16,252,659 | 5,265,000 | 10,987,659 | 16,252,659 |
| 2034 | | | | 5,545,000 | 10,707,572 | 16,252,572 | 5,545,000 | 10,707,572 | 16,252,572 |
| 2035 | | | | 5,840,000 | 10,412,588 | 16,252,588 | 5,840,000 | 10,412,588 | 16,252,588 |
| 2036 | | | | 6,150,000 | 10,101,919 | 16,251,919 | 6,150,000 | 10,101,919 | 16,251,919 |
| 2037 | | | | 6,480,000 | 9,774,713 | 16,254,713 | 6,480,000 | 9,774,713 | 16,254,713 |
| 2038 | | | | 6,825,000 | 9,429,984 | 16,254,984 | 6,825,000 | 9,429,984 | 16,254,984 |
| 2039 | | | | 7,185,000 | 9,066,947 | 16,251,947 | 7,185,000 | 9,066,947 | 16,251,947 |
| 2040 | | | | 7,570,000 | 8,684,681 | 16,254,681 | 7,570,000 | 8,684,681 | 16,254,681 |
| 2041 | | | | 7,970,000 | 8,282,006 | 16,252,006 | 7,970,000 | 8,282,006 | 16,252,006 |
| 2042 | | | | 8,395,000 | 7,858,003 | 16,253,003 | 8,395,000 | 7,858,003 | 16,253,003 |
| 2043 | | | | 8,840,000 | 7,411,425 | 16,251,425 | 8,840,000 | 7,411,425 | 16,251,425 |
| 2044 | | | | 9,310,000 | 6,941,156 | 16,251,156 | 9,310,000 | 6,941,156 | 16,251,156 |
| 2045 | | | | 9,810,000 | 6,445,819 | 16,255,819 | 9,810,000 | 6,445,819 | 16,255,819 |
| 2046 | | | | 10,330,000 | 5,923,969 | 16,253,969 | 10,330,000 | 5,923,969 | 16,253,969 |
| 2047 | | | | 10,880,000 | 5,374,425 | 16,254,425 | 10,880,000 | 5,374,425 | 16,254,425 |
| 2048 | | | | 11,460,000 | 4,795,613 | 16,255,613 | 11,460,000 | 4,795,613 | 16,255,613 |
| 2049 | | | | 12,065,000 | 4,186,022 | 16,251,022 | 12,065,000 | 4,186,022 | 16,251,022 |
| 2050 | | | | 12,710,000 | 3,544,144 | 16,254,144 | 12,710,000 | 3,544,144 | 16,254,144 |
| 2051 | | | | 13,385,000 | 2,868,009 | 16,253,009 | 13,385,000 | 2,868,009 | 16,253,009 |
| 2052 | | | | 14,100,000 | 2,155,913 | 16,255,913 | 14,100,000 | 2,155,913 | 16,255,913 |
| 2053 | | | | 14,850,000 | 1,405,819 | 16,255,819 | 14,850,000 | 1,405,819 | 16,255,819 |
| 2054 | | | | 15,640,000 | 615,825 | 16,255,825 | 15,640,000 | 615,825 | 16,255,825 |
| Total | \$ 17,935,000 | \$ 2,287,688 | \$ 20,222,688 | \$ 237,065,000 | \$ 224,261,691 | \$ 461,326,691 | \$ 255,000,000 | \$ 226,549,378 | \$ 481,549,378 |

¹ Interest on the 30-year Level Debt Service Component is net of capitalized interest through October 1, 2025.

Description of Security

The Bonds will be secured by a senior lien on certain gross revenues generated by FSU's Athletics Department and Seminole Boosters. The pledged revenue streams include athletic conference distribution revenue, annual Booster membership fees, Project-specific donations received within five years of issuance, sponsorships and advertising money, proceeds from ticket sales, concession revenues, and game guarantees (collectively, the "Pledged Revenues").

The Bonds will be secured by and payable from the Pledged Revenues pursuant to Section 1010.62(2)(a), Florida Statutes, which allows revenue bonds to be issued to finance or refinance capital outlay projects secured by or payable from the revenues authorized for such purpose, including those revenues derived from or received in relation to sales and services of auxiliary enterprises or component units of the University, including athletic activities or other similar services.

Additionally, in compliance with the requirements for structural features in the Debt Management Guidelines, the donations for the Stadium renovations received within the first 5 years of issuance will be pledged to the Bonds. Donations received after the first 5 years of issuance will not secure the Bonds, though may be used to pay debt service on the Bonds.

**State of Florida, Board of Governors
Florida State University Athletics Association, Inc.
\$255M Football Stadium Renovation Project**

Historical and Projected Debt Service Coverage

| | Historical | | | | Preliminary | Projected | | | | |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | 2019 | 2020 | 2021 | 2022 | 2023 | 2024 | 2025 | 2026 | 2027 | 2028 |
| FSUAA Pledged Revenues | | | | | | | | | | |
| Conference Distribution Revenues ¹ | \$ 30,094,293 | \$ 34,049,496 | \$ 37,162,169 | \$ 40,569,836 | \$ 44,250,000 | \$ 44,384,623 | \$ 49,873,903 | \$ 51,548,141 | \$ 58,556,561 | \$ 60,620,971 |
| Athletic Department Net Ticket Revenues ² | 9,354,910 | 6,311,824 | - | 7,615,558 | 12,633,135 | 10,780,262 | 6,073,580 | 6,891,298 | 8,018,566 | 8,992,538 |
| Game Guarantees Revenue | 132,225 | 500,000 | 83,776 | 607,500 | 80,000 | 295,000 | 50,000 | 250,000 | 500,000 | 500,000 |
| Unrestricted Contributions - Tied to Ticket Sales | | | | 8,705,035 | 8,776,736 | 9,480,630 | 9,527,036 | 23,685,722 | 24,489,819 | 25,961,459 |
| Unrestricted Contributions - Other | 18,109,588 | 16,901,001 | 15,439,633 | 9,268,922 | 10,412,917 | 9,519,370 | 8,941,472 | 9,605,022 | 9,636,700 | 9,802,055 |
| Sponsorship & Advertising Revenues | 14,085,018 | 8,834,453 | 10,788,819 | 16,115,910 | 14,752,709 | 15,136,709 | 15,745,334 | 17,430,656 | 18,585,798 | 20,345,296 |
| Concession Revenues | 2,208,377 | 1,100,000 | - | 827,916 | 500,000 | 1,500,000 | 1,486,840 | 1,998,866 | 2,071,364 | 2,107,164 |
| Football Operations Facility Gifts & Donations ³ | - | - | - | - | - | 5,985,408 | 5,254,145 | 4,526,371 | 3,822,125 | 2,507,039 |
| Stadium Improvements Gifts & Donations ³ | - | - | - | - | - | 6,807,456 | 6,264,224 | 4,428,357 | 2,617,739 | 1,886,140 |
| Total Pledged Revenues | \$ 73,984,411 | \$ 67,696,774 | \$ 63,474,397 | \$ 83,710,677 | \$ 91,405,497 | \$ 103,889,458 | \$ 103,216,534 | \$ 120,364,433 | \$ 128,298,672 | \$ 132,722,662 |
| Estimated Annual Debt Service | | | | | | | | | | |
| Football Operations Facility Debt Service | n/a | n/a | n/a | n/a | n/a | \$ 3,045,000 | \$ 13,441,813 | \$ 12,782,525 | \$ 11,942,663 | \$ 11,366,044 |
| Short-Term 5-Year Debt Service | n/a | n/a | n/a | n/a | n/a | 235,397 | 6,186,828 | 5,690,678 | 4,021,828 | 2,378,184 |
| Long-Term 30-Year Debt Service ⁴ | n/a | n/a | n/a | n/a | n/a | - | - | 6,222,956 | 16,255,250 | 16,254,909 |
| Total Debt Service | n/a | n/a | n/a | n/a | n/a | \$ 3,280,397 | \$ 19,628,641 | \$ 24,696,159 | \$ 32,219,741 | \$ 29,999,138 |
| Debt Service Coverage Ratio | n/a | n/a | n/a | n/a | n/a | 31.67x | 5.26x | 4.87x | 3.98x | 4.42x |

¹ Conference Distribution Revenues in FY21 are net of \$1.85M of rent paid by the Athletic Department to FSU Financial Assistance, Inc. (a DSO of the University). The annual rent is typically paid with net ticket revenues, but those revenues were insufficient to support the rent payment in FY21 due to the impacts of COVID-19.

² Represents net ticket revenues less \$7 million pledged to FSUFA bonds and \$1.85 million of athletic department rent pledged to FSUFA. The \$7 million portion pledged to FSUFA bonds is only secured by net ticket revenues, while the \$1.85 million athletic department rent payment is secured by all budgeted athletic department revenues but is typically paid with net ticket revenues. In FY21, net ticket revenues were approximately \$4.2 million resulting in no pledged revenues while the \$1.85 million rent payment was made from Conference Distribution Revenues.

³ Gifts and donations for the Football Operations Facility and Stadium Improvement Project will only be pledged to the bonds for first five years following issuance. Donations prior to issuance will be used to partially fund construction of the facilities. Donations received five years after issuance may be used to pay debt service on the bonds, but will not secure the debt. The bonds will be structured with an accelerated debt service structure based on projected receipts of donations over that five year period; the five-year period is in keeping with the limitations required in Florida Statutes and SUS Debt Mgt Guidelines for debt secured with donations.

⁴ Excludes the interest payments on the bonds due in FY24 and FY25 and a portion of the interest payments on the bonds due in FY26, which will be paid from proceeds of the bonds (capitalized interest).

Legislative Approval

Legislative approval for the football stadium improvement project was included in the 2023 appropriations bill which was signed by the Governor on June 15, 2023.

Conclusion and Recommendation Regarding Method of Sale

Florida State University (the "University") proposes to finance the renovation of a football stadium with revenue bonds, under the newly created Florida State University Athletics Association, Inc. ("FSUAA") credit structure. The Debt Management Guidelines established by the Board of Governors require that prior to issuing any debt obligations by negotiated sale, an analysis be done to assess the relative benefits of a negotiated sale versus a competitive sale.

Based on the analysis of the characteristics of the proposed FSUAA Revenue Bonds, the University and the Division of Bond Finance anticipate issuing the bonds via competitive sale. If a determination is made to consider issuing the bonds through a negotiated sale, a detailed negotiated sale analysis will be provided.

**FSU Athletic Association
Internal Rate of Return Calculation**

Internal Rate of Return
(entire project): **8.19%**

| <i>Construction Cost Outflow</i> | (233,305,705) | | | | |
|----------------------------------|---------------------------------------|-------------------------------------|----------------------------------|--|----------------------|
| Cashflow by fiscal year: | Construction Costs¹ | Foregone Revenue² | Gift Receipts³ | Operational Revenue⁴ | Net Cash Flow |
| <i>FY2023</i> | (2,333,060) | - | 8,019,593 | - | 5,686,533 |
| <i>FY2024</i> | (54,268,590) | - | 15,718,451 | - | (38,550,139) |
| <i>FY2025</i> | (151,406,637) | (5,000,000) | 21,321,881 | - | (135,084,756) |
| <i>FY2026</i> | (25,297,418) | - | 20,029,255 | 10,596,742 | 5,328,579 |
| <i>FY2027</i> | - | - | 15,060,052 | 10,884,940 | 25,944,992 |
| <i>FY2028</i> | - | - | 5,368,950 | 10,237,891 | 15,606,841 |
| <i>FY2029</i> | - | - | 2,356,839 | 10,305,174 | 12,662,013 |
| <i>FY2030</i> | - | - | 2,306,839 | 12,621,390 | 14,928,229 |
| <i>FY2031</i> | - | - | 1,306,839 | 13,777,467 | 15,084,306 |
| <i>FY2032</i> | - | - | 1,306,839 | 13,738,630 | 15,045,469 |
| <i>FY2033</i> | - | - | 1,267,950 | 13,698,627 | 14,966,577 |
| <i>FY2034</i> | - | - | 868,950 | 13,657,424 | 14,526,374 |
| <i>FY2035</i> | - | - | 868,950 | 13,614,985 | 14,483,935 |
| <i>FY2036</i> | - | - | 868,950 | 14,810,795 | 15,679,745 |
| <i>FY2037</i> | - | - | 868,950 | 14,765,771 | 15,634,721 |
| <i>FY2038</i> | - | - | 868,950 | 14,719,397 | 15,588,347 |
| <i>FY2039</i> | - | - | 868,950 | 14,671,632 | 15,540,582 |
| <i>FY2040</i> | - | - | 868,950 | 14,622,433 | 15,491,383 |
| <i>FY2041</i> | - | - | 868,950 | 15,858,958 | 16,727,908 |
| <i>FY2042</i> | - | - | 868,950 | 15,806,763 | 16,675,713 |
| <i>FY2043</i> | - | - | 868,950 | 15,753,003 | 16,621,953 |
| <i>FY2044</i> | - | - | 868,950 | 15,697,629 | 16,566,579 |
| <i>FY2045</i> | - | - | 868,950 | 15,640,595 | 16,509,545 |
| <i>FY2046</i> | - | - | 868,950 | 16,918,752 | 17,787,702 |
| <i>FY2047</i> | - | - | 868,950 | 16,858,244 | 17,727,194 |
| <i>FY2048</i> | - | - | 868,950 | 16,795,921 | 17,664,871 |
| <i>FY2049</i> | - | - | 868,950 | 16,731,728 | 17,600,678 |
| <i>FY2050</i> | - | - | 868,950 | 16,665,609 | 17,534,559 |
| <i>FY2051</i> | - | - | 868,950 | 17,986,232 | 18,855,182 |
| <i>FY2052</i> | - | - | 868,950 | 17,916,087 | 18,785,037 |
| <i>FY2053</i> | - | - | 868,950 | 17,843,837 | 18,712,787 |
| <i>FY2054</i> | - | - | 868,950 | 17,769,420 | 18,638,370 |
| | (233,305,705) | (5,000,000) | 112,311,438 | 430,966,076 | 304,971,809 |

¹ Construction to begin in November 2023 with Project in-service in August 2025. Costs incurred prior to November 2023 represent preliminary and engineering costs.

² Represents revenue lost due to decreased attendance to football games during construction.

³ Gifts received and projected through the life of the project. Actual spread of collections could differ materially from projections. Contributions that will be pledged to the Bond will be provided separately based off current signed gifts and estimated collection schedules.

⁴ Includes increases in net revenues from ticket sales and contributions to Boosters.