

	Policy Owner:	Vice President for Research
	Responsible Office:	Office of the Vice President for Research
	Origination Date:	03/31/2016
	Last Revised:	12/23/2025

Policy Title:

## Research Misconduct (Interim)

### Background and Purpose

Productivity and creativity flourish in institutions of higher education through an atmosphere of intellectual honesty. Because educational institutions maintain intellectually stimulating environments in different ways, the institutions—and not the sponsors of the research—are responsible for the research conduct of faculty, staff, and students. The responsibility for establishing and maintaining an academic atmosphere based upon high ethical standards must be accepted by all Northern Arizona University (NAU) faculty, staff and students in the performance of their scholarly activities. Even rare occurrences of misconduct have potentially long--lasting and severe consequences to the reputation and credibility of NAU and those involved. Therefore, it is the responsibility of all to report promptly and confidentially any indications or allegations of misconduct in research. Administrators and principal investigators have special responsibility for developing and practicing high standards of ethics and for educating their colleagues and students who collaborate on research conducted at NAU.

Thus, the purpose of this policy is to specify guidelines and procedures for dealing with alleged and suspected incidents of misconduct in research. The Office for Research Integrity (ORI) in the US Department of Health and Human Services (DHHS) has developed a policy on Misconduct in Research from which portions of the NAU policy have been adopted. Portions of this policy are included here. For more information on the federal policy visit the ORI website at <http://ori.hhs.gov/>.

### Applicability

This policy applies to any person who is enrolled as a student, employed by, acting as an agent of, or affiliated by contract, agreement, or other means with Northern Arizona University. For students and faculty engaged in scholarship and creative activities that fall outside the definition of "Research" as stated by this policy, NAU's [Academic Integrity Policy](#) and NAU's [Conditions of Faculty Service](#), respectively, may be applicable and utilized in lieu of this policy.

This policy does not apply to allegations of observed or potential Research Misconduct that occurred more than six prior to the date the RIO receives the allegation, except for in the following circumstances:

- The six-year time limitation does not apply if the Respondent continues or renews any incident of alleged Research Misconduct that occurred before the six-year period through the use of, republication of, or citation to the portion(s) of the Research Record alleged to have been Fabricated, Falsified, or Plagiarized, for the potential benefit of the Respondent (“subsequent use exception”). For alleged Research Misconduct that appears subject to this subsequent use exception, but the Research Integrity Officer determines is not subject to the exception, the RIO will document its determination that the subsequent use exception does not apply and will retain this documentation for the later of seven years after completion of the institutional proceeding or the completion of any federal proceeding.
- The six-year time limitation also does not apply if the RIO determines that the alleged Research Misconduct, if it occurred, would possibly have a substantial adverse effect on the health or safety of the public.

## Definitions

**Assessment:** a consideration of whether an Allegation of Research Misconduct appears to fall within the definition of Research Misconduct; falls within the scope of this policy; and is sufficiently credible and specific so that potential evidence of Research Misconduct may be identified. The Assessment only involves the review of readily accessible information relevant to the Allegation.

**Complainant:** an individual who in good faith makes an Allegation of Research Misconduct.

**Fabrication:** making up data or results and recording or reporting them.

**Falsification:** manipulating Research materials, equipment, or processes, or changing or omitting data or results such that the Research is not accurately represented in the Research Record.

**Inquiry:** preliminary information-gathering and preliminary fact-finding to determine whether an Investigation is warranted.

**Institutional Record:** (a) The entirety of the records that the institution compiled or generated during the Research Misconduct proceeding, except records the institution did not consider or rely upon to make its determination; (b) a single index listing all the Research Records and evidence that the institution compiled during the Research Misconduct proceeding, except records the institution did not consider or rely on; and (c) a general description of the records that were sequestered but not considered or relied upon.

**Investigation:** the formal development of a factual record and the examination of that record to determine whether Research Misconduct occurred and, if so, who is responsible.

**Plagiarism:** the appropriation of another person's ideas, processes, results, words, or creative output without giving appropriate credit. Plagiarism does not include self-plagiarism or authorship disputes, including disputes among former collaborators who participated jointly in the development or conduct of a Research project.

**Recklessly:** To act Recklessly means to propose, perform, or review Research, or report Research results, with indifference to a known risk of Fabrication, Falsification, or Plagiarism.

**Research:** includes all basic, applied, and demonstration Research in all fields of science, engineering, mathematics, humanities, and the arts. This includes, but is not limited to, Research in natural sciences, social sciences, quantitative science, engineering, economics, education, linguistics, medicine, psychology, the arts, and statistics. Special attention is warranted to ensure the highest standards of ethics in Research involving human subjects or animals.

**Research Misconduct:** Fabrication, Falsification, or Plagiarism in proposing, performing, or reviewing Research, or in reporting Research results. Research Misconduct does not include honest error, differences of opinion, or authorship disputes.

**Research Record:** the record of data or results that embody the facts resulting from scientific and humanistic inquiry, and includes, but is not limited to, Research proposals, laboratory records, both physical and electronic, progress reports, correspondences, abstracts, theses, oral presentations, internal reports, monographs, and journal articles.

**Respondent:** the individual against whom an Allegation of Research Misconduct is directed or who is the subject of a Research Misconduct Proceeding.

## **Policy**

### **Section I: Responsibilities**

#### **A. Vice President for Research**

The overall responsibility for the implementation and administration of this policy is delegated by the President to the Vice President for Research. The Vice President is responsible for:

1. Assuring full and complete inquiries, investigations and resolution processes in accordance with this Policy;

2. Appointing the Research Integrity Officer (RIO);
3. Appointing ad hoc committee members with the appropriate disciplinary expertise to conduct inquiries and investigations into allegations of Research Misconduct and assuring that no conflict of interests exist or arise in those so appointed;
4. Determining whether and when law, regulation or the terms and conditions of the award require notification of the sponsor, specify time limits or require other actions to assure compliance;
5. Assuring appropriate confidentiality or anonymity, including confidentiality of records relating to the Investigation and resolution of incidents of alleged Research Misconduct, as well as fairness and objectivity of all proceedings under this Policy;
6. Notifying, when required, appropriate parties such as (but not limited to): sponsors, collaborators, licensing boards, professional societies and legal authorities;
7. Protecting the positions and reputations of those who, in good faith, make allegations of Research Misconduct;
8. Serving as the Deciding Official (DO) by, after the conclusion of an Investigation, making the final determination of whether Research Misconduct occurred, who is responsible, and implementing any institutional actions; and
9. Taking reasonable steps to restore the reputation of persons alleged to have engaged in misconduct when allegations are not substantiated.

B. Research Integrity Officer

The responsibility to deal with allegations of and/or suspected misconduct in Research in accordance with this Policy is delegated by the Vice President for Research to the Research Integrity Officer (RIO). All allegations of possible Research Misconduct should be reported to the RIO. Even in the absence of a specific complaint, the RIO should be consulted about any questionable activities that could be interpreted as involving misconduct in Research.

C. Extramural Research Sponsors

The University and its extramural Research sponsors are partners who share responsibility for the Research process. Extramural funding agencies have

ultimate oversight authority for externally funded Research, but the University bears primary responsibility for prevention and detection of Research Misconduct and for the Inquiry, Investigation, and adjudication of alleged Research Misconduct in association with its faculty, staff and students.

### **Section II: Requirements for Findings of Research Misconduct**

- A. A finding of Research Misconduct requires that the following three conditions be met:
  1. The alleged misconduct represents a significant departure from the accepted practices of the relevant (disciplinary) Research community; and,
  2. The alleged misconduct was committed intentionally, knowingly, or Recklessly; and
  3. The allegation is supported by a preponderance of evidence

### **Section III: Allegations of Misconduct**

- A. Any person who is enrolled as a student, employed by, acting as an agent of, or affiliated by contract, agreement, or other means with Northern Arizona University must report observed or suspected Research Misconduct. Reports of observed or suspected Research Misconduct should be made and brought directly to the attention of the RIO, the Vice President for Research, or any College Dean or Department Chair. If a report is made to anyone other than the RIO, that individual must immediately notify the RIO.
- B. If an individual is not certain whether an incident falls within the definition of Research Misconduct, s/he should contact the RIO or Vice President for Research to discuss the suspected misconduct informally.
  1. If the circumstances described do meet the definition of Research Misconduct, the Vice President for Research shall recommend that the individual submit a formal, written allegation.
  2. If the circumstances described do not meet the definition of Research Misconduct, the Vice President for Research shall refer the individual to other campus offices that may help to resolve the matter.
- C. In addition to stating the nature of the suspected misconduct, allegations should present the evidence that led the reporting individual (hereinafter, "Complainant") to believe that an incident of Research Misconduct has occurred.

1. Allegations made on an anonymous basis must include sufficient detail and evidence to warrant further action.

#### **Section IV: Response to an Allegation of Research Misconduct**

A. A response to an allegation of Research Misconduct will consist of four phases:

1. An Assessment – a review of the allegation(s) to determine whether it falls within the purview of this policy and is sufficiently credible and specific to warrant an Inquiry;
2. An Inquiry – the preliminary gathering and review of evidence to determine whether an Investigation is warranted;
3. An Investigation – the formal development of a factual record, and the examination of that record leading to dismissal of the case or to a recommendation for a finding of Research Misconduct or other appropriate remedies; and
4. Adjudication – during which the DO reviews the recommendations made by the Investigation committee, makes a final decision of whether Research Misconduct occurred, and coordinates with other administrative offices and authorities to take appropriate corrective actions.

#### **Section V: Assessment**

- A. When an allegation of Research Misconduct is received, the RIO will promptly conduct an Assessment to determine a) whether the allegation fits within the definition of Research Misconduct, b) is within the applicability criteria of this policy, and c) is sufficiently credible and specific to identify and sequester evidence. If the allegation meets all three of these criteria, then an Inquiry is warranted.
- B. If the RIO determines that an Inquiry is warranted, they will document the Assessment and promptly sequester all Research Records and potential evidence.
- C. If the RIO determines that the alleged misconduct does not meet the criteria to proceed to an Inquiry, they will write sufficiently detailed documentation to permit a later review of why the University did not proceed to an Inquiry and securely retain this documentation for seven years.

## Section VI: Inquiry

- A. An Inquiry's purpose is to conduct an initial review of the evidence to determine whether the allegation warrants an Investigation.
- B. The RIO will form an ad hoc Committee that will consist of no fewer than three individuals who have appropriate expertise and who have no unresolved conflicts of interest associated with the Complainant, the Respondent, or the activity within which the misconduct is alleged to have occurred.
- C. At the time of, or before initiating the Inquiry, the RIO will notify in writing the researcher accused of misconduct (hereinafter, "Respondent") that an Inquiry is being conducted, inform the researcher of the nature of the allegation(s), and will outline the procedure that will be followed. The RIO will also indicate the membership of the ad hoc Committee.
  1. The Respondent has five (5) business days from notification of the membership of the ad hoc Committee to challenge Committee membership for bias and/or conflict of interest.
  2. The RIO and the VPR will determine whether to replace the challenged member(s) with qualified substitute(s).
- D. Before or at the time the RIO notifies the Respondent of the allegations, the RIO will take all reasonable and practical steps to obtain all Research Records and other evidence, which may include copies of the data or other evidence so long as those copies are substantially equivalent in evidentiary value, needed to conduct the Research Misconduct proceeding; inventory the Research Records and other evidence; and sequester them in a secure manner. If at any time during the Research Misconduct proceeding additional evidence or Research Records are identified, the RIO will make all reasonable efforts to sequester them at the time they become known.
  1. Anyone who has relevant information, evidence, or Research Records, including but not limited to the Respondent, Complainant, and witnesses, must cooperate with the RIO in the sequestration process. Refusal to cooperate may result in disciplinary action.
  2. The Respondent's failure to provide Research Records documenting the questioned Research is evidence of Research Misconduct where the Respondent claims to possess the records but refuses to provide them upon request.

- E. The ad hoc Committee will review the sequestered evidence and gather any additional information and facts to determine whether the allegation warrants Investigation. Such information gathering may include requests for documents, review of published literature, and interviews with the Complainant and/or Respondent or with other individuals who are associated with the activity that led to the reporting of alleged misconduct.
- F. If additional Respondent(s) are identified after the start of the Inquiry, the RIO, in consultation with the VPR, may decide to either add them to the ongoing Inquiry, or conduct a separate Inquiry for each newly identified Respondent. Any additional Respondent(s) will be notified in writing as described above in paragraph C.
- G. The Committee will conclude the Inquiry within 90 days of the receipt of the formal allegation by submitting a report detailing the process of the Inquiry and the Committee's findings to the RIO. If there are delays, the Committee and RIO must document the reasons for the delay.
- H. The contents of a complete Inquiry report will include:
  - 1. The names, professional aliases, and positions of the Respondent and Complainant(s).
  - 2. A description of the allegation(s) of Research Misconduct.
  - 3. Details about the funding, if any, including any grant numbers, grant applications, contracts, and publications listing such funding support.
  - 4. The composition of the Inquiry committee, including name(s), position(s), and subject matter expertise.
  - 5. An inventory of sequestered Research Records and other evidence and description of how sequestration was conducted.
  - 6. Transcripts of interviews, if transcribed.
  - 7. Inquiry timeline and procedural history.
  - 8. Any scientific or forensic analyses conducted.
  - 9. The basis for recommending that the allegation(s) warrant an Investigation.
  - 10. The basis on which any allegation(s) do not merit further Investigation.

11. Any comments on the Inquiry report by the Respondent or the Complainant(s).
12. Any institutional actions implemented, including internal communications or external communications with journals or funding agencies.
13. Documentation of potential evidence of honest error or difference of opinion.

I. The University will give the Respondent a copy of the draft Inquiry report for review and comment. The University may, but is not required to, provide relevant portions of the Inquiry report to the Complainant for comment. The Respondent and Complainant must submit any comments regarding the draft Inquiry report to the RIO within 14 calendar days of receiving the draft report.

J. The DO will review the Inquiry report and make a determination. The three possible outcomes of Inquiry are:

1. Dismissal of allegations: If the Committee finds insufficient grounds for an Investigation, the report will recommend that the allegations be dismissed.
  - a. If the DO agrees, s/he will dismiss the allegations and notify in writing the appropriate administrators, the Respondent, the Complainant, any external agencies that were notified, and any others who were formally made aware of the allegation and Inquiry.
  - b. If the DO does not agree with the recommendation that the allegations be dismissed, s/he may determine that sufficient grounds exist for an Investigation.
2. Finding of Improper or Malicious Allegations: If the Inquiry finds that the allegations were improper or malicious, the Vice President for Research will notify appropriate university administrators, who will initiate administrative and/or disciplinary procedures against the Complainant under other NAU policies and procedures pertinent to such actions and circumstances.
3. Investigation Warranted: If the Committee determines and recommends that sufficient grounds exist for an Investigation, the DO will direct the RIO to initiate an Investigation. The DO may not disagree with an Inquiry Committee's recommendation that an Investigation is warranted.

K. The DO will review the Inquiry Report and make a determination.

- L. The RIO will retain the Committee Inquiry report and Institutional Record for seven years after the termination of the Inquiry.
- M. During the Inquiry phase of this process, the identities of the individual who reported the allegation of misconduct (hereinafter, Complainant) and the Respondent will remain confidential, to the extent permitted by due process rights, to assure that no Complainant acting in good faith will experience retaliation and that the damage to the reputation of the Respondent will be minimized.

### Section VII: Investigation

- A. The purpose of an Investigation is to formally develop a factual record, pursue leads, examine the record, and recommend finding(s) to the DO, who will make the final decision, based on a preponderance of evidence, on each allegation and any institutional actions. As part of its Investigation, the University will pursue diligently all significant issues and relevant leads, including any evidence of additional instances of possible Research Misconduct, and continue the Investigation to completion.
- B. After determining that an Investigation is warranted, the University will promptly notify in writing the Respondent of this determination and complete any other required notifications of federal agencies and begin the Investigation. All notifications must be made prior to the initiation of the Investigation.
- C. The Vice President for Research will take prudent action to protect the university and the funds of any external granting agency involved.
- D. The RIO will take any additional reasonable steps necessary to obtain the original or substantially equivalent copies of all Research Records and other evidence, inventory these materials, and sequester them in a secure manner,
- E. The RIO, in consultation with the VPR, appropriate chair or director, and the dean of the college, will appoint at least three members to the ad hoc Investigation Committee.

These members must include at least two faculty members with expertise in the Respondent's or a related discipline and at least one faculty member who is familiar with the discipline but is not among the faculty of the Respondent's college. No individual may serve on the committee if they have a conflict of interest.

- F. Investigations must begin no later than 30 days after an Inquiry is completed; the ad hoc Committee should take no longer than 180 days to complete the

Investigation and report to the RIO. If the Investigation takes longer than 180 days, the ad hoc Committee and RIO must document the reasons for the delay.

- G. The Investigation will entail an in-depth examination of all pertinent information, Research Records, and evidence.
- H. The Committee will interview each Respondent, Complainant(s), and any other available person who has been reasonably identified as having information regarding any relevant aspects of the Investigation, including witnesses identified by the Respondent. The University will number all relevant exhibits and refer to any exhibits shown to the interviewee during the interview by that number. The University will record and transcribe interviews during the Investigation and make the transcripts available to the interviewee for correction. The University will include the transcript(s) with any corrections and exhibits in the Institutional Record of the Investigation. The Respondent will not be present during the witnesses' interviews, but the University will provide the Respondent with a transcript of each interview, with redactions as appropriate to maintain confidentiality.
- I. The Respondent will have the opportunity to respond to the allegation of misconduct and the information collected. The Respondent may be assisted, as he or she chooses, by others, including attorney(s), Research collaborator(s), professional associate(s), etc.
- J. The Committee will conduct the Investigation, prepare the draft Investigation report for each Respondent, and provide the opportunity for Respondents to comment on the draft report. The final Investigation report will be submitted to the DO, who will make a final determination. The University will document the DO's final determination and, if the proceedings concern federally-funded Research, notify the appropriate federal oversight agency. If the Investigation takes more than 180 days to complete, the University will document the reasons for exceeding the 180-day period in the Investigation report. If federally funded, the University will follow agency-specific requirements for requesting an extension from the appropriate oversight agency.
- K. The Committee will give the Respondent a copy of the draft Investigation report and, concurrently, a copy of, or supervised access to, the Research Records and other evidence that the Investigation committee considered or relied upon to make their determination. The Respondent must submit any comments on the draft report to the University within 30 days of receiving the draft Investigation report. If the Committee chooses to share a copy of the draft Investigation report or relevant portions of it with the Complainant(s) for comment, the Complainant's comments must be submitted within 30 days of the date on which they received

the report. The Committee will add any comments received to the final Investigation report and submit the report to the DO.

L. The Investigation report for each Respondent will include:

1. Description of the nature of the allegation(s) of Research Misconduct, including any additional allegation(s) addressed during the Research Misconduct proceeding.
2. Description and documentation of sponsor support, if any, including any grant numbers, grant applications, contracts, and publications listing such support. This documentation includes known applications or proposals for support that the Respondent has pending with Federal agencies.
3. Description of the specific allegation(s) of Research Misconduct for consideration in the Investigation of the Respondent.
4. Composition of Investigation committee, including name(s), position(s), and subject matter expertise.
5. Inventory of sequestered Research Records and other evidence, except records the University did not consider or rely on. This inventory will include manuscripts and funding proposals that were considered or relied on during the Investigation. The inventory will also include a description of how any sequestration was conducted during the Investigation.
6. Transcripts of all interviews conducted.
7. Identification of the specific published papers, manuscripts submitted but not accepted for publication (including online publication), funding applications, progress reports, presentations, posters, or other Research Records that contain the allegedly Falsified, Fabricated, or Plagiarized material.
8. Any scientific or forensic analyses conducted.
9. A copy of these policies and procedures.
10. Any comments made by the Respondent and Complainant(s) on the draft Investigation report and the committee's consideration of those comments.
11. A statement for each separate allegation of whether the committee recommends a finding of Research Misconduct.

M. The three possible outcomes of the Investigation are:

1. Finding of No Research Misconduct. If the Committee concludes that no Research Misconduct occurred, it will recommend in its report that the DO dismiss the allegations.
2. Finding of Improper or Malicious Allegations. If the Committee Investigation finds that the allegations of the Complainant were improper or malicious, the RIO will notify appropriate university administrators, who will initiate administrative and/or disciplinary procedures against the Complainant under other NAU policies pertinent to such actions and circumstances.
3. Finding of Research Misconduct. If the Committee concludes that Research Misconduct has occurred, it will recommend in its report that the DO make a finding of Research Misconduct.

### **Section VIII: Adjudication**

The DO will review the Investigation report and make a final written determination for each allegation of whether the University found Research Misconduct and, if so, who committed the misconduct. If a finding of Research Misconduct is made, the DO will inform the appropriate administrative office or body to determine and administer appropriate administrative and/or disciplinary action against the Respondent(s). The DO will include in the final written determination a description of relevant institutional actions taken or to be taken.

### **Section IX: Administrative Actions**

If at any point during a Research Misconduct proceeding, the University becomes aware that the Research Record needs to be corrected, it will take appropriate steps to do so.

### **Section X: Notifying Funding Agencies**

The RIO will notify the funding agency (or agencies if appropriate) of an allegation of Research Misconduct in accordance with each agency's policy for reporting instances of alleged Research Misconduct or, in the absence of such policies, if/when:

- A. The allegation involves externally funded Research (or an application for external funding) and meets the definition of Research Misconduct given above;
- B. If the institution's Inquiry into the allegation results in insufficient evidence to proceed to an Investigation;

- C. At the completion of an Investigation, at which time the RIO will forward to the agency a copy of the evidentiary record, the investigative report, and recommendations made to the institution's adjudicating official, and the subject's written response to the recommendations (if any);
- D. At the completion of the adjudication, at which time the RIO will forward the Deciding Official's final determination, along with the Institutional Record, and notify the agency of any corrective actions taken or planned;
- E. At any time during a Research Misconduct proceeding, the RIO will immediately notify the agency if the University has reason to believe that any of the following conditions exist:
  - 1. public health or safety is at risk, including an immediate need to protect human or animal subjects;
  - 2. agency resources or interests are threatened;
  - 3. Research activities should be suspended;
  - 4. there is reasonable indication of possible violations of civil or criminal law;
  - 5. federal action is required to protect the interests of those involved in the Research Misconduct proceeding;
  - 6. the University believes the Research Misconduct proceeding may be made public prematurely so that appropriate steps can be taken to safeguard evidence and protect the rights of those involved; or,
  - 7. the Research community or public should be informed.

#### Section XI: Safeguards for Personnel

- A. So that individuals may have confidence that they can bring allegations of Research Misconduct to the attention of appropriate authorities or serve as informants to or as committee members for an Inquiry or an Investigation without suffering retribution:
  - 1. The University will develop and implement fair and objective procedures for the examination and resolution of allegations of Research Misconduct , and
  - 2. The University shall take all reasonable and practical efforts to protect or restore the position and reputation of any Complainant, witness or

committee member and to counter potential or actual retaliation against those Complainants, witnesses and committee members.

B. So that individuals may have confidence that, absent any other compelling reasons, the mere filing of an allegation of Research Misconduct against them will not result in any disciplinary or adverse action:

1. The University will develop and implement fair and objective procedures for the examination and resolution of allegations of Research Misconduct, and
2. The University shall undertake all reasonable, practical and appropriate efforts to protect and restore the reputation of any person alleged to have engaged in Research Misconduct but against whom no finding of Research Misconduct was made, if that person or his/her legal counsel or other authorized representative requests that the University do so.

### **Section XII: Confidentiality During the Inquiry, Investigation, and Adjudication Processes**

- A. To the extent possible permitted by state and federal law and regulation, and consistent with a fair and thorough Investigation, knowledge about the identity of Respondents, Complainants, and witnesses is limited to those who the University determines have a legitimate need to know. Those who need to know may include institutional review boards, journals, editors, publishers, co-authors, collaborating institutions, and federal oversight agencies. Records generated by the University during the course of a Research Misconduct proceeding are held strictly confidential by the Office of the Vice President for Research.
- B. To the extent permitted by law, anyone with knowledge of the allegations or Research Misconduct proceedings must keep confidential all information regarding the allegations and any proceedings under this policy until the university process, including any disciplinary action, has concluded and all avenues of appeal (if pursued) have been exhausted.

### **Section XIII: Record Retention**

The University will maintain records of Research Misconduct proceedings in a secure manner for 7 years after completion of the University's proceeding, or any subsequent federal proceeding, whichever is later.

## **Related Information\***

PHS Research Misconduct Regulations: [42 CFR Part 93](#)

NSF Research Misconduct Regulations: [45 CFR Part 689](#)

[DHHS Office of Research Integrity](#)

[Academic Integrity](#)

[Conditions of Faculty Service](#)

[Code of Conduct](#)

[Student Code of Conduct](#)

[Student Code of Conduct Procedures](#)

[5.19 Disciplinary Action](#)

## **Policy History\***

3/31/2016: Origination date.

12/23/2025: Interim policy approved.

---

\* Related Information and Policy History are solely for the user's convenience and are not part of the official university policy.