UNLESS OTHERWISE NOTED, THE POLICIES AND PROCEDURES IN THIS MANUAL APPLY TO FACULTY AND ADMINISTRATORS OF THE UNIVERSITY.

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SECTION 1: INTRODUCTION
The university’s policies have been designed to establish a working environment that is conducive to achieving institutional goals, while at the same time ensuring compliance with government regulations. The contents of this document are not to be construed as a contract of continuous employment. The New School reserves the right to add, change and revoke policies and content at any time without notice.

All employees should become familiar with the university’s organization, governance, policies and practices included in this section. Unless noted differently, the policies and procedures in this manual apply to faculty and administrators of the university.

BASIC ELEMENTS OF THE NEW SCHOOL’S ORGANIZATION AND GOVERNANCE

Board of Trustees
The New School is a private, nonsectarian institution of higher education that is incorporated under the Education Law of the State of New York. Article II, Section 1, of the By-Laws of the University states that "The property, affairs and business of The New School shall be managed by the Board of Trustees." The Board itself elects new Trustees, whose term of office is four years. Between meetings of the Board, the Executive Committee has broad authority to act on its behalf. Other committees of the Board are the Academic Affairs Committee, Audit and Risk Committee, Committee on Trusteeship, Finance Committee, Investment Committee, ad hoc Brand Strategies Committee, and Facilities Committee.

The Officers of Administration and the Deans
The President serves ex-officio as a Trustee and supervises, subject to the control of the Board of Trustees, the business and affairs of the university. The internal operations of the University are governed by the President, the other officers of administration, and the deans and directors of the seven academic divisions. The Provost is the senior academic officer of the university, who works closely with the President, the other officers, and the deans in the conduct of University business.

University-Wide Committees
The University has several university-wide Committees. They include the Staff Advisory Committee which meets regularly with the Senior Vice President and Chief Human Resources Officer throughout the year. Administrative employees from all academic divisions are members of the committee, which considers a wide range of matters that are important to the University as a whole. There are also university-wide Committees for: Diversity, Financial Aid, Security, Student Life, Libraries, Institutional Research, Honorary Degrees, Employee Benefits and Academic Computing.

Boards of Governors
The University benefits from the existence of advisory groups, including those known generically as Board of Governors. Their members, elected by the Board of Trustees, are persons whose professional expertise and interests are relevant to one or more of the University's programs and who bring perspective and insight to these programs not always available within the institution. They provide counsel and support to the Deans of the academic divisions, the President, and the Board of Trustees. They also represent their divisions and the University in the external communities in which they live and work.

MAP OF THE NEW SCHOOL
The central administration offices and all of the academic programs of the University are located in Greenwich Village campus area.

SECTION 2: EMPLOYMENT PRACTICES
This section describes the University's administrative employment practices, which are designed to provide an environment in which efficiency, growth and satisfaction of both the employee and The New School are top priorities.

GENERAL ADVISORY ON FULL-TIME EMPLOYMENT
This Advisory concerns the university’s basic standard for faculty and administrators who have full-time positions at the university. Both faculty and administrators who are invited to join the collegial enterprise of the University on a full-time basis are expected to make a professional commitment to dedicate themselves to the pursuit of the university’s mission and purposes.
In the course of fulfilling their responsibilities, members of the University may perform a variety of tasks in addition to the responsibilities ordinarily required by their positions. Fundamentally, the nature of work in an educational community requires the talent and flexibility to participate in a variety of activities. The range of tasks and activities enhances the University environment and provides beneficial experiences to individual careers. Consequently, the general principle is that additional compensation will not be offered for work undertaken on behalf of the University which extends beyond the usual activities in which faculty or administrators are engaged.

Administrators work on a twelve-month schedule, not on academic year schedule, so it is assumed that they will be at the University during most of the summer months.

From time to time, administrators who have relevant academic training or experience may be invited to teach a course in one of the university’s academic programs. This opportunity is one of the special privileges of working at a university. Administrators who wish to teach should do so only after consulting with their supervisors. No compensation will be offered for this opportunity. Administrators, who teach must, at the same time, continue to fulfill all the responsibilities of their administrative positions.

**Outside Work Policy**
The New School recognizes the value that outside work activities bring to its administrators and to the University. Such activities may enhance the professional abilities of administrators, and bring credit to both them and the University. The New School encourages these activities so long as they do not interfere with the administrator’s assigned duties and responsibilities, or create a conflict of interest.¹

If there is any question as to whether a particular outside work activity may interfere with an administrator’s assigned duties, or create a conflict of interest, the administrator should discuss this with his/her supervisor. Supervisors, in turn, should likewise discuss such matters with, and obtain any needed approval from, their unit leadership. An online form is available to facilitate this process. Questions concerning the application of this policy may be submitted to Human Resources. The New School will assume no responsibility for outside work activities performed by an administrator, and the administrator should make clear to all involved that their outside work has no official connection with The New School.

Volunteer activities in professional organizations or in organizations related to higher education in general are encouraged. If such activities impinge upon the full-time commitment to the University or create a conflict of interest, the administrator should discuss the activity with their supervisor to decide how they can best be accommodated.

Other volunteer activities, unrelated to University work, which do not impinge upon or create a conflict of interest with the administrator’s professional work commitment, are not the concern of this advisory.

Questions about new activities should be forwarded to the President or the Provost. Such questions should be asked prior to agreement on any arrangements that would be an exception to this general advisory.

**ISSUANCE AND VALIDATION OF IDENTIFICATION CARDS**
The New School provides to all its employees a University identification card, called the “newcard.” Employees are required to carry their newcard with them at all times for access into buildings, use of consortium libraries, and dining services. Employees are welcome to utilize the Dining Dollars program at the University dining facilities. Additional information can be obtained from Campus Card Services.

**AT WILL EMPLOYMENT**
This is applicable only to administrators of the university.

The State of New York is an “at will” employment state; this means that no one has a contractual right, express or implied, to remain in The New School’s employ. The New School may terminate an employee’s employment, or an employee may terminate his/her employment, without cause, and with or without notice, at any time for any reason.

WORK HOURS AND CATEGORIES

This applies only to administrators. For more information on faculty ranking, please refer to the Full Time Faculty Handbook for full time faculty categories, and, the Collective Bargaining Agreement between The New School and Academics Come Together, ACT-UAW, Local 7902 and The International Union, UAW for part time faculty categories.

For purposes of salary administration, eligibility for overtime payments and employee benefits, the University classifies its employees as follows:

- **Full-time employees.** Employees hired to work the University's customary, full-time, 35-hour work week on a regular basis. Such employees may be "exempt" or "nonexempt" as defined below. Note: employees scheduled to work a Sunday shift in addition to working four eight-hour days during the work week are considered full-time employees for the purposes of benefit eligibility.

- **Part-time employees.** Employees hired to work less than 35 hours per week. Part-time employees who work under 1,000 hours per calendar year are not eligible to receive benefits.

- **Temporary employees.** In some cases, the University will hire employees to work full-time or part-time with the understanding that their employment will be for a limited period of time. Temporary personnel in either category may be used as needed in, among others, the following situations:
  - Completion of extraordinarily heavy workloads;
  - Replacement of regular employees for limited periods of time;
  - Short-term assignments and projects; and/or
  - Special peak periods of business activity.

Note: Temporary employees may be offered and may accept new temporary assignments with the University without becoming regular employees. Temporary employees may be "exempt" or "nonexempt" as defined below.

**Exempt/Nonexempt Status**

- **Nonexempt employees.** Employees who are required to be paid overtime at the rate of time and one half their regular rate of pay for all hours worked beyond forty hours in a single workweek, in accordance with applicable federal wage and hour laws.

- **Exempt employees.** Employees who are not required to be paid overtime, in accordance with applicable federal wage and hour laws, for work performed beyond forty hours in a workweek. Executives, professional employees, officers, most managers and certain employees in administrative positions are typically exempt. Exempt employees are expected to stay as long as necessary to complete assigned tasks, notwithstanding the absence of any entitlement to overtime pay.

If an employee changes positions during his/her employment as a result of a promotion, transfer, or otherwise, the employee will be informed of any change in his/her exemption status.

Employees should direct any questions regarding their employment classification and exemption status to their supervisor.

**ATTENDANCE POLICY**

The University expects employees to be at work as scheduled and to avoid unscheduled absences whenever possible. In an effort to provide advice to supervisors regarding absenteeism and to balance the employee’s paid leave protection against the university’s right to a reasonable standard of attendance, the following guidelines are provided.

**Guidelines**

A. Supervisor’s Responsibility:

1. **Climate:** Establish a favorable climate for good attendance. The key to the development of a favorable climate is in employees’ understanding of why good attendance is important, that is, the ways in which absenteeism interferes with workflow and unfairly imposes on others. Generally, the supervisor who successfully conveys to each employee that his/her work is important and appreciated contributes to motivating good attendance.

2. **Records:** Establish a system for recording attendance to maintain awareness of attendance patterns. A simple chart e.g., the Monthly Leave Report issued by Human Resources can be used to record attendance/absences for each employee. The data should be maintained consistently and accurately. This will enable the supervisor to work with the employee as soon as problematic attendance is identified.
3. **Standards:** Because the needs of each department may vary, there is no set formula for establishing standards of attendance. The total number of days absent is not as significant as the frequency of incidents. However, unscheduled absences averaging one day per month should be considered excessive, except when the average is increased by a lengthy absence associated with a verified extended disability.

4. **Communications:** Standards for attendance and the system for recording attendance should be defined and communicated on a continuing basis to all employees in the department. When frequency of unscheduled absences becomes problematic, the issue should be addressed promptly with the employee, and appropriate action taken. (See policies on Employee Discipline and Medical Leave of Absence.) Follow-ups should be built into the system to show serious intent. In interviewing job applicants, the supervisor should stress the university's interest in, and the importance of, good attendance.

5. **Health Problems:** If an employee’s general health is causing frequent or regular absences, employees should be directed to contact Human Resources. Absences of three or more consecutive days should be reported to Human Resources. If an employee has physical limitations, these must be in writing from a physician and approved by Human Resources. The existence of an illness or injury may support continued use of sick leave under the FMLA, a leave without pay to provide time for rehabilitation if sick leave benefits are exhausted, or eligibility for long-term disability. However, if employees continue to be unavailable for work due to frequent and/or extended absences that are not eligible for Family Medical Leave, their employment may be terminated. In all cases, supervisors should call the Human Resources Benefits department for guidance.

**DRESS POLICY AND GUIDELINES**

The University expects that employees’ appearance, personal hygiene, and dress will be professional, neat, clean and appropriate to the function they perform at the university. More specific guidelines or rules may be established by department heads when they are necessary based on the nature of the work.

**Guidelines**

A. **Departmental Regulations:** employees are required to comply with departmental dress regulations for their respective positions. Failure to do so will result in corrective discipline.

B. **Health & Safety Regulations:** some departments have established specific practices that may require wearing uniforms or items of protective clothing and equipment. In addition, certain articles, such as types of jewelry, may be prohibited because of the nature of the work or to satisfy certain health, safety, and other regulations.

C. The following articles of clothing are deemed to be inappropriate business attire:
   1. revealing, provocative, exceedingly tight or sheer clothing
   2. shorts, leggings, and jeans (if bleached, dyed, torn or extremely worn)
   3. Athletic wear including jogging or warm up suits, sneakers, baseball caps, etc.
   4. torn or ripped clothing
   5. logo tee-shirts
   6. beach shoes/flip-flops or no shoes

D. While there is no official “dress down day” policy, supervisors who wish to implement one must consult with Human Resources first before doing so. Casual wear does not include any of the items noted above.

**GUIDELINES ON DEMONSTRATIONS IN UNIVERSITY FACILITIES**

**Preamble**

The New School is committed to freedom of speech, thought, inquiry, and artistic expression for all members of its community. It is equally committed to protecting the right of free speech of all individuals authorized to use its facilities or invited to participate in the educational activities of any of the university's academic divisions.

Demonstrations, marches, and picketing have long been recognized as legitimate forms of self-expression in the University community. The limiting principles for such activities are that demonstrators must not unreasonably disrupt other University functions, interfere with the freedom of others, or otherwise violate the rights of others. Demonstrations that take place inside University facilities, including all University buildings and the enclosed courtyard areas they bound, always have great potential to disrupt normal functions. Hence, it is necessary to give particular attention to the rights of all members of the University community when demonstrations take place in these facilities.
Purpose
These Guidelines on Demonstrations in University Facilities establish rules for carrying out demonstrations -- understood as speech activities and expression enjoying the basic protection of the right to free expression -- in University facilities. They also establish procedures for supervising such demonstrations, protecting the rights of demonstrators, and protecting the rights of others and the University.

Demonstrations are one of the tests of the freedom of expression, and these Guidelines also are explicitly intended to increase understanding of and strengthen the protection for free expression at the university. They follow by a little more than 10 years the report of the Committee on Freedom of Expression that was appointed by President Jonathan Fanton in December 1985. The report of that Committee, disseminated in November 1986, began by indicating that the members "welcomed the opportunity to underscore that the condition of freedom of expression at The New School is a collective responsibility." On the matter of rules and expressly prohibited behavior, the report took a position that continues to merit the support of the University community:

"In institutions, behavior is regulated most effectively and meaningfully when rules are expressed in terms of expectations rather than restrictions. Only the most extreme and unambiguous requirements should be articulated in the terms of prohibitions: in this case, absolutely no form of physical violence or intimidation can be tolerated.... At the same time, we are at a loss to find statutory language to govern all situations when demonstrations might impede speech to some extent but fall short of violence or the threat of violence. In particular, we think it important not to confuse civility and standards of behavior as an audience interacts with a speaker with questions of censorship or intimidation."

These Guidelines have been influenced significantly by the reasoning and the spirit of that report. At the same time, and in the same spirit, the University vigorously reaffirms both its Policy on the Free Exchange of Ideas, adopted by the Board of Trustees on January 21, 1987, and the Statement on Freedom of Artistic Expression, adopted by the Board on October 4, 1989.

Principles
The New School is committed by tradition and by its defining values to the free exchange of ideas and the freedom of artistic expression. The Policy on the Free Exchange of Ideas pointed out that:

"A University in any meaningful sense of the term is compromised without unhindered exchange of ideas, however unpopular, and without the assurance that both the presentation and the confrontation of ideas takes place freely and without coercion. In this context and because of its distinctive, educational role as a forum for public debate, the University has deep concern for preserving and securing the conditions which permit the free exchange of ideas to flourish."

Obviously, the free exchange of ideas is not achieved once and for all time by the act of its proclamation. Free exchange of ideas requires active, ongoing, sometimes arduous support by the University community.

The overriding concern may appear deceptively simple: that the free exchange of ideas is essential to the ability of universities to serve society and the search for truth. Each member of the community must be willing to accept an individual and collective responsibility for maintaining the fullest possible freedom of expression. This responsibility involves: toleration for the right of all members of the community to free expression, especially the expression of unusual, unpopular, even objectionable ideas, and respect for the conditions that make free expression possible. The Policy on the Free Exchange of Ideas states that:

"Faculty members, administrators, staff members, students and guests are obligated to reflect in their actions a respect for the right of all individuals to speak their views freely and be heard. They must refrain from any action which would cause that right to be abridged. At the same time, the University recognizes that the right of speakers to speak and be heard does not preclude the right of others to express differing points of view. However, that right must be exercised in ways which allow speakers to continue and must not involve any form of intimidation or physical violence. Beyond the responsibility of individuals for their own actions, members of the New School community share in a collective responsibility for preserving freedom of speech."

The Elements of Time, Manner and Place
The exercise of the freedom of expression does not mean its unlimited exercise at all times, in all possible manners, in all places. Universities are large communities whose many members cannot all simultaneously exercise the right of free expression. How it is exercised at a given time and place can significantly affect the ability of others to make use of their right.
The elements of time, manner and place are particularly relevant to speech and other expression when demonstrations are carried out in University facilities. The university's concern with these elements does not arise from a concern with demonstrations per se. Rather, it springs from the recognition that (1) the rights of individuals belonging to the University community or the public may well collide at such times, (2) the University has the responsibility to carry out its educational and administrative activities as well as to protect the rights of all members of the community, and (3) without prior content-neutral rules, any intervention to protect those involved in the demonstration, others in the University community, or the institution, may appear biased.

The American Civil Liberties Union, in its Policy on College Student's Civil Liberties, describes the complex interplay of rights that must be balanced for free expression to flourish:

"Picketing, demonstrations, sit-ins, or student strikes, provided that they are conducted in an orderly and non-obstructive manner, are legitimate activities whether they are instigated by events outside the campus or directed against the college administration, and should not be prohibited, nor should students be penalized for engaging in them. Demonstrators or distributors of pamphlets, however, have no right to deprive others of the opportunity to speak or be heard; take hostages; physically obstruct the movement of others; or otherwise disrupt the educational or institutional processes in a way that interferes with the safety or freedom of others."

Hence, the regulation of the elements of time, manner and place of demonstrations is a legitimate and necessary concern of the university. The following sections dealing with those elements are intended to clarify the conditions that make possible the exercise of free expression for all members of the University community. They have four principal objectives: to protect the rights of demonstrators to be heard, protect the rights of the University community as a whole to receive information from demonstrators, protect others against the violation of their rights, and protect the University as an educational institution against the substantial and material disruption of its educational and administrative processes.

Opportunities for Speech Activities and Expression
The New School respects the right of demonstrators to express their ideas in ways that do not limit the freedom of others or impinge on the rights of others.

The New School's buildings are available to the University community for speech activities during the regular business hours of the particular building, excluding classrooms being used for classes, libraries, computing centers, and faculty and administrative offices.

The University also will designate a bulletin board in the lobby of the Albert List Academic Center where members of the University community can exercise their right of free expression on any issue. If a demonstration is planned to take place inside University facilities, that is, inside a University building or enclosed courtyard area, the persons desiring to demonstrate are asked to notify the Secretary of the University at least 24 hours in advance in order to allow for the exchange of information about other activities that may be scheduled and to assure public safety.* Demonstrators will not be permitted to remain in any University building beyond its normal closing hour.

If the demonstrators wish to continue beyond one day, a permit must be secured to use a specific space for a specified period of time. Such permits will be renewable and subject to modification, given the university's need to consider competing requests. Permits shall be granted on a content neutral basis.

The University will allow recognized student, staff or faculty organizations to set out and use tables, carts, booths and symbolic structures in accordance with an express permit issued under the conditions that are described below in section VI. The University may require that tables, carts, booths, and symbolic structures be removed each day.

The Time, Manner and Place of Speech Activities and Expression Speech activities may not:

- Involve any form of physical violence or physical intimidation.
- Violate any laws of the United States, the State of New York or the City of New York.
- Violate fire and building codes or any other code and regulation for public safety.
- Violate the University Code of Conduct.
- Impede the movement of people or disrupt regular or authorized activities in classrooms, offices, studios, and laboratories.
- Be conducted at a volume which disrupts the normal use of classrooms, offices, studios and laboratories.
The University may require a speech activity to be conducted 10 feet or more from any exit, entrance, staircase, etc. to allow access. It also may impose limits on the portion of interior floor space and the portion of exterior and interior walls of University buildings that may be used for speech activities.

The secretary, or another University officer designated by the president, will be responsible for approving requests to use space inside University facilities for speech activities and for establishing any conditions for their conduct.

Permission for the use of symbolic structures in carrying out speech activities or expression will require that such structures be portable and conform to any conditions contained in the permit. "Symbolic structures" include props and displays, furniture, and any constructions. Permits for the use of symbolic structures also shall be granted on a content neutral basis. In regulating by permit the duration, size, location, and other features of symbolic structures, the University will be guided by the following, and other similar, community interests:

- protecting health and safety
- preventing damage or risk of damage to University property
- preserving unimpeded mobility within buildings and unimpeded entrance to and departure from buildings
- providing for competing uses of facilities
- avoiding interference with other University activities
- reasonably limiting costs to the University for increased security, potential University liability, insurance coverage, and cleanup and repair after an event

Advisory Committee on Speech Activities and Expression
The president will appoint a standing advisory committee chaired by the secretary, comprised of 3 students, 2 faculty members, 2 administrators, and 2 individuals from the public, to work on issues that arise during demonstrations. The committee will be asked to give advice particularly on those issues that affect the university's ability to ensure that the rights of all parts of the community -- including those of demonstrators -- are respected, that competing requests for the use of University space are taken into account, and that the underlying conditions for free expression are preserved.

Violations
The University is deeply committed to maintaining the basic conditions for the exercise of free expression. The procedures established in these Guidelines are intended to enable all members of the University community to exercise their right to free expression and their right to hear what others want to express, and the infringement of either of these rights is a serious matter to the University community.

Violations of the rights of demonstrators or of the time, manner and place conditions for particular demonstrations are violations of these guidelines and also violations of the University Code of Conduct. The Code of Conduct indicates that when members of the University community are alleged to have committed violations, "they will be accorded the due process to which they are entitled. Members of the University community are granted a fair hearing; they are fully advised of any charges against them, they are afforded ample opportunity to respond to accusations, and they are given a clear explanation of the right to an appeal."

Individuals who are found to have violated the guidelines or other University policies bearing on freedom of expression will be subject to a range of penalties. For students, the penalties indicated in the Code of Conduct are: a warning that repetition of the wrongful conduct may be the cause for more severe sanctions and a clear instruction to desist; restitution for damage or loss to either University or individual property; probation placing the student in official jeopardy, so that a further violation of University rules and regulations while on probation may result in suspension or expulsion; restriction in the use of certain University facilities or the right to participate in certain activities or privileges for a specified period of time; suspension from all functions of the University for a stated period, and the possible requirement of a petition for readmission; and expulsion from the University for violations judged to be so serious that the student is informed that readmission will not be considered.

For faculty members found to have committed a serious violation of University policy, the penalties indicated in the Guidelines on the Rights and Responsibilities of Faculty are: a written warning, probationary status, suspension (including suspension of salary, or the termination of appointment.

The above listed penalties may be in addition to, and separate from, any penalties or liabilities pursuant to the laws of the United States, State of New York, or City of New York. The University may, at its discretion, depending on the gravity of the violation, file a criminal or civil complaint with the appropriate public official.
The University officer involved in establishing time, manner and place conditions for demonstrations will not have a role in the adjudication of allegations against a participant in those demonstrations.

* No demonstration may be held without submitting an application and receiving approval in the form of a permit issued by the Office of the Secretary of the Corporation. Click here for the Application to Hold a Demonstration.

**Guidelines for At Home Entertainment**

We at The New School recognize two important facts: there are times when a more informal and casual environment is conducive to carrying out the work of the University; and entertainment space is a scarce commodity in our community. Generally, University events should be held on campus or in a restaurant, and shall only be held in a private residence if absolutely necessary. With these factors in mind, this Policy endeavors to outline when such activity is permitted in an individual’s home, and, if so, whether the costs associated with this activity will be reimbursed by the University.

Decisions regarding the use of an individual’s home for a University-sanctioned event shall be made in advance by the Dean or Vice President who supervises that individual or the expense of the event will not be covered. The approval of funding for University events in a residence does not constitute permission for inappropriate or illegal activity, including but not limited to, serving alcohol to individuals under 21 years of age, or to those who may be inebriated. Generally speaking, when the University sanctions an activity, it assumes some responsibility for the safety and well-being of the people engaging in the activity. Therefore, the proposed activity must have a legitimate, educational purpose that furthers the goals of the University. Because it is neither practicable nor a desired consequence that the University inspect the premises of individuals who sponsor an activity in their home, it is the general policy that regular, ongoing activities, such as classes, individual lessons or counseling should not take place in individuals’ homes. In addition, University sanctioned events may not occur in students’ homes.

Once a decision has been made to permit an event in someone’s home, the Dean or Vice President may then approve the expenditure of funds for the event. Not all events must be supported by University funds. The policy may cover the catering of food and beverages or ordering take-out, but does not cover the purchase of tabletop goods such as glasses and plates. The use of University furniture for the event is not permitted. The hiring of security officers for the event will not be covered by the University, and the use of University security or maintenance personnel is not permitted. University students or employees may not be used as servers for the event. For reimbursement, documentation of expenses is required in the form of receipts similar to those processed for other University expense reimbursements. Tips given to caterers or delivery drivers should be given at a reasonable customary rate. A Dean or Vice President should determine that the nature of the expenditure is reasonably related to supporting the proposed activity and that the amount of money being spent is appropriate for the activity.

The standards enunciated herein are intended to be flexible in order to permit Deans and Vice Presidents with the discretion to support the work of their staff. If guidance or support is required, please consult with the Office of the General Counsel or The Office of Finance and Business on individual situations as they arise.

**EMPLOYEE DISCIPLINE POLICY**

This is applicable only to administrators of the university.

While all employees should recognize that their employment relationship with the University is terminable “at will” by either the University or individual employees, the University encourages open, honest communications between supervisors and their subordinates relating to job performance and related discipline.

Identifying employee performance problems and/or inappropriate behavior, and the appropriate and most effective means of resolving them, can be complex and require a variety of considerations. Disciplinary actions are usually corrective and progressive in nature, however, serious misconduct and work performance problems, or violation of laws and/or University policies, procedures, and practices may warrant disciplinary action, including termination, outside of the corrective, progressive approach that is outlined below. These procedures serve as a guide for supervisors to help ensure that a fair approach is taken in dealing with employees with continuing and/or serious performance problems. In most instances, disciplinary actions should not come as a surprise to the employee, but should occur after other informal remedial and/or corrective measures such as ongoing performance feedback, coaching, counseling, training, etc., have not been successful.
There are three types of disciplinary action that may be taken: warning; suspension and termination. In determining the proper course of disciplinary action, however, the supervisor and/or Human Resources may repeat, modify, or omit a level of discipline based upon the facts of the specific case. For example, in the case of serious misconduct, a suspension or termination of employment of the first offense may be warranted.

**Note:** Although the university’s philosophy on improving performance and behavior is a corrective and progressive approach, there are situations when this approach is not appropriate. Some examples of this type of situation include, but are not limited to employees who fail to meet performance expectations in positions that require them to: 1) regularly and reliably exercise a high level of judgment and discretion; 2) consistently demonstrate effective supervision, management, and leadership; and, 3) productively participate in a confidential capacity as part of the management team, where the actions and inactions of such individuals may seriously impair the ability of a unit, college, division, or the University to carry out its mission. In these cases, as early as possible, the affected employee should be given a clear understanding of how his/her performance is not meeting expectations or the standards of the job. The supervisor should thoroughly discuss the concerns with the employee and allow him/her an opportunity to present his/her understanding of the situation. If a mutually agreeable resolution to the situation cannot be found, the University reserves the right to terminate the employee’s employment. Appropriate notice or pay in lieu of notice will be arranged.

**Caution:** Before imposing discipline, supervisors are expected to consult with Human Resources.

**Employee Rights**
This is applicable only to administrators of the university.

If an employee feels that discipline has been unduly imposed, s/he may contact Human Resources for assistance in trying to resolve the problem informally. Employees have the right to file a formal grievance whenever they believe they have been treated in a manner inconsistent with this policy.

**Disciplinary Actions**

**Warning**
Initial disciplinary actions can be oral or written, depending upon the severity of the situation. The supervisor should meet with the employee to discuss the performance problem and/or inappropriate behavior and outline the steps necessary to correct it. The supervisor may make notes of this initial discussion and retain them for future reference.

If performance or behavioral problems continue, or if the severity of the initial offense warrants, the supervisor should meet with the employee and give a formal written warning to document the discussion. The written warning should include a description of the problem and the specific steps necessary to successfully correct it, the timeline for improvement, and a scheduled time to meet to review the employee’s subsequent performance. The warning should also indicate that unless the unacceptable performance or behavior is corrected and the acceptable behavior maintained as discussed, further disciplinary action, including termination, may occur.

If there is no change or improvement in performance or behavior, further disciplinary action may include a second written warning, a final warning, a suspension, or termination, depending on the actual situation. Determination of which action is appropriate should be made after consultation with Human Resources. Written warnings should make clear to the staff that absent compliance and appropriate corrective action, further disciplinary measures, which may include termination, will follow.

Prior to issuance, all written warnings should be reviewed by Human Resources. The original is given to the employee and a copy is retained in the employee’s HR personnel file.

**Suspension**
Suspension may be appropriate as a form of discipline. It may also be invoked to facilitate investigative actions.

**Disciplinary suspensions** are used to address serious misconduct/violations of procedures, practices, or laws. They also may be used when oral and written warnings have not corrected deficient work performance or behavior or when the performance/behavior warrants a more severe discipline in the first instance. Supervisors must discuss with Human Resources plans to suspend employees.
• **Disciplinary suspensions of non-exempt employees:** These suspensions are unpaid and, generally, range from one to three consecutive workdays in duration. In cases of severe infractions, longer suspensions may be given and scheduled at the discretion of the department.

• **Disciplinary suspension of exempt employees:** In accordance with the Fair Labor Standards Act, no exempt employee may be subject to a suspension without pay unless it is in increments of one or more full work days.

**Investigatory suspensions** may be used in situations where actions of an employee are being investigated. The employee is placed on a suspension, with or without pay, depending upon the circumstances of the case, while the investigation is being conducted. Based on the outcome of the investigation, the employee may be issued a disciplinary suspension, reinstated either with or without the imposition of a lesser disciplinary action, or terminated.

Prior to issuance of suspension, the department head, and Human Resources must review all suspensions. Following the investigation and discussion with the employee, the individual should receive a letter documenting the reason for the suspension, whether the suspension is with or without pay, and the period of suspension. A copy of the letter is retained in the employee's HR personnel file. For more information, please contact Human Resources.

**Termination**
An employee's employment may be terminated for performance deficiencies that are not corrected, or for serious misconduct. Prior to initiating such action, the supervisor and/or unit head must consult with Human Resources. Supervisors must request the return of all University property, including keys, ID cards, procurement cards, parking permits, computer equipment, etc. For more information, please refer to the [Separation from Employment](#) section of this document.

**Responsibilities**
The major responsibilities each party has in connection with the University Policy on Employee Discipline (Excluding Academic and Bargaining Unit Staff), are as follows:

<table>
<thead>
<tr>
<th>Human Resources Representative</th>
<th>Consult with the SVP and Chief Human Resources Officer and the Supervisor and/or Unit Head to ensure that disciplinary procedures are conducted in accordance with this policy. Review all suspensions before their issuance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>Read and understand University <a href="#">Policy on Disciplinary Actions</a>. When grieving a disciplinary action, do so in accordance with the <a href="#">Employee Grievance Policy</a>.</td>
</tr>
<tr>
<td>Supervisor</td>
<td>Before invoking the terms of this policy, meet with the employee to discuss performance problems and/or inappropriate behavior and outline the steps necessary to correct them. Before invoking disciplinary procedures, consult with Human Resources. Issue verbal or written warnings and carry out disciplinary procedures fairly, and in accordance with this policy. Prior to issuance, have all written warnings reviewed by Human Resources. Give originals of all warnings to the employee. Retain a copy of all warnings. In cases of termination, request the return of all University property, including keys, ID cards, computer equipment, procurement cards, etc.</td>
</tr>
</tbody>
</table>

**Definitions**

<table>
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<tr>
<th>Insubordination</th>
<th>Refusal to follow specific directives and otherwise submit to authority</th>
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</thead>
<tbody>
<tr>
<td>Serious Misconduct</td>
<td>Conduct by an individual, while engaged in University business or on University premises, that includes, but is not limited to: violation of laws, and/or University policies, procedures, and practices; theft; assault or fighting; insubordination; dishonesty or other unethical conduct; safety violations; harassment; possession/concealment of weapons; possession, use, sale, or purchase of illegal drugs or illegal intoxicants; falsification or improper alteration of records, including time cards/records; damage or destruction of University property; being intoxicated and disclosure or misuse of confidential information</td>
</tr>
<tr>
<td>Unit</td>
<td>A department, college, school, program, division, or other entity of the University that is responsible for an individual's employment</td>
</tr>
</tbody>
</table>

**GRIEVANCE POLICY**
Applies to regular full-time and part-time, administrative staff. (Note: Employees represented by a collective bargaining unit are not covered by this Policy and should consult the current contract language. Full time faculty should consult the [Full Time Faculty handbook](#).)
The grievance procedure is designed to supplement the informal departmental means of resolving employees' problems or complaints, unrelated to any complaint of employment discrimination. It may be used whenever an employee's efforts to
solve the problem through discussion with the immediate supervisor have been unsuccessful. Human Resources is available to assist employees in the informal resolution of their grievances.

I. Procedure: The following steps comprise the grievance procedure.

   A. Step 1:
      a. The employee should present the problem or complaint in writing to the department head. This should be done as promptly as possible—generally no more than one week after the incident or action under question. Upon receipt of the written statement, the department head shall promptly meet with the employee and any others concerned and shall reply in writing to the employee giving his or her decision, and the reason for it, within one week of the meeting.

   B. Step 2:
      a. If the department head's decision does not resolve the problem to the employee's satisfaction, the employee should refer the problem to the dean, vice president or director concerned within one week of having received the department head's response under Step 1. The employee should send the dean, vice president or director a copy of the complaint and the response from Step 1 along with a letter explaining his or her reasons for dissatisfaction with the department head’s reply.

      b. The dean, vice president or director shall promptly meet with the employee and any others concerned (the grievant may invite someone to accompany him/her to this meeting), and shall reply in writing generally within two weeks of the meeting with the employee. In cases where the dean, vice president or director finds the need for a longer inquiry, he or she shall advise the grievant within two weeks as to when the decision will be rendered.

   C. Step 3:
      a. If the employee feels the problem has not been satisfactorily resolved at Step 2 and desires further appeal, he/she may refer the grievance to the Review Committee. That Committee includes the Chief Financial Officer & Senior VP for Finance & Business of the university, or his/her designee, who chairs the Committee and the Vice President General Counsel or a representative. The Senior Vice President and Chief Human Resources Officer or designee will serve as the third member of the committee. To request review under Step 3, the employee should, within two weeks of his or her receipt of the response under Step 2, provide the Chief Financial Officer & Senior VP for Finance & Business with copies of the 1st and 2nd step statements and responses along with an explanation of his or her reasons for dissatisfaction with the decision received at the second step.

      b. The committee will schedule a meeting at which the employee may present his or her case. The employee may invite someone to accompany him/her to this meeting. The Department head and/or supervisor will present the management case.

      c. A decision will be issued in writing generally within three weeks of the meeting. In cases where the need for a longer inquiry is necessary, the grievant will be advised as to when a decision can be expected. The decision of the Review Committee completes the final appeal step and is binding upon all parties within the university.

II. Assistance: Throughout the process Human Resources will counsel employees regarding the Grievance Procedure and provide assistance in preparing the written statements.

EMPLOYMENT OF MINORS POLICY

It is the policy of The New School to maintain certain personnel and safety practices concerning the employment of minors. New York State and the federal government place many restrictions on the type of work that may be performed by minors and the hours during which they may be employed.

As a consequence, no one under the age of 18 may be employed in any capacity on either a part-time or a full-time basis. Information regarding the employment of University students may also be obtained from Human Resources as well as the Student Employment/Financial Aid Office.
VISA SPONSORSHIP FOR FOREIGN NATIONALS POLICY
The New School, from time to time, may seek Foreign Nationals to work within the university. The University will only sponsor visas for Foreign Nationals in faculty positions. For more information, please contact the Office of General Counsel and/or the Office of International Student Services.

RELATED HUMAN RESOURCES POLICIES

Background Investigations
The New School will conduct background investigations on certain newly hired employees and current employees where this is a condition of continued employment. Background investigations may include but are not limited to:

- Education verification
- Employment verification
- Criminal and Civil Records
- Financial information

New employees who will be investigated are:
1. Deans, Officers, Vice Deans, Associate and Assistant Deans, Associate and Assistant Vice Presidents, Deputy Provosts, Vice Provosts, Associate and Assistant Provosts
2. Faculty working on grants as Primary Investigator, Academic Center and Institute Directors (this stipulation must be included in grant forms)
3. All employees in Accounting
4. All employees in Purchasing
5. All employees in Bursar’s Office
6. All employees in Human Resources
7. All employees in Payroll
8. Housing Directors and employees who come in contact with resident students
9. All employees in the University Budget office and divisional budget offices
10. Directors of Administration in the divisions
11. Directors of Admissions in the divisions
12. Security Management and security officers (investigations are performed through the Security Department)
13. All University and Division Development Administrators
14. All IT employees who have access to sensitive information or who can unilaterally change information
15. All Student Financial Services Administrators
16. All employees who are issued University credit cards (at the time of application a release must be completed for the background check)
17. All employees in facilities and maintenance who have authority to commit
18. University funds
19. Assistant General Counsels
20. Director and Assistant Directors of Enrollment Management
21. All Student Health Services employees
22. All other employees entrusted with University assets and those that can commit University funds

Conflicts of Interest
I. Preamble
The New School is committed to maintaining the highest standards of honesty and integrity in all of its dealings both within the University community and with individuals and organizations outside of the University community. Underlying this commitment is the responsibility of members of the University community whenever they are acting on behalf of the University or whenever the interests of the University are involved to act always in the interests of the institution and on behalf of the public good and not for themselves, members of their families, or business associates. The University is entitled to expect that the independent, unbiased judgment of its members is unimpaired by actual, potential or apparent financial or other personal interests. In keeping with this commitment, the Board of Trustees of The New School publishes this Policy on Conflicts of Interest and reaffirms its legal, moral and ethical responsibility to protect the institution’s integrity and well-being in serving the public trust.
This Policy reflects the fundamental principle that the interests of the University must be superior to the personal interests of those who work for the University or serve it in a volunteer capacity. When those interests conflict, the University’s interests must be paramount.

Individuals serving the University in a managerial, fiduciary and advisory capacity are or may be involved in the affairs of other organizations. In the case of Trustees of the University and members of Boards of Governors and Advisory Boards or Committees, individuals are selected to serve the University because of these associations and because they bring to the University background, experience and expertise which is of great value to the University. Indeed, it is the expectation of the University that these individuals will devote their time and expertise to the University on a pro bono basis.

Notwithstanding this expectation, it is recognized that those individuals involved in the governance of the University may not always be entirely free from at least perceived conflicts of interest. Although most such potential conflicts will be deemed to be inconsequential, and often, if not inconsequential, will be determined to be appropriate because they serve the best interests of the University, all individuals must assume the responsibility to ensure that the Board of Trustees and the President are made aware of situations that involve personal, familial or business relationships which could subject the University or the individual to criticism.

II. Individuals Covered by the Policy on Conflicts of Interest
This Policy applies to all Trustees, Officers, Deans or Executive Directors and Key Employees, and all members of the Boards of Governors and Advisory Boards or Committees in the academic divisions as well as all Designated Faculty and Designated Administrative Employees.

III. Statement of Policy
An individual covered by the Policy shall disclose and, unless approved under this Policy, avoid potential, actual and apparent conflicts of interest as defined below. Any transaction, contract or other business or financial relationship between the University and an individual covered by the Policy which presents a conflict of interest or the appearance of a conflict of interest shall be void unless approved in accordance with this Policy as provided in paragraph V below. This policy also explicitly prohibits business or financial relationships between the University and its trustees, officers, deans or directors, key employees and/or their family members, and key vendors unless such business or financial relationships have been thoroughly reviewed and considered as discussed below.

IV. Definitions
1. “Conflict of Interest”: A conflict of interest shall be deemed to exist in any instance where the interests of the University are involved and where the actions, judgment or decisions of an individual covered by the Policy may be, have the potential to be or may appear to be, influenced, directly or indirectly, by his or her personal interest, financial, fiduciary or otherwise in any other person or entity. A conflict of interest shall also be deemed to exist when the interests of the individual’s family members are or may be involved.

2. “Family Members”: Unless otherwise noted in the Annual Disclosure & Certification Form, an individual’s family members includes spouse, ancestors, children, grandchildren, great-grandchildren, siblings, in-laws, and any other individuals residing in the same household as the person covered by the Policy.

3. “Business or Financial Relationships”: Unless otherwise noted in the Annual Disclosure & Certification Form, this term includes, but is not limited to, employment and contractual relationships, commitment of resources to a common venture or the existence of a significant interest in another entity with whom the University has a business relationship. A significant interest in another entity includes service as a trustee, director, partner, or management level employee; direct or beneficial ownership of more than 5% of the entity; or a compensation arrangement with such entity that is dependent upon a business or financial relationship with the University.

4. “Key Employee: Unless otherwise noted in the Annual Disclosure & Certification Form, the term includes anyone who has responsibilities, powers or influence over the University as a whole similar to those of officers, deans or trustees.
5. “Designated Faculty”: Any faculty and academic administrator who the Provost determines as having responsibilities that may trigger the application of this Policy including, but not limited to, those who are: Chairs, appointed to serve on search committees, working on grants as Primary Investigators or are Academic Center and Institute Directors. It also includes any faculty or academic administrator whose relationship with any outside organization creates a potential conflict of financial interest to the extent such organization supplies goods or services to the University or is a direct competitor of the University.

6. “Designated Administrative Employees”: Any employee earning over $50,000 assigned to work in the departments listed below have been determined by the Chief Operating Officer as having responsibilities that may trigger the application of this Policy. It also includes any employee whose relationship with any outside organization creates a potential conflict of financial interest to the extent that organization supplies goods or services to the University or becomes a direct competitor of the University.

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<thead>
<tr>
<th>Accounting</th>
<th>Housing</th>
<th>Security</th>
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<tr>
<td>Bursar’s Office</td>
<td>Human Resources</td>
<td>Student Affairs &amp; Student Health Svcs</td>
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<td>Development</td>
<td>Information Technology</td>
<td>Student Financial Services</td>
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<td>Facilities</td>
<td>Payroll</td>
<td>University &amp; divisional budget offices</td>
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<td>General Counsel’s Office</td>
<td>Purchasing</td>
<td>Communications and External Affairs PIIM</td>
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<td></td>
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<td>Provost’s Office</td>
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V. Procedures for Considering Conflicts of Interest

In the event of a conflict of interest situation or potential conflict of interest situation, an individual covered by the Policy shall disclose to the Chief Legal Officer & Secretary of the Corporation such conflict or potential conflict at the earliest practicable time. A conflict of interest situation or potential conflict of interest situation may also be disclosed on the Annual Certifications on file with either the Office of the General Counsel or Human Resources, as appropriate. Regardless of how such a conflict of interest situation or potential conflict of interest situation is revealed, compliance with this Policy can be accomplished only by elimination of the conflict or by approval of the transaction as described below.

1. Procedures Applicable to Trustees, Officers, Deans or Executive Directors, Key Employees, Members of the Board of Governors and Advisory Boards or Committees
   a. Upon review of the circumstances surrounding the conflict or potential conflict of interest involving a Trustee, Officer, Dean or Designated head of a School or program, Key Employee, Member of the Board of Governors or similar advisory committees, the Chief Legal Officer & Secretary of the Corporation shall make a recommendation to the Chairman of the Board of Trustees and the President of the University as to whether the Chairman and the President should (i) determine the conflict situation or potential conflict situation to be inconsequential and approve the situation; (ii) determine the conflict situation or potential conflict situation to be consequential and avoid the situation; or (iii) refer the conflict of interest situation to a sub-committee of the Executive Committee of the Board of Trustees.

   b. Certain circumstances will result in a presumption that the conflict of interest situation or potential conflict of interest situation is inconsequential and should accordingly be approved without the need for review by a sub-committee. For example, such a situation will be deemed to exist where the University has engaged in a competitive process for the selection of a contract provider. Generally, where there has been a competitive process and where the selected provider is associated with an individual covered by this Policy and where this selected provider has submitted the lowest bid or satisfied other appropriate competitive pricing criteria or standards, the situation may be approved without the need for sub-committee review. However, personal service by the covered individual or by a member of the covered individual’s family should be a factor in determining whether to submit the situation to sub-committee review.
c. Upon consideration of the recommendation of the Chief Legal Officer & Secretary of the Corporation, the Chairman and the President shall make a determination as set forth in paragraph 1(a) above.

d. In the event that the Chairman and the President determine to refer the conflict of interest situation to a sub-committee, the sub-committee shall consist of seven members, three of whom shall be the Chairman of the Board of Trustees, the Chairman of the Audit Committee and the President. While disclosure of a conflict situation or potential conflict situation is required at the earliest time practicable, once a situation has been identified as an issue for sub-committee review, the sub-committee need not be convened to review the situation until the potentially conflicted party (associated with a covered individual under the Policy) has been selected in a competitive process. After consideration of the matter, the sub-committee may approve the conflict of interest situation only upon a clear showing that: (1) other reasonable alternatives were considered and (2) approval of the conflict of interest situation is “in the best interests of and provides a substantial benefit to the university.” Any conflict of interest situation which is approved by the sub-committee shall be disclosed to the Executive Committee at its next regularly scheduled meeting.

e. Any individual covered by the Policy who discloses a conflict of interest situation or a potential conflict of interest situation shall not be present at the portion of any meeting in which the subject is discussed, nor shall that individual participate in any way in the discussion of or decision on the subject, except to answer pertinent questions by or to provide relevant information to the sub-committee or the Executive Committee. Furthermore, that individual is prohibited from influencing the deliberation or voting on the matter giving rise to such conflict or potential conflict.

2. Procedures Applicable to Designated Faculty and Designated Administrative Employees

a. Upon review of the circumstances surrounding the conflict or potential conflict of interest involving a Designated Faculty or Designated Administrative Employee, the Chief Legal Officer & Secretary of the Corporation shall make a recommendation to the Provost, if the conflict involves a Designated Faculty, or to the Chief Operating Officer, if the conflict involves a Designated Administrative Employee. Such recommendation shall (i) determine the conflict situation or potential conflict situation to be inconsequential and approve the situation; (ii) determine the conflict situation or potential conflict situation to be consequential and avoid the situation; or (iii) refer the conflict of interest situation to a sub-committee.

b. As described in 1(b) above, certain circumstances will result in a presumption that the conflict of interest situation or potential conflict of interest situation is inconsequential and should accordingly be approved by the Provost or the Chief Operating Officer, as appropriate, without the need for review by a sub-committee.

c. Upon consideration of the recommendation of the Chief Legal Officer & Secretary of the Corporation, the Provost or the Executive Vice President shall make a determination as set forth in paragraph 2(a) above.

d. In the event that the Provost or the Chief Operating Officer decides to refer the conflict of interest situation to a sub-committee, the sub-committee shall consist of three members. If the conflict involves a Designated Faculty member, the sub-committee shall consist of a member of the Office of the Provost and the Senior Vice President and Chief Human Resources Officer or her designee and a representative from the Office of the General Counsel. If the conflict involves a Designated Administrative Employee, the Chief Operating Officer or his designee, rather than a representative from the Office of the Provost, shall be the third member of the sub-committee. While disclosure of a conflict situation or potential conflict situation is required at the earliest time practicable, once a situation has been identified as an issue for sub-committee review, the sub-committee need not be convened to review the situation until the potentially conflicted party (associated with a covered individual under the Policy) has been selected after a competitive process. After consideration of the matter, the sub-committee will make a recommendation to the Provost or Chief Operating Officer, as appropriate, on whether the conflict should be approved or disapproved. All recommendations to approve a conflict must be based upon a clear showing that: (1) other reasonable alternatives were considered and (2) approval of the conflict of interest situation is “in the best interests of and provides a substantial benefit to the
Any recommendation that a conflict of interest situation be approved must be sent by the Provost or the Chief Operating Officer, as appropriate, to the President and the Chief Legal Officer & Secretary of the Corporation for final review and approval.

e. Any individual covered by the Policy who discloses a conflict of interest situation or a potential conflict of interest situation shall not be present at the portion of any meeting in which the subject is discussed, nor shall that individual participate in any way in the discussion of or decision on the subject, except to answer pertinent questions by or to provide relevant information to the sub-committee or the President and the Chief Legal Officer & Secretary of the Corporation. Furthermore, that individual is prohibited from influencing the deliberations or voting on the matter giving rise to such conflict or potential conflict.

f. An annual report of all potential conflicts reviewed by the sub-committee shall be submitted to the Chairman of the Audit Committee.

VI. Annual Certification

All newly elected trustees must review the policy and complete a written certification prior to commencing service. All other individuals covered by the Policy shall review the Policy annually and shall complete a written certification in the form annexed hereto that he/she has read and reviewed the Policy and is in compliance with the Policy and has disclosed information as required through the annexed form. Failure to disclose situations that may constitute a conflict of interest or to timely submit a completed and accurate Annual Disclosure & Certification form each year may, after investigation of any alleged violation of the policy, lead to disciplinary or corrective actions.

Trustees, Officers, Deans or Executive Directors, Key Employees, Members of the Board of Governors and similar advisory committees shall file such certification with the Chief Legal Officer & Secretary of the Corporation. Designated Faculty and Designated Administrative Employees shall file the certification with Human Resources. The Chief Legal Officer & Secretary of the Corporation along with the Senior Vice President and Chief Human Resources Officer, shall have responsibility for administration of this Policy.

Sexual Harassment

The New School is committed to creating and sustaining a University environment in which students, faculty, and staff can study and work in an open atmosphere, unhampered by discrimination. This commitment is explicitly stated in all descriptions of University programs and in all the official catalogs of the academic divisions of the University. The University’s statement on non-discrimination is:

“The New School is committed to creating and maintaining an environment that promises diversity and tolerance in all areas of employment, education and access to its educational, artistic or cultural programs and activities. The New School does not discriminate on the basis of age, race, color, creed, sex or gender (including gender identity and expression), pregnancy, sexual orientation, religion, religious practices, mental or physical disability, national or ethnic origin, citizenship status, veteran status, marital or partnership status, caregiver status, or any other legally protected status.”

Policy on Sexual Harassment

As a necessary part of its commitment to create and sustain an environment that is free of any kind of discrimination, The New School commits itself to prohibit sexual harassment and to confront and deal with it when it occurs. Sexual harassment is defined in this policy and procedures have been established for responding to concerns, allegations, and questions about sexual harassment brought by any member of the University community.

The University’s goal is to create a community free of sexual harassment. To do so requires good judgment, awareness, and intelligence. To sustain this kind of community also requires directness and clarity, since many members of the community may not immediately recognize instances of sexual harassment and the consequences of such conduct on individuals and the community. In order to achieve the goal of a community free of sexual harassment, standards of behavior and procedures for dealing with breaches of those standards must be established and implemented within the context of academic freedom. Education of the community on this issue will also be necessary. The University seeks to sustain a high standard of behavior.
and to correct breaches of that standard, regardless of whether the offending behavior would meet external legal standards of the term sexual harassment.

**Definition of Sexual Harassment**

Generally, sexual harassment is conduct that exploits power or authority in order to elicit sexual submission, or inappropriate sexual conduct that creates an intimidating, hostile or abusive environment for working, learning or enjoying other opportunities and activities. Sexual harassment can include a wide range of behaviors, from the actual coercing of sexual relations to inappropriate sexualization of the working or learning environment with words, materials or behavior. It may involve women being harassed by men, men being harassed by women, or harassment between persons of the same sex, and can take place across all gender identities.

The Federal Equal Employment Opportunity Commission (“EEOC”) has issued guidelines that provide a basic definition of sexual harassment. While the EEOC guidelines apply only to faculty and other employees, the University prohibits sexual harassment of any member of the University community, whether such harassment is aimed at students, faculty or other employees.

Based upon the EEOC guidelines, and for the purposes of this policy, sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other expressive or physical conduct of a sexual nature, where

- submission to such conduct is explicitly or implicitly made a term or condition of employment or status in a course, program or activity; or
- submission to or rejection of such conduct is used as a basis for an employment or academic decision affecting the individual, or for a decision regarding an individual's status in a course, program or activity; or
- such conduct has the purpose or effect, when judged from the perspective of a reasonable person in the position of the complaining individual, of substantially interfering with an individual's academic or work performance, or with an individual's enjoyment of other University opportunities, programs and activities; or
- such conduct has the purpose or effect, when judged from the perspective of a reasonable person in the position of the complaining individual, of creating an intimidating, hostile or offensive environment for working, learning, or enjoying other University opportunities, programs and activities.

Sexual harassment is generally found to be in two distinct forms. *Quid pro quo* sexual harassment occurs when an individual makes an explicit proposition for sexual favors in return for express or implied job benefits or academic decisions, or where rejection of such a proposition is to be used for, or negatively effects, job benefits or academic decisions. Hostile environment sexual harassment occurs when conduct (either through its severity and/or its repetitive or consistent nature) has the purpose or effect of substantially interfering with an individual’s work or academic performance, or creates an intimidating, hostile or offensive working or learning environment. Unwanted flirtations, advances or propositions of a sexual nature, or unwanted comments of a sexual nature about an individual’s body or clothing, whether conveyed orally, in writing or by electronic transmission, or unwelcomed touching, such as patting, pinching, hugging, or brushing against an individual’s body, are illustrations of the kinds of conduct, if engaged in by an individual repeatedly and consistently, which could constitute hostile environment sexual harassment.

**Other Issues Concerning the Conduct of Members of the University**

The EEOC definition refers to legal standards for identifying sexual harassment. There are, however, other standards for conduct among its members that are important in a University setting. Although we do not wish to discourage collegial relationships which are essential to the educational mission of a university, members of the University must recognize the professional responsibility that faculty have for students’ education and the considerable power that faculty have over students’ careers. As a result, our standards for relationships between faculty and students at the University, and between other members of the University community, may be more restrictive than those encompassed in the EEOC definition which pertains to employment.

Faculty members (and administrative staff) should be aware that any romantic involvement with students (or staff members who report to them) is considered inappropriate, and it might make them liable to formal action. Where these relationships develop, they should be immediately reported to the appropriate designated official (See Guidelines for Dealing With Issues of Sexual Harassment & Discrimination.)
Romantic involvements between faculty and students outside the instructional context also have the potential to lead to difficulties. Beyond these difficulties, and the risk of formal action, these involvements can have a negative effect on the community. Suspicions of favoritism may arise that affect the academic and/or work environment; there may be the appearance of exploitation even if the relationship is consensual. In addition, there is always the possibility that relationships that begin consensually will be subject to misinterpretation and that after they end, the faculty (or administrative staff member) will be vulnerable to accusations and recriminations.

The foregoing paragraphs refer generally to faculty and students, or administrative staff members and those who report to them, but it is equally important that relations between students in all programs of the University adhere to a high standard of collegiality and mutual respect.

The foregoing paragraphs are included within the purview of this policy statement, because it is important to keep this highest standard of professional behavior in mind and to avoid even the semblance of exploitation. At a university, in situations where colleagues, co-workers, teachers and students work together as equals, and where the atmosphere is collaborative, there will be a tendency to ignore distinctions and to behave as if they do not exist. Particularly, in the case of senior faculty and junior faculty and in the case of faculty and graduate students (when students are older, working adults) it may be easy to ignore differences in responsibility and power. But even in the case of non-traditional students, -- teachers have power and authority over all students -- this asymmetry should be acknowledged and respected. The same is true for the relations between supervisors and staff.

At the same time as we respect the differences in our roles, we want to sustain a collegial atmosphere and the informality of the University environment so that our mission -- the process of education -- can flourish. At no point, however, should the freedom, openness, and collegiality of the University permit an abandonment of responsibility.

The highest standards of professional conduct pertain to all members of the faculty in their dealings with one another as well as with staff and students; the relationships between supervisors and members of the staff at all levels should also be governed by these standards. No member of the University should feel that the fulfillment of her or his duties is obstructed or impeded by sexual harassment from a teacher, colleague, or supervisor.

The standards we have outlined above have their parallel in relationships among students in all academic divisions of the University. We expect those relations to be collegial and civil. Students should not engage in any behaviors that coerce, demean, or threaten other students.

Online Sexual Harassment Prevention Training Program
The University has implemented online sexual harassment training software by New Media Learning called, "Preventing Sexual Harassment", to supplement its current training practices on sexual and discriminatory harassment.

This online program is comprehensive, user friendly and can be accessed 24 hours per day/365 days per year from any computer with internet access by logging on to www.newmedialearning.com/psh/newschool. The entire training program can be completed in 60 minutes. For those who do not have access to a computer, a dedicated terminal is available in the Office of Human Resources located at 80 Fifth Avenue, 8th floor.

The New Media web site gives clear instructions for completing the training program, lists an email address for Human Resources where questions and concerns can be emailed in confidence and contains copies of all relevant University policies and procedures. Upon completing the program, a Certificate of Completion is issued and the results (pass/fail) are mailed to the Office of Human Resources for filing.

All new employees of the University are required to complete this training within the first 30 days of employment.

Title IX
Title IX of the Education Amendments of 1972, 20 U.S.C. §1681 et seq., is a comprehensive federal law that prohibits discrimination on the basis of sex/gender in any federally funded education program or activity. The New School is committed to educating students and employees about Title IX and how it affects the university community as a way to affirm the dignity of all students. Educational institutions that receive federal funding are covered by Title IX. In compliance with Title IX, The New School prohibits discrimination on the basis of gender in employment as well as in all programs and activities.
Students or employees who wish to report an incident or have questions about gender discrimination, harassment, or sexual misconduct are encouraged to contact their Title IX officer.

Rhonnie Jaus, AVP for Equal Employment Opportunity, Affirmative Action and Compliance  
80 Fifth Avenue, 8th floor, jausr@newschool.edu.

Jennifer Francone, AVP for Student Equity and Access  
72 Fifth Avenue, 4th floor, franconi@newschool.edu.

The United States Department of Education’s Office for Civil Rights (OCR) is in charge of enforcing Title IX. Information about the OCR can be found on the U.S. Department of Education website.

The New School affirms the dignity and rights of all members of the university community. The policies listed below are enforced by the university with the goal of ensuring an environment free of gender discrimination, harassment, and sexual misconduct.

**Discriminatory Harassment**

The New School is committed to being an academic community that is racially and culturally diverse, that values mutual respect, human dignity, and individual differences, and that is supportive of intellectual, artistic, and professional growth.

These benefits are compromised when individuals or groups within the community engage in acts of discrimination and discriminatory harassment as well as coercion against other individuals or groups, including intimidation by threats and/or acts of violence or personal vilification on the basis of age, race, color, creed, sex or gender (including gender identity and expression), pregnancy, sexual orientation, religion, religious practices, mental or physical disability, national or ethnic origin, citizenship status, veteran status, marital or partnership status, caregiver status, or any other legally protected status.

Such acts undermine the fundamental values of the entire community and contribute to a hostile environment which may limit or deny access to the educational process, not just for those subjected to such acts but to the community as a whole. Acts of discrimination including discriminatory harassment are prohibited.

This policy is not intended to discourage the expression of ideas that, while they may be offensive, are protected by the university’s Policy on the Free Exchange of Ideas and the university’s Statement on Freedom of Artistic Expression, and by the First Amendment of the Constitution of the United States.

Speech or other expression constitutes discriminatory harassment if it:

1. deliberately insults, stigmatizes, threatens or intimidates an individual or small group of specific individuals on the basis of age, race, color, creed, sex or gender (including gender identity and expression), pregnancy, sexual orientation, religion, religious practices, mental or physical disability, national or ethnic origin, citizenship status, veteran status, marital or partnership status, caregiver status, any other legally protected status or other personal attributes; and
2. is addressed directly to the specific individual or individuals who it insults, stigmatizes, threatens, or intimidates; and
3. makes use of “fighting words” or non-verbal symbols.

In the context of discriminatory harassment, “fighting words” or non-verbal symbols are words, pictures or symbols that are, as a matter of common knowledge, understood to convey direct hatred or contempt for human beings and that by their very use inflict injury or tend to incite an immediate breach of the peace.

Individuals who believe they have been subject to discrimination in violation of this policy may obtain redress through the University’s Sexual Harassment & Discrimination complaint procedures, or, where applicable, the collective bargaining agreement, as described in the Guidelines For Dealing With Issues Of Sexual Harassment & Discrimination.²

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² It is also a violation of this policy to engage in hate/bias crimes which include violence, intimidation and/or destruction of property against a person
Guidelines for Dealing with Issues of Sexual and Discriminatory Harassment

The Board of Trustees of The New School has approved the preceding Policy on Sexual Harassment and Policy on Discriminatory Harassment. These policies provide a discussion of the standards of behavior to which the University community adheres in this regard.

These policies are statements of values and standards; they do not include procedures. The following Guidelines for Dealing with Issues of sexual harassment and other forms of discrimination have been established in order to provide a structure and procedures for dealing with actual charges of sexual harassment or discrimination as defined in the policies. The procedures uphold the basic requirements of fairness and accord full consideration and respect to the complainant and to the person complained against.

These Guidelines are for members of the University including faculty, students, and administrative staff. For clerical union employees, the University’s Sexual Harassment and Discrimination policies have been incorporated within the current collective bargaining agreement with the union local. There are two different procedures to be followed depending upon the status of the employee bringing a claim of having been sexually harassed or otherwise been discriminated against. If a claim is brought by an employee of having been harassed while in the status of a clerical union employee, it will be handled through the grievance machinery established in the collective bargaining agreement. If the claim of harassment or discrimination is brought by a member of the University while in the status of a student, administrative staff or faculty member, the University-Wide Sexual Harassment and Discrimination complaint procedures will be followed. An employee cannot utilize both procedures simultaneously.

The University has a separate policy and procedure related to behavior that constitutes sexual assault and other sexual violence. Students, Staff and Faculty who want to file a complaint of sexual assault should contact the Designated Officials listed below or the Director of Security.

Process for bringing a complaint of sexual or discriminatory harassment

Any member of the university community seeking to file a complaint would meet with a designated official(s) or designee(s). During this initial meeting, the designated official(s) or designee(s) will listen, ask questions, review appropriate policies and procedures, and explain next steps. If it is determined that the complaint falls under the Policy on Sexual Harassment or Policy on Discrimination, the designated official(s) or designee(s) will investigate the complaint. This investigation includes information gathering and meeting with the alleged harasser and other relevant persons (e.g. witnesses). Once the investigation is complete, the designated official(s) will review the collected information, determine whether the University’s anti-discrimination policies were violated, and recommend appropriate disciplinary/corrective measures.

The determination and implementation of disciplinary/corrective measures will be based on the status of the alleged harasser. If the alleged harasser is a student, the matter will be processed as a complaint pursuant to the non-academic disciplinary procedures. If the alleged harasser is an employee, the complaint will be processed pursuant to the relevant disciplinary procedures. The findings and any disciplinary actions will be provided to both the person filing the complaint and the alleged harasser by letter.

The New School’s designated officials for receiving complaints of discrimination, including sexual harassment, are:
  Students: Jennifer Francone, Assistant Vice-President for Student Equity and Access (The University’s Title IX Coordinator) at franconj@newschool.edu or 646-909-3656
  Faculty & Staff: Rhonnie Jaus, Vice President for Equal Employment Opportunity, Affirmative Action, and Compliance at jausr@newschool.edu or 646-909-2610 or can be submitted online via the Complaint Form.

The designated officials may assign the initial meeting/investigation to one of their designees (a staff member who reports directly to them and is experienced in handling such matters).

Discipline

based in whole or substantial part because of a belief or perception regarding that person’s age, race, color, creed, sex or gender (including gender identity & expression), pregnancy, sexual orientation, mental or physical disability, religion, religious practices, national or ethnic origin, citizenship status, ancestry, veteran status, marital or partnership status, caregiver status, or any other legally protected status, regardless of whether the belief or perception is correct.
Where the investigation of a complaint results in a conclusion that the imposition of discipline is necessary and appropriate, such discipline will follow the basic structure of penalties under the established disciplinary procedures at the University, including any related appeal process. For students, faculty, or staff these penalties will have different significance and practical consequences.

Since our goal is to deal directly and clearly to prevent and to correct sexually harassing or discriminatory behavior, in cases of severe harassment or discrimination (i.e., involving sexual assault, quid pro quo sexual harassment, multiple charges, or a history of complaints), the University reserves the right to take summary disciplinary action pursuant to the University Code of Conduct and/or pursuant to existing University employment procedures, including those contained in the applicable collective bargaining agreement, the Institutional Policies and Procedures Manual and the Full-Time Faculty Handbook. Where the designated official supports the imposition of significant discipline i.e., suspension or termination of employment, and the person initiating process is a student, the University will become the complainant for purposes of processing the related disciplinary action.

General Consideration

Confidentiality – The parties investigating the complaint, must seek to determine the facts of the case in order to make a fair determination and finding in as confidential a manner as practical. The designated officials/designees reviewing a case shall not discuss a case except in formal sessions dedicated to that purpose. The privacy of both parties to a case will be respected insofar as possible.

Protection from Retaliation – All individuals involved in the consideration of a complaint of sexual harassment or discrimination will be protected from retaliation, such as threats, false countercharges, the punitive use of grades, arbitrary dismissal, or denial of promotion. Individuals should be protected from retaliation both during and after a complaint is considered. Any indication of retaliation should be promptly reported to the designated official who is (or was) responsible for the consideration of the case during the proceedings. He or she will review the facts and recommend appropriate action.

Required Reporting for Responsible Employees- All employees of the University, with the exceptions of those designated as confidential resources (Counseling Center, Student Health Center, and the Faculty/Staff/Student Ombuds) are considered Responsible Employees of the University and are required to report all allegations of harassment or discrimination for which they have actual or constructive notice. Reports should be made as follows:

For incidents involving students: Jennifer Francone, Assistant Vice President for Students and Campus Life and Title IX Coordinator, at FranconJ@newschool.edu.

For incidents involving faculty and staff: Rhonnie Jaus, Vice President for EEO, AA and Compliance, at Jausr@newschool.edu or can be submitted online via the Complaint Form.

Student employees (both graduate and undergraduate) are not considered responsible employees under this section. However, students employed as Resident Advisors, Resident Housing Directors, Teaching Assistants, Teaching Fellows, Peer Advisors and Orientation Leaders are considered responsible employees of the University and required to report as indicated above.

Disability Anti-Discrimination Complaint Procedures for Faculty and Staff

I. Informal Process

A faculty or staff member ("employee") who needs a reasonable accommodation for a disability in order to perform an essential function of his/her job may make such a request to the Director of Benefits in the Human Resources Department. The Director of Benefits shall consult with employee’s department head in processing the request. The supervisor may require the employee to submit adequate documentary evidence from medical professionals describing both the injury, condition or disease which forms the basis of the disability, the resulting limitation of function, and various, alternative accommodations which would remedy the circumstance. The University will keep such request for accommodation confidential and will disclose information about the individual's disability only to those with a "need to know".

II. Filing a Complaint

1. If the employee believes that he/she has been discriminated against on the basis of a disability, that employee may file a formal written complaint within twenty (20) days after the alleged discrimination.
2. The complainant shall file the signed complaint in writing with the Human Resources Department. A complaint shall contain the name, address and telephone number of the person filing it, a detailed description of the injury, condition or disease which is the basis of the disability, a description of the resulting limitations of function and/or a complete description of the alleged discriminatory act(s). The complainant may also be required to provide any of the following information, to the extent practicable:

1. A detailed description by medical professionals of the injury, condition or disease and the resulting limitation(s) if function which is the basis of the disability claim;
2. The issues or circumstances involved;
3. The date of the alleged discriminatory act(s);
4. Details of what allegedly occurred;
5. Identification of witnesses or others with relevant knowledge; and
6. The accommodation(s) requested and/or remedy sought.
7. The alleged specific violation of Section 504 of the Rehabilitation Act, the Americans with Disabilities Act or any other federal, state or local disability law.

3. An investigation, as may be appropriate, shall follow the filing of a complaint. The University's Disability Official or a designee will conduct the investigation. During the investigation the complainant (and anyone accused of discrimination in the complaint) may be contacted and afforded an opportunity to submit evidence relevant to the complaint.

4. The designee shall issue a written determination regarding the complaint and, if appropriate, a description of the resolution. The designee shall forward a copy of the determination to the complainant and to the University Disability Official within a reasonable period of time. The designee shall notify the complainant of the opportunity for a reconsideration of the complaint by the University Disability Official.

5. The complainant as well as the accused may request a reconsideration of the designee's determination. Written requests for reconsideration must be submitted to the University Disability Official within 20 days of the date of the designee's determination. The University Disability Official will then review the request for reconsideration and may investigate further the circumstances of the complaint. He/she will issue thereafter a written determination and will forward a copy of this determination to the party who requested reconsideration within a reasonable period of time. The University Disability Official's determination is final and binding on behalf of the University.

6. In cases of alleged discrimination filed by students, applicants or other non-employees of the New School against a staff member covered by a collective bargaining agreement, the university will utilize this complaint procedure. In all other cases involving staff members covered by collective bargaining agreements, the university will utilize the grievance and arbitration process of the applicable collective bargaining agreement, unless both the staff member and union agree in writing to utilize this complaint procedure.

7. Anyone accused of discrimination in the complaint shall be notified of such accusations and shall be afforded an opportunity to respond to such allegations, including any reconsideration by the University Disability Official, or the Official's designee, as appropriate. Anyone accused of discrimination in the complaint shall also be notified of the final determination of the complaint.

New School University herein expressly prohibits retaliation against anyone who requests an accommodation or who files a complaint of discrimination under these procedures.

**Disability Anti-Discrimination Complaint Procedures for Students**

**I. Request for Reasonable Accommodations**

Applicants or students who need reasonable accommodations for their disabilities or who have complaints of discrimination on the basis of their disabilities are encouraged to consult and seek a resolution with the Director of the Office of Student Disability Services. The Director may require the submission of adequate documentary evidence from medical professionals describing the injury, condition or disease which forms the basis of the disability, the resulting limitation(s) of function and various alternative accommodations which would remedy the circumstance or a statement identifying in detail the alleged discriminatory act(s). To effect better handling of the request for accommodations or of the complaint of discrimination, the Director will attempt to keep requests for accommodations or complaints of discrimination confidential and will endeavor to inform only those with a "need to know", e.g., the professor, department chair, dean, or an individual accused of discrimination.

**II. Filing a Complaint**
1. If an applicant or student wishes to file a formal complaint of discrimination on the basis of a disability, he or she must file such a complaint within twenty (20) days after the alleged discrimination has occurred.

2. Applicants or students shall file the signed complaint in writing with the University Designated Official. A complaint shall contain the name, address, and telephone number (and a student identification number) of the person filing it, a detailed description of the injury, condition or disease which is the basis of the disability, a description of the resulting limitations of function and/or a complete description of the alleged discriminatory act(s). The complaint may also be required to provide any of the following information, to the extent practicable:

   1. A detailed description by medical professionals of the injury, condition or disease and the resulting limitation(s) if function which is the basis of the disability claim;
   2. The issues or circumstances involved;
   3. The date of the alleged discriminatory act(s);
   4. Details of what allegedly occurred;
   5. Identification of witnesses or others with relevant knowledge; and
   6. The accommodation(s) requested and/or remedy sought.

3. An investigation, as may be appropriate, shall follow the filing of a complaint. The University's Designated Official's designee will conduct the investigation. During the investigation, interested persons may be contacted and afforded an opportunity to submit evidence relevant to the complaint.

4. The Official's designee shall issue a written determination regarding the complaint and, if appropriate, a description of the resolution. The Official's designee shall forward a copy of the determination to the complainant within a reasonable period of time. Further, the Official's designee shall notify the complainant of the opportunity for a reconsideration of the complaint by the University Disability Official.

5. The complainant may request a reconsideration of the designee's determination within 20 days of the date of this determination. The University Disability Official, or the Official's designee, will then review the request for reconsideration and may further investigate the complaint. The University's Disability Official shall issue a written determination and forward a copy of the complaining party within a reasonable period of time. The University Disability Official's decision is final and binding on behalf of the University.

6. Anyone accused of discrimination in the complaint shall be notified of such accusations and shall be afforded an opportunity to respond to such allegations, including during any reconsideration by the University Disability Official, or the Official's designee, as appropriate. Anyone accused of discrimination in the complaint shall also be notified of the final determination of the complaint.

New School University expressly prohibits retaliation against anyone who requests an accommodation or who files a complaint of discrimination under these procedures.

**Sexual Assault Policy**

**Statement of Purpose**

The New School is committed to creating and sustaining a university environment in which students, faculty, and staff can study and work in an atmosphere that is open, healthy, safe, and unhampered by discrimination. Consistent with this commitment and in keeping with federal and state law requirements, it is the policy of the university that sexual assault and sexual exploitation will not be tolerated. Non-consensual sexual conduct and other forms of sexual violence can be traumatizing and detrimental to a person's learning experience and total health and has no place in our community. The New School will take any and all action needed to prevent, correct, and discipline behavior that violates this standard of conduct. Due diligence will be used to ensure the disciplinary review and any appropriate action be taken in as expeditious manner as possible. The university will make every effort to provide assistance and support to the victim of sexual assault in a thorough, consistent, and sensitive manner.

Sexual Assault is a serious problem on college campuses throughout the country. To counteract this problem, the university provides educational and preventive programs, resources for individuals dealing with sexual assault, and accessible methods of complaint resolution.

**Definition of Sexual Assault**

The university defines sexual assault as follows:
• **Non-consensual Sexual Intercourse or Sexual Contact** which includes any non-consensual oral, anal, penile, vaginal penetration, with any object, by an individual or group upon an individual or group, without consent. It also includes any intentional sexual touching (intentional contact with the breasts, buttocks, groin, or genitals, or touching another with any of these body parts, or making another touch you or themselves with or on any of these body parts; any intentional bodily contact in a sexual manner, though not involving contact with/of/by breasts, buttocks, groin, genitals, mouth or other orifice), with any object, by an individual or group upon an individual or group, without consent. It also includes any intentional sexual touching (intentional contact with the breasts, buttocks, groin, or genitals, or touching another with any of these body parts, or making another touch you or themselves with or on any of these body parts; any intentional bodily contact in a sexual manner, though not involving contact with/of/by breasts, buttocks, groin, genitals, mouth or other orifice), with any object, by an individual or group upon an individual or group, without consent.

• **Sexual Exploitation** which includes when a student takes non-consensual or abusive sexual advantage of another for his/her own advantage or benefit, or to benefit or advantage anyone other than the one being exploited, and that behavior does not otherwise constitute one of the other sexual assault offenses. Examples of sexual exploitation include, but are not limited to: Prostituting another student; Non-consensual video or audio-taping or photographing of sexual activity; Unauthorized posting or distribution of materials involving the sexual activity of another person(s); Going beyond the boundaries of consent (such as voyeurism or secretly watching others); Tampering with birth control or condoms; Knowingly transmitting a sexually transmitted infection or HIV to another student.

This definition includes conduct that may be considered criminal under the New York State Penal Code. New York State Law contains the following legal provisions defining the crimes related to sexual assault which can be viewed at the following site: [http://ypdcrime.com/penal.law/article130.htm](http://ypdcrime.com/penal.law/article130.htm)

**Definition of Consent**

The presence of consent involves explicit communications and mutual approval for the act in which the parties are/were involved. A sexual encounter is considered consensual when individuals willingly and knowingly engage in sexual activity. Consent can be revoked at any time for any reason. Consent is active, not passive: lack of resistance, physical or verbal, does not imply consent, nor does silence, in and of itself, imply consent. It must be given for every act and for every time that the act occurs, regardless of history, past behaviors, or reputation. In order to give effective consent in New York State, one must be of legal age (17).

Consent cannot be procured by use of pressure, manipulation, compelling threats, intimidating behavior, substances and/or force, nor can it be given if an individual is mentally or physically incapacitated by alcohol or other drug use, unconsciousness, mental disability, asleep, and/or involuntary physical restraint. Intoxication does not excuse behavior that violates this policy.

**Reporting Procedures**

Students are encouraged to speak to staff at the university to file a report of sexual assault. Students have the right and can expect to have incidents of sexual assault taken seriously by the university when reported, and to have those incidents investigated and properly resolved through administrative procedures.

To file a report, a New School employee, whether staff or faculty, should report the sexual assault to Rhonnie Jaus, Vice President for EEO, AA and Compliance, at jausr@newschool.edu or can be submitted online via the Complaint Form.

A student should file a report of sexual assault to any of these university offices:

- Jennifer Francone, Assistant Vice President for Students and Campus Life and Title IX Coordinator, at FranconJ@newschool.edu.
- Student Support and Crisis Management
  79 Fifth Avenue, 5th Floor, 212.229.5900 ext. 3189 or x3710
- Student Rights and Responsibilities
  79 Fifth Avenue, 5th Floor, 212.229.5349
- Campus Security
  55 West 13th Street, Mezzanine Level, 212.229.7001 (24 hours)

Once a report is filed the university official receiving the report or another appropriate official will provide the following information:

- Clear explanation of the university investigative and hearing procedures
- Where to access medical care

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3 The Assistant Vice President for Student Life is the University’s Title IX Coordinator for incidents involving students.
There may be circumstances in which the university must take immediate action to protect the university community, prior to a formal hearing. Actions such as interim suspension and/or removal from housing may be deemed necessary by a senior university official.

After reporting sexual assault a student may request the following:

- Change of on-campus housing assignment or exploration of alternative housing
- Transfer to a different class sections when available, without academic penalty
- Determine feasibility of incompletes or leave of absence

After filing a report if a student expresses reluctance or unwillingness in proceeding, the university, in accordance with the belief that a victim of sexual assault should be given this right, may comply with this request after appropriate investigation, as long as doing so maintains the health and safety of the university community.

Removing Barriers to Reporting

The university encourages the reporting of code of conduct violations and crimes. Sometimes, victims are hesitant to report to university officials because they fear that they themselves may be accused of policy violations, such as underage drinking, at the time of the incident. To encourage reporting, the university pursues a policy of offering victims of sexual assault limited immunity from policy violations related to the incident, this also extends to students who offer help and assistance to others in need. While violations cannot be completely overlooked, the university will provide educational options (e.g. utilizing university support resources) rather than punishment, in such cases.

Confidentiality

When a report is filed, every effort will be made to protect a student’s privacy, and sharing of information will be on a need-to-know basis only. If a student seeks to make a confidential disclosure, this can be made to a medical or mental health professional, as protected by law; either on campus at Student Health Services or off campus (see resource section at end of this policy).

Investigative and Hearing Procedures

For the purposes of this Policy, the student making the complaint of sexual assault will be referred to as “the accuser” and the student alleged to have committed the assault will be referred to as “the accused.” Complaints will be investigated and processed expeditiously.

Complaints of sexual assault will be reviewed under the Non-Academic Disciplinary Procedures (hotlink) and handled as a Level II Review. Under Section III.B.3 (e) of the Non-Academic Disciplinary Procedures, if the accused accepts responsibility for the alleged violations, the accused may waive the disciplinary review by the Disciplinary Review Panel. The Vice President for Student Success or his/her designee will then determine sanctions, if applicable.

If the accused does not accept responsibility or accepts responsibility but does not waive his/her right to a disciplinary review by the Disciplinary Review Panel, the Assistant Vice President for Student Life will convene the panel. Panelists are selected by recommendation by the Faculty Senate, the University Student Senate, the Provost, and the Senior Vice President for Student Services. Members of the panel will be trained prior to panel hearings on sexual assault, its impact, and other information appropriate to this type of panel hearing. The Assistant Vice President for Student Life facilitates the hearing but does not weigh in on determining responsibility or sanctions.

The Hearing

If the matter is referred to a Panel for its review, the Panel shall set to begin as soon as possible after the accused has received notice of the complaint. The accuser and the accused will have the option to appear before the panel separately. The accuser and the accused may choose not to appear before the panel and may submit a written statement to be read to the panel. At the review, the Panel hears statements from both parties, asks questions, and then makes a decision based upon whether there is a preponderance of evidence that the sexual assault occurred. Preponderance of evidence means that it is more likely than not that the facts the accuser seeks to prove are true.
The Panel’s recommendation will then be sent to the Vice President for Student Success who will review the recommendation of the Panel, and decide on a sanction, if appropriate. The accuser and accused party are each entitled to have a support person present during a panel hearing (an ally, friend, family member). A lawyer can be considered a support person and attend, but cannot ask questions or direct the hearing process. Past sexual history or sexual character of a party will not be admissible by the other party in hearings unless such information is determined to be highly relevant. All such information will be presumed irrelevant. While previous conduct violations by the accused student are generally not admissible as information about the present alleged violation, the Assistant Vice President for Student Life may supply previous complaint information to the hearing panel, or may consider it him/herself if s/he is hearing the complaint.

Sanctions Statement
The university conduct process is founded on educational ideals that reflect the university’s mission. As much as possible, the university is committed to educating students to be aware of policy, to respect others, and to be accountable for their actions. The Hearing Panel attempts to look at each situation independently and consider all variables in recommending a fair and reasonable sanction in a timely manner.

- Any student found responsible for violation of The Policy on Sexual Assault will receive a sanction ranging from warning to expulsion; depending on the severity of the incident, and taking into account any previous campus conduct code violations.

The outcome of a hearing panel is part of the educational record of the accused student, and is protected from release under the federal law, Family Educational Rights and Privacy Act (FERPA). However, the university observes the legal exceptions as follows:
- The accuser has an absolute right to be informed of the outcome and sanctions of the hearing, in writing, without condition or limitation.
- The university may release publicly the name, nature of the violation and the sanction for any student who is found in violation of a university policy that is a “crime of violence,” including but not limited to sex offenses and assault. The university will release this information to the accuser in these offenses regardless of outcome.

The accuser and the accused have the right to appeal the decision of the hearing panel. This appeal must be received in writing within ten (10) working days of the hearing outcome. The appeal will be reviewed by the Vice President for Student Success in consultation with the Provost and the dean/director of the program for which the accused is enrolled. That decision will be final. In making this determination two things should be considered as grounds for an appeal: (i) clear and specific demonstration of being denied a fair review, and (ii) flagrant discrepancy between the infraction and the imposed sanctions.

Federal Law on Sexual Assault
The Jeanne Clery Disclosure of Campus Security Policy and Campus Crimes Statistics Act (Clery Act) is a federal law that requires colleges and universities to disclose certain timely and annual information about campus crime and security policies.
- Institutions must publish an annual report disclosing campus security policies and three years worth of selected crime statistics
- Institutions must make timely warnings to the campus community about crimes that pose an ongoing threat to students and employees
- Each institution with a police or security department must have a public crime log
- The United States Department of Education centrally collects and disseminates the crime statistics
- Campus community sexual assault victims are assured of certain basic rights.
- Institutions must notify victims of their option to report their assault to the proper law enforcement authorities

Students, faculty and staff who have questions or concerns regarding this policy or the application of this policy may contact the following university offices:

Student Rights and Responsibilities
Address: 79 Fifth Avenue, 5th Floor
Phone: 212.229.5349

The Office of the General Counsel
80 Fifth Avenue, 8th Floor
Phone: 212.229.5432

Options for the Survivor of Sexual Assault
The university strongly encourages students who believe that they have been sexually assaulted to report these incidents, and to be aware of the following options regarding medical, legal and psychological care.
The Importance of Medical Care

The survivor of sexual assault has the option of going to a hospital Emergency Room for medical care. This is especially important if the survivor presents within 96 hours of the assault. To preserve the evidence, it is best not to shower, wash, douche, eat or drink, if possible. Carry evidence in a clean paper bag. If the survivor presents post 96 hours of the assault, it is still recommended that they receive medical care, but they will not have available all the options discussed below. The survivor has the right to refuse all or any parts of the treatment/evidence collection. The medical care following a sexual assault includes:

- a physical exam to examine any internal or external injuries
- evidence collection (if presenting within 96 hours of the assault)
- preventive treatment for Sexually Transmitted Infections
- preventive treatment for HIV (if presenting within 36 hours)
- emergency contraception (if presenting within 72 hours)
- medical follow-up referrals and information

It is recommended that you refer the survivor to one of the hospitals listed below. These hospitals have Rape Crisis Programs and have trained Advocates available 24 hours. The Advocates will provide emotional support and information and help with the police reporting process.

- Beth Israel Hospital Emergency Department
  16th Street (between 1st and 2nd Avenues) – phone: 212.420.2840
- St. Luke’s/Roosevelt Hospital Emergency Department
  1000 Tenth Avenue (at 59th Street) – phone: 212.523.6800

Please note: Going to a hospital emergency room does not mean that the survivor has to report the crime to the police. The survivor can go to the emergency room and get medical attention/evidence collection and then take some time to think about reporting the crime to the police. The hospital emergency room is required to store the evidence for 30 days. If the student refuses medical care from a hospital ER, it is still encouraged that s/he seeks medical attention. You can refer the student to their private medical provider or our Medical Services, where s/he might feel more comfortable. Just note that the student will not have available all the options stated above, especially evidence collection.

To learn more about the evidence collection procedure, please visit:
http://www.health.state.ny.us/professionals/protocols_and_guidelines/sexual_assault/docs/protocol_appendix_q.pdf

Legal Options

In addition to the university’s student disciplinary process and those disciplinary procedures applicable to faculty and staff, the survivor has the right to pursue criminal prosecution and/or civil litigation. S/he can go to the precinct corresponding to the area where the crime occurred or call the New York Police Department Special Victims Report Line at 646.610.7273. The hotline provides the option of getting some information without having to disclose their name. With that information the survivor can then decide whether to go forward with the reporting process. The survivor should never be pressured to file a report. It is her/his decision to report unless:

- There is suspicion or evidence of child abuse when a report to Administration for Children’s Services 800.635.1522 is mandated;
- There is an injury by a deadly weapon, when medical staff only is mandated to report the crime to the police.

Reporting a sexual assault to the police does not obligate the survivor to file criminal charges or pursue other legal action. In the case of sexual assault, however, prompt reporting and a comprehensive medical examination completed at a hospital emergency department within 96 hours of the assault will aid the legal process.

The Office of Student Support and Crisis Management working with Campus Security are available to provide support and advocacy with local police. The university is committed to providing full and prompt cooperation and assistance in notifying the proper law enforcement personnel if the survivor so chooses.

Psychological Concerns

Survivors of sexual assault can experience a wide range of emotional reactions, and the decision to report the assault and seek help is a very personal and complex one. It is encouraged that survivors seek support as soon as they are ready. As reactions
can vary and may include shock, denial, anxiety, guilt, anger, and self-blame, as well as nightmares, changes in sleeping and eating patterns, flashbacks, and depression, the survivor may want to seek professional assistance either on campus at Counseling Services at 80 Fifth Avenue, 3rd Floor, or off campus at one of the local Rape Crisis Centers.

Resources for Survivors, Allies and Advocates

The New School
- Campus Security – 212.229.7001 (24 hours)
- Student Counseling Services - 212.229.1671, option 1
- Student Medical Services - 212.229.1671, option 2
- After Hours Nurse Advice Line – 212.229.1671, option 1 (when counseling and medical services are closed)
- Student Support and Crisis Management - 212.229.5900 x3189 or x3710
- Student Rights & Responsibilities - 212.229.5900 x3656
- Assistant Vice President for Student Life - 212.229.5900 x3656
- Student Ombudsperson - 212.229.8996 x3619
- Office of Human Resources - 212.229.5671

New York City
- Police and for Emergency - Dial 911 (24 hours)
- NYPD Special Victims Liaison Unit Report Line - 646.610.7273 (24 hours)
- Manhattan District Attorney’s Office - 212.335.9373
- Brooklyn District Attorney’s Office - 718.250.3170
- Bronx District Attorney’s Office - 718.590.2323
- Queens District Attorney’s Office - 718.286.6505
- Staten Island District Attorney’s Office - 718.876.6300

Hotlines – 24 Hours
- Safe Horizon: Rape and Sexual Assault Hotline - 212.227.3000
- Safe Horizon: New York City Domestic Violence Hotline - 800.621.4673
- NYC Gay and Lesbian Anti-Violence Project - 212.714.1141
- Suicide Prevention (LifeNet) - 800.543.3638
- New York Asian Women’s Center - 212.732.5230

Sexual Assault Advocacy and Counseling Services
- St. Luke’s-Roosevelt Crime Victims Treatment Center
  411 West 114th Street, 212.523.4728
- Beth Israel Rape Crisis Intervention Program
  317 East 17th Street, 212.420.4054
- Women’s Rights at Work - 888.979.7765
- New York City Alliance Against Sexual Assault - 212.523.4344
- New York State Victim Information and Notification Everyday – 888.VINE.4NY
- New York State Crime Victim’s Board - 718.923.4325

Domestic Violence
- St. Luke’s-Roosevelt Crime Victims Treatment Center
  411 West 114th Street, 212.523.4728
- The New York City Gay & Lesbian Anti-Violence Project (AVP)
  240 West 35th Street, suite 200, 212.714.1184

LGBTQI Resources
- The Lesbian, Gay, Bisexual, and Transgender Community Center
  208 West 13th Street, 212.620.7310

HIV/AIDS Testing
• Hispanic AIDS Forum at The New School, Student Health Services
  135 East 12th Street, 2nd floor, 212.229.1671
  Hours: Mondays, 4:30-6:30 PM (except university holidays)
• New York City Department of Health
  800.TALK.HIV or 212.447.8200 (call for information: multiple testing sites)

Local Pharmacies (the following accept coverage under the university sponsored
Student Health Insurance plan)
• Duane Reade
  24 East 14th Street. (Between Fifth Avenue and University Place), 212.989.3632
• Duane Reade (Open 24 hrs.)
  378 Sixth Avenue (at Waverly Place), 212.674.5357

Other Issues Concerning the Conduct of Members of the University
The EEOC definition refers to legal standards for identifying sexual harassment. There are, however, other standards for
conduct among its members that are important in a University setting. Although we do not wish to discourage collegial
relationships which are essential to the educational mission of a university, members of the University must recognize the
professional responsibility that faculty have for students’ education and the considerable power that faculty have over students’
careers. As a result, our standards for relationships between faculty and students at the university, and between other
members of the University community, may be more restrictive than those encompassed in the EEOC definition which
pertains to employment.

Faculty members (and administrative staff) should be aware that any romantic involvement with students (or staff members
who report to them) is considered inappropriate, and it might make them liable to formal action. Romantic involvements
between faculty and students outside the instructional context also have the potential to lead to difficulties. Beyond these
difficulties, and the risk of formal action, these involvements can have a negative effect on the community. Suspicions of
favoritism may arise that affect the academic and/or work environment; there may be the appearance of exploitation even if
the relationship is consensual. In addition, there is always the possibility that relationships that begin consensually will be
subject to misinterpretation and that after they end, the faculty (or administrative staff member) will be vulnerable to
accusations and recriminations.

The foregoing paragraphs refer generally to faculty and students, or administrative staff members and those who report to
them, but it is equally important that relations between students in all programs of the University adhere to a high standard of
collegiality and mutual respect.

The foregoing paragraphs are included within the purview of this policy statement, because it is important to keep this highest
standard of professional behavior in mind and to avoid even the semblance of exploitation. At a university, in situations
where colleagues, co-workers, teachers and students work together as equals, and where the atmosphere is collaborative, there
will be a tendency to ignore distinctions and to behave as if they do not exist. Particularly, in the case of senior faculty and
junior faculty and in the case of faculty and graduate students (when students are older, working adults) it may be easy to
ignore differences in responsibility and power. But even in the case of non-traditional students, -- teachers have power and
authority over all students -- this asymmetry should be acknowledged and respected. The same is true for the relations
between supervisors and staff.

At the same time as we respect the differences in our roles, we want to sustain a collegial atmosphere and the informality of
the University environment so that our mission -- the process of education -- can flourish. At no point, however, should the
freedom, openness, and collegiality of the University permit an abandonment of responsibility.

The highest standards of professional conduct pertain to all members of the faculty in their dealings with one another as well
as with staff and students; the relationships between supervisors and members of the staff at all levels should also be governed
by these standards. No member of the University should feel that the fulfillment of her or his duties is obstructed or impeded
by sexual harassment from a teacher, colleague, or supervisor.

The standards we have outlined above have their parallel in relationships among students in all academic divisions of the
university. We expect those relations to be collegial and civil. Students should not engage in any behaviors that coerce,
demean, or threaten other students.
Drugs & Alcohol-Free Workplace Policy

The University is committed to maintaining a safe, healthy and productive workplace for all its employees. The University strictly prohibits the manufacture, distribution, dispensation, possession, sale or use of any illegal drug, or the abuse of alcohol or any legal drug by employees. An employee on the job while under the influence of any drug or alcohol may pose a serious health and safety risk to himself or herself and to others, and may also interfere with productive and efficient school operations.

Therefore, employees are required to report to work free from the influence of any drug or alcohol. In addition, the manufacture, distribution, dispensation, possession, sale, or use of any illegal drug or alcohol, or the misuse of any legal drug in the workplace, in University vehicles or while engaged in University business off University premises is strictly prohibited. Any employee violating this policy is subject to appropriate disciplinary action, up to and including discharge. In addition, and depending on the circumstances, other action, including notification to appropriate law enforcement agencies, may be taken with respect to any employee violating this policy.

The federal Drug-Free Workplace Act of 1988 requires that any employee who pleads guilty to or is convicted of any drug-related violation in the workplace or while conducting University business off premises must so inform Human Resources within five (5) days. Any employee who fails to report any such conviction or plea is subject to appropriate disciplinary action, up to and including discharge.

Applicants for employment may be required, as a condition of employment, to submit to an appropriate drug and alcohol test. In addition, the University reserves the right to require employees to undergo appropriate medical tests designed to detect the use of drugs and alcohol where, in the university’s view, it has reason to believe that an employee may be under the influence of a drug or alcohol, or otherwise fails to cooperate fully with any investigation relating to this policy, including any refusal to submit to drug or alcohol testing, is subject to appropriate disciplinary action, up to and including discharge.

At its discretion, the University may require employees who violate this policy to complete successfully a drug or alcohol abuse assistance program as a condition of continued employment.

It is the responsibility of each employee to seek assistance before any drug or alcohol problem leads to disciplinary action. Enrollment in or use of a drug assistance program after an employee is found to have violated this policy will not necessarily lessen disciplinary action already imposed or otherwise impact the university’s determination as to appropriate disciplinary action.

Below is the contact information for drug and alcohol counseling and support services centers.

- The New School Employee Assistance Program: (212) 935-3030
- Alcohol Abuse Advisory and Consultation Center: (212) 971-9213
- Alcohol Council of Greater New York: (212) 979-6277
- Alcoholic’s Anonymous: (212) 683-3900
- National Council on Alcoholism: (212) 260-0407
- St. Vincent’s Alcohol Outpatient Clinic: (212) 790-8273
- Beth Israel Hospital Substance Abuse Information Center: (212) 420-2012
- Alanon (support group for friends and relatives of alcoholics): (212) 601-5817
- Cocaine Hotlines: (800) 662-HELP
  (800) COCAINE

Minors on Campus

Policy Statement: To provide guidelines for appropriate protection and supervision of minors participating in The New School (TNS)-sponsored programs, in programs operated by outside entities held in University facilities, and/or programs housed in University facilities.

This policy does not apply to general public events where parents/guardians are invited and expected to provide appropriate protection and supervision of minors.

All TNS employees, Authorized Adults and/or Required Reporters are subject to the terms of this policy.

I. Definitions
This policy is subject to the following definitions:

Authorized Adult – An individual, age 18 and older, paid or unpaid, who is authorized to interact with, supervise, chaperone, or otherwise oversee minors in program activities, or recreational and/or residential facilities. Authorized Adults are considered to be Required Reporters as defined by pending New York state law.

The Central Register (aka “Hotline”) – An organizational unit of the New York State’s Office of Children and Family Services which operates a statewide toll-free system for receiving reports of suspected child abuse refers such reports for investigation and maintains the reports in the Statewide Central Register of Child Abuse and Maltreatment.

Direct Contact – Position which exercises direct supervision, guidance, or control of minors.

Minor – A person under the age of eighteen (18) who is not enrolled in a credit-bearing program at the University.

One-On-One Contact – Interaction between any Authorized Adult and a minor without at least one other Authorized Adult, Parent or Legal Guardian present.

Programs – Programs and activities offered by any academic or administrative unit of the University, or by non-University groups using University facilities.

Required Reporters – Persons who, in the course of their employment, occupation, or practice of their profession come into contact with children and have reasonable cause to suspect, on the basis of their medical, professional or other training and experience, that a child coming before them in their professional or official capacity is a victim of child abuse.

Sponsoring Unit – The academic or administrative unit of the University that offers a program or gives approval for use of University facilities.

University Facilities – Facilities owned by, or under the control of, the University.

II. Duty to Report Child Assault, Abuse and Neglect

If any person, Authorized Adult or a Required Reporter, (collectively “Reporter”) has reasonable cause to suspect that a minor has been subject to assault, abuse or neglect, (“Child Abuse”) that person shall immediately notify Campus Security, by calling (212-229-5101).

Campus Security shall be responsible for, and have the obligation to immediately make, a Report of the suspected child abuse to the New York State Office of Children and Family Services (OCFS) Central Registry (800-342-3720).

Campus Security may not make an independent determination of whether to report a suspected incident of child assault, abuse or neglect.

Campus Security shall notify the person who reported the abuse to them when the report was made to NY OCFS.

If Campus Security is unavailable, or if Campus Security or his/her designee does not call NY OCFS to make such report, then that person shall immediately call OCFS (800-342-3720) to make such a report. Reports shall be accepted by NY OCFS or the county agency regardless of whether the person identifies himself.

Notwithstanding this policy, nothing prohibits an Authorized Adult, a TNS employee, a Required Reporter or any other individual from making a report directly to NY OCFS (800-342-3720).

In addition to other reports they make, Required Reporters shall report suspected child abuse to NY OCFS.

Within 48 hours of reporting to NY OCFS, Campus Security shall make a written report on forms provided by NY OCFS and obtainable on its website at http://ocfs.ny.gov/main/Forms/cps/LDSS-2221A Report of Suspected Child Abuse or Maltreatment.pdf.

Campus Security shall be responsible for notifying within 48 hours the Director of Campus Security and the respective Program Director of the suspected child abuse, assault or neglect unless Campus Security believes that the Program Director is involved with the alleged abuse.

All persons subject to the terms of this policy must make all reasonable efforts to remove minors from dangerous or potentially dangerous situations, irrespective of any other limitation or requirement.

The New School does not retaliate against any individual who has a reasonable cause to suspect that a minor has been subject to assault, abuse or neglect and who reported such an incident.
III. Policy for Programs Involving Minors Operated by any Unit of The New School

Sponsoring units operating a Program involving minors (not including minors matriculated as undergraduate students) shall operate the Program in accordance with the following guidelines:

A. Measures to prevent abuse of minors:

1. Require background investigations including a check of the New York State Sex Offender Registry of Authorized Adults and Required Reporters who have interaction with minors. The Program Director must ensure these investigations are completed prior to the start of the Program.

2. New hires will be required to complete the University background process at the time of hire.

3. The background investigation process referred to herein requires that individuals must complete the NY State Criminal History Record and NY State Sex Offender Registry. All reports must be dated within 6 months of the initial date of assignment. This requirement applies to current employees who have not previously had a background check completed. All individuals whether paid or in a volunteer capacity must comply with this requirement.

4. All Authorized Adults and Required Reporters must also disclose, in writing and within 72 hours, any arrests and/or convictions that have occurred since the date of a background check and/or clearance. Failure to so disclose may result in an Authorized Adult and/or Required Reporter not participating in a program in a New School facility and, for TNS employees may result in disciplinary action, up to and including, termination of employment.

5. The cost for completion of a background check for non-employees will be the responsibility of the individual.

6. If such a background investigation indicates a record of sexually-based offenses or crimes against minors, that individual shall not participate in the Program.

7. If other offenses are revealed by such a background investigation, the Program Head must contact the Director of Security, the Senior Vice President and Chief Human Resources Officer, and the appropriate Vice President or his/her designee, who collectively will determine whether participation in that Program by that individual can occur.

8. Background investigations must be valid and repeated every 3 years.

9. Establish a procedure for the notification of the minor’s parent/legal guardian in case of an emergency, including medical or behavioral problems, natural disasters or other significant Program disruptions. Authorized Adults with the Program, as well as participants and their parents/legal guardians, must be advised of this procedure in writing prior to the participation of the minors in the Program.

10. Provide a list of all Program Participants and a directory of Program Staff to Campus Security. (TNS will provide this contact information to the sponsors). This list shall include each participant’s name, local room assignment (if applicable), gender, age (if a minor), and phone number(s) of parent or legal guardian, as well as emergency contact information.

11. Provide information to parent or legal guardian detailing the manner in which the minor participant can be contacted during the Program.

12. Obtain all media and liability releases as part of the program registration process. All data gathered shall be confidential, is subject to records retention guidelines, and shall not be disclosed, except as provided by law.

13. Require that Authorized Adults participating in Programs and activities covered by the policy not engage in the following conduct unless required by exigent circumstances:

   a. Have one-on-one contact with minors unless authorized (e.g. on-campus private lessons instruction). [Administrative Offices are advised to, whenever feasible, ensure that there are at least two Authorized Adults present during activities when minors are present or take other appropriate precautions to minimize the risks of harm to any minor during such activity.]

   b. Enter a minor's room, bathroom facility, or similar area when that minor is staying overnight in University housing without another Authorized Adult in attendance, except under emergency circumstances.

   c. Share accommodations with minors with the exception of minors' parents or guardians sharing accommodations with their own children.

   d. Engage in abusive conduct of any kind toward, or in the presence of, a minor.

   e. Strike, hit, administer corporal punishment to, or touch in an inappropriate or illegal manner,
a. Pick up minors from, or drop off minors, at their homes, other than the driver's child (ren), except as specifically authorized in writing by the minor's parent or legal guardian.

b. Provide alcohol or illegal drugs to any minor. Authorized Adults also shall not provide prescription drugs or any medication to a minor.

c. Make sexual materials in any form available to minors participating in programs or activities covered by this Policy or assist them in any way in gaining access to such materials. Nor shall they have any discussions of a sexual nature with minor participants.

14. All Authorized Adults participating in a program covered by this Policy should attend University-sponsored annual training on the conduct requirements of this Policy, on protecting participants from abusive emotional and physical treatment, and on appropriate or required reporting of incidents of improper conduct to the proper authorities. See www.new school.edu/riskmanagement for links to sponsored online training.

15. If an allegation of inappropriate conduct has been made against an Authorized Adult participating in a program s/he shall discontinue any further participation in that program unless or until such allegation has been satisfactorily resolved by the Program Director or designee. TNS employees are additionally subject to discipline, up to and including termination of employment.

B. Measures to Maintain Adequate Supervision of Minors:

1. Whenever feasible, all activities involving minors (with the exception of academic classroom activities) should be supervised by at least two or more Authorized Adults or by the minor's parent(s) or legal guardian(s) at all times. Some of the factors to consider in determining "adequate supervision" are the number and age of participants; the activity (ies) involved; type of housing, if applicable; and the age and experience of the supervisors.

2. If applicable, programs must adopt and implement rules and regulations for proper supervision of minors in University housing. The following should be included:
   a. Guidelines on adequate number of staff for supervision of minors in particular activities.
   b. Written permission signed by the parent/guardian for the minor to reside in University housing, including contact information for parents and a duly executed emergency medical authorization to be given to the Group Supervisor.
   c. Guests of participants, if allowed, (other than a parent/legal guardian and other program participants) are restricted to visitation in the building lobby, and only during approved hours specified by the program.
   d. The program must comply with all security measures and procedures specified by The New School Housing and Residence Life and The New School Campus Security.
   e. Pre-enrollment visit programs for High School students housed overnight in residence halls must be registered with the TNS Office of Residence Life.

C. Measures to Address Medical and Emergency Situations Involving Minors:

1. Authorization of, and Access to, Emergency Medical Services
   a. A medical treatment authorization form, release of medical information (HIPAA), emergency treatment and general medical liability waiver form should be completed by the parent or guardian of each minor participant.
   b. Programs must arrange to access emergency medical services at all locations. Medical care appropriate for the nature of the events, expected attendance and other variables should be taken into consideration. Consultation may be obtained from Campus Security, or Health Services.
   c. This section does not apply to programs which involve only academic classroom activities.

2. Distribution or Administration of Medications
   a. The New School University employees may not administer or distribute medication to any minor participant.
   b. Appropriate refrigeration will be provided for medication if requested.
   c. In the event that any medicine cannot be self-administered, the participant or their parent(s) or legal guardian must arrange for administration with an independent health care professional in advance of the participant's arrival.

3. Programs must also follow appropriate safety measures approved by the Student Services, Campus Security, and Compliance and Research and Sponsored Programs offices.

D. Rules and Regulations:

1. Develop and make available to participants the rules and disciplinary measures applicable to the program. Program participants and staff must abide by all New School rules and regulations and may be removed from the program for non-compliance with rules and regulations. The following must be included in program rules:
   a. Possession or use of alcohol and other drugs, fireworks, guns and other weapons is prohibited.
   b. Rules and procedures governing when and under what circumstances participants may leave University property during the program.
   c. Violence, including sexual abuse or harassment, is prohibited.
   d. Hazing of any kind is prohibited. Bullying, including verbal, physical, and cyber bullying is prohibited.
   e. Theft of property regardless of owner will not be tolerated.
   f. Use of tobacco products is permitted only in designated areas.
   g. Misuse or damage of University property is prohibited. Charges will be assessed against those participants who are responsible for damage to or misusing University property.
   h. Inappropriate use of cameras, imaging, and digital devices is prohibited, including use of such devices in showers, restrooms, or other areas where privacy is expected by participants.

IV. Policy for Programs Involving Minors Operated by Outside Parties in The New School facilities:

Any program involving minors operated by outside parties in The New School facilities shall be operated consistent with the guidelines of this Policy. All contracts for the use of TNS facilities by outside parties for programs involving minors shall reference this requirement and provide a link to this Policy.

Authorized personnel/signatories for non-University groups using TNS facilities must provide to the Sponsoring Unit satisfactory evidence of compliance with all of the requirements of this Policy at least thirty (30) days prior to the scheduled use of University facilities, and they must sign and approve the agreement for use of University facilities, if applicable.

Equal Employment Opportunity

The New School is committed to creating and maintaining an environment that promises diversity and tolerance in all areas of employment, education and access to its educational, artistic or cultural programs and activities. The New School does not discriminate on the basis of age, race, color, creed, sex or gender (including gender identity and expression), pregnancy, sexual orientation, religion, religious practices, mental or physical disability, national or ethnic origin, citizenship status, veteran status, marital or partnership status, caregiver status, or any other legally protected status.

Employee Code of Conduct

As an institution of higher learning, The New School affirms certain basic principles and values that are, in the fullest and best sense of the word educational. The New School is also a community and in that regard, upholds certain basic principles and standards of behavior that underlie its educational purpose. These include the recognition and preservation of basic human dignity, the freedom of expression, equal opportunity, and civil discourse, a sustained atmosphere of safety, respect for policies, rules, regulations, and standards set forth by the university, its Academic Divisions, and the Federal, State, and City Governments.

The Employee Code of Conduct is designed to protect and promote these principles and standards of behavior that are in keeping with our educational mission. Formal disciplinary proceedings and penalties have a role subordinate to informal conversation and discussion, constructive advice and counsel, and supportive guidance. The Employee Code of Conduct supports an environment where sensitivity, tolerance, and respect are sustained for members of the University community and its neighbors.

A breach/violation in the Code of Conduct may lead to disciplinary actions as outlined in the Employee Discipline Policy, including but not limited to suspension/termination of employment, by the university.

A. General Violations:

The following actions are considered violations of the Employee Code of Conduct and are subject to disciplinary action, including but not limited to suspension/termination of employment, by the university.

1. Fraud
   Knowingly furnishing false information to the University administration, faculty, staff, or students.
2. Forgery
   Forgery, alteration or misuse of University documents, records or identification.

3. Harassing Conduct
   Physical, verbal, or written harassment or abuse of any person, or any other conduct which threatens or endangers the physical, emotional health, or safety of any person on university-owned or controlled property or at University sponsored functions.

4. Theft or Damage to Property
   Theft or damage to property of the university, or that of a member of the University community or campus visitor, while on University property or at University sponsored activities.

5. Disorderly Conduct
   Disorderly conduct including, but not limited to, public intoxication, lewd, indecent or obscene behavior on university-owned or controlled property or at University sponsored functions; conduct that is unreasonable in the time, place, or manner in which it occurs; and/or obstruction or disruption of University sponsored activities.

6. University Facilities
   Unauthorized entry or use of University facilities.

7. Keys or Access Cards
   Unauthorized possession, duplication or use of keys or access cards to University facilities.

8. Weapons
   Possession, display, use or distribution of any weapon such as a firearm, knife, etc., or any item used as a weapon or of such a nature that it is intended for use as a weapon, except with expressed University authorization, on university-owned or controlled property or at University sponsored functions.

9. Compliance
   Failure to comply with directions of University officials acting in the performance of their duties.

10. University Identification
    Misuse or transfer of University identification documents. This includes but is not limited to, the transfer of University identification documents to gain entry to University buildings, and/or to procure any University services.

11. Conduct
    Conduct which adversely affects the employee’s suitability as a member of the University community or which is inconsistent with the mission of the university.

12. Gambling
    Gambling in any form anywhere on campus.

B. Academic Dishonesty
   1. Definition
      Academic Dishonesty is any act, which allows a member of the University to gain an unfair advantage over others. This includes but is not limited to, copying, plagiarism, collaboration, alteration of records, use of restricted aids, unauthorized use of proprietary material, bribery, and lying.

   2. Divisional Responsibility for Academic Dishonesty
      a. The academic division in which an employee works has primary responsibility for the adjudication of all infractions involving Academic Dishonesty, with the assistance of Human Resources.
      b. It is the responsibility of the employee to become familiar with the Academic Dishonesty policy in effect in the division in which he/she is enrolled.

C. Rights Reserved by The New School
   1. The New School reserves the right to enter offices without a search warrant for the purpose of maintaining safety and security standards, to enforce health regulations, to follow through with disciplinary action, and to respond to emergency situations. Desks, lockers and file cabinets are the property of the University and are subject to search by University officials at any time.

   2. The New School holds employees financially responsible for all losses and damages to University property.

Employment References/Employment Verification
The university’s Office of Human Resources will provide employment verification to potential employers and housing authorities and lending institutions with the written permission of current or former employees. Employment verification includes years of employment, title(s) and salary information only.
**Family Educational Rights and Privacy Act (FERPA)**
The Family Educational Rights and Privacy Act of 1974 as amended in 1995 and 1996, with which the New School complies, was enacted to protect the privacy of education records, to establish the right of students to inspect and review their education records, and to provide guidelines for correction of inaccurate or misleading statements.

The New School has established the following student information as public or directory information, which may be disclosed by the institution at its discretion: student name; major field of study; dates of attendance; full- or part-time enrollment status; year level; degrees and awards received, including Dean's List; the most recent previous educational agency or institution attended, addresses, phone numbers, photographs, email addresses, and date and place of birth.

Students may request that The New School withhold release of their directory information by notifying the Office of the Registrar in writing. This notification must be renewed annually at the start of each fall term.

All employees of the University with access to student information are required to take the university’s FERPA tutorial. For further information on FERPA and the tutorial, please contact the Office of the Registrar.

**Free Exchange of Ideas**
An abiding commitment to preserving an enhancing freedom of speech, thought, inquiry and artistic expression is deeply rooted in the history of The New School. The New School is committed to academic freedom in all forms and for all members of its community. It is equally committed to protecting the right of free speech of all outside individuals authorized to use its facilities or invited to participate in the educational activities of any of the university’s academic divisions. Faculty members, administrators, staff members, students and guests are obligated to reflect in their actions a respect for the right of all individuals to speak their views freely and be heard. They must refrain from any action which would cause that right to be abridged. At the same time, the University recognizes that the right of speakers to speak and be heard does not preclude the right of others to express differing points of view. However, this latter right must be exercised in ways which will allow speakers to continue and must not involve any form of intimidation or physical violence.

For the full details of this policy, please refer to the Full Time Faculty handbook.

**Freedom of Artistic Expression**
The university’s responsibility for and dedication to securing the conditions in which freedom of expression can flourish extend to all forms of artistic expression, including the fine arts, design, literature, and the performance of drama, music and dance.

The opportunity to display or perform works of art at the University is made available through several academic processes and procedures in which faculty members and other duly appointed individuals exercise their best professional judgment. Among these procedures is the selection of: 1) student art work by faculty, 2) selection of gallery shows by gallery committees, 3) selection of works of art by the Committee on the University Art collection, and 4) display or performance as part of an approved course curriculum. Such authorized display or performance, regardless of how unpopular the work might be, must be unhindered and free from coercion. Members of the University community and guests must reflect in their actions a respect for the right to communicate ideas artistically and must refrain from any act that would cause that right to be abridged. At the same time, the University recognizes that the right of artists to exhibit or perform does not preclude the right of others to take exception to particular works of art. However, this latter right must be exercised in ways that do not prevent a work of art from being seen and must not involve any form of intimidation, defacement, or physical violence. The University rejects the claim of any individual or outside agency to dictate on the appropriateness or acceptability of the display or performance of any work of art in its facilities or as part of its educational programs.

For the full details of this policy, please refer to the Full Time Faculty handbook.

**Hiring Independent Contractors Policy**
An individual performing services for the University is to be regarded as a University employee, whether the service is full- or part-time, regular or temporary, unless it is clearly demonstrated that the relationship is that of a true independent contractor. An individual will be considered and treated as an employee if others in the same or substantially similar positions are employees. Appropriate categorizing of individuals performing services to the University is essential to avoid incurring substantial tax penalties and other liabilities. Decisions concerning the appropriate category will be made jointly by
Accounting and the Office of Human Resources, in consultation with legal counsel, as needed. Approval must be secured prior to commencement of services.

**Guidelines**

A person acts as an independent contractor if the University directs and controls only the intended results and not the means and methods of accomplishing it. Doubtful cases of interpretation are to be resolved in favor of categorizing the individual as an employee. Specific cases will be decided on particular facts, but the following guidelines are instructive:

- Independent contractors generally have other clients and derive a substantial part of their income from sources outside the university.
- The work of independent contractors is uniquely skilled or professional in nature and requires a considerable amount of independent judgment and specialized knowledge or training obtained elsewhere. Secretarial or clerical services will generally be regarded as being provided by employees.
- The place where the work is performed is one indicator, but not determinative.
- The substance of the relationship is important and not what it is called. Use of a business name is not determinative.

**Procedures**

- All actions necessary to engage a consultant or to hire an employee must be approved prior to offer and commencement of services, and must be processed at least three weeks before services are required. More time may be needed for sign-off and posting requirements. Offers extended without approval of Human Resources and/or Accounting may be rescinded.
- Questions regarding employee hiring should be addressed to Human Resources. For a temporary assignment or project, a department may wish to hire an employee through a temporary service. Questions regarding or assistance in hiring a temporary employee may be obtained from Human Resources.
- Contact And Obtain Approval From The Accounting Department.

**Intellectual Property Rights**

The New School seeks to encourage creativity and invention among its faculty members and students. In doing so, the University affirms its traditional commitment to the personal ownership by its faculty members and students of Intellectual Property Rights in works they create. This Policy governs the Intellectual Property Rights of the university, faculty members and students in the work product, ideas and inventions (regardless of the medium) created in connection with activities associated with the University (the “Work” or “Works”). The term “Intellectual Property Rights”, as used in this policy, refers to copyrights, rights in trademarks and service marks, patents, moral rights, and other intangible proprietary rights. The term “Works”, as used in this policy, does not include any Works created by faculty or students outside the scope of their activities in connection with the university, except to the extent that such activities fall within one of the limited Exceptions set forth below or the policy concerning disclosure of faculty-student agreements.

The University supports the Intellectual Property Rights of its faculty and students in materials which they create or otherwise author related to academic work, including, but not limited to art objects, lecturer notes, lecture transcripts and tapes (audio or video), works of original authorship (including both literary and artistic works, and including documentations of these such as photographs or art works), software, compilations of information such as databases, and any other research, scholarly or creative work and its derivatives, in any medium, except as otherwise set forth in this Policy.

For the full details of this policy such as the Exceptions to the General Rule and Minimum Rights, please refer to [http://www.newschool.edu/leadership/provost/policies/property-rights/](http://www.newschool.edu/leadership/provost/policies/property-rights/)

**General Rule**

Faculty members and students will own all Intellectual Property Rights in Works they create in connection with activities associated with the university, subject only to the limited Exceptions to the General Rule and the university’s Minimum Rights. If more than one person contributes to a Work, then the contributions of each contributor shall be acknowledged and each contributor shall be treated as having Intellectual Property Rights in the Work under this Policy.

No Limitation on Fair Use

Nothing in this policy shall limit the rights of faculty members, students, or the University to make a “fair use” of copyrighted Works as that term is defined in the Copyright Act.
Lactation Spaces
The New School provides Lactation Spaces for nursing parents to comfortably and conveniently pump while at work. Please review the Lactation Spaces Guide (PDF) for more information pertaining to the use of these spaces.

Nepotism Policy
It is the policy of The New School to base appointments and promotions on qualifications and work performance. In keeping with this policy, members of the same family, including significant others, may be eligible for employment within the same department or area of the university. When members of the same family are recommended to work for the same supervisor, written approval of the arrangement by the appropriate senior officer will be required in advance. In such cases, however, a supervisor-employee relationship cannot exist at the time of employment or thereafter, nor shall one member of the family relationship assume for the other the role of advocate or judge with respect to conditions of employment, salary, or promotion.

It should be clear that the reasons underlying such a restriction on employment, defined as applying to members of the same family, shouldapply with equal validity to those whose living arrangements approximate family relationships. Similarly, the university’s Policy on Conflicts of Interest indicates that familial and other personal relationships may constitute a conflict of interest which must be properly disclosed.

While general responsibility for assuring adherence to these policies must rest with those responsible for appointments and assignments which is generally the university’s academic and administrative department heads, it is generally not recommended to have employees with family relationships work in the same unit.

The New School Smoke and Electronic Cigarette Use-Free Workplace Policy
Purpose – A smoke free policy has been developed to comply with the New York City Smoke-Free Air Act (Title 17, Chapter 5 of the Administrative Code of the City of New York) and New York State Clean Indoor Air Act (Article 13-E of the New York State Public Health Law), and to protect all employees and visitors from secondhand smoke, an established cause of cancer and respiratory disease. The policy set forth below is effective March 30, 2003 for all The New School locations.

Smoke-Free Areas – All areas of the workplace are now smoke-free without exception. Smoking and electronic cigarette use are not permitted anywhere in the workplace, including all indoor facilities and company vehicles with more than one person present. Smoking is not permitted in private enclosed offices, conference and meeting rooms, cafeterias, lunchrooms, employee lounges or Lang Courtyard.

Signage Requirement – “No Smoking and Electronic Cigarette Use” signs must be clearly posted at all entrances and on bulletin boards, bathrooms, stairwells and other prominent places. No ashtrays are permitted in any indoor area.

Compliance – Compliance with the smoke-free workplace policy is mandatory for all employees and persons visiting the University, with no exceptions. Employees who violate this policy are subject to disciplinary action.

Any disputes involving smoking should be handled through the University’s procedure for resolving other work-related problems. If the problem persists, an employee can speak to the Human Resources Department at 212-229-5671 or lodge an anonymous complaint by calling the New York City Department of Health and Mental Hygiene’s complaint line, 1-877-NYC-DOH7 (1-877-692-3647) or on the web at nyc.gov/health. DOHMH’s enforcement staff will take appropriate action to resolve the problem.

The law prohibits employers from retaliating against employees who invoke the law or who request management’s assistance in implementing it in the workplace.

Smoking Cessation Options – The New School encourages all smoking employees to quit smoking. The New School’s Health Center offers a number of services for employees who want to quit. Smoking cessation information is available from the New York Smokers’ Quit Line at 1-866 NY QUITS (1-866-697-8487).

Questions – Any questions regarding the smoke free workplace policy should be directed to 212-229-5671.
Snow and Other Emergency Information
Although a snow emergency or other weather-related situations on rare occasions may cause some classes to be cancelled, administrative offices will be open and all employees are expected to make every effort to reach work on scheduled work days. In the event that an administrative employee is delayed in reporting to work or unable to report to work due to an emergency situation, the employee should contact his/her department as soon as possible.

In case of situations affecting scheduling of classes, announcements regarding University operations are carried on local radio station WINS - (1010 AM), WCBS (880AM), the University advising line (212-229-7008), the University Status Message on the University website, and New School Alerts.

Whistleblower Policy
It is the intent of The New School that its academic and administrative activities conform to applicable legal, ethical and professional standards and the University expects its trustees, faculty, administrators, staff, students and volunteers (“Members of the University community”) to conduct their activities in accordance with applicable Federal, State and local laws as well as University policies and procedures as set forth in the University’s Institutional Policies & Procedural Manual, Student Handbook and Full-time Faculty Handbook.

This policy is intended to encourage Members of the University community to disclose conduct that they believe violates applicable law and/or University policies and the overarching principle that the University’s resources are not to be used for personal gain (“misconduct or suspected misconduct”). The University expects that reports of misconduct or suspected misconduct will be made in good faith, and will reflect a real and legitimate concern that must be promptly investigated and addressed. The University will strive to keep disclosures confidential unless disclosure is required by applicable law or the failure to disclose would impede the University’s investigation of the reported misconduct or suspected misconduct.

This policy prohibits Members of the University community from retaliating against those who disclose misconduct or suspected misconduct pursuant to this policy. Any Member of the University community who reports a misconduct or suspected misconduct in good faith will be protected from harassment, retaliation or other adverse employment, academic or educational consequences. Anyone who harasses, intimidates or otherwise attempts to retaliate against a reporter will be subject to disciplinary action, up to and including termination of employment and possible referral for other civil and/or criminal sanctions.

REPORTING:
Internal Mechanisms
Members of the University community are encouraged to report misconduct or suspected misconduct to their immediate supervisor. If this is not a feasible option, the University has designated the following persons to receive, investigate and resolve complaints of misconduct or suspected misconduct as appropriate:

A. Academic Misconduct (faculty or student) – Deputy Provost and Senior Vice President
   Bryna Sanger, sanger@newschool.edu
   66 West 12th Street, 8th Floor, NYC, NY 10011
   Phone: 212-229-8947 ext 1411

B. Misconduct related to the University’s Personnel Practices – Senior VP and Chief Human Resources Officer
   Jerry M. Cutler, cutlerjm@newschool.edu
   80 Fifth Ave, 8th Floor, NYC, NY 10011
   Phone: 212-229-5671 ext 4968

C. Fiscal Misconduct - Chief Operating Officer
   Tokumbo Shobowale, shobowale@newschool.edu
   66 West 12th Street, 8th Floor, NYC, NY 10011
   Phone: 212-229-5600 ext 3822

D. All Other Misconduct – Chief Legal Officer & Secretary of the Corporation
   Roy Moskowitz, moskowir@newschool.edu
   80 Fifth Ave, 8th Floor, NYC, NY 10011
   Phone: 212-229-5432 ext 4950
and/or;

The Chair of the Board of Trustees Audit and Risk Committee
Jane DeFlorio, auditchair@newschool.edu
C/O Office of the General Counsel
80 Fifth Ave, 8th Floor, NYC, NY 10011
Phone: 212-229-5432

External Mechanism
Members of the University community who wish to report their concerns anonymously, may contact EthicsPoint, a third-party provider of confidential reporting services retained by the University to accept anonymous reports. To contact EthicsPoint: http://tnssecure.ethicspoint.com.

INVESTIGATIONS/CORRECTIVE ACTIONS:
The designated persons will be responsible for investigating reports made to them or to EthicsPoint, unless one of the members is the subject of the report; in those cases the Chair of the Board of Trustees Audit and Risk Committee will conduct the investigation.

Corrective actions in response to a report will be made to the President and Provost for approval and implementation.

The designated persons will make annual reports to the Board of Trustees Audit and Risk Committee of all reports made and corrective actions, if any, taken.

Workplace Violence Policy
The University prohibits threats, menacing conduct or acts of violence on its premises by its employees, former employees, customers, vendors, visitors or any other individuals. Moreover, the University prohibits any of such acts or conduct off University premises while on University business. The University further prohibits all individuals (except law enforcement officers) from bringing any weapons, including, but not limited to, firearms, knives or explosives onto its premises.

Threats are generally considered to be any expression of an intent either immediately or subsequently to inflict harm, loss or pain to a person and/or his or her property rights or to injure a person or his or her property by the commission of some unlawful act. Menacing conduct is a disposition to inflict injury or to place another in fear of future injury.

Employees will be held accountable for their statements, acts and conduct. For example, an employee's undisclosed intent not to carry out a threat or a threat made in jest will not be considered as an excuse for engaging in such prohibited behavior.

The possession or control of weapons on University premises will subject an employee to immediate termination of employment, while non-employees (other than law enforcement officers) will be required to immediately leave the university's premises.

Employees who learn that a co-worker or other individual on University premises is in possession of a weapon have an obligation to immediately report such to management. In addition, any other acts or conduct that violate this policy must also be reported, including, for example, threats or acts of violence, aggressive or menacing behavior, threatening or offensive comments, etc. Employee reports made pursuant to this policy will be investigated as appropriate and, to the extent possible, maintained in confidence.

The University will take prompt, appropriate remedial action against those who violate this policy. Remedial action may include up to immediate termination of employment and notification of law enforcement personnel.

Retaliation against an employee reporting potential violations of this policy is prohibited and such conduct is also a violation of this policy which will subject the "retaliator" to disciplinary action, up to and including termination of employment.

Hazard Communication Policies
1. The purpose of this policy is:
To establish a comprehensive hazard communication program to ensure employees, students, and contractors are informed about:

- the hazards of chemicals they handle, use, or may be exposed to during the course of their normal work activities
- safe work practices and precautions to protect themselves against these chemicals.

To comply with the requirements of the Occupational Safety and Health Administration’s (OSHA) Hazard Communication Standard.

2. This policy applies to:

- All employees of the University, including but not limited to full-time and part-time faculty, staff, and technicians; temporary/seasonal employees; and student employees
- Interns and volunteers
- Contractors, vendors and sub-contractors
- Other individuals who have business with The New School

Note: Laboratory employees are covered by the Chemical Hygiene Plan.

3. Definitions

3.1 Container: Any bag, barrel, bottle, box, can, cylinder, drum, jar, storage tank or vessel that contains a hazardous chemical.

3.2 Hazardous chemical: a chemical that poses a physical or health hazard.

3.3 Hazard warning: words, pictures, or symbols on a container label that communicates the physical or health hazard of a chemical.

3.4 Health hazard: chemicals from which exposure can lead to adverse health effects. Examples of health hazards include irritants, toxic substances, corrosives, carcinogens, sensitizers, and chemicals that target specific body organs or systems.

3.5 Material Safety Data Sheet (MSDS): a written document prepared by a hazardous product’s manufacturer or distributor as required by the OSHA Hazard Communication Standard. The MSDS conveys to the user information on the hazard of a chemical; proper storage & disposal; emergency response procedures involving spills and fires; its chemical properties; safe work practices and other protective measures to work safely with the chemical; and applicable regulatory information.

3.6 Physical hazard: hazardous materials that threaten your physical safety. Physical hazards include materials that are flammable, combustible, reactive, explosive, oxidizer, water or chemical sensitive, and compressed gas.

4. Responsibilities

4.1 The highest-ranking individual serving in a management capacity within each Program, Department, School or Division (e.g., Directors (program or facilities) and School or Divisional Deans) is the Responsible Individual. Responsible Individuals have the following responsibilities:

- Enforcing compliance with the Hazard Communication program and taking disciplinary actions in accordance with collective bargaining agreement procedures, if any.
- Informing contractors, vendors or visitors of the need to comply with this policy

4.2 Supervisors are responsible for:

- Coordinating with the Assistant Director for Environmental Health & Safety (EHS), Facilities Management, to ensure all employees complete initial hazard communication training and whenever a new category of hazardous chemical is introduced.
- Maintaining a hazardous chemical inventory annually and submitting a copy (Appendix A) to the EHS office located at 71 Fifth Avenue, 9th floor. Note: Inventories are due to EHS every year before the end of January.
- Verifying all containers of hazardous chemicals in their respective area(s) are labeled legibly with the contents, appropriate hazard warning, and manufacturer’s name and address.
- Ensuring hard copies of MSDSs for hazardous chemicals used and stored in their respective area(s) are readily available during employees’ work shift(s). Copies of all MSDSs must be forwarded to EHS.
- Ensuring appropriate personal protective equipment (such as gloves and safety glasses) is available and worn by employees, if needed. Refer to the Personal Protective Equipment (PPE) policy for details.
- Enforcing compliance with this Policy and adherence to safe work procedures or guidelines related to chemical use.

4.3 All Employees are responsible for:
- Complying with the policy: attending training, reading labels and Material Safety Data Sheets (MSDS) for chemicals used, keeping containers of chemicals closed when not in use, wearing personal protective equipment as needed, and following other safety rules and guidelines related to chemical use.
- Notifying their Supervisor of issues pertaining to the use of hazardous chemicals.

4.4 The Assistant Director for Environmental Health and Safety (EHS), Facilities Management is responsible for:
- Implementing the Hazard Communication policy.
- Reviewing the policy periodically and updating it as needed.
- Providing training, technical assistance, and clarification of the policy.
- Reviewing hazardous chemical inventories submitted by Supervisors and filing them with regulatory agencies as required.
- Maintaining copies of all MSDSs and providing copies as requested.
- Screening MSDSs for new or significant hazard information and notifying affected employees.
- Monitoring employee exposure to hazardous chemicals as needed.

4.5 Labor Relations, General Counsel’s Office is responsible for:
- Reviewing letters from labor unions or healthcare providers, if any, regarding issues involving the use of hazardous chemicals.

4.6 Project Manager or Coordinator is responsible for:
- Notifying the Contractor of hazardous chemicals used or stored by the University that the contractor’s employees may be potentially exposed to in the job site and any necessary precautionary measures to protect the employees.
- Informing the contractor how to access the MSDS for hazardous chemicals the Contractor’s employees may be potentially exposed to in the job site. The Project Manager or Coordinator may submit a written request to EHS if copies of the MSDS are needed.
- Obtaining (1) an inventory of hazardous chemicals to be used by the Contractor at the University job site and (2) copies of the MSDSs for such chemicals. This information must be available upon request by EHS and affected Departments.

5. Inventory of Hazardous Chemicals
5.1 Supervisors must compile and maintain an inventory of all known hazardous chemicals and submit it to EHS annually before the end of January. Appendix A may be used to submit the annual inventory.
5.2 The inventory includes the name of the chemical, the manufacturer, storage locations, container type, and quantity stored.
5.3 When new chemicals are received, the inventory must be updated (including date the chemicals were introduced) within 30 days. A copy of the updated inventory and MSDS must be forwarded to EHS.
5.4 The inventories are filed with regulatory agencies by EHS annually, as required.

6. Material Safety Data Sheets (MSDS)
6.1 The MSDS should arrive with the shipment of a hazardous chemical. If it does not, the Supervisor must contact the manufacturer or distributor to obtain a copy of the MSDS.
6.2 MSDSs must be readily available for review by employees (and students) in areas where hazardous chemicals are used. Hard copies of MSDSs are located in work areas such as Parsons shops and the EHS office in Facilities Management located at 71 Fifth Avenue, 9th floor. Electronic copies of the MSDSs may also be available on the internet or from the product’s manufacturer and/or distributor.
6.3 If revised MSDSs are received, copies must be forwarded to EHS and included in the work area’s MSDS binder.

7. Container Labeling
7.1 All containers must be labeled legibly with the name of the chemicals, appropriate hazard warning, and the manufacturer’s contact information including their name and address.
7.2 Secondary containers into which chemicals were transferred (e.g., spray bottles, small squeeze bottles) must be labeled with the name of the chemicals and appropriate hazard warning(s).

8. Training

8.1 All employees who work with or are potentially exposed to hazardous chemicals during the course of their normal work activities will receive initial training on the Hazard Communication standard and Hazard Communication policy before working with the chemicals. Supervisors must coordinate with EHS to arrange for the training.

8.2 Prior to introducing a new chemical hazard category into the work area, each affected employee will be given information and training as outlined below for the new chemical hazard.

8.3 Training includes the following information:
- An overview of the OSHA Hazard Communication standard
- The hazardous chemicals present in work area
- The physical and health risks of the hazardous chemicals
- How to determine the presence or release of hazardous chemicals in the work area
- How to reduce or prevent exposure to hazardous chemicals through use of control procedures, work practices and personal protective equipment
- Steps the University has taken to reduce or prevent exposure to hazardous chemicals
- Procedures to follow if employees are overexposed to hazardous chemicals
- How to read labels and MSDSs to obtain hazard information
- Location of the MSDS files and written Hazard Communication policy

9. Hazardous Non-Routine Tasks

9.1 Periodically, employees are required to perform non-routine tasks that are hazardous. Examples of non-routine tasks include confined space entry. Prior to starting work on such projects, the Supervisor must notify affected employee(s) about the specific chemical hazards, protective and safety measures the employee should use, and steps the University is taking to reduce the hazards. Employees must wear the issued PPE properly when performing tasks that put them at risk of recognized hazards identified in the hazard assessment.

9.2 EHS is available to assist in evaluating hazards of non-routine tasks and recommending appropriate safety precautions upon request.

10. Contractor Notification

10.1 The Project Manager or Coordinator must notify the Contractor of the University’s chemical hazards as it relates to the job site, how to access MSDSs for hazardous chemicals used or stored by the University, and any precautionary measures to take to protect the Contractor’s employees.

10.2 Contractors must notify the Project Manager or Coordinator of hazardous chemicals to be used on the job site by providing a chemical inventory and copies of the MSDSs.

11. Program Evaluation

11.1 EHS will periodically evaluate the Hazard Communication policy and make changes as necessary.

12. Program Availability

12.1.1 A copy of this policy will be made available, upon request, to employees and their representatives. A written request should be submitted to EHS.

References
OSHA Hazard Communication Standard (29 CRF 1910.1200)

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Personal Protective Equipment (PPE) Policy

1. Purpose

The purpose of this policy is:
- To establish minimum personal protective equipment requirements to be followed when performing hazardous or potentially hazardous tasks.
• To comply with applicable Occupational Health and Safety Administration (OSHA) regulations.

2. Scope
The PPE policy applies to all employees whose responsibilities put them at risk of exposure to recognized hazards that require the use of personal protective equipment (PPE). Personal protective equipment is to be used as a barrier between the employee and the hazard(s) when engineering (e.g., ventilation) or administrative controls (e.g., job rotation) are not feasible to provide adequate protection.

This policy applies to:
• All employees of the University, including but not limited to full-time and part-time faculty, staff, and technicians; temporary/seasonal employees; and student employees
• Interns and volunteers
• Contractors, vendors and sub-contractors (these individuals must provide their own PPE)
• Other individuals who are visiting or have business with The New School

3. Responsibilities

3.1 Responsible Individual
The highest-ranking individual serving in a management capacity within each Program, Department, School or Division (e.g., Directors (program or facilities) and School or Divisional Deans) is the Responsible Individual. Responsible Individuals have the following responsibilities:
• Approving the Hazard Assessment Form for each area under their responsibility
• Enforcing compliance with the PPE program and taking disciplinary actions in accordance with collective bargaining agreement procedures, if any.
• Informing contractors, vendors or visitors of the need to comply with this policy

3.2 Supervisors are responsible for:
• Identifying hazards and potential hazards by completing the Hazard Assessment Form (Appendix A) for each location they supervise and submitting it to Environmental Health & Safety (EHS), Facilities Management.
• Notifying EHS of changes in the work area(s) and/or its processes/procedures that may introduce new hazards and require different or additional PPE. Such instances will require submission of an updated Hazard Assessment Form.
• Purchasing PPE for employees as needed.
• Communicating hazards, acceptable work practices, and PPE requirements to all employees.
• Monitoring and enforcing compliance with the PPE policy including, but not limited to: inspection, use, proper maintenance, storage, disposal, and replacement of issued PPE.
• Providing specific training to their employees on the types of PPE available for each task; the rationale for the selected PPE (including their limitations); proper fit, use, care and disposal of PPE. EHS is available to assist with training upon request.
• Ensuring engineering and administrative controls that prevent workplace hazards are maintained.

3.3 All Employees are responsible for:
• Complying with the policy: adhering to acceptable work practices; attending training; using, inspecting, properly maintaining, storing, and disposing of PPE.
• Notifying their supervisor of issues pertaining to the PPE such as improper fit, defects, or medical conditions that may affect use of PPE.

3.4 Environmental Health and Safety (EHS), Facilities Management is responsible for:
• Reviewing and selecting appropriate PPE compliant with OSHA regulations based on completed hazard assessments.
• Providing technical assistance with hazard assessment and training upon request by Supervisors.
• Administration of the PPE program including but not limited to: recordkeeping, periodically reviewing effectiveness of the policy, and updating it as needed.
3.5 Labor Relations, General Counsel’s Office is responsible for:
   • Reviewing letters from labor unions or healthcare providers, if any, regarding issues involving the use of PPE.

4. Hazard Assessment
4.1 A written hazard assessment (Appendix A) is required of the employee’s workplace to determine hazards and the appropriate PPE. The form must be completed by the Supervisor and submitted to EHS. One completed form can be submitted if it includes all tasks performed by all employees in a given work area. A separate written hazard assessment is required for unusual tasks that arise and were excluded from the previously submitted hazard assessment.

5. Obtaining PPE
5.1 Supervisors must purchase necessary PPE identified in the hazard assessment form.

6. Training
6.1 Supervisors shall ensure their employees are trained on task-specific PPE including availability, rationale for the selection, proper fitting/use, maintenance/storage, and limitations of the PPE. EHS is available to assist with this training on a request basis.
6.2 Supervisors must submit the Training Certification (Appendix B) to EHS.

7. Retraining
7.1 When the Supervisor has reason to believe that any previously trained employee does not understand or have the skill required to use PPE, the Supervisor must retrain the employee. These circumstances include, but are not limited to:
   • Changes in the workplace that make previous training obsolete.
   • Change in the types of PPE that make previous training obsolete.
   • Inadequacies in an affected employee’s knowledge or use of assigned PPE indicating that the employee has not been trained properly.

8. Using PPE
8.1 Employees must inspect their issued PPE for defects prior to putting them on each time.
8.2 Employees must wear the issued PPE properly when performing tasks that put them at risk of recognized hazards identified in the hazard assessment.
8.3 Employees must not perform a task when required PPE is unavailable nor use damaged or improperly fitting PPE.

9. Maintaining & Storing PPE
9.1 It is the responsibility of the employee to properly maintain (e.g., store, clean) his/her issued PPE in a sanitary manner.

10. Replacing PPE
10.1 Supervisors must provide replacements for PPE as needed due to damage or improper fit.

11. Program Evaluation
11.1 EHS will periodically evaluate the PPE policy and make changes as necessary.

References

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Chemical Hygiene Plan
1. Purpose
   The purpose of this policy is:
   • To establish procedures to protect laboratory employees from hazardous chemical exposures,
   • To comply with the requirements of the Occupational Safety and Health Administration’s (OSHA) Occupational Exposure to Hazardous Chemicals in Laboratories Standard (29 CFR 1910.1450).
2. Scope
Laboratory employees work with relatively small quantities of chemicals on a non-production basis. The Chemical Hygiene Plan (CHP) applies to all employees of the University who work in laboratories, including but not limited to full-time and part-time faculty, staff, assistants, technicians, and student employees.

3. Definitions
3.1 Extremely hazardous substance: select carcinogens, reproductive toxins, and substances with a high degree of acute toxicity (Permissible Exposure Limit of <2 mg/m³ or 2 parts per million).
3.2 Hazardous chemical: a chemical that poses a physical or health hazard.
3.3 Physical hazard: hazardous materials that threaten your physical safety. Physical hazards include materials that are flammable, combustible, reactive, explosive, oxidizing, water or chemical sensitive, and compressed gases.
3.4 Health hazard: chemicals from which exposure can lead to adverse health effects. Examples of health hazards include irritants, toxic substances, corrosives, carcinogens, sensitizers, and chemicals that target specific body organs or systems.
3.5 New processes or equipment: any new equipment or process used in the laboratory that could possibly expose employees to a hazardous material.

4. Responsibilities
4.1 Chemical Hygiene Officer (CHO)
The University designates the Assistant Director for Environmental Health & Safety, Facilities Management, as the Chemical Hygiene Officer responsible for:
- Implementing the CHP, conducting an annual review, and updating the CHP as needed.
- Providing information and training for the CHP.
- Monitoring employee exposure to hazardous chemicals as needed.
- Monitoring the procurement, use, and disposal of chemicals.
- Reviewing the use of extremely hazardous substances and recommending guidelines based on a review of the chemical hazards.
- Assisting with development of chemical hygiene policies and Standard Operating Procedures as needed.
- Assisting Project Managers in Design & Construction in the review of plans for new or renovated laboratories where chemicals are used.

4.2 Assistant Chemical Hygiene Officer (ACHO)
The University designates the laboratory Supervisor or his/her designee as the ACHO responsible for:
- Monitoring compliance with the CHP including, but not limited to: chemical hygiene rules, functioning of engineering controls, availability and use of appropriate personal protective equipment, and availability/testing of emergency equipment (e.g., eyewash testing, emergency shower, first aid kit & fire extinguisher).
- Maintaining required signage for the lab.
- Ensuring required certifications are maintained by designated lab staff.
- Ensuring all employees attend mandatory training.
- Maintaining a current chemical inventory of hazardous chemicals and submittal to the CHO by January 31st annually.
- Ensuring Material Safety Data Sheets (MSDS) are accessible to employees during their work shift.
- Ensuring chemical containers are properly labeled.
- Informing the CHO of changes that may affect employee exposures to hazardous chemicals including new hazardous chemicals (particularly of extremely hazardous substances), procedures, or equipment, and participating in their review and approval prior to use.
- Notifying employees of results of any exposure monitoring results provided by the CHO.
- Developing lab-specific Standard Operating Procedures (SOPs) with the CHO.

4.3 Laboratory Supervisor is responsible for:
- Ensuring full development/implementation and compliance with the lab-specific Chemical Hygiene Plan.
- Communicating the CHP to all affected employees.

4.4 All Employees are responsible for:
- Complying with the CHP: attending training, practicing good chemical hygiene, and following all applicable standard operating procedures.
• Notifying their Supervisor of health and/or safety hazards.
• Notifying their Supervisor of injuries or illnesses associated with chemical exposure.

4.5 The General Counsel’s Office is responsible for:
- Reviewing any correspondence with or issues raised by labor unions regarding this policy; and
- Communicating with employees and/or their healthcare providers regarding any medical concerns or issues that arise from or relate to hazardous chemicals used by employees, including but not limited to a request for an accommodation relating to this policy.

5. Standard Operating Procedures
5.1 The laboratory shall develop, implement, and adhere to lab-specific Standard Operating Procedures (SOPs) where deemed necessary by the CHO and ACHO to protect lab workers.

6. Safe Handling Procedures and Implementation of Exposure Controls
6.1 Each laboratory must compile and maintain a current hazardous chemical inventory and submit a copy to the CHO before January 31st of each year. The inventory includes the name of the chemical, the manufacturer, storage locations, container type, and quantity stored. Appendix A may be used to submit the annual inventory.
6.2 Material Safety Data Sheets (MSDSs) must be readily available for review by employees (and students) in areas where hazardous chemicals are used. Hard copies of MSDSs are located in the laboratory and the CHO’s office. Electronic copies of the MSDSs may also be available on the internet or from the product’s manufacturer and/or distributor.
6.3 Copies of MSDS must be submitted to the CHO when the hazardous chemical inventory is due.
6.4 Copies of revised MSDS must be forwarded to the CHO and included in the lab’s MSDS binder.
6.5 The lab must confirm the order’s accuracy before accepting a chemical delivery. Procured chemicals must not be accepted if they are incorrect, unlabeled, or expired.
6.6 All containers must be labeled legibly with the name of the chemicals, appropriate hazard warning, and the manufacturer’s contact information including their name and address.
6.7 Chemicals must be stored in chemically compatible, non-leaking containers and must remain closed when not in use.
6.8 Chemicals must be segregated and stored based on compatibility. Chemicals shall not be stored on the laboratory floor.
6.9 Secondary containers must be used for storing highly toxic and/or opened chemical stocks.
6.10 The smallest practical quantities of chemical quantities should be maintained in the lab.
6.11 The quantities of flammables stored in the lab shall not exceed the New York City Fire Department’s allowable limit.

7. Waste Management
Hazardous chemicals must never be disposed of in sinks, drains, or trash cans. Hazardous wastes are to be managed in accordance with the Environmental Protection Agency’s (EPA) Resource Conservation and Recovery Act (RCRA).

7.1 Determine if the waste is hazardous by reading the MSDS and/or label. Hazardous wastes possess one of more characteristics including toxicity, ignitability, reactivity, or corrosivity. Waste is also considered hazardous if it is listed under RCRA. Consult with the CHO to confirm which chemicals must be managed as hazardous waste.
7.2 Unlabeled, expired, or chemical stock that will no longer be used should be disposed of promptly.
7.3 Evaporating volatile chemicals in the fume hood shall not be used as a means of disposal.
7.4 Collect hazardous waste in containers labeled as “Hazardous Waste” with the contents listed. Segregate hazardous wastes based on compatibility and store the waste containers in a designated location in the lab.
7.5 Notify the CHO of hazardous waste for disposal. The CHO will arrange for a pickup by the University’s hazardous waste contractor.

8. Measures to Minimize Exposure
8.1 Engineering Controls
• Whenever feasible, hazardous chemicals will be substituted with alternatives that are non-toxic and/or have lower hazard ratings (e.g., less flammable, reactive, explosive).
• Exposure to hazardous chemicals shall be minimized through the use of engineering controls including chemical fume hoods and other forms of appropriate ventilation.
• Chemical fume hoods must be tested by the CHO annually to ensure adequate face velocity (average of 80-120 feet per minute).
• The sash height of the fume hood must be maintained to ensure the face velocity is within the acceptable range.
• The CHO must be notified and a Work Order submitted to Facilities Management to repair the fume hood or the general ventilation system when not functioning properly. The fume hood should not be used until the repair is complete and the CHO has confirmed the average face velocity is acceptable.

8.2 Administrative Controls
• Emergency equipment and supplies must be maintained and stored in a location known to the lab staff.
• Designated areas must be used to perform procedures with hazardous chemicals.
• SOPs and other chemical hygiene rules and guidelines must be adhered to at all times. Any additional protective measures when working with extremely hazardous substances will be recommended by the CHO based on a review of the chemical hazards.
• Certain procedures or activities require prior approval by the ACHO before being carried out by lab staff. It is at the ACHO's discretion to identify such procedures or activities.
• All lab employees must attend mandatory training.
• The CHO will conduct quarterly lab audits and report the results to the ACHO and Laboratory Departmental Chairperson. All identified deficiencies must be corrected promptly.
• The ACHO will conduct ongoing compliance inspections of the laboratory to ensure compliance with the CHP.

8.3 Personal Protective Equipment
• The need for Personal Protective Equipment (PPE), including respirators, shall be determined based on an exposure assessment by the ACHO in accordance with the University’s PPE Policy.
• PPE shall be used and maintained in accordance with the University’s PPE Policy.

9. Reporting injuries/illnesses
Injuries and illnesses associated with chemical exposure must be reported promptly by completing the Incident Log through the Security Department and notifying EHS. The log is available from the Security officers in each building.

10. Information and Training
10.1 All employees must be informed of chemical hazards in their work areas.
10.2 Employees will receive initial training on the chemical hazards at the time of the employee’s initial assignment to the work area and prior to assignments involving new exposure situations.
10.3 Supervisors must coordinate with the CHO to arrange for the training and inform the CHO of changes to procedures or chemicals that may result in new exposure situations.
10.4 Training includes the following information:
• An overview of the OSHA Hazardous Chemicals in Laboratories Standard
• The hazardous chemicals present in work area
• The physical and health risks of the hazardous chemicals
• How to determine the presence or release of hazardous chemicals in the work area
• How to reduce or prevent exposure to hazardous chemicals through use of control procedures, work practices and personal protective equipment
• Steps the University has taken to reduce or prevent exposure to hazardous chemicals
• Procedures to follow if employees are overexposed to hazardous chemicals
• How to read labels and MSDSs to obtain hazard information
• Location of the MSDS files and written CHP
10.5 A copy of the CHP is available in the Human Resources Policies Manual or upon request from the CHO.

11. Medical Consultations and Examinations
11.1 Lab employees shall be provided the opportunity to receive medical attention without any cost to the employee, without any loss of pay, and at a reasonable time and place under the following conditions:
• Medical consultation in the event of an emergency that results in the likelihood of a hazardous chemical exposure.
• Medical examination if signs or symptoms develop due to a potential hazardous chemical exposure.
• Medical surveillance if results of exposure monitoring by the CHO indicate an exposure level routinely above
  the action level for any substance as prescribed by a particular OSHA Standard.

11.2 The ACHO will coordinate the medical evaluation or examination through EHS.
11.3 A licensed physician will perform the medical consultation or examination and provide a written opinion in
  accordance with the OSHA Occupational Exposure to Hazardous Chemicals in Laboratories Standard.
11.4 The CHO will provide a copy of the Standard to the physician.

12. Hazard Identification and Exposure Monitoring
12.1 The CHO will rely primarily on the chemical labels and Material Safety Data Sheets (MSDS) to determine hazards
  associated with a chemical.
12.2 The CHO shall conduct initial exposure monitoring for any substance regulated by an OSHA Standard if there is
  reason to believe exposure levels for the substance routinely exceed the action level (or the Permissible Exposure
  Limit in the absence of an action level).
12.3 The CHO shall conduct periodic exposure monitoring in accordance with the relevant Standard if the initial
  monitoring results indicate employee exposure is above the action level (or the Permissible Exposure Limit, where
  applicable).
12.4 Exposure monitoring shall be terminated in accordance with the relevant OSHA Standard.
12.5 Employees shall be notified in writing within 15 days after the receipt of the monitoring results.

13. Record Keeping
13.1 The CHO will maintain records of industrial hygiene exposure monitoring records, training, audits, and
  process/equipment reviews.

14. Program Evaluation
14.1 The Chemical Hygiene Officer will evaluate the Chemical Hygiene Plan annually and make changes as necessary.

References
OSHA Occupational Exposure to Hazardous Chemicals in Laboratories Standard (29 CFR 1910.1450)

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Ozone-Depleting Substances Policy
1. Purpose
• To ensure the recovery and recycling of refrigerants, which are known ozone-depleting substances (ODS), during
  servicing and disposal of refrigeration and air conditioning equipment. ODS includes chlorofluorocarbons
  (CFC), hydrochlorofluorocarbons (HCFC), and their blends.
• To comply with the applicable requirements of the Environmental Protection Agency’s (EPA) Clean Air Act.

2. Scope
This policy applies to:
• All maintenance staff in the Facilities Management Department, particularly the Heating, Ventilation, & Air
  Conditioning (HVAC) staff.
• Contractors and sub-contractors that may maintain applicable equipment.

3. Certification
• HVAC staff must possess the appropriate EPA Technician certification for proper refrigerant practices (e.g.,
  Universal certification for servicing all types of equipment).
• Only EPA-certified refrigerant recovery machines must be used. The office of
  Environmental Health & Safety (EHS), Facilities Management, shall file this certification with EPA as
  needed.
• Contractors who service or repair air-conditioning or refrigeration equipment must provide proof of
  possessing appropriate EPA certifications for their technicians and recovery machines.

4. Refrigerant Sales Restrictions
• Only EPA-certified HVAC technicians may purchase ozone-depleting refrigerants such as R-22. Note: This does not apply to refrigerants contained in fully assembled refrigerant circuits such as household refrigerators and window/packaged air conditioning units.

5. Prohibition of Venting
• Intentional venting of ODS used as refrigerant is prohibited.
• Exemptions: small emissions from connecting/disconnecting/purging hoses during charging or servicing, “de minimus” releases during good faith attempts to recapture/recycle/safety dispose of refrigerant, or releases of ODS that are not used as refrigerants (e.g., purging or leak test gases).

6. Service Practice Requirements
• Evacuate air-conditioning and refrigeration equipment to established vacuum levels when opening the equipment for maintenance, service, repair, or disposal. Note: Connecting and disconnecting hoses and gauges to and from the appliance to measure pressures within the appliance and to add refrigerant to or recover refrigerant from the appliance shall not be considered "opening."
• The equipment must be evacuated to the levels specified in Appendix A.
• For small appliances such as household refrigerators, window air conditioners, and water coolers, 90% of the refrigerant must be recovered and when the compressor in the appliance is working.
• HVAC technicians must ensure that they are recovering the correct percentage of refrigerant using EPA-certified recovery equipment according to the manufacturer’s directions.
• The only acceptable instances where equipment evacuation do not need to be done to the extent specified above are: (1) if the maintenance, service, or repair does not involve removal of the appliance compressor, condenser, evaporator, or auxiliary heat exchanger coil, AND (2) the work is not followed by evacuation of the equipment to the environment. In these instances, high- or very-high pressure equipment must be evacuated to at least 0 psig before opening and low-pressure appliances pressurized to 0 psig before opening.

7. Refrigerant Leaks
• Refrigeration and air-conditioning equipment containing 50 pounds or more of refrigerant must have leaks repaired within 30 days of discovery.
• The trigger for repair requirements is the current leak rate projected over a consecutive 12-month period rather than the total quantity of refrigerant lost.
• HVAC staff must maintain records of refrigerant added to equipment and calculate the leak rate. If the leak rate is 15% or greater, the repair must be done within 30 days.

8. Recovery/Recycling
• Used refrigerant may be recovered and/or recycled and returned to the same or other equipment without restriction by HVAC staff or certified contractors, however, if the refrigerant changes ownership it must be reclaimed.

9. Reclamation
• Refrigerant must be reclaimed to the required purity only by a general reclamer or the refrigerant manufacturer approved by Facilities Management.

10. Safe Disposal Requirements
• HVAC staff must evacuate and tag refrigeration and air-conditioning equipment using EPA certified equipment to the specified service levels prior to disposal. The tag must be completed with the date of the evacuation and the technician’s signature.
• Facilities Management’s Supervisors are responsible for requesting evacuation of equipment by HVAC staff and making disposal arrangements after the equipment is evacuated and tagged.

11. Recordkeeping
• HVAC staff must maintain a service log for appliances containing 50 pounds or more of refrigerant. The log must record type of equipment, its location, manufacturer, model, date and type of service, and the quantity of refrigerant added.
• Contractors must also maintain records of the quantity of refrigerant added for appliances containing 50 pounds or more of refrigerant.
• HVAC technicians must submit copies of all certificates and service logs to the office of EHS.

Reference
40 CFR Part 82

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Bloodborne Pathogens Exposure Control Program

1. Purpose
The purpose of this policy is:
• To establish an Exposure Control Plan to minimize employees’ exposure to bloodborne pathogens.
• To comply with the requirements of the Occupational Safety and Health Administration’s (OSHA) Bloodborne Pathogens Standard.

2. Scope
Bloodborne pathogens are disease-causing agents carried in the blood and certain body fluids of infected individuals. Employees who may be exposed to these potentially infectious materials during the course of their routine job tasks are, per OSHA, “reasonably at risk” of bloodborne pathogens that can cause diseases including Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV).

The Bloodborne Pathogens Exposure Control Program applies to:
• All employees of The New School reasonably at risk of exposure to bloodborne pathogens, including job titles listed in the Exposure Determination (section #5) of the bloodborne pathogens exposure control program.

Note: Student Health Services has developed a department-specific Exposure Control Plan.

3. Definitions
3.1 Engineering controls: devices that isolate or remove the bloodborne pathogens hazard such as sharps disposal containers, self-sheathing needles, needleless systems, and sharps with engineered sharps injury protection.
3.2 Good samaritan act: first aid or cardio-pulmonary resuscitation (CPR) performed by an employee who is not a trained or designated first aid provider.
3.3 HBV: hepatitis B virus, the disease-causing agent of hepatitis B.
3.4 HIV: human immunodeficiency virus, the disease-causing agent of Acquired Immune Deficiency Syndrome (AIDS).
3.5 Other potentially infectious materials (OPIM): human body fluids; any unfixed human tissue or organ (other than intact skin); HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions.
3.6 Parenteral: piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.
3.7 Occupational exposure: Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from the performance of the employee’s duties.
3.8 Regulated waste: liquid or semi-liquid blood or OPIM, items contaminated with blood or OPIM and which would release these substances in a liquid or semi-liquid state if compressed, items caked with dried blood or OPIM and are capable of releasing these substances during handling, contaminated sharps, and pathological or microbiological waste containing blood or OPIM.
3.9 Sharps: any object or device that can penetrate the skin such as needles, blades, broken glass, etc.
3.10 Source individual: any person whose blood or OPIM may be a source of an occupational exposure to employees.
3.11 Universal precautions: OSHA’s required method of control to protect employees from exposure to all human blood and OPIM. It is the concept of bloodborne disease control that requires all human blood and certain body fluids are treated as if known to be infectious for HIV, hepatitis B virus (HBV), or other bloodborne pathogens.
3.12 Work practice controls: practices that reduce the likelihood of exposure by changing the way a task is performed.
4. **Responsibilities**

4.1 **Responsible Individual**
The highest-ranking individual serving in a management capacity within each Program, Department, School or Division (e.g., Directors (program or facilities) and School or Divisional Deans) is the Responsible Individual.

Responsible Individuals are responsible for:
- Allocating necessary funds to support compliance with the Bloodborne Pathogens Exposure Control Plan.
- Enforcing compliance with the Plan, and when necessary, taking disciplinary actions in accordance with applicable collective bargaining agreement procedures.

4.2 **Supervisors are responsible for:**
- Notifying the Assistant Director for Environmental Health & Safety (EHS), Facilities Management, of job titles with reasonable risk of bloodborne pathogens exposure and the procedures/tasks that put employees at risk.
- Notifying EHS of any new or modified job titles, tasks, or procedures that affect occupational exposure to bloodborne pathogens.
- Scheduling initial and annual training for employees.
- Notifying EHS of all employees who choose to take the Hepatitis B vaccine and ensuring they are available to receive the vaccine.
- Forwarding completed Hepatitis B Vaccine Waiver (Appendix A) to EHS for all employees who opt out of the vaccine.
- Ensuring appropriate personal protective equipment (such as gloves), spill supplies, regulated waste containers, and appropriate engineering controls are readily available and used properly by employees. Refer to The New School's Personal Protective Equipment (PPE) policy for details.
- Notifying EHS promptly after an exposure occurs and ensuring post-exposure procedures are followed including completion of the Incident Report with Security Dept. and the required forms in the Bloodborne Pathogens Exposure Kit (Appendix B).
- Monitoring and enforcing compliance with the Bloodborne Pathogens Exposure Control Plan.

4.3 **All employees with reasonable risk of exposure are responsible for:**
- Complying with the policy: attending training, wearing PPE as needed, reporting to the licensed healthcare provider to receive the Hepatitis B vaccine or submitting the Hepatitis B Vaccine Waiver form to his/her Supervisor, and complying with all applicable sections of the Bloodborne Pathogens Exposure Control Plan.
- Immediately notifying their Supervisor of any safety issues and exposure incidents involving bloodborne pathogens.

4.4 **The Assistant Director for Environmental Health and Safety (EHS), Facilities Management is responsible for:**
- Identifying job titles for inclusion in the Bloodborne Pathogens Exposure Control Program.
- Implementing and monitoring compliance with the Program.
- Reviewing the policy annually and updating it as needed.
- Providing information, training, and clarification of the Program.
- Conducting an exposure determination and updating it as needed.
- Coordinating Hepatitis B vaccinations with Supervisors as needed.
- Monitoring employee exposure to bloodborne pathogens and conducting post-exposure investigations.
- Maintaining records for training, sharps injury log, hepatitis B vaccine waiver, post-exposure incident report, consent forms, and written opinion of licensed healthcare providers for post-exposures.
- Providing PPE in accordance with the PPE policy.
- Providing BBP spill kits as needed.
- Scheduling pick-ups of regulated medical waste (except for Student Health Services’ facility).

4.5 **General Counsel’s Office is responsible for:**
- Reviewing letters from labor unions or healthcare providers, if any, regarding issues involving bloodborne pathogens.
- Maintaining accurate OSHA 300 logs including privacy cases involving all work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material.
4.6 The Director of Medical Services, Student Health Services, is responsible for:
- Reviewing Student Health Services’ Bloodborne Pathogens Exposure Control Plan with EHS annually and updating it as needed.
- Obtaining input annually from non-managerial employees responsible for direct patient care and who are potentially exposed to contaminated sharps, in the identification, evaluation, and selection of effective engineering (i.e., safer medical devices) and work practice controls.
- Documenting the consideration and implementation of safer medical devices during the annual review.
- Notifying EHS of any new or modified job titles, tasks, and procedures that affect occupational exposure to bloodborne pathogens.
- Properly managing regulated medical waste generated by Student Health Services.

4.7 The Director of Security is responsible for:
- Maintaining and forwarding copies of Incident Reports involving bloodborne pathogens exposures to Human Resources and EHS.
- Ensuring the Bloodborne Pathogens Post-Exposure Kit is available at every security post.

4.8 The Director of Facilities Management, is responsible for:
- Ensuring The New School’s facilities are maintained in a clean and sanitary manner.
- Ensuring staff follows decontamination procedures after contact with blood and OPIM.
- Managing regulated waste (outside of Student Health Services’ facility).
- Maintaining adequate supplies of EHS-approved disinfectants, bloodborne pathogens spill kits, and other necessary supplies.

4.9 Director of Housing is responsible for:
- Ensuring housing staff and dormitory residents are informed of and comply with best management practices for regulated medical waste.

5. Exposure Determination

5.1 The New School must identify all workers exposed to blood and OPIM without regard to PPE, review all processes and procedures with exposure potential, and re-evaluate when there are changes to the processes and procedures.

5.2 Job titles in which all employees have occupational exposure:

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Porter</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Handyman</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Foreman</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Assistant Superintendent/Building Supervisor</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Superintendent/Building Supervisor</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Assistant Director for EHS</td>
<td>Facilities Management</td>
</tr>
<tr>
<td>Director for Fire/Life Safety</td>
<td>Design &amp; Construction</td>
</tr>
<tr>
<td>Physicians</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Nurse Midwives</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Registered Nurses</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Director of Medical Services</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Assistant VP of Student Health &amp; Support Services</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Assistant Director of Health Education Services</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Health Educator</td>
<td>Student Health Services</td>
</tr>
<tr>
<td>Medical Services Student Worker</td>
<td>Student Health Services</td>
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<td>Security Officer</td>
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<td>Director of Security</td>
<td>Security</td>
</tr>
<tr>
<td>Group Fitness Coordinator</td>
<td>Student Services</td>
</tr>
<tr>
<td>Group Fitness Trainee</td>
<td>Student Services</td>
</tr>
<tr>
<td>Special Events Coordinator</td>
<td>Student Services</td>
</tr>
<tr>
<td>Marketing Coordinator</td>
<td>Student Services</td>
</tr>
<tr>
<td>Director of Recreation</td>
<td>Student Services</td>
</tr>
<tr>
<td>Outdoor Recreation Director</td>
<td>Student Services</td>
</tr>
<tr>
<td>Supervisor</td>
<td>Student Services</td>
</tr>
</tbody>
</table>

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5.3 The following is a list of job titles in which some employees have occupational exposure and the tasks/procedures in which occupational exposure may occur:

<table>
<thead>
<tr>
<th>Job Title/Category</th>
<th>Department/School</th>
<th>Procedures/Tasks with Potential for Exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shop Manager</td>
<td>Parsons (shops)</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Technician</td>
<td>Parsons (shops)</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Student monitor</td>
<td>Parsons (shops)</td>
<td>Emergency response</td>
</tr>
<tr>
<td>ARC, SCE &amp; SDS Admin. Staff</td>
<td>Parsons (shops)</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Director of Student Development</td>
<td>Office of Student Development &amp; Activities</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Assistant Director of Student Development</td>
<td>Office of Student Development &amp; Activities</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Assistant Director of HEOP/OIS</td>
<td>Office of Student Development &amp; Activities</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Coordinator</td>
<td>Office of Student Development &amp; Activities</td>
<td>Emergency response</td>
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<td>Office support staff</td>
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<td>Parsons</td>
<td>Emergency response</td>
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<td>Emergency response</td>
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<td>Head Resident</td>
<td>Student Housing &amp; Residence Life</td>
<td>Emergency response</td>
</tr>
<tr>
<td>Medical Services Office Assistants</td>
<td>Student Health Services</td>
<td>Handling of laboratory specimen box</td>
</tr>
</tbody>
</table>

5.4 Supervisors must notify EHS, Facilities Management, of any job titles not listed above with reasonable risk of bloodborne pathogens exposure.

6. Methods of Exposure Control

6.1 Universal precautions
- Universal precautions must be used by employees at all times when handling blood, OPIM, or contaminated equipment or working surfaces.
- All body fluids must be considered potentially infectious materials if differentiation between body fluid types is difficult or impossible.

6.2 Engineering and work practice controls
- Engineering and work practice controls must be used to eliminate or minimize exposure to employees.
- Personal sharps containers are available from Student Health Services, Residence Hall staff, EHS, and every Security post.
- Wall-mounted sharps containers are located in designated bathrooms in each New School building. Refer to http://www.newsou.edu/ehs/waste-management/ for locations.
- Employees must wash their hands or flush their eyes with water as soon as feasible after contact with blood or OPIM.
- Employees must practice good hand hygiene by washing hands immediately after removing gloves or other PPE.
- If handwashing facilities are not readily accessible, employees must use antiseptic hand cleansers in conjunction with clean cloth/paper towel or antiseptic towelettes. Hands must then be washed with soap and water as soon as it is feasible.
- Contaminated needles or other contaminated sharps shall not be sheared, broken, or recapped or removed. If recapping is needed for a medical procedure, it must be done using a mechanical device or a one-handed technique.
- Eating, drinking, smoking, applying lip balm or cosmetics, or handling contact lenses are prohibited in areas where there is reasonable likelihood of occupational exposure.
- Food and drink shall not be kept/stored in areas where blood or OPIM are kept.

6.3 Personal Protective Equipment (PPE)
- PPE must be used if occupational exposure risk remains after implementation of engineering and work practice controls.
- Employees will be provided PPE for bloodborne pathogens at no charge.
- PPE must be used to prevent direct contact with blood and OPIM.
- Employees will be trained to use the PPE by their Supervisors in accordance with The New School’s PPE policy. EHS is available to provide assistance upon request.
- At minimum, employees will be provided with disposable gloves, and other PPE (e.g., surgical mask combined with eye protection, face shield, apron) whenever there is a risk of splash/spray/splatter/or droplets of blood or OPIM may be generated.
- PPE must be replaced when torn, punctured, or when their ability to function as a barrier is compromised.
6.4 Housekeeping

- Disposable clothing must be used during clean-up/decontamination of blood or OPIM and disposed of as regulated waste.
- Laundering service must be provided when reusable PPE is provided. Use of additional personal protective equipment will be in accordance with the PPE Policy.

7. Post-exposure Procedures

7.1 A bloodborne pathogens exposure involves any specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM.

7.2 Areas of the body exposed to bloodborne pathogens or OPIM must be immediately washed with soap and water. Eyes or mucous membranes must be flushed with copious amounts of running water.

7.3 The employee should notify his or her Supervisor immediately (i.e., during the work shift in which the exposure occurred) of the bloodborne pathogens exposure. Complete an Incident Report, available from a New School Security Officer.

7.4 The Supervisor must forward the completed Post-Exposure Incident Report and other applicable forms (Appendix B: Part A, B, C & D) to EHS, Facilities Management.

7.5 The completed Sharps Injury Log form (Appendix C) must also be completed if the exposure involves contaminated sharps.

7.6 Employees who experience a bloodborne pathogens exposure will be offered a confidential medical evaluation and treatment at no cost, and at a reasonable time and place. Note: Post-exposure procedures are also available to employees who incur a bloodborne pathogens exposure as a result of a Good Samaritan act.

7.6 Medical evaluation and treatment will be provided according to the current recommendations of the U.S. Public Health Service.

7.8 If the employee agrees to a medical evaluation, the Supervisor must refer the employee to The New School’s authorized licensed medical provider (Appendix B, Part D). The post-exposure medical evaluation includes:
- Laboratory tests by an accredited lab
- Medical evaluation
- Identifying and the source individual, if feasible
- Testing the exposed employee’s blood with his or her consent
- Post-exposure prophylaxis
- Counseling
- Evaluating reported illnesses

7.9 The healthcare provider will be given a copy of the Bloodborne Pathogens Standard, as well as the Employee Post-Exposure Incident Report, Evaluation of Exposure Incident, Source Individual’s Consent or Refusal for HIV, HBV, HBC Infectivity Testing. The documents include:
- A description of the employee’s duties as they relate to the exposure incident
- Documentation of the routes and circumstances of the exposure
- The results of the source individual’s blood testing, if available
- All medical records relevant to the appropriate treatment of the employee, including vaccination status.

7.10 The health care provider will provide a written medical opinion to EHS. EHS will provide a copy to the employee within 15 days of receipt of the report. The report will indicate the following as required by OSHA:
- If Hepatitis B vaccination was recommended and whether or not the exposed employee received the vaccine,
• The employee has been informed of the results of the medical evaluation and told of any medical conditions resulting from the exposure to blood which require further evaluation or treatment.

7.11 All medical records must remain confidential and require the exposed employee’s specific written consent for anyone to release the records.

7.12 Medical records are provided upon request of the employee or anyone having written consent of the employee within 15 working days. Such requests should be sent to The New School’s authorized medical provider.

8. Hepatitis B Vaccination
8.1 Hepatitis B vaccinations will be made available at no cost to employees with occupational exposure within 10 working days of initial assignment.
8.2 Employees have the right to decline the vaccination but may choose to receive the vaccination at a later date, upon request to his/her Supervisor.
8.3 The Supervisor must inform EHS of employees who choose to receive the Hepatitis B vaccination and ensure the employee is available to receive the vaccine. The New School must compensate employee for his/her time during all activities associated with receiving the vaccine, even during the employee’s regular work-hours.
8.4 Employees who choose not to receive the Hepatitis B vaccination must complete the Hepatitis B vaccination waiver form (Appendix A).

9. Label and Signs
9.1 Warning signs and labels must be posted to communicate bloodborne pathogen hazards.
9.2 Warning signs and labels will be affixed to:
   • Refrigerators or other containers used to store blood or other potentially infectious materials.
   • Restricted areas
9.3 Red bags or containers bearing the biohazard warning label will be used for storing blood and other potentially infectious materials. The biohazard warning label has a red background with black ink and includes the symbol for biohazards. See below for an example:

![Biohazard Warning](image)

9.4 Red, leak-proof, puncture resistant sharps containers will be used to store needles and other sharps.

10. Regulated Waste
10.1 Regulated waste must be placed in designated red bags and sharps containers.
10.2 Red bags or sharps containers must only be filled up to 80% of their capacity as a precaution.
10.3 Disposal of regulated waste must be coordinated with Facilities Management. Student Health Services will coordinate pick-up of its regulated waste generated directly with the authorized waste contractor.
10.4 Full personal sharps containers should be returned to Student Health Services, Residence Hall staff, or EHS for disposal.
10.5 Sharps may also be discarded in wall-mounted sharps containers in designated restrooms in each New School building.

11. Information and Training
11.1 All employees with occupational exposure to bloodborne pathogens must attend training at initial assignment and annually thereafter. Supervisors must coordinate with EHS to arrange for the training.
11.2 Training includes the following information:
   • An overview of the OSHA Bloodborne Pathogens standard
   • A description of The New School’s bloodborne pathogens exposure control plan and how to obtain a copy
   • Epidemiology and symptoms of bloodborne diseases
   • Modes of transmission of bloodborne pathogens
   • How to recognize tasks that involve blood or OPIM
- Hepatitis B vaccine
- Use and limitations of exposure control methods: engineering controls, work practices, PPE
- Post-exposure procedures and benefits

12. Record keeping
12.1 EHS will maintain training records, vaccine waiver forms, employee post-exposure incident report, evaluation of exposure incident, consent forms, Health Care Professional’s Written Opinion For Post-Exposure Evaluation, and the sharps injury log. These records will be kept in the Facilities Management office.
12.2 The New School’s authorized licensed medical provider will maintain medical records for the duration of the employees’ employment plus 30 years as required by OSHA.

13. Program Evaluation
13.1 EHS will evaluate The New School’s Bloodborne Pathogens Exposure Control Plan annually and update it when necessary.
13.2 The Director of Medical Services, Student Health Services, will evaluate Medical Services’ Bloodborne Pathogens Exposure Control Plan with EHS annually and solicit input from non-managerial employees responsible for direct patient care in the identification, evaluation, and selection of engineering controls. Student Health Services will revise their Bloodborne Pathogens Exposure Plan to reflect technological changes (e.g., safer medical devices) as needed and maintain records of the annual review.

14. Program Availability

References
OSHA Bloodborne Pathogens Standard (29 CRF 1910.1030)

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Respiratory Protection Policy
1. Purpose
The purpose of this policy is:
- To establish a respiratory protection program to protect employees exposed to hazardous levels of air contaminants.

2. Scope
The respiratory protection policy applies to all employees who wear respirators to prevent overexposures to harmful dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors. Respirators are to be used when engineering controls (e.g., ventilation) are not feasible or while they are being instituted.

This policy applies to:
- All employees of the University, including but not limited to full-time and part-time faculty, staff, and technicians; temporary/seasonal employees; and student employees
- Interns and volunteers
- Contractors and vendors (these individuals must provide their own respiratory protection)

3. Responsibilities
3.1 Responsible Individual
The highest-ranking individual serving in a management capacity within each Program, Department, School or Division (e.g., Directors (program or facilities) and School or Divisional Deans) is the Responsible Individual. Responsible Individuals have the following responsibilities:
- Allocating necessary funds to support compliance with the respiratory protection program.
- Enforcing compliance with the respiratory protection program and, where necessary, taking disciplinary actions in accordance with Institutional Policies & Procedures Manual as well as the relevant handbooks and collective bargaining agreements.
3.2 Supervisors are responsible for:
- Identifying potential airborne contaminants in each location they supervise and requesting a hazard evaluation by Environmental Health & Safety (EHS), Facilities Management, to determine the need for respirator use.
- Notifying EHS of changes in the work area(s) and/or its processes/procedures that may introduce new or increased levels of airborne contaminants.
- Purchasing appropriate respirators identified by EHS for employees.
- Monitoring and enforcing compliance with the policy including, but not limited to: inspection, use, proper maintenance, storage, disposal, and replacement of issued respirators as needed.
- Scheduling initial and annual respiratory protection training for employees with EHS.
- Coordinating with EHS for mandatory medical evaluation and fit-testing for employees. Note: Fit-testing is not required for voluntary respiratory use.
- Ensuring engineering controls that prevent or minimize airborne contaminants are maintained and notifying EHS of issues in a timely manner.

3.3 All Employees are responsible for:
- Complying with the policy: adhering to acceptable work practices; attending training; completing medical evaluation; completing fit-testing (if required); using, inspecting, properly maintaining, storing, and disposing of respirators.
- Notifying their supervisor of issues pertaining to the respirator such as improper fit, respirator defects, or medical conditions that may affect respirator use.

3.6 Environmental Health and Safety (EHS), Facilities Management is responsible for:
- Conducting exposure evaluations and selecting appropriate respirators.
- Providing training, fit-testing, and coordinating medical evaluations.
- Maintaining required records, periodically reviewing effectiveness of the policy, and updating it as needed.

3.7 Labor Relations, General Counsel’s Office is responsible for:
- Reviewing and responding to communications from labor unions, health care providers, or employees raising personal medical issues/concerns regarding issues related to this policy and/or its application to an employee or employees.

4. Exposure Assessment
4.1 An exposure assessment is required to evaluate respiratory hazards and the necessity of respirator use. The Exposure Assessment Form (Appendix A) must be completed by the Supervisor and submitted to EHS.
4.2 Employees must wear respirators if the exposure assessment determines that the employees’ exposure exceed established occupational exposure limits (OELs).
4.3 Employees whose exposures do not exceed OELs may wear respirators voluntarily provided that respirator use will not in itself create a hazard.

5. Respirator Selection
5.1 EHS will select the appropriate NIOSH-certified respirator based on the exposure assessment.

6. Medical Evaluation
6.1 Employees who wear elastomeric (reusable) respirators either on a mandatory or voluntary basis, or disposable respirators on a mandatory basis, must be medically evaluated at no cost to the employees to determine their ability to use the respirator safely.
6.2 The medical evaluation consists of completing the OSHA Respirator Medical Questionnaire (Appendix B) and possibly a medical examination if deemed necessary by the University’s authorized physician or other licensed health care professional (PLHCP).
6.3 The medical evaluation must be conducted before the employee begins wearing the respirator, and must be repeated if any of the following conditions occur:
   - The employee reports medical symptoms related to the ability to wear a respirator,
   - Changes in workplace conditions may result in a substantial increase in the physiological burden placed on the employee,
   - If the PLHCP or EHS deems re-evaluation is necessary
6.4 All medical information will be kept strictly confidential by the PLHCP. However, the PLHCP must inform EHS if the employee is medically cleared or approved to wear the issued respirator.
6.5 Employees who do not pass medical clearance must not perform tasks that require respirator use until an alternative option is approved and provided.

7. Fit-Testing
7.1 Fit-testing must be completed after the employee has been medically cleared and before the employee is required to use a negative or positive pressure tight-fitting respirator to ensure a tight seal can be maintained between the facepiece and the employee’s face.
7.2 Fit-testing must be repeated annually, when a different respirator model and/or size is used, and when there are changes in the user’s physical conditions that could affect the tightness of the respirator’s fit, including but not limited to: obvious weight gain/loss, facial scarring, cosmetic surgery or dental changes.
7.3 Employees cannot be fit-tested if there is facial hair that comes between the sealing surface of the respirator and the face or that interferes with valve function.
7.4 If the employee cannot pass the fit-test, retesting must be done with a different respirator model and/or size.

8. Training
8.1 Supervisors must schedule training with EHS to ensure employees receive training for the respiratory hazards they are at risk of being exposed to and the specific respirator to be used.
8.2 Employees must be trained on the proper use of the respirator (including how to put it on and take it off), proper maintenance, limitations of the respirator, and respiratory hazards to which the employee may be potentially exposed to during routine and emergency situations.
8.3 Training must be conducted before the employee begins wearing the respirator and annually thereafter. Instances that warrant additional training include:
   • Changes in the workplace or specific task that requires respirator use which may affect worker exposure.
   • Change in the type of respirator, rendering previous training obsolete.
   • Inadequacies in an employee’s knowledge or use of assigned respirator indicating the employee has not been trained properly.

9. Respirator Use and Care
9.1 Respirators must be worn when employee exposure to airborne contaminants exceed established occupational exposure limits (OELs), as confirmed by EHS.
9.2 Respirators may be worn voluntarily when OELs are not exceeded. Note: Employees who use respirators on a voluntarily basis must be provided a copy of Voluntary Use Information & Acknowledgement (Appendix C).
9.3 Employees must inspect their issued respirators for defects prior to putting them on each time.
9.4 Employees who wear tight-fitting respirators must perform a seal check, per the manufacturer’s instructions, to ensure a tight fit each time the respirators are worn.
9.5 Employees must wear the issued respirator properly, by following the manufacturer’s instructions, when performing tasks that warrant its use.
9.5 Employees must not perform a task when the required respirator or appropriate cartridge/canister/filter is unavailable nor use a damaged or improperly fitting respirator.
9.6 Employees are responsible for properly storing, maintaining, and cleaning their issued respirators in accordance with the manufacturer’s instructions.

10. Canister/Cartridge Change Schedule
10.1 Respirator canisters/cartridges must be replaced per the manufacturer’s end-of-service-life indicator (ESLI), if any, or based on a consultation with EHS to determine the appropriate change-out schedule.
    10.2 Employees must not rely on odor thresholds or other warning properties (e.g., taste, respiratory irritation, etc.) as the basis for determining when the canisters/cartridges must be replaced.

11. Program Evaluation
11.1 EHS will periodically evaluate the respiratory protection policy and make changes as necessary.

Appendices
Lockout/Tagout Policy

1. Purpose
   The lockout/tagout (LOTO) policy is designed to prevent injuries and stop accidental release of potentially hazardous energy (e.g., electrical, mechanical, hydraulic, pneumatic, chemical, thermal) during servicing or maintenance on machinery and equipment through the use of energy control procedures.

   The purpose of this policy is:
   • To establish a program to protect employees from unexpected energization, startup, or release of stored energy.
   • To comply with the Occupational Health and Safety Administration (OSHA) Standard for the Control of Hazardous Energy (lockout/tagout).

2. Scope
   The lockout/tagout policy applies to all employees and contractors who work on or near machinery and equipment during servicing or maintenance. This policy does not apply to:
   • Plug and cord electrical equipment for which hazards can be controlled by unplugging the equipment from the energy source and if the plug is exclusively under the control of the employee performing the servicing or maintenance.
   • Hot tap operations involving transmission and distribution systems for gas, steam, water, or petroleum products when they are performed on pressurized pipelines, provided it can be demonstrated that continuity of service is essential, shutdown of the system is impractical, and documented procedures are followed and special equipment is used to provide proven, effective protection for authorized employees.

3. Definitions
   3.1 Affected employee: an employee whose work operation is or may be in an area where energy control procedures may be utilized, but does not perform servicing or maintenance on machines or equipment that would require LOTO.
   3.2 Authorized employee: a person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment.
   3.3 Disconnecting means: the switch or device used to disconnect the circuit from the power source.
   3.4 Energy isolating device: a mechanical device that physically prevents the transmission or release of energy (e.g., a disconnect switch, manually operated circuit breaker, line valve, etc.). Note: Push buttons, selector switches, and other control circuit type devices are not energy isolating devices.

4. Responsibilities
   4.1 Responsible Individual
      The highest-ranking individual serving in a management capacity within each Program, Department, School or Division (e.g., Directors (program or facilities) and School or Divisional Deans) is the Responsible Individual. Responsible Individuals have the following responsibilities:
      • Allocating necessary funds to support compliance with the LOTO program.
      • Enforcing compliance with the LOTO program and, where necessary, taking disciplinary actions in accordance with Institutional Policies & Procedures Manual as well as the relevant handbooks and collective bargaining agreements.

   4.2 Supervisors are responsible for:
      • Informing Environmental Health and Safety, Facilities Management, of changes in job assignments, machines, equipment or processes that present a new hazard, or when there is a change in the energy control procedures.
      • Establishing written energy control procedures to be utilized by their authorized employees during servicing and repair of specific machinery and equipment.
• Purchasing appropriate lockout/tagout devices where necessary for equipment owned or operated by their department.
• Monitoring and enforcing compliance with the policy including, but not limited to: training, periodic inspection, selection and use of LOTO devices by affected and authorized employees that they supervise.

4.3 Authorized employees are responsible for:
• Complying with the policy: adhering to energy control procedures, attending training, properly using LOTO devices, and reporting safety concerns to their Supervisor.

4.4 Affected employees are responsible for:
• Complying with the policy: adhering to energy control procedures, attending training, and reporting safety concerns to their Supervisor.

4.5 Director of Facilities Management is responsible for:
• Ensuring maintenance staff and contractors hired by Facilities Management comply with LOTO procedures.

4.6 Environmental Health and Safety (EHS), Facilities Management, is responsible for:
• Conducting periodic inspections of the energy control procedures with supervisors of authorized employees.
• Providing technical support and training as needed.
• Maintaining centralized training records for training and periodic inspection of energy control procedures.
• Periodically reviewing effectiveness of the policy and updating it as needed.

4.7 Project Managers are responsible for:
• Ensuring contractors are informed of and comply with the requirements of this policy and provide information on their specific energy control procedures.

4.8 Contractors are responsible for:
• Complying with all LOTO requirements.
• Ensuring all their employees performing work on The New School's campus have been suitably trained on both LOTO procedures specific to the contractor and The New School.

4.9 Labor Relations, General Counsel's Office is responsible for:
• Reviewing and responding to communications from labor unions, or from health care providers or employees raising personal medical issues/concerns regarding issues related to this policy and/or its application to an employee or employees.

5. Energy control procedures
5.1 Written energy control procedures
• Supervisors of authorized and affected employees must establish and implement a written energy control procedures for a particular machine or equipment during servicing or repair.
• The procedures must clearly and specifically outline the scope, purpose, authorization, rules, and techniques to be utilized for the control of hazardous energy, and the means to enforce compliance including, but not limited to following:
  o A specific statement of the intended use of the procedure,
  o Specific procedural steps for shutting down, isolating, blocking and securing machines or equipment to control hazardous energy,
  o Specific procedural steps for the placement, removal, and transfer of LOTO devices and the responsibility for them, and
  o Specific requirements for testing a machine or equipment to determine and verify the effectiveness of LOTO devices and other energy control measures.
• Written procedures for a particular machine or equipment are not required if all of the following conditions for this exception are met:
  o The machine or equipment has no potential for stored or residual energy or reaccumulation of stored energy after shut down which could endanger employees,
  o The machine or equipment has a single energy source which can be readily identified and isolated,
  o The isolation and locking out of the single energy source will completely de-energize and deactivate the machine or equipment,
  o The machine or equipment is isolated from the single energy source and locked out during servicing or maintenance.
  o A single lockout device will achieve a locked-out condition,
o The lockout device is under the exclusive control of the authorized employee performing the servicing and maintenance,
o The servicing and maintenance does not create hazards for other employees, and
o The department using this exception has had no accidents involving the unexpected activation or reenergization of the machine or equipment during servicing or maintenance.

5.2 De-energization
- As a rule, all powered or energized electrical machinery and equipment should be de-energized or shut down before work is performed on or near them. Energized electrical parts of 50 volts or more must be isolated and de-energized due to increased risk of electrical shock or other injuries resulting from direct or indirect electrical contact.
- The circuits and equipment to be worked on must be disconnected from all energy sources.
- Control circuit devices such as push buttons, selector switches, and interlocks must not be used as the sole means of de-energizing circuits or equipment.

5.3 Lockout/Tagout (LOTO)
- LOTO is to be used if machine guards or other safety devices must be by-passed during the work, or if the authorized employee must place any part of his or her body into the point of operation or into an area on the machine or equipment where work is performed.
- An authorized employee must securely attach the LOTO device directly on each energy-isolating device on the machinery or equipment on which work is to be performed in a manner that will hold it in a “safe” or “off” position. The lock is attached to prevent others from operating the disconnecting means unless they resort to undue force or the use of tools. The tag contains a statement prohibiting unauthorized operation of the disconnecting means and removal of the tag. Note: Both a lock and tag must be used together; a tagout device is acceptable only when the machine or equipment cannot be locked out. The tag must be attached securely on the energy-isolating device or visibly posted nearby to anyone who attempts to operate the machine or equipment.
- Group lockout/tagout devices and procedures that afford the authorized employees the same level of protection as individual LOTO devices and procedures must be used when several authorized employees (e.g., crew, department, etc.) are performing servicing and/or maintenance:
  o The primary responsibility of group LOTO is vested in an authorized employee (e.g., the crew’s Supervisor) for a set number of employees working under the protection of a group LOTO device.
  o The authorized employee with primary responsibility for the employees using the group LOTO device must ascertain the exposure status of each employee with regard to LOTO of the machine or equipment.
  o Each authorized employee must affix a personal LOTO device to the group LOTO device when he/she begins work and must remove the device when he/she stops working on the machine or equipment being serviced/maintained.
  o When multiple crews or groups are involved, assignment of overall job-associated LOTO control responsibility must be delegated to an authorized employee designated to coordinate affected groups and ensure continuity of protection.
- The Supervisor of an authorized employee(s) or an authorized employee designated by the Supervisor must ensure the continuity of LOTO protection during shift or personnel changes, including transfer and/or application of LOTO device between employees starting or ending their shifts.
- Electric parts that have been de-energized but have not been locked and tagged out must be treated as energized parts.
- Interlocks for electric equipment may not be used as substitutes for LOTO.
- Elevators are to be de-energized at the main electrical source disconnect and locked out/tagged out before entry into elevator pits. Note: The pit stop switch is not an acceptable method to lockout (isolate) the elevator as it is not the main electrical disconnect.

5.4 Verification of de-energized condition
- Once the machine or equipment has been de-energized and locked out/tagged out, the qualified person performing the work must verify de-energization by (1) using test equipment (i.e., appropriately rated voltage detector) and (2) using the equipment’s operational controls or otherwise verify the equipment cannot be restarted.

5.5 Release from lockout/tagout
- The work area must be inspected to ensure nonessential materials have been removed and that all the machine and equipment components are operationally intact.
- Ensure all employees are safely positioned and clear of the area.
• Removal of LOTO devices:
  o The employee who applied the LOTO device or an employee under his/her direct supervision must remove it from the energy-isolating device.
  o Other authorized employees may remove the LOTO device when the employee who applied it is unavailable and only if all of the following conditions are met: he/she has been verified to be absent from the facility and reasonable efforts were made to contact the employee to inform him/her that the LOTO device has been removed before he/she resumes work at that facility.
  o If the LOTO device must be temporarily removed from the energy isolating device and the machine or equipment energized to test or position the machine, equipment, or any of its components, the following sequence of actions must be followed:
    A. Clear the machine or equipment of tools, materials, or other nonessential items and ensure the machine or equipment is operationally intact.
    B. Remove employees from the machine or equipment area.
    C. Remove the LOTO device as described in the section above.
    D. Energize and proceed with testing and positioning.
    E. De-energize all systems and reapply energy control measures to continue servicing and/or maintenance.
  o Notify all affected employees that lockout/tagout devices have been removed before the equipment is re-energized.

5.6 Re-energization
• Before circuits or equipment are re-energized, even temporarily, the qualified person must conduct tests and visual inspections to verify that all devices (e.g., tools, grounds, etc.) have been removed so they can be safely energized.
• Employees exposed to the hazards associated with re-energizing the circuit or equipment must be warned to stay clear of these circuits and equipment.

6. Materials and hardware
6.1 Lockout/tagout devices must be standardized (either of the same color, size, or shape), and tagout devices must have standardized print and format.
6.2 Lockout/tagout devices must be durable to withstand the environment to which they will be exposed and for the maximum period of time that exposure is expected.
  • Lockout devices must be substantial enough to prevent removal without the use of excessive force or techniques like use of cutting tools.
  • Tagout devices must be substantial enough to prevent inadvertent or accidental removal.
6.3 Tagout devices must be non-reusable, attachable by hand, self-locking, non-releasable with an unlocking strength of at least 50 pounds, and having the general design and basic characteristics at least equivalent to a single nylon cable tie.
6.4 Lockout/tagout devices must be able to indicate the identity of the employee applying the device and warn against hazardous conditions if the machine or equipment is energized and must include warnings such as: Do Not Start. Do Not Open. Do Not Close. Do Not Energize. Do Not Operate.

7. Periodic inspection
7.1 EHS and authorized employees who do not utilize the energy control procedure will conduct periodic inspections of the energy control procedure at least annually to ensure compliance.
7.2 The periodic inspection must be conducted to correct any deviations or inadequacies identified.
7.3 The periodic inspection must include a review between the person(s) conducting the inspection and each authorized employee, of that employee’s responsibilities under the energy control procedure being inspected.
7.4 EHS and the supervisors must certify that the periodic inspections have been performed using Appendix A.

8. Training
8.1 Supervisors must schedule training with EHS to ensure all authorized and affected employees receive training.
8.2 The training will ensure authorized employees understand the purpose and function of the energy control program, and acquire the knowledge and skills required for the safe application, usage, and removal of the energy controls.
8.3 The training for authorized employees will include:
  • Recognition of applicable hazard energy sources
  • Type and magnitude of energy available in the workplace
• Methods and means necessary for energy isolation and control
• Purpose and use of energy control procedure
• Limitations of tags when machines or equipment are incapable of being locked out

8.4 Affected employees whose work operations are or may be in an area where energy control procedures may be utilized must be instructed about the procedure and about the prohibitions relating to attempts to restart or re-energize machines or equipment that are locked out or tagged out.

8.5 Authorized and affected employees must be retrained whenever there is a change in their job assignments, a change in machines, equipment or processes that present a new hazard, or when there is a change in the energy control procedures.

9. Program Evaluation
9.1 EHS will periodically evaluate the policy and make changes as necessary.

Appendices
Appendix A - Periodic Inspection Certification
Appendix B - Contractor Acknowledgement

References
29 CFR 1910.147

For further information and copies of appendices, please visit http://www.newschool.edu/ehs/policies/.

Confined Space Entry Policy

1. Purpose
The purpose of this policy is to protect employees and contractors who are required to perform duties in confined spaces from serious injury or death due to hazards inherent in such spaces. This policy includes provisions that meet the requirements of the Occupational Safety and Health Administration’s (OSHA) Permit-Required Confined Spaces (PRCS) standard.

2. Scope
The confined space policy applies to authorized employees of the University and contractors required to enter confined spaces to perform their duties. Confined spaces may be categorized as non-permit confined spaces or permit-required confined space (PRCS). PRCS have serious hazards that require safety precautions for entry. Proper identification of confined spaces and adherence to their corresponding entry procedures are key to the success of this program.

An inventory of known confined spaces is maintained by the Facilities Management Department. Most, but not all, of the PRCS’s on campus fall into these categories: rooftop gravity tanks, fuel tanks & their vaults, escalator pits, elevator pits and shafts, and sewer pump pits. University employees are prohibited from entering gravity tanks, fuel tanks, escalator pits, elevator pits and shafts, and sewer pump pits. It is the University’s policy to employ Contractors for any work that must be performed in such PRCS's.

3. Definitions
3.1 Alternate entry: A confined space entry approach that uses an “intermediate” level of precautions between a non-permit confined space entry and full permit-required confined space entry. It may only be used for confined spaces where the only serious hazard is atmospheric and that mechanical ventilation and air monitoring can control the hazard.

3.2 Attendant: A person stationed outside one or more permit-required confined spaces who monitors the authorized entrants and performs all attendant’s duties assigned as required by OSHA’s Permit-Required Confined Space Standard.

3.3 Authorized employees: employees of the departments of Facilities Management and Design & Construction who have received confined space training and are required to enter confined spaces to perform inspections, preventive maintenance, and repairs.

3.4 Confined space: A space that meets ALL of the following criteria: is large enough for the body to enter, is not designed for continuous human occupancy, and has limited means of entry/egress (e.g., entry through a hatch, ladder, or similar methods without regard to the number of such entrances or exits).
3.5 Control: implementation of precautions to reduce, rather than eliminate, the health and safety risk associated with serious hazards. Examples include personal protective equipment (PPE), ventilation, and fall protection harness and lanyard.

3.6 Eliminate: removal of serious hazards in confined spaces using engineering controls (such as lockout/tagout), removal of hazardous materials or substitution with less hazardous materials.

3.7 Engulfment: The surrounding and effective capture of a person by a liquid or flowable solid substance that can be aspirated to cause death by filling or plugging the respiratory system or that can exert enough force on the body to cause death by strangulation, constriction, or crushing.

3.8 Entrant: A person who performs entry into a confined space.

3.9 Entry: When any part of the entrant’s body breaks the plane or passes through an opening into a confined space.

3.10 Hazardous atmosphere: An atmosphere that may expose employees to the risk of death, incapacitation, impairment of ability to escape unaided from a permit space, injury, or acute illness due to one or more of the following:
- Flammable gas, vapor, or mist in excess of 10% of its Lower Flammable Limit (LFL)
- Airborne combustible dust concentration that meets or exceeds it’s LFL
- Atmospheric oxygen concentration below 19.5% or above 23.5%
- Atmospheric concentration of any substance that may exceed an OSHA published dose or permissible exposure limit (PEL)
- Any other atmospheric condition that is immediately dangerous to life or health (IDLH)

3.11 Non-permit confined space: A confined space where all serious hazards have been eliminated.

3.12 Permit-required confined space (PRCS): A confined space that has 1 or more of the following properties:
- Contains or has the potential to contain a hazardous atmosphere
- Contains a material that has the potential for engulfing an entrant
- Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section
- Contains any other recognized serious safety or health hazard

3.13 Serious hazards: hazards in confined spaces that have the ability to incapacitate entrants and prevent their ability to self-rescue. Examples include oxygen concentrations below 19.5%, toxic exposures that are high enough to incapacitate or disorient entrants, flammable vapors, fall hazards >6 feet, dangerous internal configuration, engulfment, and similar hazards.

4. Responsibilities

4.1 Responsible Individual

The highest-ranking individual serving in a management capacity within each Program, Department, School or Division is the Responsible Individual. Responsible Individuals have the following responsibilities:
- Enforcing compliance with the Confined Space Entry program and taking disciplinary actions in accordance with collective bargaining agreement procedures, if any.
- Ensuring all permit-required confined spaces are identified and included in this program.

4.2 Supervisors are responsible for:
- Coordinating with the Assistant Director for Environmental Health & Safety (EHS), Facilities Management, to ensure employees attend confined space training.
- Enforcing compliance with safe work procedures or guidelines related to confined space entry.

4.3 Employees are responsible for:
- Complying with the policy: attending training and following required procedures for confined space entry.
- Notifying their Supervisor of safety issues pertaining to confined spaces.

4.4 The Assistant Director for Environmental Health and Safety (EHS), Facilities Management, is responsible for:
- Implementing the Confined Space Entry policy.
- Reviewing the policy annually and updating it as needed.
- Providing training, technical assistance, and clarification of the policy.
- Evaluating confined spaces and maintaining the confined space inventory.

4.5 The Project Manager is a University employee who directs contractor activities. The Project Manager is responsible for:
- Informing the Contractor of the University’s Confined Space Entry policy, any PRCS in which entry must be performed, the PRCS’s identified hazards, and any precautions that will be taken by the University employees in
the area of the PRCS. Appendix A (Contractor Acknowledgement) must be completed by the Contractor and submitted to EHS.

- Coordinating activities for preparation of PRCS entry by the Contractor and to prevent hazards to University employees working near the PRCS from the activities of the contractor, and vice versa.
- Ensuring the Contractor complies with the policy.
- Forwarding the original signed permit to EHS upon completion of the work or expiration of the permit, whichever comes first.

4.6 Contractors are responsible for:

- Developing their own health & safety plans compliant with applicable OSHA standards and ensuring their employees who enter confined spaces complies with this policy, at minimum.
- Arriving at The New School work sites with all necessary confined space entry training, equipment, and a full understanding of their responsibilities as Entrants, Attendants, and/or Entry Supervisors.

4.7 Labor Relations, General Counsel's Office is responsible for:

- Reviewing letters from labor unions or healthcare providers, if any, regarding issues involving confined space entry.

5. Confined Space Inventory

5.1 The Facilities Management and Design and Construction Departments must report all known and suspected confined spaces to EHS for evaluation and inclusion in the confined space inventory.

5.2 The inventory includes the following information: location, type of space, if a permit is required, known hazard(s), and if alternate entry can be used.

5.3 Permit-required confined spaces are labeled with the appropriate sign bearing the following language or its equivalent at minimum: **DANGER – CONFINED SPACE – AUTHORIZED PERSONNEL ONLY.** Note: Facilities Management and Design and Construction must notify the University’s authorized contractors in writing of PRCSs that are not labeled, such as elevator and escalator pits.

6. Reclassification of Confined Spaces

6.1 A confined space may be reclassified if any of the criteria that defines it as a non-permit confined space or PRCS is changed. The Confined Space Decision Flow Chart (Appendix B) can be used to determine if reclassification is possible.

6.2 A PRCS cannot be reclassified as a non-permit confined space if the hazards cannot be eliminated or controlled. In such cases, full PRCS entry procedures must be followed.

6.3 A PRCS can be reclassified as a non-permit confined space if serious hazard(s) can be **eliminated** prior to entry using lockout/tagout, guardrails, installing stairs or a ramp into a pit, or similar precautions. Note: Ventilation and personal protective equipment (PPE) do not eliminate hazards.

6.4 Non-permit spaces must be reclassified as permit spaces when a new serious hazard is introduced into the space (e.g., welding, flooding, use of chemical, etc.).

7. Training

7.1 All employees who must enter and/or do work in PRCS must receive training before entering a permit-required confined space or using the alternate entry approach to confined spaces.

7.2 Training must be repeated when confined space duties change, when a change in permit space operations introduce a new hazard about which the employee was not previously trained, and when there are deviations from or inadequacies in knowledge of the required procedures.

7.3 Training includes the following information:

- An overview of the OSHA Permit-Required Confined Space standard
- How to identify, evaluate, and reclassify confined spaces
- Procedures for safe entry of confined spaces
- Location of the confined spaces on campus
8. Entry Permit
8.1 A confined space entry permit (Appendix C) must be completed to document proper classification and applicable safety procedures for all permit-required confined spaces prior to entry.
8.2 The entry team’s supervisor/leader, all entrants, and the University’s authorized representative must sign the permit. A copy of the completed permit must be sent to EHS.
8.3 The permit must be posted conspicuously near the entrance to the confined space.
8.4 The permit is valid for only 1 work shift of the individual(s) entering the PRCS, or until completion of the work, whichever comes first.
8.5 The permit is rendered invalid if the space is reclassified or new hazards (not previously documented in the original permit) are introduced into or adjacent to the confined space. All work in the confined space must immediately stop and all entrants evacuated from the space. Work may resume only upon completion of a new permit.

9. Atmospheric Testing
9.1 Before an employee enters a permit required confined space, the internal atmosphere will be tested, with a calibrated, direct-reading instrument to determine if acceptable entry conditions exist. Testing will be for the following conditions, in the order given:
- Oxygen content - 19.5% - 23.0%;
- Flammable gases and vapors - <10% LEL
- Toxic air contaminants:
  - Carbon monoxide (CO) – 35 ppm
  - Hydrogen Sulfide (H2S) – 10 ppm
- Volatile Organic Compounds (VOCs) – Action or response level to be identified on the permit depending on the type of VOCs present. Consult with EHS when determining an acceptable action level.
- Other toxic hazards will be specified on the Confined Space Entry Permit

10. Confined Space Entry Procedures
10.1 Non-permit confined spaces:
- Non-permit confined space procedures may be used when the presence of a confined space is confirmed and there is a possibility that it may be designated as a non-permit confined space because serious hazards are not present or have been eliminated.
- Only persons with confined space entry training may designate a confined space as a non-permit space in consultation with EHS.
- If entry is required to determine if hazards are present, the space must be treated as PRCS until it can be determined that it meets the definition of a non-permit space.
- The attendant and rescue team are not required when using non-permit entry procedures.
- New School employees may enter non-permit confined spaces to perform inspections, preventive maintenance, and repairs. Where feasible, the entrances to these spaces may also be labeled with a confined space sign to serve as a reminder to the entrant of the need to verify the absence of hazards prior to entry.
- If hazards arise in a non-permit space, entrants must evacuate the space immediately and EHS notified. The space must then be re-evaluated to determine if the space must be reclassified as a PRCS.
- Once the confined space is successfully designated as a non-permit space, persons who subsequently enter the confined space do not require confined space training.
- Any changes to the scope of work or work methods that may increase hazards will void the prior Non-Permit Confined Space designation.
10.2 Permit-Required Confined Spaces (PRCS):
- PRCS entry procedures are required for entry in a confined space where a serious hazard cannot be eliminated and alternate entry is not an option (i.e., a physical hazard remains).
- If entry in a PRCS is required to eliminate the hazard(s), PRCS entry procedures must be followed.
- New School employees are prohibited from entering a PRCS in which alternate entry procedures cannot be used. Such spaces generally fall into the following categories: roof gravity tank, fuel oil tank, elevator shafts/pits, escalator pits, and sewer ejector pits.
• As a rule, any work activity to be conducted in a PRCS must be contracted to a qualified firm and in compliance with OSHA’s PRCS requirements.
• Contractors are responsible for developing permit-required confined space procedures for their employees and providing all necessary equipment for entry. PRCS entry procedures must include the following elements as required by OSHA:
  o Written permit entry system
  o Training of entrant, attendant, and entry supervisor
  o Air monitoring by an entrant outside of the PRCS prior to entry
  o Provisions for rescue in the event of an emergency
  o Facilitation of rescue with a non-entry retrieval system (e.g., harness and cable attached to a mechanical hoist), where feasible
• A confined space entry permit must be completed by the Contractor and co-signed by an authorized University representative:
  o The Contractor’s Entry Supervisor will complete the University’s permit.
  o Entry must be coordinated by the University’s Project Manager supervising the Contractor’s activities.
  o Obtain available information regarding the scope of work and potential hazards that may be introduced into the confined space. Complete the “General Information & Hazard Review” section of the permit.
  o Complete the “Safety Checklist” section.
  o Complete the “Safety Equipment” section. Identify all safety equipment necessary; include any equipment not listed on the form.
  o Complete the “Air Monitoring” section. The Entry Supervisor will specify what equipment is to be used, the particular tests to be conducted, and the frequency of monitoring. The Entrant, Attendant, or Entry Supervisor will then write the pre-entry air monitoring results in the “Results” column. Additional air monitoring results will be recorded on the permit for any alarm condition or significant changes in air concentrations from the pre-entry air monitoring results.
  o Complete the “Entrant & Attendant Review and Pre-Entry Briefing” section of the permit. All Entrants and Attendants will print and sign this section ONLY if they have reviewed the permit and verified that all safety equipment and procedures required by the permit are in place and they have had a Pre-Entry Briefing by the Entry Supervisor;
  o Complete the “Entry Supervisor/Permit Authorization” section of the permit. The University’s authorized representative will sign the permit after all previous sections have been completed and a Pre-Entry Briefing has been conducted. Authorized representatives are as follows based on priority: EHS, the Fire/Life Safety Director, and the Director of Facilities Management or his designee.
  o Complete the “Permit Duration” section of the permit. Permits must be retained on site for the duration of the project. When the project is complete, the permit must be sent to EHS for record keeping and auditing purposes.
  o Permits may be issued for 1 shift only, after which they expire. A new permit is required for work in the PRCS to resume.
  o Permits are cancelled if any of the following occurs: a new hazard is encountered that was not previously identified in the “Potential Hazards” section of the permit OR any Entrant, Attendant, or Entry Supervisor initiates an evacuation. The reason for the evacuation must be investigated and a new permit issued that includes the changes (if any) to safety controls or procedures.

10.3 Alternate entry procedure
• This procedure may only be used for confined spaces where all serious physical hazards have been eliminated and the only potential serious hazards are atmospheric. Both mechanical ventilation and air monitoring equipment (i.e., gas meters) must then be used to effectively control atmospheric hazards.
• The attendant and rescue team are not required if the alternate entry approach can be used. However, all entrants must still have confined space entry training.
• New School employees may enter PRCS’s where the only serious hazard is atmospheric and forced mechanical ventilation and air monitoring can control the hazard.
• Forced ventilation is required during entry. Note: Natural ventilation may not be substituted for mechanical ventilation.
• Air monitoring must be conducted continuously throughout the entry.
• A confined space entry permit must be completed to document and authorize use of the alternate entry procedure:
Mark the box for “Alternate Entry Approach” in the “General Information & Hazard Review” section at the top of the Confined Space Entry Permit;

If no serious physical hazards are identified or they have been eliminated, then mark the box for “Physical Hazards Eliminated” in the “Potential Hazards” section of the permit;

Perform a careful hazard review of confined space entry activities by reviewing the list of “Potential Hazards” on the permit. Mark all hazards that cannot be eliminated. For alternate entry, physical hazards must be eliminated while atmospheric hazards must be adequately controlled using mechanical ventilation and air monitoring. If any physical hazards cannot be eliminated, then alternate entry may not be used.

Complete the remainder of the “General Information & Hazard Review” section on the permit;

If hazards arise (e.g., gas meter alarm goes off), entrants must evacuate the space immediately and notify EHS. The space must then be re-evaluated and hazards controlled (if atmospheric) or eliminated (if physical) before re-entry.

11. Recordkeeping

11.1 Expired and cancelled permits will be kept for 1 year by EHS.
11.2 Employee training records will be kept by EHS.

12. Program Evaluation

12.1 EHS will evaluate the Confined Space Entry policy annually and make changes as necessary.

Appendices

Appendix A - Contractor Acknowledgement
Appendix B - Confined Space Decision Flow Chart
Appendix C - Confined Space Entry Permit

References

OSHA Permit-Required Confined Spaces Standard (29 CRF 1910.146)

For further information and copies of appendices, please visit [http://www.newschool.edu/ehs/policies/](http://www.newschool.edu/ehs/policies/).

POLICY ON UNION RELATIONS

Collective Bargaining Policy

The University has recognized the following unions as the exclusive bargaining agents for employees within their respective bargaining units, and has entered into written collective bargaining agreements with each of them.

Local 1205  Local 802  Local 7902  Local 32B-J  Local One

The University has thereby accepted the principle of collective determination of wages, hours, and conditions of employment, to be exercised in accordance with the principles set forth in the bilateral, contractual agreements to which the University is a party. The University enters into these agreements in good faith, and it is its policy and intent to abide by the letter and the spirit of the agreements. Each supervisor/manager should become acquainted with the provisions of the agreements covering employees in his or her area of responsibility.

Interpretation of Contract Language

While each agreement outlines the principal terms negotiated between the University and the union, it may not cover every situation. From time to time, specific circumstances arise which require interpretation of the contract language. Such interpretation may lead to controversy, which in turn may lead to the need for resolution through the grievance procedure of
the agreement. However, mutually acceptable interpretation generally is agreed upon between the University and the representatives of the union. When such interpretations are reached which could affect the supervisor-employee relationship, supervisors will be advised.

This manual may be helpful in answering issues not specifically covered in the union agreements. Questions relating to union matters and interpretations of union agreements or contract language should be referred to Human Resources and/or the Office of the General Counsel.

Policy Against Discrimination Because of Union Activity
It is contrary to University policy for any representative of the management of the University to discriminate against any employee because he or she is a member of a union or active in a union. This policy applies to consideration for promotion and or transfer, assignment of job duties, discipline, and other related decisions that are the responsibility of the supervisor.

The Role of the Union Shop Steward
The union representative, or Shop Steward, is an elected spokesperson for a group of employees in a particular shop or work area. It is the representative's duty to look after the members' interests, both within the union, and in their collective bargaining relationship with the university. A sincere and well-intentioned Shop Steward who has the confidence of the employees can help to prevent misunderstandings and may often settle complaints before they become formal grievances. Wherever possible, a cooperative and reciprocal relationship should be established wherein the supervisor and the Shop Steward can work together to the benefit of both the employees and the university. The supervisor can help to promote this relationship by discussing anticipated changes and developments with the Shop Steward, giving courteous attention to the Shop Steward's views on matters affecting employees, and otherwise showing that the Shop Steward's position and role is recognized and respected. However, the supervisor should not permit the Shop Steward to share in managerial decisions or to substitute for the free and natural exchange between supervisor and employee which is essential to a good employment relationship.

Time Off for Union Business
In general, it is the policy of the University to accommodate requests for time off for union business to the extent that such requests are submitted in advance for approval and are reasonable and legitimate. Election to union office, however, does not entitle an employee to leave his or her work whenever he or she or the union considers it appropriate. For more information, please refer to the respective union contracts or contact the General Counsel's Office.

Conduct Expected of Union Officials
It has been agreed within the various unions that engaging in union activities during working hours, with or without pay, is conditioned on the university's understanding that the privilege will not be abused and that the union officials will conform to certain procedures and standards of behavior. The more important of these conditions follow:

1. Time off for union activities will be held to the minimum necessary for the purpose involved and will be taken at times that cause the least inconvenience to the work.
2. The Shop Steward or other official must obtain the consent of the supervisor before leaving his or her own work area.
3. Before entering another work area, the Shop Steward or other official must obtain the permission of the supervisor in charge of that area to enter the work area.
4. Grievance investigations will be conducted as quietly and privately as possible so as not to disrupt the work of other employees.
5. No meetings, investigations, discussions or other activities that involve a number of employees and would cause general disruption to the work of a particular group will be permitted during working hours.
6. The University does not attempt or desire to stipulate union attendance at grievance meetings. It does, however, reserve the right to refuse to pay excessive numbers of union officials or employees who attend such meetings.
7. Time spent on union business must in all cases be reasonable in light of both the work requirements of the department or laboratory and the obligations of the union officer or Shop Steward as an employee. Appropriate steps will be taken to limit union activities during working hours whenever they impair the individual's effectiveness as an employee.

Conduct Expected of Supervisors
A supervisor is expected to control the activities of his or her work area and the conduct of personnel for whom he or she is responsible in an effective and reasonable manner when union business is involved. The supervisor also is expected to respect the rights of the union and its representatives.
If a union representative requests time off for union business, a limited but reasonable period of time should be granted if the lost time will not be in conflict with the interest of the work. If the work flow will not permit the Shop Steward to be released at the time requested, then another time period should be arranged that is mutually convenient and practical.

A Shop Steward from another department may ask to visit the work area to conduct union business. He or she should be accommodated if reasonable adjustments to the work schedule can be made at the time requested. If the work may not be reasonably interrupted at the time requested then a more appropriate time should be arranged with the representative.

**Official Union Membership Meetings**

Official union membership meetings may be held on University property if rooms are properly arranged for in advance, and the meetings are conducted in an orderly manner. Such meetings may not be conducted during employees' normal working hours. Union members will not be permitted to leave their work area during normal work hours to attend official union membership meetings.

**Bulletin Boards**

All unions have been assigned bulletin boards for the exclusive use of the union officers to post notices of official union business only. These boards may not be used for any other purpose. Use of the official union bulletin board for political activity, campaigning for elections, or any other purpose is not permitted.

**POLICY ON USE OF UNIVERSITY EQUIPMENT & RECORD-KEEPING**

The telephone is a vital part of our business and we must keep telephone lines open for necessary business calls. Please refrain from using the telephones for personal calls, except in emergencies.

The same policy applies to computers, photocopiers, facsimile machines, postage meters and office supplies.

**Information Security Policy**

Information, and the supporting processes, systems, and networks used to process, store, retrieve, and transmit that information, play a vital role in the conduct and success of The New School’s academic, research, and public service mission. As more information is used and shared by students, faculty, and staff, both within and outside the university, a concerted effort must be made to protect that information. Confidentiality, integrity, and availability of information are essential to maintaining the university’s reputation, legal position, and ability to conduct its operations.

The senior leadership of the university is committed to:

- achieving high standards of university information security governance;
- treating information security as a critical business issue and creating a security-conscious environment;
- demonstrating to third parties that the university deals with information security in a proactive manner; and
- applying fundamental principles such as assuming ultimate responsibility for information security, implementing controls that are proportionate to risk, and achieving individual accountability.

This document defines the fundamental principles of the New School information security program, establishes categories of information and their protection requirements, and assigns roles and responsibilities for implementing and complying with those requirements.

For the full details of this policy, please refer to the complete Information Security Policy.

**Information Resource Acceptable Use Policy**

Freedom of expression and an open environment to pursue scholarly inquiry and for sharing of information are encouraged, supported, and protected at The New School. These values lie at the core of the university’s academic community, and extend to the use of its information resources. However, the use of university information resources, like the use of other university-provided resources and activities, is subject to the requirements of legal and ethical behavior. Thus, acceptable use of a computer, computer system, or network does not extend to whatever is technically possible. The university depends upon a spirit of mutual respect and cooperation to create and maintain an open community of responsible users.
This policy establishes the rules for ethical and acceptable use of information resources at The New School. These rules support the free exchange of ideas among members of the New School community and between the New School community and other communities, while recognizing the responsibilities and limitations of such exchange.

For the full details of this policy, please refer to the complete Information Resource Acceptable Use Policy

**Statement on the Responsibilities of Computer Users**

Maintaining the security of information, whether it belongs to the university, its business partners, its students, or its employees, is a primary business objective that requires the attention of all faculty, staff, and students. Accordingly, The New School has established the following policies:

- **The New School Information Security Policy** defines the fundamental principles of the New School information security program, establishes categories of information and their protection requirements, and assigns roles and responsibilities for implementing and complying with those requirements.

- **The New School Information Resource Acceptable Use Policy** establishes the rules for ethical and acceptable use of information resources at The New School. These rules support the free exchange of ideas among members of the New School community and between the New School community and other communities, while recognizing the responsibilities and limitations of such exchange. [http://www.newschool.edu/informationtechnology/information-resource-acceptable-use-policy.pdf](http://www.newschool.edu/informationtechnology/information-resource-acceptable-use-policy.pdf)

All computer users—faculty, staff, and students—are responsible for familiarizing themselves with these policies. To access the policy documents, sign on to MyNewSchool and click on the Faculty, Employee, or Student tab as appropriate. Locate the Academic Technology channel, and click on the links to the documents found under the Policies heading.

Compliance with these policies is mandatory for all students, faculty, staff, contractors, consultants, temporary employees, guests, volunteers, and other members of the university community, including those affiliated with third parties, who access or in any way make use of university information or information systems.

The university considers the data processed by and stored on administrative computer systems to be the property of the university. The contents of user accounts are considered to be the property of the authorized user, subject to applicable university copyright and intellectual property policies and applicable federal and state laws.

Individuals should be aware that their use of university information resources, including accessing the Internet or using electronic mail, social media, instant messaging, telephone, or voice mail, are not completely private. While the university does not routinely monitor individual usage of its information resources, the normal operation and maintenance of these resources require the backup and caching of data and communications, the logging of activity, the monitoring of general usage patterns, and other such activities that are necessary for the provision of service. The university may also specifically monitor the activity and accounts of individual users of university information resources, including individual login sessions, the content of individual communications, and the contents of stored information, with or without notice, in certain situations.

Failure to comply with these policies, whether deliberate or due to careless disregard, will be treated as serious misconduct and may result in actions including (but not limited to) disciplinary action, dismissal, and civil and/or criminal proceedings.

Alleged infractions of these policies are handled via formal procedures and investigation by the Office of the Provost, Department of Human Resources, or Office of Student Services, as appropriate. Upon determination of misuse, individuals who are found to be in violation of these policies may be subject to the following:

- restriction or suspension of computer access privileges;
- disciplinary action by their academic division and/or the university up to and including termination;
- referral to law enforcement authorities for criminal prosecution; and
- other legal action, including action to recover civil damages and penalties.

More information on enforcement actions associated with these policies can be found in the complete policy documents, see above.
Personal Use of University Information Resources

Authorized users may access The New School’s information resources for personal use under certain conditions. Examples of permitted limited personal use include electronic communication with children and dependents, scheduling personal appointments, and use of computers for listening to news and music within reason.

Limited and reasonable personal use is subject to all of the requirements and prohibitions of this policy, as well as the following conditions:

- Personal use of university information resources must not in any way negatively impact the operational needs of the university, or result in any direct cost to the university.
- Personal use of university information resources must not result in commercial gain or private profit, except as allowed under the university Intellectual Property Rights policy. However, in no case may university information resources be used for solicitation or performance of external activity for pay.
- Personal use of university information resources must not state or imply university sponsorship or endorsement.
- Personal use of Internet gaming outside the framework of a course or research project is prohibited.

For the full details of this policy, please refer to the complete Information Resource Acceptable Use Policy

E-mail Use
For the full details of this policy, please refer to the complete Information Resource Acceptable Use Policy

Internet Use
For the full details of this policy, please refer to the complete Information Resource Acceptable Use Policy

Social Media Policy

At The New School, we understand that social media are responsible for tremendous changes to the communications landscape over the last several years. Social media sites such as Facebook, Twitter, You Tube, and individual blogs and websites aid in disseminating robust intellectual and program content, and are also a rewarding way to share personal experiences and opinions with family, friends, and colleagues. In the last two years, the university itself has taken advantage of social media to recruit prospective students and employees, share details of university events and accomplishments, and demonstrate its distinctiveness over peer institutions and others.

Use of social media presents certain risks and carries with it certain responsibilities due to the speed with which information can be shared as well as the vast audience who can access information once broadcast. To assist in making responsible decisions about the use of social media and to help ensure that your actions conform to existing workplace norms, we have established these guidelines for appropriate use of social media. The guidance below is not “new;” the same principles and guidelines regarding workplace conduct found in The New School’s policies also apply to online activities to the extent they affect the university environment.

This policy applies to all employees of The New School, including faculty and staff, and is not intended to interfere with any rights protected by any law including those pursuant to Section 7 of the National Labor Relations Act.

Guidelines

In the rapidly expanding world of electronic communication, social media can mean many things. Social media includes all means of communicating or posting information or content of any sort on the Internet, including to your own or someone else’s web log or blog, journal or diary, personal web site, social networking or affinity web site, web bulletin board, image-sharing platform, or chat room, whether or not associated or affiliated with The New School, as well as any other form of electronic communication such as Facebook, Twitter, and You Tube. Ultimately, you are solely responsible for what you post online. Before creating online content, consider some of the risks and rewards that are involved. Keep in mind that any conduct that adversely affects your job performance, the performance of your co-workers, or otherwise adversely affects the staff, students or other members of The New School community or The New School’s legitimate business interests may result in disciplinary action up to and including termination consistent with existing policies and procedures, including those contained in the Full-time Faculty Handbook, the Institutional Policies and Procedures Manual and applicable collective bargaining agreements.

Know and follow the rules
Carefully read these guidelines and the policies contained in the Institutional Policies & Procedure Manual and ensure your postings that in any way affect your employment relationship are consistent with these policies. Inappropriate postings that may include discriminatory remarks, harassment, and threats of violence or similar inappropriate or unlawful conduct will not be tolerated and may subject you to disciplinary action up to and including termination.

**Be respectful**
Be fair and courteous to your co-workers, students and other members of The New School community. Also, keep in mind that you are more likely to resolve work-related complaints by speaking directly with your co-workers or by utilizing our Open Door Policy than by posting complaints to a social media outlet. Nevertheless, if you decide to post complaints or criticism, you should avoid using statements, photographs, video or audio that reasonably could be viewed as malicious, obscene, threatening or intimidating, that disparage co-workers, students, or other members of The New School community, or that might constitute harassment or bullying. Examples of such conduct might include offensive posts meant to intentionally harm the reputation of individuals, programs, departments, other institutions, or the university at-large, or posts that could contribute to a hostile work environment on the basis of race, sex, disability, religion or any other status protected by law or university policy.

**Be honest and accurate**
Make sure you are always honest and accurate when posting information or news. If you make a mistake, correct it quickly. Remember that the Internet archives almost everything; even deleted postings can be searched. Never post any information that you know to be false about The New School, your co-workers, students or other members of The New School community or The New School’s competitors. It is strongly recommended that you never post rumors.

**Post only appropriate content**
- Maintain the confidentiality of New School business plans and private or confidential information. This may include information regarding the development of systems, processes, products, know-how and technology. Do not post internal reports, policies, procedures or other internal business-related confidential communications.
- Respect financial disclosure laws. Do not create a link from your blog, website or other social networking site to The New School website without identifying yourself as an employee of The New School.
- Express only your personal opinions. Never represent yourself as a spokesperson for The New School. If The New School is a subject of the content you are creating, be clear and open about the fact that you are an employee and make it clear that your views do not represent those of The New School, your co-workers, students or any other members of The New School community. If you do publish a blog or post online related to the work you do or subjects associated with The New School, make it clear that you are not speaking on behalf of The New School. It is best to include a disclaimer such as “The postings on this site are my own and do not necessarily reflect the views of The New School.”

**Using social media at work**
Refrain from using social media while on work time or on equipment we provide, unless it is work-related and is otherwise consistent with the university’s policies. New School email addresses should be used exclusively to monitor or contribute to conversations that advance academic or professional discourse. New School email addresses must not be used to express personal grievances or to conduct personal business.

**Retaliation is prohibited**
The New School prohibits taking negative action against any co-worker, student or member of The New School community for reporting a possible deviation from this policy or for cooperating in an investigation. Any employee who retaliates against a co-worker, student or member of The New School community for reporting a possible deviation from this policy or for cooperating in an investigation will be subject to disciplinary action, up to and including termination.

**Media contacts**
New School employees should not speak to the media on The New School’s behalf. All media inquiries should be directed to the Marketing & Communication Department at 212.229.5151. Questions about media contact should be directed to Anne Adriance, Chief Marketing Officer at 212.229.5667 ex. 3032 or adrianca@newschool.edu.

**University social media profiles**
Staff considering creating a social media profile that represents The New School, its divisions, programs, or departments, please contact Christopher Fleener, the university’s Social Media Director, at 212.229.5667 ex. 3554 or socialmedia@newschool.edu.

For more information
If you have questions or need further guidance regarding this policy, please contact Jerry M. Cutler in Human Resources, Senior Vice President and Chief Human Resources Officer, at 212-229-5671 ext. 4900.

If you have questions related to social media in general, please contact Courtney Wood, the university’s Social Media Director, at 212.229.5667 or socialmedia@newschool.edu.

External and University-Sponsored Websites and Blogs
Methods of communication have changed dramatically in the past few years with the advent of blogs, wikis, and other Web 2.0 social networking tools. It is imperative for an institution such as ours—one that needs to share information with and from a young audience—to tap into these new technologies to improve our communications and marketing with this market. However, with these new and less moderated sites come some issues that require a few rules.

The following policy was created to address both the websites and blogs being hosted by members of the University community outside of the University server that reference The New School name or activities at the university, and those blogs that have been requested by members of the community to be hosted on the University server.

While the University is unable to support externally-created websites and blogs on the University server, it recognizes their existence outside of the University server, consistent with its belief in the free exchange of ideas.

The Department of Marketing & Communication (M&C) may choose to link to externally hosted websites or blogs. This will be done on a case-by-case basis and upon evaluation by M&C. The University will not supervise these links but does reserve the right to remove any link when a complaint is lodged and it is determined that the material is illegal, obscene, defamatory, threatening, infringing of intellectual property rights, invasive of privacy or otherwise injurious or misleading. In such instances, the University may remove the link or take other appropriate action.

In addition, the University will host a limited number of university-sponsored websites, blogs and social networking applications on its server that would be accessible to the public. Again, this will be done on a case-by-case basis upon the recommendation of the Dean or Officer, evaluation by M&C and approval by the Provost. The University will develop terms and conditions to govern the hosting of these websites, blogs and social networking applications. Among other terms, all content posted will be the responsibility of the individual who originally posted the content and the University will not be liable for any errors or omissions. The University retains the right to remove any website, blog or social networking application or content posted on any of the foregoing in accordance with the standards enunciated for external blogs or for lack of use or space available on the University server.

Retention of University Records
The New School is required to retain various types of records for specific periods of time, and has designated official repositories for their maintenance. These records must be managed according to procedures that are outlined in this document.

CONTACTS
Direct any questions about this policy to your department’s administrative manager. If you have questions about specific issues, call the following offices:

<table>
<thead>
<tr>
<th>Subject</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electronic Media Storage</td>
<td>Information Technology</td>
</tr>
<tr>
<td>Micrographic Preservation</td>
<td>University Library Department of Preservation and Conservation</td>
</tr>
<tr>
<td>Records Management &amp; Permanent Storage of Inactive Records</td>
<td>Designated Official Repository &amp; the Departmental Records Manager</td>
</tr>
<tr>
<td>Policy Clarification or Exceptions</td>
<td>University Counsel</td>
</tr>
</tbody>
</table>
DEFINITIONS

These definitions apply to these terms as they are used in this policy:

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Record</td>
<td>A record with current administrative use for the department that generated it. Records remain active for varying numbers of years, depending on the purpose for which they were created.</td>
</tr>
<tr>
<td>Archival Record</td>
<td>A record that is inactive; not required to be retained in the office in which it originated or was received; and has permanent or historic value. Archival records are retained and preserved indefinitely—generally in off-campus storage.</td>
</tr>
<tr>
<td>Electronic Record</td>
<td>Any record that is created, received or stored on a University local workstation or central server. Examples include but are not limited to: electronic mail (email), PDFs, word processing documents and spreadsheets and databases.</td>
</tr>
<tr>
<td>Official Repository</td>
<td>The department designated as having responsibility for retention and timely destruction of particular types of official University records.</td>
</tr>
<tr>
<td>Departmental Records Manager</td>
<td>The individual designated by the administrative head in each department to oversee the management of records within that department who is responsible for: 1) designating which official University records are archival; and 2) effecting the transfer of archival records from the office in which they originated or were received to storage at such times and in the manner and form prescribed by the storage facility and subject to the appropriate retention and disposition schedules that are outlined in this document.</td>
</tr>
<tr>
<td>University Record</td>
<td>The original copy of any record including electronic records. Official repositories for these records are identified in Tables I and II of this document. The definition does not apply to Instant Messaging (IM) which should not be used for conducting University business.</td>
</tr>
</tbody>
</table>

OVERVIEW

Introduction to This Policy

In order to operate efficiently throughout the university, The New School requires consistent treatment of records. Maintenance, retention, and disposal procedures for University records (see the "Definitions" Section of this document) must be followed systematically by staff in designated official repositories.

In addition, duplicate or multiple copies of these records, retained in locations other than official repositories (see the “Definitions” Section of this document), must also be disposed of when they are outdated and no longer useful.

This policy is intended to ensure that the university:

- preserves the history of the university;
- meets legal standards;
- optimizes the use of space;
- minimizes the cost of record retention;
- destroys outdated and useless records.

ELECTRONIC RECORDS

Responsibilities for Managing Electronic Records

Work-related email is a University record, and must be treated as such. Each e-mail user must take responsibility for retaining, disposing or archiving University records as required below.

Email that does not meet the definition of University record, e.g., personal or junk email, should be deleted immediately from the system and not be commingled with work-related messages.

The University servers are not intended for long-term record retention. Information Technology (IT) performs backups on a regular schedule of the email and electronic files stored on central servers for disaster recovery. These backups are to be used for system restoration purposes only. IT administrators are not the legal custodians of messages or records which may be included in such backups.

Email messages and any associated attachment(s) are to be printed and stored in similar fashion to paper records. It is important to note that the email message should be kept with the attachment(s). The printed copy of the e-mail must contain the following header information: (1) who sent the message, (2) who the message was sent to and (3) date and time message was sent and (4) subject of the message.
When email is used as a transport mechanism for other records types, it is possible, based on the content, for the retention and disposition period of the email and transported record(s) to differ. In this case, the longest retention period shall apply.

**LITIGATION HOLDS**

<table>
<thead>
<tr>
<th>Responsibilities for Preserving Documents Relevant to Active Litigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>When litigation against the University or its employees is filed or threatened, the law imposes a duty upon the University to preserve all documents and records that pertain to the issues. As soon as University Counsel is made aware of pending or threatened litigation, a litigation hold directive will be issued to the legal custodian. The litigation hold directive overrides any record retention schedule that may have otherwise called for the transfer, disposal or destruction of the relevant documents, until the hold as been cleared by University Counsel. Email and computer accounts of separated employees that have been placed on a litigation hold by University Counsel will be maintained by IT until the hold is released. No employee who has been notified by University Counsel of a litigation hold may alter or delete any record that falls within the scope of that hold. Violation of the hold may subject the individual to disciplinary action, up to and including termination, as well as personal liability for civil and/or criminal sanctions by the courts or law enforcement agencies.</td>
</tr>
</tbody>
</table>

See Exhibit A – “Notification to Hold/Preserve Document”

**PROCEDURES**

<table>
<thead>
<tr>
<th>Responsibilities for Managing Official University Records</th>
</tr>
</thead>
<tbody>
<tr>
<td>Departments and units that maintain University records are called “official repositories.” These specific departments are responsible for establishing appropriate record retention management practices. Each department’s administrative manager must designate a Departmental Records Manager to:</td>
</tr>
<tr>
<td>• implement the department’s and/or office’s record management practices;</td>
</tr>
<tr>
<td>• ensure that these management practices are consistent with this policy;</td>
</tr>
<tr>
<td>• educate staff within the administrative unit in understanding sound record management practices;</td>
</tr>
<tr>
<td>• preserve inactive records (see the “Definitions” Section of this document) of historic value, and transfer those records to storage;</td>
</tr>
<tr>
<td>• ensure that access to confidential files is restricted. Long term restrictions on access to selected archival records should be negotiated at the time of their transfer to storage;</td>
</tr>
<tr>
<td>• destroy inactive records that have no archival value upon passage of the applicable retention period.</td>
</tr>
</tbody>
</table>

If you have any questions about your responsibilities, contact the Records Manager (see the “Contacts” Section of this document), who will work closely with you to ensure understanding of this policy and implementation of these responsibilities.

Preserving or Disposing of Official University Records

When the prescribed retention period (see Tables I and II, which follow) for official University records has passed, a determination of whether to preserve or dispose of the documents must be made. To decide if the record is of historic value to the university, consult the Departmental Records Manager (see the “Definitions” Section of this document) who has the authority to designate which records stored permanently.

**Option A**

*Archival Records*

If you have determined that the records are archival, they may be transferred to permanent storage, call the Departmental Records Manager to:

1. Review records to be sent to permanent archival storage.
2. Request archival boxes (1 full file drawer = 2 boxes).
3. Request all relevant forms.
4. Schedule a time for boxes to be picked up.

☐ Option B

Non-archival Records
If you have determined that it is appropriate to dispose of the records, destroy them in one of the following ways:
1. Recycle non–confidential paper records.
2. Shred or otherwise render unreadable confidential records.
3. Erase or destroy electronically stored data.

☐ Caution: Periodically review records generated and maintained in University information systems or equipment (including mainframe, mini, and micro computing/storage systems) to ensure that these requirements are met.

Records Retention: Location and Duration

Tables 1 and 2, which follow, list the official repositories for University records as well as how long these records must be retained.

Record retention periods may be increased by government regulation, judicial or administrative consent order, private or governmental contract, pending litigation or audit requirements. Such modifications supersede the requirements listed in this policy. Suspension of record destruction required by any of these reasons will be accomplished by a notice sent out to affected departments by the Office of the General Counsel, Office of the Treasurer/Accounting, the Division of Financial Affairs, or the Office of Sponsored Programs.

☐ Note: No document list can be exhaustive. Questions regarding the retention period for any specific document or class of documents not included in these tables should be addressed to the General Counsel’s Office.

☐ Caution: Departments and units that are not official repositories and that retain duplicate or multiple copies of these University records should dispose of them when they are no longer useful.

Table 1
Repositories and Retention Periods for Undergraduate, Graduate, Professional, Continuing Education and Summer Session, Extramural and Special Programs Student-Related Academic Records

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Actions, (Dismissal, etc.)</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Academic Integrity Code Violations</td>
<td>AVP Student Affairs</td>
<td>Permanent</td>
</tr>
<tr>
<td>Academic Records (including narrative evaluations, competency assessments, etc.)</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Change of Grade Forms</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Change to Student ID number</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Consent to Release Personally Identifiable Information (Requests for Non-Disclosure)</td>
<td>Office of the University Registrar</td>
<td>Kept until next academic year;</td>
</tr>
<tr>
<td>Course Offerings</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Curriculum Change Authorizations</td>
<td>Office of the College Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Directory Information Privacy Request (FERPA Hold)</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Enrollment Verifications</td>
<td>Office of the University Registrar</td>
<td>1 year from enrollment date</td>
</tr>
<tr>
<td>Hold or Encumbrance Authorizations</td>
<td>Issuing Office</td>
<td>Until Released</td>
</tr>
<tr>
<td>Name Changes</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Original Grade Sheets</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Student Class Schedules (Maintained in Banner)</td>
<td>Office of the University Registrar</td>
<td>1 year from graduation date or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>date of last attendance</td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------</td>
<td>---------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Student Registration Forms-Continuing Education, Summer Sessions, and Extramural Studies</td>
<td>Office of the University Registrar</td>
<td>1 year from registration</td>
</tr>
<tr>
<td>Transcripts</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Transcript Requests</td>
<td>Office of the University Registrar</td>
<td>1 year from submission date</td>
</tr>
<tr>
<td>Transfer Credit Evaluations</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Veteran Administration Certifications</td>
<td>Office of the University Registrar</td>
<td>3 years from graduation or date of last attendance</td>
</tr>
<tr>
<td>Withdrawal Authorizations/Leaves of Absence</td>
<td>Office of the University Registrar/Graduate School/Professional School Registrars</td>
<td>2 Years</td>
</tr>
</tbody>
</table>

**Admissions for Applicants Who Do Not Enroll, Whether Accepted or Rejected**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Placement Records, Applications for Admission or Readmission, Correspondence that is relevant, Entrance Exam Reports (ACT, SAT, et. al.), Residency Classification Forms, Letters of Recommendation, Transcripts — High School and Other College</td>
<td>Admissions Office</td>
<td>2 years from date of start of application term</td>
</tr>
<tr>
<td>Advanced Placement Records, Applications for Admission or Readmission, Acceptance Letter, Correspondence that is Relevant, Entrance Exam Reports (ACT, SAT et. al.)</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
</tbody>
</table>

**Admissions for Applicants Who Enroll**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letters of Recommendation</td>
<td>Office of the University Registrar</td>
<td>Until date of admission</td>
</tr>
<tr>
<td>Recruitment Materials</td>
<td>Office of the University Registrar</td>
<td>Until date of enrollment</td>
</tr>
<tr>
<td>Residency Certificates</td>
<td>Office of the University Registrar</td>
<td>Until date of enrollment</td>
</tr>
<tr>
<td>Residency Change Documents (Non-resident to Resident)</td>
<td>Office of the University Bursar</td>
<td>5 years from graduation or date of last attendance</td>
</tr>
<tr>
<td>Student Waivers for Right of Access... (See Letters of Recommendation for Admission)</td>
<td>Office of the University Registrar</td>
<td>Until graduation or date of last attendance</td>
</tr>
<tr>
<td>Transcripts — High School and Other College</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>International Student Forms (visa documentation, etc.)</td>
<td>International Students Services</td>
<td>1 Year after application term</td>
</tr>
</tbody>
</table>

**Publications, Statistical Data/Documents, and Reports**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree, Grade, Enrollment, and Racial/Ethnic Statistics</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>Schedule of Classes (institutional)</td>
<td>Office of the University Registrar</td>
<td>Permanent</td>
</tr>
<tr>
<td>NYSED Reports</td>
<td>Office of the University Registrar and Institutional Research</td>
<td>Permanent</td>
</tr>
<tr>
<td>Catalogs</td>
<td>Office of the University Registrar/Office of the Provost</td>
<td>Permanent</td>
</tr>
<tr>
<td>Commencement Programs</td>
<td>Office of the Secretary/Library</td>
<td>Permanent</td>
</tr>
</tbody>
</table>

**Student Financial Services**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Aid Records (applicants who do enroll)</td>
<td>Office of Financial Aid and Student Employment</td>
<td>3 years from graduation date</td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------</td>
<td>--------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Student Loan Records (Perkins)</td>
<td>Student Financial Services</td>
<td>3 years after the loan has been repaid, cancelled or assigned to the Dept. of Education</td>
</tr>
<tr>
<td>Tuition, Fee, Housing, and Meal Plan Charges and Payments</td>
<td>Student Financial Services</td>
<td>7 years</td>
</tr>
</tbody>
</table>

**Student Disability Services**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical records (letters, reports, evaluations, test results)</td>
<td>Office of Student Disability Services</td>
<td>7 years</td>
</tr>
<tr>
<td>Academic Adjustment Notices</td>
<td>Office of Student Disability Services</td>
<td>7 years</td>
</tr>
<tr>
<td>Progress Notes on Services Provided to Students</td>
<td>Office of Student Disability Services</td>
<td>7 years</td>
</tr>
<tr>
<td>Various Letters to Students, Faculty, etc.</td>
<td>Office of Student Disability Services</td>
<td>7 years</td>
</tr>
</tbody>
</table>

**Table 2 Repository and Retention Periods for Non-Student-Related Records**

**Academic Personnel**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Search Records</td>
<td>See Affirmative Action/Equal Opportunity Section</td>
<td></td>
</tr>
<tr>
<td>Annual Conflict of Interest Disclosure Statements</td>
<td>Office of the General Counsel</td>
<td>3 Years</td>
</tr>
<tr>
<td>Grievances</td>
<td>Appropriate Dean’s Office &amp; Office of Labor Relations</td>
<td>No Cause Findings, 3 years from determination Cause Findings, Permanent</td>
</tr>
<tr>
<td>Personnel Files, Appointment Letters and Forms</td>
<td>See Human Resources Section</td>
<td></td>
</tr>
<tr>
<td>Tenure or Promotion Dossiers</td>
<td>Appropriate Dean’s Office &amp; Office of the Provost</td>
<td>If action approved, 3 years; If tenure denied, 3 years from end of term appointment</td>
</tr>
<tr>
<td>Trustee Decisions Regarding Academic Personnel and Designated Executives</td>
<td>Office of the Secretary</td>
<td>Permanent</td>
</tr>
</tbody>
</table>

**Accounting and Finance**

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Account Reconciliations (Balance Sheet)</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Accounts Payable Vouchers and Attachments</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Accounts Receivable Statements, Centrally Generated</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Accounts Receivable Statements, Department Generated</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Accounting Reports (monthly reports) Schedules of Department Balances, Transaction Statements, Account Analysis Statements, Monthly and Year-to-Date Salary and Wage Statements</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Annual Financial Reports and Work papers</td>
<td>Accounting/Treasurer</td>
<td>Permanent</td>
</tr>
<tr>
<td>APPS Invoices</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Banking Records, Including Deposit and Withdrawal Records, Bank Statements and Reconciliation, Voided and Canceled checks</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Billing Records</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Capital Equipment Records</td>
<td>Accounting/Treasurer</td>
<td>Life of Asset: records of equipment purchased on federal funds must be retained for three years after final disposition</td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>DCAA Audit Work Papers</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>----------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Depreciation Records</td>
<td>Accounting/Treasurer</td>
<td>Life of Asset</td>
</tr>
<tr>
<td>Effort Certifications</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Indirect Cost Rate Calculations</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Inventories</td>
<td>Accounting/Treasurer</td>
<td>Life of Asset</td>
</tr>
<tr>
<td>Journal Entries and Back-up Documentation</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>New Account Records and Back-up Documentation</td>
<td>Accounting/Treasurer</td>
<td>6 years after account closing</td>
</tr>
<tr>
<td>Procurement Card Charge Documentation</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Subsidiary Ledgers (Accounts Payable, Accounts</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Receivable, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary Analysis Reports, end of year (Fund, Source,</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Function)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trial Balances</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Transaction Authority Cards</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>Travel Reimbursements and Attachments</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
<tr>
<td>University Audit Work Papers</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
</tbody>
</table>

Affirmative Action/ Equal Opportunity

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Search Plans and Statements</td>
<td>For Forms, Human Resources; For Search Materials and Documents Supporting Decision,</td>
<td>For Permanent Waivers, 3 years from date of appointment; For Limited-Term</td>
</tr>
<tr>
<td></td>
<td>Appropriate Dean’s Office &amp; Office of the Provost</td>
<td>Waivers, 3 years from satisfaction of subsequent search requirements or appointment termination</td>
</tr>
<tr>
<td>Academic Search Waivers</td>
<td>Office of Human Resources &amp; Office of the Provost</td>
<td>No Cause Findings, 3 years from determination</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cause Findings, Permanent</td>
</tr>
<tr>
<td>Affirmative Action Programs</td>
<td>Office of Human Resources</td>
<td>Permanent</td>
</tr>
</tbody>
</table>

Alumni Affairs and Development

<table>
<thead>
<tr>
<th>TYPE OF RECORD</th>
<th>OFFICIAL REPOSITORY</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alumni Records</td>
<td>Development</td>
<td>Permanent</td>
</tr>
<tr>
<td>Gift Records</td>
<td>Development</td>
<td>6 years for hard copy records Permanent for electronic records</td>
</tr>
<tr>
<td>Gifts of Art</td>
<td>Development</td>
<td>Permanent</td>
</tr>
<tr>
<td>Original Gift Letter Agreements, Signed by President</td>
<td>Office of General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Type of Record</td>
<td>Official Repository</td>
<td>Duration</td>
</tr>
<tr>
<td>----------------</td>
<td>---------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Development</td>
<td>Permanent</td>
<td></td>
</tr>
<tr>
<td>Permanent</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Construction**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Official Repository</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>As–built Drawings</td>
<td>Department of Design, Construction and Facilities Management</td>
<td>Permanent</td>
</tr>
<tr>
<td>Contracts and Agreements</td>
<td>Department of Design, Construction and Facilities Management</td>
<td>6 Years</td>
</tr>
</tbody>
</table>

**Corporate Records**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Official Repository</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation Records</td>
<td>Office of the President/Provost</td>
<td>Permanent</td>
</tr>
<tr>
<td>Board of Trustee Minutes &amp; Committee Meetings Materials</td>
<td>Office of the Secretary</td>
<td>Permanent</td>
</tr>
<tr>
<td>Bylaws</td>
<td>Office of the Secretary</td>
<td>Permanent</td>
</tr>
<tr>
<td>Charter</td>
<td>Office of the Secretary</td>
<td>Permanent</td>
</tr>
<tr>
<td>Annual Reports</td>
<td>Office of the Secretary/Communications</td>
<td>Permanent</td>
</tr>
</tbody>
</table>

**Environmental Health and Safety**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Official Repository</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evacuation Drill Records</td>
<td>Security Department</td>
<td>5 Years</td>
</tr>
<tr>
<td>Fire Protection Systems Records</td>
<td>Security Department</td>
<td>5 Years</td>
</tr>
<tr>
<td>Incident Records</td>
<td>Security Department</td>
<td>5 Years</td>
</tr>
<tr>
<td>Portable Extinguisher Training Records</td>
<td>Security Department</td>
<td>3 Years</td>
</tr>
<tr>
<td>OSHA Records</td>
<td>Department of Design, Construction and Facilities Management</td>
<td>30 years after termination of affected employee</td>
</tr>
</tbody>
</table>

**Human Resources**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Official Repository</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Personnel Files (including application, resume, payroll, appointment/salary forms)</td>
<td>Office of Human Resources</td>
<td>6 years after termination</td>
</tr>
<tr>
<td>Federal Reporting Requirements: Welfare Benefits and other Fringe Benefit Plans (i.e., 403 (c)).</td>
<td>Office of Human Resources</td>
<td>Permanent</td>
</tr>
<tr>
<td>Individual Contracts of Employment</td>
<td>Office of Human Resources</td>
<td>6 years after termination</td>
</tr>
<tr>
<td>I–9 Forms (Faculty and Staff)</td>
<td>Office of Human Resources</td>
<td>3 Years, or 1 year after termination (whichever is greater)</td>
</tr>
<tr>
<td>I–9 Forms (Students)</td>
<td>Office of Human Resources</td>
<td>3 Years, or 1 year after termination (whichever is greater)</td>
</tr>
<tr>
<td>Occupational Injury or Illness, Records Relating to</td>
<td>Office of Human Resources</td>
<td>5 Years</td>
</tr>
<tr>
<td>Performance Appraisals</td>
<td>Office of Human Resources</td>
<td>3 years after separation</td>
</tr>
<tr>
<td>Search Committee Records, including employment applications, resumes, and all applicant search materials</td>
<td>Office of Human Resources</td>
<td>3 Years</td>
</tr>
<tr>
<td>Union Agreements</td>
<td>Office of Human Resources</td>
<td>Permanent</td>
</tr>
<tr>
<td>Volunteer Registration Forms, Parental Consent Forms, and Agreements</td>
<td>Office of Human Resources</td>
<td>3 Years</td>
</tr>
<tr>
<td>Workers’ Compensation Claims and Insurance Policies</td>
<td>Office of Human Resources</td>
<td>18 Years</td>
</tr>
</tbody>
</table>

**Insurance**

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Official Repository</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificates of Insurance, Indemnification Agreements, Hold Harmless Agreements, Contracts</td>
<td>Office of the Chief Financial Officer/Office of the General Counsel</td>
<td>6 years after expiration</td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>-----------------------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Insurance Policies (Liability, Property, and Other Policies)</td>
<td>Office of the Chief Financial Officer / Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Incident Reports, Accident Reports</td>
<td>Office of the General Counsel / Security</td>
<td>4 years after report date</td>
</tr>
<tr>
<td><strong>Legal</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>Consent Orders</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Court Orders</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Judgments</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Releases</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Settlements</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td><strong>Medical</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>University Student Health Services for Regulatory Required Medical Surveillance and Monitoring Records</td>
<td>University Student Health Services</td>
<td>30 years after person leaves the University</td>
</tr>
<tr>
<td>Patient Records (Non-regulatory)</td>
<td>University Student Health Services</td>
<td>6 Years</td>
</tr>
<tr>
<td><strong>Patent and Trademarks</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>Original Patents, Trademarks, and Related Work Papers</td>
<td>Office of the General Counsel</td>
<td>Permanent</td>
</tr>
<tr>
<td>Royalty Records</td>
<td>Office of the General Counsel</td>
<td>Life of Patent or TM plus 6 years</td>
</tr>
<tr>
<td><strong>Payroll</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Payment Records (W2, Alpha lists, employee transaction lists)</td>
<td>University Payroll Department</td>
<td>Permanent</td>
</tr>
<tr>
<td>Imputed Income Records</td>
<td>University Payroll Department</td>
<td>6 years</td>
</tr>
<tr>
<td>Information Returns filed with Federal and State authorities (W-2, 941, 1042S, etc.)</td>
<td>University Payroll Department</td>
<td>6 years</td>
</tr>
<tr>
<td>Leave Reporting Documents</td>
<td>University Payroll Department</td>
<td>4 years</td>
</tr>
<tr>
<td>Payroll Deduction Authorization Forms</td>
<td>University Payroll Department</td>
<td>5 years after employment ends</td>
</tr>
<tr>
<td>Payroll Vouchers</td>
<td>University Payroll Department</td>
<td>3 years</td>
</tr>
<tr>
<td>Record of Payments and Deductions (payroll registers, deductions lists, adjustments)</td>
<td>University Payroll Department</td>
<td>5 years</td>
</tr>
<tr>
<td>Time Cards, student</td>
<td>Appropriate Department</td>
<td>3 years after the date that all student loans are paid</td>
</tr>
<tr>
<td>Time Cards, other</td>
<td>Appropriate Department</td>
<td>3 years</td>
</tr>
<tr>
<td>Wage Assignment Orders</td>
<td>University Payroll Department</td>
<td>5 years after closed</td>
</tr>
<tr>
<td><strong>Pension</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TYPE OF RECORD</td>
<td>OFFICIAL REPOSITORY</td>
<td>DURATION</td>
</tr>
<tr>
<td>Office of Human Resources</td>
<td>6 years after death of eligible employee and beneficiary</td>
<td></td>
</tr>
</tbody>
</table>

<p>| TYPE OF RECORD                                                                 | OFFICIAL REPOSITORY          | DURATION                                                                 |
| Employee Eligibility for Pension                                             | Office of Human Resources    | 6 years after death of eligible employee and beneficiary               |
| Employee Personal Information (name, address, SSN, period of employment)    | Office of Human Resources    | 6 years after death of eligible employee and beneficiary               |
| Employee Service Records                                                     | Office of Human Resources    | 6 years after death of eligible employee and beneficiary               |
| Plan Administrator Setting Forth Authority to Pay, Records of                | Office of Human Resources    | Permanent                                                               |
| Pension Paid to Employees or their Beneficiaries                             | Office of Human Resources    | 6 years after death of employee and beneficiary                        |
| Pension Plans and All Attached Amendments                                   | Office of Human Resources    | Permanent                                                               |</p>
<table>
<thead>
<tr>
<th>Planning and Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE OF RECORD</strong></td>
</tr>
<tr>
<td>Pensions or Pension Plans Filed with the Department of Labor and Internal Revenue Service</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Public Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE OF RECORD</strong></td>
</tr>
<tr>
<td>Accident Reports</td>
</tr>
<tr>
<td>Crime Stats &amp; Reports</td>
</tr>
<tr>
<td>Property Damage Reports</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purchasing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE OF RECORD</strong></td>
</tr>
<tr>
<td>Purchase Orders, Contracts, Agreements</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>TYPE OF RECORD</strong></th>
<th><strong>OFFICIAL REPOSITORY</strong></th>
<th><strong>DURATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Documents for leases, licenses, construction contracts and other contracts of a temporary nature valued at less than $50,000</td>
<td>Department of Design, Construction and Facilities Management/General Counsel's Office</td>
<td>6 years after expiration of lease or contract term</td>
</tr>
<tr>
<td>Property Deeds, Easements, Licenses, Rights of Way, Leases, Rights of First Refusal, Remainder Interests, Mortgages</td>
<td>Department of Design, Construction and Facilities Management/General Counsel’s Office</td>
<td>Permanent</td>
</tr>
<tr>
<td>Property Tax Returns filed with taxing jurisdiction</td>
<td>Accounting/Treasurer</td>
<td>6 Years</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sponsored Projects Contracts, Grants</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE OF RECORD</strong></td>
</tr>
<tr>
<td>Grant and Contract Applications, Proposals, and Supporting Documentation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tax</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE OF RECORD</strong></td>
</tr>
<tr>
<td>Assets: Acquisition/Disposition</td>
</tr>
<tr>
<td>Depreciation Schedules</td>
</tr>
<tr>
<td>Excise Tax Returns</td>
</tr>
<tr>
<td>Fringe Benefit Returns</td>
</tr>
<tr>
<td>Income Tax Returns</td>
</tr>
<tr>
<td>Information Returns (990, 1099, 8282, 90.22 etc.)</td>
</tr>
<tr>
<td>Payroll Tax Returns (W-2, Social Security, Unemployment Tax)</td>
</tr>
<tr>
<td>Pension Tax Returns</td>
</tr>
<tr>
<td>Property Tax Returns</td>
</tr>
<tr>
<td>Sales Tax Returns</td>
</tr>
</tbody>
</table>
IMPORTANT
PRESERVATION NOTICE

PRIVILEGED & CONFIDENTIAL
ATTORNEY/CLIENT COMMUNICATION
ATTORNEY WORK PRODUCT

READ THOROUGHLY
ACKNOWLEDGE RECEIPT IMMEDIATELY

-SAMPLE- Litigation Hold/Preserve Notice – Exhibit A

TO: Attached Distribution List
DATE: ______________________

FROM: Roy P. Moskowitz, Vice President for Legal Affairs & General Counsel

The New School (the “university”) is involved in a lawsuit/action brought by _____________ concerning ______________________(the “Matter”). The University is legally required to preserve all electronic and tangible records, data or things (“Material”) relevant to the currently apparent scope of the Matter, and to cease destruction, whether manual or automated, of such Material.

Failure to comply with this Preservation Notice may expose the University to adverse consequences including monetary sanctions and criminal charges of obstruction of justice, and will expose you to disciplinary action up to and including termination.

If you are aware of someone within the University who may possess relevant Material but did not receive this Preservation Notice, please notify the Contact Person listed below.

This Preservation Notice overrides any University policies concerning the retention of documents or Material relevant to this matter until further written notice. If you have any questions, please speak to the Contact Person designated below.

NAME OF MATTER AND COURT/AGENCY

NATURE AND SCOPE OF MATTER

TYPES OF MATERIAL TO BE PRESERVED

TIME PERIOD AND SCOPE

DESIGNATED CONTACT PERSON
Keila C. Tennent, Esq., Associate General Counsel
Phone: (212) 229-5432  E-mail (preferred): tennentk@newschool.edu

You must acknowledge receipt of this PRESERVATION NOTICE. Please do so by checking all applicable boxes below, signing the “I Acknowledge Receipt” box and return the completed form to the Designated Contact Person.

☐ I have relevant paper or tangible Material  ☐ I have relevant electronic Material  ☐ I have no relevant Material

I Acknowledge Receipt and will preserve all relevant Material in my possession and all relevant Material that may come into my possession, until further written notice

X__________________________________________________________
Name: ____________________ Title: ____________________ Date: ______________

05/10/2018
SALARY ADMINISTRATION POLICY
The goal of the university's salary administration program is to provide an equitable and systematic means of compensating its various categories of employees in relation to their assigned duties and responsibilities and, to the most reasonable degree possible, recognize differences in employee performance levels. Further, it is the university's policy that its salary administration practices and compensation levels are competitive with those in like organizations for comparable job categories.

ADMINISTRATIVE STAFF NOT COVERED BY A COLLECTIVE BARGAINING AGREEMENT

Administrative Staff Structure
Administrative Staff appointments are approved for employees with professional or administrative responsibilities in the university's central administration, academic divisions, and the University libraries.

For new or revised job description for Administrative Staff appointments, Human Resources will work with the requesting manager/department administrative officer to review the salary for that position. Human Resources, in conjunction with department managers and administrative officers, will watch the job market closely. Human Resources tracks the market by participating in annual salary surveys and, wherever possible, obtaining salary information on "industry standard" positions, typically referred to as benchmark jobs i.e., those jobs that are typical in higher education and other industries and are easily matched and compared to jobs at The New School. Salary survey results provide us with market data and salary range data for jobs similar to ours.

Establishing or Changing a Position Classification
All employment requisitions and requests for promotion and reclassification for Administrative and Support staffs should be submitted directly to Human Resources and should include or be accompanied by a detailed job description.

Managers and department heads must submit a job description so that Human Resources can evaluate the position and assign the appropriate level or grade. Job descriptions should be prepared by the responsible hiring manager, in conjunction with the employee when appropriate.

The job evaluation process should be conducted for either a position that is newly created or for one that currently exists but is believed by the hiring manager to be inappropriately graded based on new or revised responsibilities and/or requirements.

When a new or revised job description is submitted, Human Resources, will work with the requesting manager to review the salary for the position. Both internal and external factors will be considered when determining the range of a position.

Additional information regarding establishing or changing a position classification can be obtained by contacting Human Resources. Funds for changes to position classifications if the classification warrants an increase must be funded by the division/department and approved via the budget process.

Determination of Individual Salaries
The Office of Human Resources works with departments and schools in establishing starting salaries. An employee's starting salary will be determined within a given salary range on the basis of his or her related experience, training, and special qualifications. Every effort will be made to ensure that the salaries of newly employed staff are properly related to the salaries of other employees in the new employee's department.

An employee's subsequent salary growth will be directly related to the quality of his or her performance and overall contribution to the university.

Annual Performance Review
This applies to administrative staff only. Please refer to the Full-Time Faculty Handbook for full-time faculty, and to the Collective Bargaining Agreement between The New School and Academics Come Together, ACT-UAW, Local 7902 and The International Union, UAW for part time faculty.

It is the university's compensation policy that departmental annual review allocations be distributed to employees on the basis of their individual contribution and performance levels. It is essential that departments make a systematic and fair assessment of each of their employees' duties and responsibilities and that they objectively analyze, qualitatively and quantitatively, how well these duties are being carried out. Recommended increases must, within established budgets, be related to these evaluations.

It is essential that outstanding employees be retained by the university. Individuals who demonstrate superior performance should therefore be recognized with review increases at or above the established review allocation amounts, even though lesser amounts will be available for individuals who demonstrate average performance.

A General Wage Increase may or may not be recommended for any employee whose performance has been unsatisfactory. Continued unsatisfactory performance should be closely monitored by supervisors and may be grounds for termination.

Annual Review Eligibility and Effective Dates
Administrative salaries are reviewed each spring and increases are granted on September 1st of each year. As a general rule, employees hired on or after May 1st will not receive a salary increase for the coming fiscal year. All salary increases are within the fiscal year guidelines which are established each year by the university.

Salary increases for employees members who are union members are negotiated and are generally across the board increases with each employee in a given bargaining unit receiving the same percentage increase.
General Review Schedule and Process
At the time of the reviews for the administrative staff, Human Resources forwards to each Dean, Vice President and other Senior Officers, the annual review guidelines and overall review allocation. Individual department budget allocations are then determined and forwarded to department heads with their separate worksheets.

Department heads are requested to confer with their appropriate supervisory personnel to assess performance and recommend, within their established review allocations, increases that reflect these assessments. Performance evaluation guidelines and forms are available on the Human Resources website.

Departmental recommendations are reviewed and approved by senior officers and are submitted to Human Resources. The Senior Vice President and Chief Human Resources Officer reviews and makes recommendations to the President, Provost and the Compensation Committee of the Board of Trustees on all merit increase requests and promotions.

ALL EMPLOYEES
Salary Payments
In accordance with federal and New York State law, administrative and full time faculty employees are paid on a biweekly basis.

- Clerical employees who are members of Local 1205 are paid on a biweekly basis.
- Security and Maintenance employees who are members of Local 32BJ are paid weekly each Friday.
- Building Engineers who are members of the Local 94 are paid on a biweekly basis.

Part time faculty and teaching employees who are members of Local 7902 or Local 802 are paid on a monthly basis.

Direct Deposit
Direct deposits of paychecks are required for all employees who are paid through the University payroll system. New employees and continuing employees who do not yet participate are required to do so. Direct Deposit offers employees the convenience of having their pay checks automatically deposited without having to wait in lines to cash paychecks and without having to wait for paychecks to clear.

This free benefit makes your check available to you as cash each payday. Please visit my.newschool.edu for electronic proof of payment. You may deposit your earnings into almost any new or existing savings or checking account, and, you may split a deposit to more than one account. In order to qualify, a bank must be a member of the Automatic Clearing House (ACH). Most commercial banks and 70 percent of thrift (savings) banks in the New York Metropolitan area are ACH members. To verify if your bank participates, call your branch manager. Please note that due to payroll processing needs, first and final paychecks are not directly deposited.

Payroll Deductions
The University is required by law to deduct FICA, Med-tax, Federal, New York State, and New York City taxes, if applicable, withholding taxes from each employee's check as appropriate. If you have questions about your paycheck, please consult the Payroll Department.

FULL-TIME FACULTY
Base Salary Determination for Term of Academic Appointment
Responsibility for faculty salary recommendations rests with the deans reporting to the provost. Initial recommendations may be made by department chairs or directors in accordance with the organizational structure and budgetary practices of each school or division. The recommendations of the dean are reviewed by the vice president for human resources and must be approved by the provost. Approved salary recommendations become part of the budget approval process approved annually by the board of trustees. If the faculty member holds appointment in two or more units that contribute to his or her salary, the primary department shall be responsible for submitting the recommendation and coordinating joint approval with the additional department(s).

Salary Adjustments
Salary adjustments are based on merit; they are not automatic. Recommendations for salary adjustments originate with the division head or chair and are reviewed by the dean, the senior vice president for human resources, the provost, and the president. Salary adjustments are determined administratively on an annual basis given adequate budget flexibility, based significantly on the quality of the faculty member's work.

Schedule of Payment
Because the academic year runs from September through August, most faculty appointments begin in September. Thus, it has been policy in most units of the university to pay new faculty members on nine-month appointments, their initial one-twelfth (1/12) of salary in September of their first year and to continue payment through August of their terminal year (except for retirements or resignations that occur at other times in the year). For various reasons, this policy is at times unsatisfactory. In cases where duties are to be assumed prior to September, arrangements may be made for the appointment to begin in July or August. The formal appointment letter provided for the provost's files must accurately reflect the appointment date. If the appointment commences in a month other than September, then the final payment in the faculty member's terminal year is adjusted accordingly. Regardless of the appointment term, all full-time faculty members receive their compensation over 12 months in bi-weekly installments.

SECTION 3: BENEFITS
All Full-Time Faculty and Full-Time and Regular Part-Time Staff are offered the following benefit options:

- Health Care Plan
- Dental Care Plan
- Flexible Spending Account Plan
- Basic Life Insurance Plan
- Accidental Death and Dismemberment Plan
For employees belonging to Local 1205, Local 7902, Local 802, Local One or Local 32BJ, please refer to your respective collective bargaining agreements for information on union benefit packages.

COBRA and CONVERSION PRIVILEGES

The Consolidated Omnibus Budget Reconciliation Act of 1985, commonly referred to as “COBRA”, provides you with a temporary extension of health care and dental care coverage, and health care flexible spending account coverage in the case that your coverage is lost due to one of the following qualifying events:

- a reduction in hours
- employment ends for any reason other than gross misconduct

COBRA continuation coverage is available to a covered spouse/domestic partner or covered dependent child(ren) due to one of the following qualifying events:

- The covered employee’s employment ends for any reason other than gross misconduct or the employee’s coverage is lost due to a reduction in hours
- Death of the covered employee
- Divorce of the covered employee and spouse or end of a domestic partnership*
- Employee becomes eligible for Medicare (Part A, Part B, or both)

COBRA continuation is also available to a covered dependent child who is no longer considered a “dependent child” due to reaching the plan’s maximum dependent age or if the child is no longer a full-time student.

* In the case of divorce or termination of a domestic partnership or a dependent ceasing to be a dependent child it is the responsibility of the employee or spouse/domestic partner to notify the New School Benefits Department within 60 days of the occurrence of the event. Notification must be provided in writing.

MEDIGAP REIMBURSEMENT PLAN

(Revised 08-11)

Background

Medigap is a medical insurance policy sold by individual insurance companies to fill the gaps (such as deductibles and coinsurance) in the Medicare Program which is composed of Parts A, B, and D.

Purpose

The New School Medigap Reimbursement Plan provides for the reimbursement of the cost for medical insurance that supplements Medicare Part A, B, and D which is purchased on an individual basis, through an association (i.e., AARP), or through a spouse’s retiree health care plan. This program is offered in lieu of a group retiree health care plan to eligible faculty and staff upon their retirement from The New School.

Plan Year: July 1 to June 30.

Eligibility Criteria

1. Individual must be classified as Full-Time Faculty or Non-Union Full-Time Administrative Staff at date of retirement from the University.
2. Individual must have completed at least 10 years of service as a Full-Time Faculty or Non-Union Full-Time Administrative Staff Member. Service need not be consecutive, but any full-time service completed prior to a three-year break in service will not be taken into consideration.
3. Individual must retire from the University on or after the attainment of age 65.
4. Individual must begin participation in the Program immediately following retirement from the University. This requirement is waived if:
   a. the retired individual is residing outside the U.S. and is not able to furnish necessary documentation noted in the Procedure Section, #4 & #5, until his/her return to the U.S., or
   b. the retired individual elects to continue working for the university in a part-time position; however a Faculty member who assumes a Part-Time Faculty position may not elect to receive this benefit if he/she is receiving the Medicare, Part B reimbursement which is available to Part-Time Faculty members.

Benefit

1. The reimbursement is limited to the actual monthly, quarterly, or annual amount paid for the Medigap coverage, subject to the maximum reimbursement amount of $1,500 per Fiscal Year (July 1 through June 30).
2. Reimbursement is for the retired faculty or staff member’s Medigap Insurance premium only. The cost of coverage for a spouse and/or child is not covered under this program.

Procedure

1. Reimbursements can be requested on a quarterly, semi-annual, or annual basis.
2. Reimbursement payments are subject to proper and timely submission of the claims for reimbursement.
3. Request for reimbursement must be received by the filing deadline set each year by the Office of Human Resources in conjunction with the Office of Finance and Business Fiscal Year End Processing Schedule.
4. Plan Participant must provide a copy of the Invoice from the Medigap Insurance provider which shows the following:
   a. That the coverage is for the New School Retiree
   b. The coverage period
To qualify to take family or medical leave under this policy, the employee must meet all of the following conditions:

B. Eligibility

- The employee must work in a worksite where 50 or more employees are employed by The New School within 75 miles of that office or worksite. The distance is to be calculated by using available transportation by the most direct route.
- The employee must have worked for The New School for 12 months or 52 weeks. The 12 months or 52 weeks need not have been consecutive. Separate periods of employment will be counted, provided that the break in service does not exceed seven years. Separate periods of employment will be counted if the break in service exceeds seven years due to National Guard or Reserve military service obligations or when there is a written agreement, including a collective bargaining agreement, stating the University’s intention to rehire the employee after the service break. For eligibility purposes, an employee will be considered to have been employed for an entire week even if the employee was on the payroll for only part of a week or if the employee is on leave during the week.
- The employee must have worked at least 1,250 hours during the 12-month period immediately before the date when the leave is requested to commence. The university counts paid and unpaid leave hours as hours worked for determining whether 1,250 hours have been worked.
- The employee must work in a worksite where 50 or more employees are employed by The New School within 75 miles of that office or worksite. The distance is to be calculated by using available transportation by the most direct route.

C. Type of Leave Covered

The New School will grant up to 12 weeks of job protected leave (or up to 26 weeks of military caregiver leave to care for a covered service member with a serious injury or illness) during a 12-month period to eligible employees. The function of this policy is to provide employees with a general description of their FMLA rights. In the event of any conflict between this policy and the applicable law, employees will be afforded all rights required by law.

MEDICAL LEAVE OF ABSENCE

If you have questions regarding the Family and Medical Leave Act and/or The New School’s Short Term Disability Plan please contact The New School Benefits Department by calling 212.229.5671, ext. 4942, or emailing BenefitsHelp@newschool.edu.

Short-Term Disability Plan

If you are absent for work for more than 7 consecutive calendar days due to a medical condition including pregnancy, you may qualify for short-term disability benefits. Short-term disability benefits provide wage replacement for a period of time if you are not able to work due to a qualified medical condition.

During your first year of employment, you are eligible to receive your full pay for the duration of the disability (to a maximum of 4 weeks as certified by your physician and subject to approval of the short-term disability carrier). If the disability is longer than four weeks, you may qualifiy for a benefit paid directly by the short term disability carrier which is equal to the New York State Disability benefit amount: 50% of your weekly pay up to a maximum of $170 per week.

If you have 1 or more years of service, you are eligible to receive your full pay for the duration of the disability (to a maximum of 26 weeks as certified by your physician and subject to approval of the short-term disability carrier).

Your wage replacement amount shall not exceed your base rate of pay and any payments received directly from the insurance company shall be offset against your University paid wage replacement.

A short term disability leave will run concurrently with leave qualified under the Family and Medical Leave Act (FMLA) if eligible.

If you do not return from an approved short-term disability leave or if you do not return upon the expiration of the maximum allowable approved short-term disability period, your employment with The New School may be terminated.

Family and Medical Leave Act (FMLA)

The New School will comply with the Family and Medical Leave Act (FMLA) implementing Regulations as revised effective October 28, 2009. The New School posts the mandatory FMLA Notice required by the U.S. Department of Labor (DOL) on Employee Rights and Responsibilities under the Family and Medical Act in The Office of Human Resources, 80 Fifth Avenue, 8th Floor and upon hire provides new employees with information.

The function of this policy is to provide employees with a general description of their FMLA rights. In the event of any conflict between this policy and the applicable law, employees will be afforded all rights required by law.

If you have any questions, concerns, or disputes with this policy, you must contact the University’s benefits office at benefitshelp@newschool.edu or by calling 212.229.5671 x4942.

A. General Provisions

Under this policy, The New School will grant up to 12 weeks of job protected leave (or up to 26 weeks of military caregiver leave to care for a covered service member with a serious injury or illness) during a 12-month period to eligible employees. The leave may be paid, unpaid or a combination of paid and unpaid, depending upon the circumstances of the leave and as specified in this policy.

B. Eligibility

To qualify to take family or medical leave under this policy, the employee must meet all of the following conditions:

1) The employee must have worked for The New School for 12 months or 52 weeks. The 12 months or 52 weeks need not have been consecutive. Separate periods of employment will be counted, provided that the break in service does not exceed seven years. Separate periods of employment will be counted if the break in service exceeds seven years due to National Guard or Reserve military service obligations or when there is a written agreement, including a collective bargaining agreement, stating the University’s intention to rehire the employee after the service break. For eligibility purposes, an employee will be considered to have been employed for an entire week even if the employee was on the payroll for only part of a week or if the employee is on leave during the week.

2) The employee must have worked at least 1,250 hours during the 12-month period immediately before the date when the leave is requested to commence. The university counts paid and unpaid leave hours as hours worked for determining whether 1,250 hours have been worked.

3) The employee must work in a worksite where 50 or more employees are employed by The New School within 75 miles of that office or worksite. The distance is to be calculated by using available transportation by the most direct route.

C. Type of Leave Covered

05/10/2018
To qualify as FMLA leave under this policy, the employee must be taking leave for one of the reasons listed below:

1) The birth of a child and in order to care for that child within one year of birth.
2) The placement of a child with the employee for adoption or foster care and to care for the newly placed child within one year of placement.
3) To care for a spouse, child or parent with a serious health condition (described below).
4) The serious health condition (described below) of the employee.
   a. An employee may take leave because of a serious health condition that makes the employee unable to perform the essential functions of the employee's position.

   "Serious health condition" means an illness, injury, impairment, or physical or mental condition that involves either:
   (a) Inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical-care facility, including any period of incapacity (i.e., inability to work, attend school, or perform other regular daily activities) or subsequent treatment in connection with such inpatient care; or
   (b) Continuing treatment by a health care provider, which includes:
       (i) A period of incapacity lasting more than three consecutive, full calendar days, and any subsequent treatment or period of incapacity relating to the same condition that also includes:
           · treatment two or more times by or under the supervision of a health care provider (i.e., in-person visits, the first within 7 days and both within 30 days of the first day of incapacity); or
           · one treatment by a health care provider (i.e., an in-person visit within 7 days of the first day of incapacity) with a continuing regimen of treatment (e.g., prescription medication, physical therapy); or
       (ii) Any period of incapacity related to pregnancy or for prenatal care. A visit to the health care provider is not necessary for each absence; or
       (iii) Any period of incapacity or treatment for a chronic serious health condition which continues over an extended period of time, requires periodic visits (at least twice a year) to a health care provider, and may involve occasional episodes of incapacity. A visit to a health care provider is not necessary for each absence; or
       (iv) A period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective. Only supervision by a health care provider is required, rather than active treatment; or
       (v) Any absences to receive multiple treatments for restorative surgery or for a condition that would likely result in a period of incapacity of more than three days if not treated.

   Employees with questions about what illnesses are covered under this FMLA policy or under The New School's sick leave policy are encouraged to consult with the Benefits staff in the Human Resource Department.

   If an employee takes paid sick leave for a condition that progresses into a serious health condition and the employee requests unpaid leave as provided under this policy, The New School may designate all or some portion of the earlier related leave taken as leave under this policy, to the extent that the earlier leave meets the necessary qualifications.

5) Qualifying exigency leave for families of members of the National Guard or Reserves or of a regular component of the Armed Forces when the covered military member is on covered active duty or called to covered active duty.
   An employee whose spouse, son, daughter or parent either has been notified of an impending call or order to covered active military duty or who is already on covered active duty may take up to 12 weeks of leave for reasons related to or affected by the family member's call-up or service. The qualifying exigency must be one of the following: 1) short-notice deployment, 2) military events and activities, 3) child care and school activities, 4) financial and legal arrangements, 5) counseling, 6) rest and recuperation, 7) post-deployment activities and 8) additional activities that arise out of active duty, provided that the University and employee agree, including agreement on timing and duration of the leave.

   “Covered active duty” means:
   (a) in the case of a member of a regular component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country; and
   (b) in the case of a member of a reserve component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country under a call or order to active duty under a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code.

   The leave may commence as soon as the individual receives the call-up notice. (Son or daughter for this type of FMLA leave is defined the same as for child for other types of FMLA leave except that the person does not have to be a minor.) This type of leave would be counted toward the employee’s 12-week maximum of FMLA leave in a 12-month period.

6) Military caregiver leave (also known as covered service member leave) to care for an injured or ill service member or veteran.

   An employee whose son, daughter, parent or next of kin is a covered service member may take up to 26 weeks in a single 12-month period to take care of leave to care for that service member. Next of kin is defined as the closest blood relative of the injured or recovering service member.

   The term “covered service member” means:
   (a) a member of the Armed Forces (including a member of the National Guard or Reserves) who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness; or
   (b) a veteran who is undergoing medical treatment, recuperation, or therapy, for a serious injury or illness and who was a member of the Armed Forces (including a member of the National Guard or Reserves) at any time during the period of 5 years preceding the date on which the veteran undergoes that medical treatment, recuperation, or therapy.

   The term “serious injury or illness”:
   (a) in the case of a member of the Armed Forces (including a member of the National Guard or Reserves), means an injury or illness that was incurred by the member in line of duty on active duty in the Armed Forces (or existed before the beginning of the member’s active duty and was aggravated by service in line of duty on
active duty in the Armed Forces) and that may render the member medically unfit to perform the duties of the member's office, grade, rank, or rating; and

(b) in the case of a veteran who was a member of the Armed Forces (including a member of the National Guard or Reserve) at any time during a period when the person was a covered servicemember, means a qualifying (as defined by the Secretary of Labor) injury or illness that was incurred by the member in line of duty on an active duty in the Armed Forces (or existed before the beginning of the member's active duty and was aggravated by service in line of duty on active duty in the Armed Forces) and that manifested itself before or after the member became a veteran.

D. Amount of Leave
An eligible employee can take up to 12 weeks for the FMLA circumstances (1) through (5) above under this policy during any 12-month period. The New School will measure the 12-month period as a rolling 12-month period measured backward from the date an employee uses any leave under this policy. Each time an employee takes leave, The New School will compute the amount of leave the employee has taken under this policy in the last 12 months and subtract it from the 12 weeks of available leave, and the balance remaining is the amount the employee is entitled to take at that time. An eligible employee can take up to 26 weeks for the FMLA circumstance (6) above (military caregiver leave) during a single 12-month period. For this military caregiver leave, The New School will measure the 12-month period as a rolling 12-month period measured forward. FMLA leave already taken for other FMLA circumstances will be deducted from the total of 26 weeks available.

While an employee is on leave, The New School will continue the employee's health benefits during the leave period at the same level and under the same conditions as if the employee had continued to work.

Under current policy, the employee pays whatever portion of the health care premium that the employee paid just prior to being on leave. However, if the premiums are raised or lowered the employee will be required to pay the new premium rates. While on paid leave, the University will continue to make payroll deductions to collect the employee's share of the premium. While on unpaid leave, the employee must continue to make this payment, either in person or by mail. The payment must be received in the Human Resources Department by the date indicated on the notification. If the payment is more than 30 days late, the employee's health care coverage may be dropped for the duration of the leave. The New School will provide 15 days notification prior to the employee's loss of coverage.

If the employee contributes to other benefit plans, such as life insurance or flexible spending accounts, The New School will continue making payroll deductions while the employee is on paid leave. While the employee is on unpaid leave, the employee may request continuation of such benefits and pay his or her portion of the premiums. If the employee does not continue these payments, the University may discontinue coverage during the leave.

F. Employee Status After Leave
An employee who takes leave under this policy may be asked to provide a return to work/fitness for duty (FFD) clearance from a health care provider. This requirement will be included in the University's response to the employee's FMLA request. Generally, an employee who takes FMLA leave will be able to return to the same position or a position with equivalent status, pay, benefits and other employment terms. The position will be the same or one which is virtually identical in terms of pay, benefits and working conditions. The New School may choose to exempt certain key employees from this requirement and not return them to the same or similar position.

G. Use of Paid and Unpaid Leave

All Staff
FMLA leave is unpaid. However, other types of leaves, such as disability (for an employee's own serious health condition or the birth of a child) and workers' compensation leave (to the extent that it qualifies) may provide income replacement and will run concurrently with FMLA and be designated as FMLA leave.

Administrative Staff:
An employee who is taking FMLA leave may use accrued vacation days and/or accrued floating holidays during all or a portion of their unpaid leave. Otherwise, the employee may choose not to use accrued time, and the leave will be unpaid.

Union Staff:
Union employees who are taking FMLA leave for their own personal illness may be required to use all or a portion of their accrued leave, may have the option to use their accrued leave, or may be able to take the FMLA leave as unpaid, depending on the collective bargaining agreement between the employee's respective union and the University and practices and procedures thereunder and the reason for the leave (i.e., a workers compensation injury or an injury covered by New York State Short Term Disability). Union employees should see the leave of absence policy for an illness, injury or disability (for their union) for more details.

Union employees who are taking FMLA leave to care for a family member with a serious health condition or are using military FMLA leave for a qualifying exigency or FMLA military caregiver leave may use accrued leave other than sick leave, or the employee may choose to not use that accrued leave, and the leave will be unpaid. The employee may not use sick leave that is designated under the relevant collective bargaining agreement as leave to be used solely for the purpose of an employee's personal illness. Local 1205 union employees may receive regular pay for all or part of the leave under Article X, Section D (1) of their union contract, if it applies.

05/10/2018
The employee's leave under the FMLA will run concurrently with leave provided for under the union contract.

H. Intermittent Leave or a Reduced Work Schedule
The employee may take FMLA leave in 12 consecutive weeks, may use the leave intermittently (take a day periodically when needed over the year) or, under certain circumstances, may use the leave to reduce the workweek or workday, resulting in a reduced hour schedule. In all cases, the leave may not exceed a total of 12 workweeks (or 26 workweeks to care for an injured or ill service member) over a 12-month period.

The New School may temporarily transfer an employee to an available alternative position with equivalent pay and benefits if the alternative position would better accommodate the intermittent or reduced schedule, in instances of when leave for the employee or employee's family member is foreseeable and for planned medical treatment, including recovery from a serious health condition or to care for a child after birth, or placement for adoption or foster care.

For the birth, adoption or foster care of a child, The New School and the employee must mutually agree to the schedule before the employee may take the leave intermittently or work a reduced hour schedule. Leave for birth, adoption or foster care of a child must be taken within one year of the birth or placement of the child.

If the employee is taking leave for a serious health condition or because of the serious health condition of a family member, the employee should try to reach an agreement with The New School before taking intermittent leave or working a reduced hour schedule. If this is not possible, then the employee must prove that the requested leave schedule qualifies under FMLA.

I. Certification for the Employee's Serious Health Condition
The New School will require certification for the employee's serious health condition. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of leave. Medical certification will be provided using the DOL Certification of Health Care Provider for Employee's Serious Health Condition (http://www.dol.gov/esa/whd/forms/WH-380-E.pdf).

The New School may directly contact the employee's health care provider for verification or clarification purposes using a health care professional, an HR professional, leave administrator or management official. The New School will not use the employee's direct supervisor for this contact. Before The New School makes this direct contact with the health care provider, the employee will be given an opportunity to resolve any deficiencies in the medical certification. In compliance with HIPAA Medical Privacy Rules, The New School will obtain the employee's permission for clarification of individually identifiable health information.

The New School has the right to ask for a second opinion if it has reason to doubt the certification. The New School will pay for the employee to get a certification from a second doctor, which The New School will select. The New School may deny FMLA leave to an employee who refuses to release relevant medical records to the health care provider designated to provide a second or third opinion. If necessary to resolve a conflict between the original certification and the second opinion, The New School will require the opinion of a third doctor. The New School and the employee will mutually select the third doctor, and The New School will pay for the opinion. This third opinion will be considered final. The employee will be provisionally entitled to leave and benefits under the FMLA pending the second and/or third opinion.

J. Certification for the Family Member's Serious Health Condition
The New School will require certification for the family member's serious health condition. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of continuation of leave. Medical certification will be provided using the DOL Certification of Health Care Provider for Family Member's Serious Health Condition (http://www.dol.gov/esa/whd/forms/WH-380-F.pdf).

The New School may directly contact the employee's family member's health care provider for verification or clarification purposes using a health care professional, an HR professional, leave administrator or management official. The New School will not use the employee's direct supervisor for this contact. Before The New School makes this direct contact with the health care provider, the employee will be given an opportunity to resolve any deficiencies in the medical certification. In compliance with HIPAA Medical Privacy Rules, The New School will obtain the employee's family member's permission for clarification of individually identifiable health information.

The New School has the right to ask for a second opinion if it has reason to doubt the certification. The New School will pay for the employee's family member to get a certification from a second doctor, which The New School will select. The New School may deny FMLA leave to an employee whose family member refuses to release relevant medical records to the health care provider designated to provide a second or third opinion. If necessary to resolve a conflict between the original certification and the second opinion, The New School will require the opinion of a third doctor. The New School and the employee will mutually select the third doctor, and The New School will pay for the opinion. This third opinion will be considered final. The employee will be provisionally entitled to leave and benefits under the FMLA pending the second and/or third opinion.

K. Certification of Qualifying Exigency for Military Family Leave
The New School will require certification of the qualifying exigency for military family leave. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of leave. This certification will be provided using the DOL Certification of Qualifying Exigency for Military Family Leave (http://www.dol.gov/esa/whd/forms/WH-384.pdf).

L. Certification for Serious Injury or Illness of Covered Service member for Military Family Leave
The New School will require certification for the serious injury or illness of the covered service member. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of leave. This certification will be provided using the DOL Certification for Serious Injury or Illness of Covered Service member (http://www.dol.gov/esa/whd/forms/WH-385.pdf).
**M. Recertification**

The New School may request recertification for the serious health condition of the employee or the employee’s family member no more frequently than every 30 days and only when circumstances have changed significantly, or if the University receives information casting doubt on the reason given for the absence, or if the employee seeks an extension of his or her leave. Otherwise, The New School may request recertification for the serious health condition of the employee or the employee’s family member every six months in connection with an FMLA absence. The New School may provide the employee’s health care provider with the employee’s attendance records and ask whether need for leave is consistent with the employee’s serious health condition.

**N. Procedure for Requesting FMLA Leave**

All employees requesting FMLA leave must provide verbal or written notice of the need for the leave by contacting the University’s benefits office at benefitshelp@newschool.edu or by calling 212-229-5671 x4942. When the need for the leave is foreseeable, the employee must provide the University with at least 30 days’ notice. When an employee becomes aware of a need for FMLA leave less than 30 days in advance, the employee must provide notice of the need for the leave either the same day or the next business day. When the need for FMLA leave is not foreseeable, the employee must comply with The New School’s usual and customary notice and procedural requirements for requesting leave, absent unusual circumstances.

**O. Intent to Return to Work From FMLA Leave**

On a basis that does not discriminate against employees on FMLA leave, The New School may require an employee on FMLA leave to report periodically on the employee’s status and intent to return to work. All employees, except for Facilities Department employees who are covered by the 32BJ/RAB contract, must provide a fitness-for-duty certification from their doctor as least two weeks prior to the employees’ scheduled date of return. Facilities Department employees who are covered by the 32BJ/RAB contract must provide a fitness-for-duty certification from their doctor at least one week prior to the employees’ scheduled date of return. If such certification is not timely received, the employee’s return to work may be delayed.

**Long-Term Disability Plan**

If you are disabled for 6 months, you may be eligible for Long-Term Disability benefits. At the expiration of the 6-month period, your employment will end and you will be offered COBRA in order to continue health care coverage at your own cost. Approval of benefits is subject to the long-term disability carrier’s approval. If you are approved for benefits you may receive 60% of your pre-disability earnings, not to exceed a benefit of $7,500 per month, less the sum of benefits from other sources including, but not limited to, Social Security benefits, Workers’ Compensation benefits, and Unemployment benefits. Long-Term Disability benefits generally end upon attaining age 65 (later in limited instances) or until the time you are no longer disabled, if sooner.

**WORKERS’ COMPENSATION**

Workers’ Compensation is insurance that provides cash benefits and/or coverage for medical care provided to employees who are injured or become ill as a direct result of their job with The New School. You must notify your supervisor and contact the Security Office to file an Incident Report about the injury and the way in which it occurred as soon as possible. Failure to file an Incident Report in writing within 30 days after the incident may cause you to lose the right to Workers’ Compensation benefits. The Incident Report forms are available at all security guard desks or through the Office of Facilities Management. Employees who qualify for Workers’ Compensation benefits will receive pay continuation according to the requirements of the state law and our insurance plan.

**SECTION 4: HOLIDAYS, VACATIONS  LEAVES, AND CHANGES IN SCHEDULE**

This is applicable to administrators, faculty and clerical staff of the university.

The New School recognizes certain days during the year as paid holidays for employees. Employees must be actively employed with the University preceding and the day following these holidays. Employees are entitled to the following paid holidays:

- New Year’s Day
- President’s Day
- Independence Day
- Martin Luther King Jr.’s Birthday
- Memorial Day
- Labor Day
- Thanksgiving
- Friday after Thanksgiving
- Christmas Day

When a holiday falls on a Saturday, it shall be celebrated on the previous Friday; when it falls on Sunday, it shall be celebrated the following Monday.

**Floating Holidays**

In addition to the University holidays stated above, full-time administrative employees are entitled to four floating holidays each year. Floating holidays are typically accrued at the beginning of each quarter. New employees who are hired before the 15th of the second month of the quarter will accrue a floating holiday for that quarter. New employees who are hired on or after the 15th of the second month of the quarter will not accrue a floating holiday for that quarter. Part-time administrative employees who are scheduled to work 20 or more hours per week will receive pro-rated floating holidays. Floating holidays may be scheduled in advance and may be enjoyed any time during the year consistent with the needs of the department. If desired, these holidays may be used for religious observances or may be taken in conjunction with other holidays and vacation time.

Floating holidays must be used within the fiscal year (July 1 – June 30). Floating holiday time not used may not be carried forward into subsequent years.
Religious Holidays
An employee may take time for religious holidays not included in the official University schedule with his/her supervisor's permission. Such time off may be covered by a floating holiday or vacation time, if an employee is eligible, or taken without pay.

VACATION
This is applicable only to non-union administrators of the university.

The University grants vacation with pay to administrative employees each year to afford them the opportunity for rest and relaxation. As a practical matter, vacation generally should be scheduled to accommodate both the needs of the employee and the department.

This policy establishes vacation eligibility and other related procedures as they affect administrative staff. Vacation eligibility, accruals, and procedures for union employees are set forth in their respective collective bargaining agreements.

Vacation Year and Scheduling Of Vacations
The vacation year begins on July 1st and ends the following June 30th. Vacation may be taken throughout the year by most employees (schedules permitting). Supervisory staff should balance the desires of employees in regard to vacation scheduling with the needs of the University and the ability of other employees to accomplish the resulting extra work. However, they also should make every effort to ensure that each employee has the opportunity to schedule and take vacation.

Vacation requests must be submitted to and approved by the employee's supervisor prior to taking vacation.

Vacation Accrual and Eligibility
A full-time member of the administrative staff shall earn vacation at the rate of 5.93 hours per pay period (or 22 days per calendar year). A part-time employee working on a continuing basis for at least 1,000 hours per year shall earn vacation in a ratio of hours equivalent to a percent of full-time employment.

Individuals begin accruing vacation on their start date with the university. If an employee's first pay cycle covers only a portion of a full pay period, the vacation accrual will reflect the proportion of the accrual for the full pay period. However, vacation should not be taken during the first six months of employment.

Part-time, Temporary, and Student Employees
Part-time employees who work under 1,000 hours per calendar year, temporary and student employees are not eligible for vacation.

Vacation in Individual Days
Although employees are encouraged to take vacation on concurrent days, individual days may be scheduled with the supervisor's approval.

Vacation Accrual Carry Over
Vacation leave is among The New School's most generous benefits, designed to give hard-working administrative employees a well-deserved break.

The maximum amount annually for carryover is 15 days. For 2017 only, the cutoff date on which balances will be adjusted to the 15 day maximum allotment will be September 1st. Beginning in 2018 and in all subsequent years, the cutoff date will be June 30th of each year.

Part-time administrators' vacation carry over will be pro-rated.

Vacation Carryover for Approved Family Medical Leave
In addition to the carryover outlined in the section prior to this one, if administrative employees have any excess vacation days above the 15 days allowable on the cutoff date, those days will be placed in a special “leave” bank to be used by the employee if and when the employee has an event that qualifies under the Family Medical Leave Act (FMLA). Events include (but are not limited to) birth or adoption of a child and care for a parent, child or spouse with a serious health condition. The maximum balance for the special leave bank will be 22 days (pro-rated for part-time employees). The employee can receive pay by using these days during an otherwise unpaid FMLA period.

Administrative employees must apply for and be approved for FMLA in order to use days in the special leave bank. Review the FMLA policy here for more information: http://www.newschool.edu/human-resources/medical-and-family-leave/. Note that circumstances that may not be explicitly spelled out in the FMLA policy, may in fact be eligible for special leave bank days, so the employee should consult with a member of the Benefits office of Human Resources.

Work in Lieu of Vacation
Since the purpose of the university's vacation policy is to allow an opportunity for rest and relaxation, there is no provision for pay in lieu of earned vacation except at termination from employment, and then only to a maximum of 15 days (the carryover amount). There will also be no waivers of the annual cutoff dates end carryover policy, so all administrative employees are encouraged to speak with their supervisors and plan their vacation time to avoid the loss of any earned time.

Vacation and Internal Transfers
Employees who change positions, including from clerical union to administrative positions, or transfer from one department to another within the university, bring their accumulated vacation with them to their new positions or departments.

The Effect of Holidays on Vacation
Holidays falling during an employee's vacation will not count as vacation time used.
NYC SAFE AND SICK, SICK, and DISABILITY LEAVE

The University recognizes that, at times, employees may be unable to work due to personal illness or injury, as well as the illness or injury of a family member.

Eligibility

Effective April 1, 2014, the University began accruing NYC Safe and Sick Time pursuant to New York City's Earned Safe and Sick Time Act ("Paid NYC Safe and Sick Leave Law"). Pursuant to that law, all existing university employees (whether faculty or staff) who have worked more than 80 hours are eligible to accrue NYC Safe and Sick Time as described below. (Please note, however, that under the provisions of the Paid NYC Safe and Sick Leave Law, students working in Federal Work Study positions are specifically excluded from eligibility for Safe and Sick Time.)

Employees who bargain collectively through a union must refer to their respective collective bargaining agreements regarding any sick leave benefits. Copies of the various collective bargaining agreements are available at http://www.newschool.edu/human-resources/labor-relations/.

Accrual Rates for NYC Safe and Sick Time

Pursuant to the Paid NYC Safe and Sick Leave Law, employees accrue NYC Safe and Sick Time at a rate of one hour for every 30 hours worked, up to a maximum of 40 hours of NYC Safe and Sick Time per fiscal year (July 1 – June 30). All employees who work more than 80 hours in each year except student workers being paid via Federal Work Study funds will accrue NYC Safe and Sick Time based one hour for every 30 hours worked up to the statutory maximum. New employees may begin to use sick leave beginning 120 days after beginning their employment.

NYC Safe and Sick Time may only be taken in an increment of no less than 4 hours in any given day.

Employees must provide notice to supervisors on the use of NYC Safe and Sick Time. If the need for leave is foreseeable, the University may require up to seven (7) days advance notice of your intent to use NYC Safe and Sick Time. At the end of a fiscal year, any unused NYC Safe and Sick Time for that year will carry over to the new fiscal year; however, employees cannot use more than 40 hours of NYC Safe and Sick Time in a fiscal year and no more than 40 hours can be accrued at any time. This means that if in September the employee needs to use NYC Safe and Sick Time, even if they have 21 hours carryover from the year before and a new accrual of 40 hours becomes effective July 1, they may only use 40 hours of NYC Safe and Sick Time in that fiscal year.

This policy does not eliminate or change the vacation/float holiday policy for staff. If necessary, staff may use vacation and/or floating holidays if NYC Safe and Sick Time has been exhausted. However, if NYC Safe and Sick Time is exhausted, please notify Human Resources, as Short Term Disability and/or Family Medical Leave Act rules may apply. The University may require documentation from a licensed health care provider if an employee uses more than 3 days (21 hours for full-time staff, or a pro-rated number of hours for part-time staff) of consecutive workdays as NYC Safe and Sick Time. To provide notice or for additional information, please call the Benefits Help Line at 212-229-5671 X4942 or send an e-mail to benefitshelp@newschool.edu.
Acceptable reasons to use NYC Safe and Sick Time
NYC Safe and Sick Time can be used when:

- The employee has a mental or physical illness, injury, or health condition; or needs to get a medical diagnosis, care or treatment of a mental or physical illness, injury, or condition; or the employee needs to get preventive medical care. This also includes absence covered by the Family Medical Leave Act policy as described in the University's Institutional Policies and Procedures document;
- The employee must care for a family member who needs medical diagnosis, care or treatment of a mental or physical illness, injury, or health condition, or who needs preventive medical care, including absence covered by the Family and Medical Leave Act policy as described in the University's Institutional Policies and Procedures document;
- The University closes due to a public health emergency or the employee needs to care for a child whose school or childcare provider closed due to a public health emergency.
- You or a family member may be the victim or any act or threat of domestic violence or unwanted sexual contact, stalking, or human trafficking and you need to take actions necessary to restore the physical, psychological, or economic health or safety of you or your family members or to protect those who associate or work with you.

Upon termination of employment for any reason and whether voluntary or involuntary, employees will not be paid for any unused accrued NYC Safe and Sick Time. However, when there is a separation from employment and the employee is rehired by the University within 6 months of separation, previously accrued unused NYC Safe and Sick Time will be reinstated to the rehired employee.

To use NYC Safe and Sick Time, an employee must follow the department's/program's established call-in procedure or scheduling procedure for approved absences.

Family Members
Family members include any individual whose close association with the employee is the equivalent of family, a child (biological, adopted, or foster child; legal ward; child of an employee standing in loco parentis), grandchild, spouse, domestic partner, parent, grandparent, child or parent of an employee's spouse or domestic partner, sibling (including half, adopted, or step sibling), or any other individual related by blood to the employee.

Additional leave for personal illness for non-union administrative staff
For non-union administrative staff of The New School, in addition to the NYC Safe and Sick Time described above, there is no set number of leave days available for personal illness. Individuals who are out sick are paid for the day. However, these days must be used for the employee's personal illness only, and cannot be applied to care for family members. An employee absent because of personal illness must notify his/her supervisor and/or department head as close as possible to his or her scheduled start time.

Responsibility
Supervisors throughout the divisions and departments/programs are responsible for monitoring NYC Safe and Sick Time and leave for personal illness following general university guidelines. They must contact the Human Resources office immediately where there are instances of three or more consecutive days of absence, or a pattern of abuse, and a doctor's note submitted directly to Human Resources may be required in such instances. Supervisors must review and approve employees' NYC Safe and Sick time in MyDay before submitting to Human Resources and/or Payroll in a timely fashion.

Employees are responsible for following established division and department/program scheduling and call-in procedures. Exempt employees must document all used NYC Safe and Sick Time and other personal illness leave days using The New School's Workday system. Non-exempt employees who normally complete time sheets must document all used Sick Time on their time sheets or time entries in Workday.

Supervisors and employees are responsible for the appropriate use of NYC Safe and Sick Time and leave days due to personal illness.

Please contact the Benefits Help Line at 212-229-5671 X4942 or send an e-mail to benefitshelp@newschool.edu with any questions about this policy.
PAID SAFE AND SICK LEAVE: WHAT EMPLOYEES NEED TO KNOW

Under New York City’s Earned Safe and Sick Time Act (Paid Safe and Sick Leave Law), covered employees have the right to use safe and sick leave for the care and treatment of themselves or a family member and to seek legal and social services assistance or take other safety measures if the employee or a family member may be the victim of any act or threat of domestic violence or unwanted sexual contact, stalking, or human trafficking.

The Department of Consumer Affairs (DCA) prepared this sheet to provide guidance to employees about their rights under the law. DCA will update this sheet as appropriate. Please note the date at the bottom of the sheet. To read the law or Frequently Asked Questions about the law, go to nyc.gov/PaidSickLeave.

EMPLOYEES COVERED/NOT COVERED BY THE LAW

<table>
<thead>
<tr>
<th>Covered</th>
<th>Not Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time employees</td>
<td>Employees who work 80 hours or less in a calendar year in New York City</td>
</tr>
<tr>
<td>Part-time employees</td>
<td>Students in federal work study programs</td>
</tr>
<tr>
<td>Transitional jobs</td>
<td>Employees whose work is compensated by qualified scholarship programs</td>
</tr>
<tr>
<td>program employees</td>
<td>Employees of government agencies</td>
</tr>
<tr>
<td>Employees who are</td>
<td>Physical therapists, occupational therapists, speech language pathologists,</td>
</tr>
<tr>
<td>family members but</td>
<td>audiologists who are licensed by the New York State Department</td>
</tr>
<tr>
<td>not owners</td>
<td>of Education</td>
</tr>
<tr>
<td>Employees who</td>
<td>These professionals are not covered under the law if they call in at work</td>
</tr>
<tr>
<td>live outside of New</td>
<td>assignments at will; determine their own work schedule; have</td>
</tr>
<tr>
<td>York City</td>
<td>the ability to reject or accept any assignment referred to them; and</td>
</tr>
<tr>
<td></td>
<td>are paid an average hourly wage, which is at least four times the</td>
</tr>
<tr>
<td></td>
<td>federal minimum wage.</td>
</tr>
</tbody>
</table>

Employees must work 80+ hours per calendar year in New York City.

Independent contractors who do not meet the definition of an employee under New York State Labor Law (go to labor.ny.gov and search “Independent Contractors”)

Participants in Work Experience Programs (WEP)

Certain employees subject to a collective bargaining agreement

Note: If your employer has an existing policy allowing employees to use safe and sick leave, the policy must meet or exceed the requirements of the law.

NOTICE OF EMPLOYEE RIGHTS

If you are a covered employee, your employer must give you written notice of your right to safe and sick leave. You have a right to the notice in English and, if available on the DCA website, your primary language. Keep a copy of the notice.

AMOUNT OF SAFE AND SICK LEAVE

<table>
<thead>
<tr>
<th>Number of Employees Employed by Employer</th>
<th>Amount of Safe and Sick Leave per Calendar Year*</th>
<th>Rate of Pay for Leave</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 or more</td>
<td>Up to 40 hours paid leave</td>
<td>Regular hourly rate but no less than the current minimum wage</td>
</tr>
<tr>
<td>1-4</td>
<td>Up to 40 hours unpaid leave</td>
<td>Unpaid</td>
</tr>
</tbody>
</table>

*Note: “Calendar Year” means any regular and consecutive 12-month period of time determined by an employer. The Notice of Employee Rights must state the employer’s calendar year.

SAFE AND SICK LEAVE ACCRUAL AND USE – IMPORTANT DATES

<table>
<thead>
<tr>
<th>Rate of Accrual</th>
<th>Date Accrual Begins</th>
<th>Date Sick Leave Available for Use</th>
<th>Date Safe Leave Available for Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 hour for every 30 hours worked</td>
<td>April 1, 2014 or the first day of employment, whichever is later</td>
<td>July 30, 2014 or 120 days after first day of employment, whichever is later</td>
<td>May 5, 2018 or 120 days after first day of employment, whichever is later</td>
</tr>
</tbody>
</table>

Exception: If you are covered by a collective bargaining agreement that was in effect on April 1, 2014, you begin to accrue safe and sick leave under City law beginning on the date that the agreement expires. You can begin using accrued sick leave 120 days after the date that the agreement expires. You can begin using safe leave on May 5, 2018 or 120 days after the date that the agreement expires, whichever is later.

Keep a copy of all documents that show your amount of safe and sick leave accrual and use.

05/10/2018
ACCEPTABLE REASONS TO USE SAFE AND SICK LEAVE
You can use safe and sick leave to take time off from work when:

☐ You have a mental or physical illness, injury, or health condition; you need to get a medical diagnosis, care, or treatment of your mental or physical illness, injury, or condition; you need to get preventive medical care.

☐ You must care for a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition, or who needs preventive medical care.

☐ Your employer’s business closes due to a public health emergency or you need to care for a child whose school or child care provider closed due to a public health emergency.

☐ You or a family member may be the victim of any act or threat of domestic violence or unwanted sexual contact, stalking, or human trafficking and you need to take actions necessary to restore the physical, psychological, or economic health or safety of you or your family members or to protect those who associate or work with you, including to:
  ☐ Obtain services from a domestic violence shelter, rape crisis center, or other services program.
  ☐ Participate in safety planning, relocate, or take other actions to protect your safety or that of your family members, including enrolling children in a new school.
  ☐ Meet with an attorney or social service provider to obtain information and advice related to custody; visitation; matrimonial issues; orders of protection; immigration; housing; discrimination in employment, housing, or consumer credit.
  File a domestic incident report with law enforcement or meet with a district attorney’s office.

The law recognizes the following individuals as “family members:”

☐ Any individual whose close association with the employee is the equivalent of family

☐ Child (biological, adopted, or foster child; legal ward; child of an employee standing in loco parentis)

☐ Grandchild

☐ Spouse

☐ Domestic Partner

☐ Parent

☐ Grandparent

☐ Child or Parent of an employee’s spouse or domestic partner

☐ Sibling (including a half, adopted, or step sibling)

☐ Any other individual related by blood to the employee

ADVANCE NOTICE
If the need is foreseeable, your employer can require up to seven days advance notice of your intention to use safe or sick leave. If the need is unforeseeable, your employer may require you to give notice as soon as practicable (reasonable). Your employer may require you to provide written verification that you used safe or sick leave for safe or sick leave purposes.

DOCUMENTATION
Your employer can require reasonable documentation if you use more than three consecutive workdays as safe or sick leave. Your employer may require a note signed by a licensed health care provider for sick leave or documentation from a social service provider, legal service provider, member of the clergy, or notarized letter written by you indicating the need for safe leave. The Paid Safe and Sick Leave Law prohibits employers from requiring that documentation specify the reason for safe or sick leave use. Disclosure may be required by other laws.

UNUSED SAFE AND SICK LEAVE
You can carry over up to 40 hours of unused safe and sick leave to the next calendar year. However, your employer is only required to let you use up to 40 hours of safe and sick leave per calendar year.
MILITARY SERVICE LEAVE
The New School will grant military leaves of absence as required by law and by the needs of employees who are members of the military service. Any full-time employee who is called to active military duty will be granted a military leave of absence. The duration of the leave will be the term of enlistment plus any additional time may be required by the government. It will include a reasonable allowance of time for travel and adjustment.

Reenlistment or any other voluntary extension of the tour of duty may affect the leave of absence. On return from military leave of absence, the employee will be reinstated as required by law, subject to these conditions:

• The employee must apply for reinstatement within the time required by law;

If the employee’s former job is not available, the University will provide a job of similar status, seniority, and pay. Adjustments and exceptions to this policy may be made as circumstances require.

The University makes it a policy not to discriminate in anyway against employees who are members of the military. The employee’s job will not be in jeopardy if a military leave of absence is requested or taken.

BEREAVEMENT LEAVE
If a member of your immediate family dies, you are allowed five (5) days paid absence. Members of the immediate family are mother, father, sister, brother, spouse, domestic partner, child, grandchild, mother-in-law, father-in-law, sister-in-law, brother-in-law, grandmother, and grandfather. If you wish to take time off due to the death of someone other than a member of your immediate family, you can take accumulated vacation days or time off without pay, with supervisory approval.

JURY DUTY LEAVE
If you receive a notice of jury duty, you must notify your supervisor and provide a copy of the jury duty notification as soon as possible so that proper coverage may be arranged for your absence. Each day that you are serving jury duty, you must inform your supervisor as to the status of your service and expected return-to-work date. If you are released from jury duty early in the day, then you are expected to return to work.

If you are called for jury duty, you will continue to receive your base normal pay for your first two (2) weeks of jury service. Employees will be compensated for base wages only, for time spent on jury duty, up to two weeks. Compensation will be made in accordance with federal and state wage and hour laws. For jury duty lasting longer than two weeks, you must contact Human Resources for further discussion.

CHANGES OF SCHEDULE
Under the NYC’s Temporary Schedule Change Law effective July 18,2018, covered employees have a right to temporary changes to their work schedule for certain “personal events.” Please see full details below.
TEMPORARY SCHEDULE CHANGE LAW:
WHAT EMPLOYERS/WORKERS NEED TO KNOW

The Department of Consumer Affairs (DCA) Office of Labor Policy & Standards (OLPS) enforces NYC’s Temporary Schedule Change Law, which took effect July 18, 2018. Under the law, covered employees have a right to temporary changes to their work schedule for certain “personal events.” DCA created this overview for employers and employees. Visit nyc.gov/dca for more information, including Frequently Asked Questions.

NOTE:

- Employers cannot punish, penalize, retaliate, or take any action against employees that might stop or deter them from exercising their rights under the law. Workers should immediately contact OLPS about retaliation. See the section Contact OLPS.
- The law covers workers regardless of immigration status.

Definitions

<table>
<thead>
<tr>
<th>Temporary change</th>
<th>Personal event</th>
<th>Family member</th>
</tr>
</thead>
</table>
| A “temporary change” means an adjustment to an employee’s usual schedule. This can include: using short-term unpaid leave, paid time off, working remotely, or swapping or shifting working hours. | A “personal event” can be any of the following:  
The need to care for a child under the age of 18  
The need to care for a “care recipient,” a person with a disability who is a family or household member and relies on the employee for medical care or to meet the needs of daily living  
The need to attend a legal proceeding or hearing for public benefits to which the employee, a family member, or the employee’s minor child or care recipient is a party  
Any other reason for which the employee may use leave under NYC’s Paid Safe and Sick Leave Law | “Family members” include:  
Any individual whose close association with the employee is the equivalent of family  
Child (biological, adopted, or foster child; legal ward; child of an employee standing in loco parentis)  
Grandchild  
Spouse  
Domestic Partner  
Parent  
Grandparent  
Child or Parent of an employee’s spouse or domestic partner  
Sibling (including a half, adopted, or step sibling)  
Any other individual related by blood to the employee |

Who Does the Law Cover?

<table>
<thead>
<tr>
<th>Employees Covered by the Law</th>
<th>Employees NOT Covered by the Law</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

More >
| All employees who work 80+ hours per calendar year in NYC and who have been employed by their employer 120 or more days |
| Government employees |
| Certain employees subject to a collective bargaining agreement |
| Certain employees in motion picture, television, and live entertainment industries |
Notice of Rights
Employers must post the notice “You Have a Right to Temporary Changes to Your Work Schedule” where employees can easily see it at each NYC workplace. Employers must post this notice in English and in any language that is the primary language of at least 5 percent of the workers at a workplace if the translation is available on the DCA website nyc.gov/dca.

Overview of Employee Rights

Temporary change to work schedule on up to two (2) occasions each calendar year
The change must be to accommodate a personal event. See Definitions. Employers must grant requests for up to:
- Two (2) separate occasions, each totaling one (1) business day OR
- One (1) occasion for up to two (2) business days

Freedom from retaliation for additional schedule change requests
Employees can request additional changes to their schedule. Employers are not required to grant additional requests; however, they cannot retaliate against employees.

Ability to propose type of temporary change
Employees can propose the type of temporary change they would like when they request it. See Definitions.

Employers must:
- Approve the proposal, OR
- Provide leave without pay.

Employers may:
- Offer employees the ability to use paid time off. Note: The law does not require employers to offer paid time off, and employees do not need to accept such an offer.

Employers may NOT:
- Require employees to use leave earned under NYC’s Paid Safe and Sick Leave Law for a temporary schedule change.

Note: If an employer has an existing policy allowing employees to request a temporary schedule change, the policy must meet or exceed the requirements of the law.

Requesting a temporary schedule change:
As soon as employees become aware of the need for a temporary schedule change, they should request one from their employer or direct supervisor either orally or in writing. The request should include:
- Date of the temporary schedule change
- That the change is due to a personal event
- Proposed type of temporary change (unless the employee would like to use leave without pay)

Employers must respond immediately.

If an employee requested the schedule change orally (for example, in person or by phone), the employee must submit a written request no later than the second business day after the employee returns to work. The employee should include in the written request the date of the temporary schedule change and that the change was due to a personal event.

Employers must provide a written response within 14 days. The response must include:
- If the request was granted or denied
- How the request was accommodated (if granted) or the reason for denial (if denied)
- Number of requests the employee has made for temporary schedule changes
- How many days the employee has left in the year for temporary schedule changes

Note: If the employee does not submit a written request, the employer is not required to provide a written response but cannot deny the request because the employee did not submit a written request.
Recordkeeping
Employers must retain electronic records documenting their compliance with the law for three (3) years unless another law requires that records be maintained for a longer period. If an employer fails to retain or produce records, employees receive a "rebuttable presumption" in their favor when they bring their complaint in court. This means that the burden will be on employers to show they did not violate the law.

Complaints

Employees can file a complaint with OLPS. Go to nyc.gov/dca or contact 311 (212-NEW-YORK outside NYC) and ask for "Temporary Schedule Change Law." OLPS will conduct an investigation and try to resolve a complaint. OLPS will keep a complainant's identity confidential unless disclosure is necessary to complete an investigation or is required by law.

If an employee files a complaint, OLPS will contact the employer by mail for written response. The employer must respond to DCA within the time period written on the notice.

Employees can also file an action in court. However, employees cannot have a complaint with OLPS and a claim in court at the same time.

Notice of Hearing
If employers receive a Notice of Hearing, they have the opportunity to settle the alleged violations without a hearing or to appear before an impartial judge at the City's administrative tribunal.

Contact OLPS
Visit nyc.gov/dca, email olps@dca.nyc.gov, or contact 311 (212-NEW-YORK outside NYC) and ask for "Temporary Schedule Change Law."
SECTION 5: SEPARATION FROM EMPLOYMENT

This is applicable only to administrators of the university.

Employees leave the University for various reasons such as: resignation, retirement, termination, layoff, and disability. This section covers the various eligibility entitlements for departing administrative employees. Entitlements differ according to the circumstances for separation.

EXITING PROCEDURES
The following paragraphs describe requirements and entitlements for all administrative employees leaving the university. Please note employees are required to submit a resignation letter to their manager to begin the exiting process.

Returning University Property
All departing employees are required to return their University issued cell phones, laptops, credit cards, any borrowed library books, office keys, all other keys to University facilities, and identification cards to the Office of Human Resources or to their immediate supervisors before or on the last day of work.

Vacation
Upon termination of employment, employees leaving the University will receive payment for accrued unused vacation according to the vacation policy in the Holidays, Vacation and Leaves Section of this manual.

Electronic Banking
Electronic transfers (direct deposit) will be canceled and a final payment paycheck will be mailed to the employee’s last known address on the regularly scheduled pay day unless other arrangements have been made with the Payroll Department.

Employment References/Employment Verification
Refer to the Employment Practices Section for information regarding employment references/employment verification.

Exit Interviews
An employee is required to contact Human Resources approximately two weeks prior to the employee’s last day of employment to schedule an exit interview. Issues such as final payments, continuation of benefits and forwarding addresses are discussed during exit interviews.

Benefits
For complete information regarding how your benefits are affected upon employment termination please go to http://www.newschool.edu/forms/Benefits-Upon-Termination-FT-Faculty-Staff.pdf.

Unemployment Insurance
University employees are covered by the New York State Unemployment Insurance Act. Individuals who resign voluntarily are not usually eligible for benefits. Benefit entitlement is determined by the New York State Unemployment Insurance Division. A separating employee should consult his/her local unemployment office. Claims should be addressed to:

The New School, Office of Human Resources
80 Fifth Avenue, 8th Floor, New York, NY 10011

REASONS FOR LEAVING
This is applicable only to administrators of the university.
Resignation
An administrative employee who resigns is expected to give at least four (4) weeks written notice to his/her immediate supervisor and the Office of Human Resources. Tuition benefits cease at the time of termination.

Termination
An administrative employee whose employment is terminated for performance related reasons will be paid for accrued unused vacation time according to the vacation policy. Tuition benefits cease at the time of termination.

Layoffs
When an administrative position is terminated due to budgetary constraints, reorganization or other reasons (such as shortage of work), the following policy will apply to all administrative employees:
1. The University will notify the employees as soon as possible regarding the coming lay-off.
2. When possible, the University will attempt to place the staff member in another vacant position for which he or she is qualified at the regular rate of pay assigned to the vacant position.
3. In the event that an employee who has received severance is recalled to work and laid off again, the previous period of service will not be calculated for severance purposes.
4. Severance pay will be calculated on the following schedule:
   - less than 2 years: 2 weeks
   - 2 - less than 5 years: 4 weeks
   - 5 - less than 8 years: 6 weeks
   - 8 years: 8 weeks
   - 9 years: 9 weeks
   - 10+ years: 10 weeks
5. To be eligible to receive the severance pay afforded under this policy, a covered employee must also sign a separation agreement and general release satisfactory to the University.

Death of Employee
Surviving dependents of an employee should contact the Benefits Office for assistance with filing a life insurance claim and to get information on continuation of health care and dental care coverage.

SECTION 6: UNIVERSITY SERVICES AND FACILITIES
This section provides an overview to some of the university’s service departments, services and academic facilities. It is intended to inform employees of the range of resources available to them at The New School. More complete information about services and facilities is available from the Office of Human Resources, Office of the Provost, the Office of the Dean of each academic division, and the offices that are responsible for the services.

HUMAN RESOURCES OFFICE
Located on the 8th floor of 80 Fifth Avenue, the Human Resources Office is responsible for administering employee benefits, labor and employee relations, and compliance with University policies and procedures concerning employment. The department also coordinates the recruitment of most University personnel.

Employees wishing to discuss matters concerning their employment or benefits should call the Human Resources Office at 212-229-5671 for information or to schedule an appointment.
The Payroll Office
The Payroll Office, a component of Human Resources, is also located on the 8th floor of 80 Fifth Avenue. The Payroll Office is responsible for preparing paychecks for all University employees. Paychecks are prepared based on information provided by the employee's department and division. Various taxes are withheld from employee paychecks based on relevant laws and withholding tax certificates filed with the Office by employees. The Office also handles credit union deductions and direct deposit payments.

Employees may contact the Payroll staff at 212-229-5674.

TREASURERS/CONTROLLER'S OFFICE
The Treasurers/Controller's Office consists of three departments: Purchasing, Accounts Payable and Accounting.

Purchasing
The Purchasing Office is located on the 4th floor of 80 Fifth Avenue and administers the centralized purchasing services of the university. It coordinates the procurement of goods and services for all academic and administrative departments. The department director, chair or dean must approve all Purchase Requisitions before they are submitted to the Purchasing Department. The Purchasing department staff can be reached at 212-229-5323.

The Accounts Payable Office
The Accounts Payable Office is located on the 4th floor of 80 Fifth Avenue. Accounts Payable is responsible for vendor payments, student refunds and employee expense reimbursements. Please refer to The General Payment Policies and Procedures Guide and the Bill Paying Schedule for descriptions of the payment process. The Accounts Payable Staff may be contacted at 212-229-5680.

The Accounting Office
The Accounting Office is also located on the 4th floor of 80 Fifth Avenue. Accounting is responsible for: the distribution of Monthly Account Director's Reports comparing actual and encumbered expenditures with budgeted figures for University projects, financial statements, tax audits, endowment and operating investments, check disbursement review, and general accounting and reporting. The Accounting staff may be contacted at 212-229-5660.

GENERAL PAYMENT POLICIES AND PROCEDURES
The Controller’s Office strives to pay its bills within thirty days of the date of invoice. The Office also aims to reimburse employees for appropriate expenses on a timely basis. To support these goals, the Controller has prepared the “General Payment Policies and Procedures” and “Reimbursement of Local Business Expenses” procedures. Both procedures have been reprinted below.

Procedure for Goods and Services Purchase with Purchase Orders
1. We order some goods and services using purchase orders. When such an order is placed, the Purchasing Department will send to you a pink copy and yellow copy of the purchase order. When you receive the goods or services, fill out the bottom of the pink copy with your signature and date. Then submit the pink copy to the Accounting Office. It is required for payment.
2. Please submit the pink copy without waiting for an invoice. It is current University policy that vendors send all original invoices directly to the Accounting Office. However, the vendor may send the original invoice to you. Send the original invoice to the Accounting Department immediately, should you receive it. Put your signature and date on it. An invoice is required for payment.
3. The Accounting Department will not send out invoices it receives directly from vendors. Instead, the Accounting Department will send a list of outstanding purchase orders to the Dean or Officer for review. This should prompt employees to send the pink copy to the Accounting Department to authorize payment.

4. Attach the packing slip that the vendor delivers with goods to the pink copy of the purchase order. It is required for payment.

Goods and Services Purchased without Purchase Orders
1. We order some goods and services without using purchasing orders. As noted above, it is current University policy that vendors send all original invoices directly to the Accounting Department. However, the vendor may send the original invoices to you. Send the original invoice to the Accounting Department immediately, should you receive it. Put your signature and date on it. It is required for payment.
2. When the Accounting Department receives a vendor invoice, we will send a copy to the appropriate person. Put your signature and date on it. Then send it back to the Accounting Department. It is required for payment.

Petty Cash Policy
Petty cash is available at Cashiering to reimburse employees for small expenses (less than $50) which could not have been processed through normal purchasing procedures or through the use of the University purchasing card or via an employee cash advance. Examples of appropriate petty cash reimbursements include taxis, postage, deliveries, and office supplies.

The following best practices apply:
- Only expenses of $50 or less will be reimbursable with petty cash. No exceptions.
- The person who incurred the expense and is requesting the reimbursement must personally appear at Cashiering and show a valid University ID card. No exceptions. A petty cash log will be maintained in Cashiering and employees will be asked to sign this log when receiving cash. (This log will periodically be reviewed by the Cashiering Manager and Accounting.)
- Expenses for meals, entertainment, and travel (other than local taxis) will not be reimbursable with petty cash. The IRS requires substantiation of who, what, where, when, and why for these expenses and this is vetted by Accounts Payable upon receipt of a properly completed expense report and will be reimbursed by check.
- Only original receipts (no copies or credit card statements) will be accepted for petty cash reimbursement.

IDENTITY THEFT PREVENTION PROGRAM
The New School (the “University”) has developed this Identity Theft Prevention Program (the “Program”) pursuant to the Federal Trade Commission’s “Red Flags Rule,” which implements Section 114 of the Fair and Accurate Credit Transactions Act of 2003. The Program is designed to detect, prevent, and mitigate identity theft in connection with the opening of a covered account, or an existing covered account offered or maintained by the University. This Program establishes procedures to:
1. Identify relevant Red Flags for Covered Accounts it offers or maintains and incorporate those Red Flags into the Program;
2. Detect and record Red Flags that have been incorporated into the Program;
3. Respond appropriately to any Red Flag that has been detected to prevent and mitigate identity theft; and
4. Ensure the Program is updated periodically to reflect changes in identity theft risks to students and employees or to the safety and soundness of the University in its role as creditor.

The Program shall, as appropriate, incorporate existing policies and procedures that control reasonably foreseeable risks.
Definitions
Covered Accounts: (i) an account the University offers or maintains primarily for personal, family or household purposes, that involves or is designed to permit multiple payments or transactions; or (ii) any other account that the University offers or maintains for which there is a reasonably foreseeable risk to customers or to the safety and soundness of the University from identity theft.

Identity Theft: A fraud committed or attempted using the identifying information of another person without authority.

Red Flag: A pattern, practice, or specific activity that indicates the possible existence of identity theft.

University Covered Accounts
The University has identified the following Covered Accounts:

University Administered Covered Accounts – Students:
- Federal Perkins Loan Program
- Deferred Tuition Payments
- Student Accounts
- Monthly Payment Plans

University Administered Covered Accounts – Employees:
- Mortgages

Service Provider Covered Accounts:
- Campus Partners – Collection of Perkins and Institutional Loans

Identification of Red Flags
The following Red Flags are potential indicators of fraud. Any time a Red Flag, or a situation closely resembling a Red Flag is apparent, it should be investigated:

A. Notifications and Warnings from Credit Reporting Agencies
- Report of fraud accompanying a credit report;
- Notice or report from a credit agency of a credit freeze on a customer or applicant;
- Notice or report from a credit agency of an active duty alert for an applicant; and
- Indication from a credit report of activity that is inconsistent with a customer’s usual pattern or activity.

B. Suspicious Documents
- Identification document or card that appears to be forged, altered or inauthentic;
- Identification document or card on which a person’s photograph or physical description is not consistent with the person presenting the document;
- Other document with information that is not consistent with existing customer information (such as if a person’s signature on a check appears forged); and
- Application for service that appears to have been altered or forged.

C. Suspicious Personal Identifying Information
- Identifying information presented that is inconsistent with other information the customer provides (example: inconsistent birth dates);
• Identifying information presented that is inconsistent with other sources of information (example: an address not matching an address on a credit report);
• Identifying information presented that is the same as information shown on other applications that were found to be fraudulent;
• Identifying information presented that is consistent with fraudulent activity (example: an invalid phone number or fictitious billing address);
• Social security number presented that is the same as one given by another customer;
• An address or phone number presented that is the same as that of another person;
• A person fails to provide complete personal identifying information on an application when reminded to do so; and
• A person’s identifying information is not consistent with the information that is on file for the customer.

D. Suspicious Requests
• A request related to transactions involving a Covered Account is made from a non-University issued email account; and
• A request is made to mail something to an address not listed on file.

E. Suspicious Account Activity or Unusual Use of Account
• Change of address for an account followed by a request to change the account holder's name;
• Payments stop on an otherwise consistently up-to-date account;
• Account used in a way that is not consistent with prior use (example: very high activity);
• Mail sent to the account holder is repeatedly returned as undeliverable;
• Notice to the University that a customer is not receiving mail sent by the University;
• Notice to the University that an account has unauthorized activity;
• Breach in the University’s computer system security; and
• Unauthorized access to or use of customer account information.

F. Alerts from Others
• Notice to the University from a customer, identity theft victim, law enforcement or other person regarding possible identify theft in connection with Covered Accounts.

Detection of Red Flags

New Accounts
In order to detect any of the Red Flags identified above associated with the opening of a new account, University personnel will take the following steps to obtain and verify the identity of the person opening the account:

• Require certain identifying information such as name, date of birth, residential or business address, driver's license or other identification;
• Verify the customer's identity (for instance, review a driver's license or other identification card);
• Independently contact the customer.

Existing Accounts
In order to detect any of the Red Flags identified above for an existing account, University personnel will take the following steps to monitor transactions with an account:

• Verify the identification of customers if they request information (in person, via telephone, via facsimile, via email);
• Verify the validity of requests to change billing addresses; and
• Verify changes in banking information given for billing and payment purposes.

Responding to Red Flags and Mitigating Identity Theft
In the event University personnel detect any identified Red Flags, such personnel shall take all appropriate steps to respond and mitigate identity theft depending on the nature and degree of risk posed by the Red Flag, including but not limited to the following examples:
• Deny access to the Covered Account until other information is available to eliminate the Red Flag;
• Continue to monitor a Covered Account for evidence of identity theft;
• Contact the customer;
• Change any appropriate passwords, security codes or other security devices that permit access to a Covered Account;
• Do not open a new account;
• Reopen a Covered Account with a new number;
• Close an existing Covered Account;
• Notify the University’s Security Department and/or law enforcement;
• Determine that no response is warranted under the particular circumstances.

Service Provider Arrangements
In the event the University engages a service provider to perform an activity in connection with one or more accounts, the University will take appropriate steps to ensure the service provider performs its activity in accordance with reasonable policies and procedures designed to detect, prevent, and mitigate the risk of identity theft. Such steps may include the following:
1. Review a copy of the service provider’s identity theft policies and procedures;
2. Require, by contract, that service providers have such policies and procedures in place; and
3. Require, by contract, that service providers review the University’s Program and report any Red Flags to the Program Administrator.

Program Administration and Maintenance
The Vice President and Treasurer shall be designated to serve as the Program’s Administrator. The Program Administrator is responsible for developing, implementing and updating the Program. The Program Administrator will be responsible for Program administration, ensuring appropriate training of University staff on the Program, for reviewing any staff reports regarding the detection of Red Flags and the steps for identifying, preventing and mitigating identity theft, determining which steps of prevention and mitigation should be taken in particular circumstances and considering periodic changes to the Program.

The Program will be periodically reviewed and updated to reflect changes in identity theft risks and technological changes. The Program Administrator will consider the University’s experiences with identity theft; changes in identity theft methods; changes in identity theft detection, mitigation and prevention methods; changes in types of accounts the University maintains; changes in the University’s business arrangements with other entities; and any changes in legal requirements in the area of identity theft. After considering these factors, the Program Administrator will determine whether changes to the Program, including the listing of Red Flags, are warranted. If warranted, the Program will be updated.

Staff Training
University staff responsible for implementing the Program shall be trained either by or under the direction of the Program Administrator in the detection of Red Flags and responsive steps to be taken when a Red Flag is detected.
BUSINESS AND TRAVEL EXPENSE POLICY

Policy Description
This policy relates to business expenses incurred by employees on behalf of The New School (“the university”). It promotes the proper stewardship of funds by providing guidelines for the appropriate and legal uses of these funds in support of the university’s mission. This policy is consistent with Generally Accepted Accounting Principles (GAAP), Board of Trustees mandates, funder requirements, federal, state and local rules, and regulations governing not-for-profit organizations. This policy and its administration may be revised periodically to reflect changes in these mandates and other factors.

Policy Statement
This policy applies to all business expenses incurred by university employees. Due to budgetary constraints or funder restrictions, some university departments may institute more restrictive guidelines. In cases where there is a discrepancy between this policy and a department, granting agency, or donor policy, the more restrictive policy will apply.

This document is intended to cover the university’s policy and procedures for the most typical business expenses and is not intended to be exhaustive. In the event that an expense is not specifically covered in the policy, Finance and Business will make a determination based on reasonable interpretation of the guidelines and regulatory requirements.

General Policy And Compliance Matters

3.1 Accountable Plan
Establishing and maintaining an "accountable plan" under IRS guidelines, for business expenses, is beneficial to everyone. Amounts paid to an employee under the university’s accountable plan are generally excluded from the employee's taxable income and are therefore exempt from payroll taxes and income taxes. However, amounts paid under a nonaccountable plan (or one that is improperly maintained) will result in additional income on the employee's W-2 form and additional payroll taxes will be withheld. The university adheres to Internal Revenue Service (IRS) regulations surrounding Accountable Plans (refer to IRS website), ensuring expenses are actual, reasonable, substantiated, and accounted for appropriately and in a timely manner. These regulations require that the following standards be met when documenting and recording expenses:

- Documentation of a business connection or purpose (3.1.1)
- Adequate accounting of expenses within a reasonable period of time (3.1.2)
- Return of any excess reimbursement, allowance, or advance within a reasonable period of time (3.1.3)

3.1.1 Documentation of a business connection or purpose
A business purpose must be documented and be specific, addressing the questions of who, what, where, when, and why. For example, “Professor Smith traveled to Boston, Massachusetts, on July 31, 20XX, to speak at an Accounts Payable Network conference” is an appropriately documented business purpose. “Travel to Boston for conference” is not.

3.1.2 Adequate accounting of expenses within a reasonable period of time
The determination of a reasonable period of time depends upon the facts and circumstances, but is generally held to be no later than thirty days after the date of the expense, except at fiscal year-end when expenses should be reported immediately.

Expense reports submitted more than thirty days after the date of the expense (if travel related, then after the return date of the trip), or outside the closing schedule at year-end, require supplemental approval (refer to Appendix A). Supporting documentation must be provided to describe the circumstances leading to the late submission in order to evaluate whether the expense reimbursement is taxable. Any expense that is not reconciled within sixty days after it is incurred may become taxable to the employee. In this case the responsible Officer or Dean will be notified.

3.1.3 The return of any advance, excess reimbursement, or allowance within a reasonable period of time
Cash advances are meant to cover expenses that cannot be charged to the corporate card and can be obtained through the corporate card with prior arrangements with the Travel Expense Service Manager. If an employee does not have a corporate card, one should be requested at least fifteen days before it is needed.

Failure to account for an advance or to return excess reimbursements within sixty days from incurring the expense or return from the trip will result in a written notification from Accounts Payable to the department head, suspension of advance privileges, and under IRS regulations, will become taxable to the employee.

3.2 Segregating unallowable or excessive expenses
Federal guidelines prohibit certain expenses from being charged to federal grants and contracts (refer to Circular A-21). These include expenditures for alcohol, entertainment, flowers or gifts, or excessive costs, such as first class travel and excessive lodging or meals costs. These unallowable costs must be identified and segregated on all expense reports.

All purchases or vendor contracts for sponsored projects must be made with vendors in good standing with the federal government and not with any vendor currently either debarred or suspended from doing business with the Federal government. During annual contract renewals, vendors’ debarment and suspension status should be checked using the System of Award Management. All reviews should be made in coordination with the university’s Grants Manager.

The university deems certain expenses unallowable, which include, but are not limited to, expenses that are personal, unauthorized, unreasonable, or not aligned with the university’s mission (See Appendix B for listing of common non-reimbursable expenses). All unallowable or excessive expenses charged to or paid by the university are considered excess reimbursements and are the responsibility of the payee (see section 3.1.3 above).
3.3 **Proper Documentation**

The Purchaser and Delegate (see Appendix A) are responsible for providing sufficient documented evidence to substantiate and support the business purpose of all expenses. Documentation should be in the form of invoices or receipts including the name of the vendor, location, date, dollar amount, description of goods or services purchased, and proof of payment.

If the receipt does not include this information, a copy of a credit or debit card statement identifying the date, location, and amount of the expense may be submitted along with a description of the purchase. Private or unrelated information should be redacted from these statements. Documentation (proof of payment) demonstrating that payment was tendered must be provided and identify the means by which payment was tendered. This is often part of the receipt. Examples of this may include notation of “cash tendered”, “paid”, a zero balance due or a debit or credit card payment.

While receipts are strongly encouraged for all purchases, purchases on the university credit card in amounts less than $25 do not require receipts. All purchases made with sponsored project and faculty research funds, regardless of dollar amount, require receipts.

In rare instances when receipts are lost or cannot be obtained the Purchaser must provide other documentation that supports the validity of the expenses. Indicate “no receipt” in the comment field of Concur and attach a signed memorandum indicating what the expense is and the extenuating circumstances for not submitting a receipt.

3.4 **Partially Covered or Shared Expenses**

If expenses are partially covered by another organization, contract, or funding source, the expense report must include the name of the organization that is partially covering the expense and the amounts to be paid by the university and the other funding source.

Business expenses shared by groups of employees should be paid by the most senior employee, who is to submit a single expense report, including names and amounts paid on behalf of the group.

3.5 **Tips**

Tips are allowed up to a “reasonable” limit (up to twenty percent of the total expense) on purchases upon which the inclusion of a tip is customary. Tip amount may be set at the traveler’s discretion as long as it does not exceed twenty percent.

3.6 **Taxes**

Business and travel expenses are often subject to taxes, which vary by country, state, and locality. The university is exempt from New York State and City taxes. Therefore, employees incurring expenses on behalf of the university should not pay New York sales tax. The tax exemption can be achieved by either:

- Using the university’s preferred vendors who recognize the university’s tax exempt status (see
Purchasing website).

- Providing the university’s exemption certificate (ST 119.1) to other vendors. Some vendors will only require that the exemption certificate be provided upon the initial purchase, while others may require that it be provided upon each subsequent purchase.

Taxes paid which could have been avoided are unallowable expenses and may be charged back to the purchaser. The exemption certificates should only be used for university expenses and must never be used for personal expenses. Using the university’s tax exemption certificate to avoid the payment of taxes on personal purchases constitutes fraud.

3.7 Methods of Payment

Corporate cards and purchase requisitions are acceptable payment methods for business and travel expenses. Personal funds should only be used in the rare instance when these payment methods are not possible.

3.8 Approval and Submission of Expenses

All expense reports (reconciliation of credit card transactions and reimbursement for expenses) for university employees (including student employees) should be submitted through the Concur online expense reporting system. Concur is the online expense management tool (Concur Expense) and the online travel booking solution (Concur Travel formerly Cliqbook) for The New School. This paperless solution allows users to book all travel and complete expense reports online. Item details can be uploaded to expense reports and automatic payment capability enables quick payments for reimbursements. If an employee has a corporate card, these charges are automatically uploaded to the system, where they await the employee’s settlement.

Once an expense report is submitted through Concur, it is automatically routed to the correct approver. The submitter will receive email notifications regarding the report’s status as the report moves to processing.

Per Diems

The university does not authorize per diems unless they are for sponsored projects and then only if allowed by the funder and included in the project budget.

Business Travel: Transportation And Lodging

Travel arrangements for transportation and lodging should be made using Concur or the university’s travel management company (TMC) and paid for with a corporate card or through direct billing to the university.

When booking transportation, the traveler should select a mode of transportation that is cost-effective. If an employee takes an indirect route for other than a university business purpose, the university will cover the travel costs up to either the actual cost of the trip, or the costs that would have been incurred by traveling the direct route by the most economical means (as documented by a fare price quote), whichever is less.

Travel arrangements should not be influenced by travel reward programs (e.g. frequent flyer miles, hotel reward programs, etc) or other personal considerations. Per IRS regulations, the university will pay actual travel
costs, and will not reimburse for the value of frequent flier miles or redemptions from other travel reward programs.

The cost incurred for any changes to travel arrangements will only be paid by the university if there is an authorized and documented business purpose. Costs of non-business related changes to travel plans are considered personal expenses and are the responsibility of the traveler.

5.1 **Air Transportation Including International Travel**

When making business travel reservations, employees should choose economy class and purchase the lowest possible airfare available. Any other class of ticket will be considered an upgrade and not an allowable expense. For those that choose to upgrade at their own expense, the economy fare price quote should be attached to the expense report. Other upgrades such as those for early boarding or extra leg room are not allowable expenses. Luggage charges are permitted as long as they are reasonable, based on the circumstances of the trip and airline policies.

Travelers are required to use Concur for travel reservations. All multi-leg, group requests, or complicated itineraries should be booked directly with TMC. Travel requests partially paid with university credit cards and with personal cards (for personal costs such as upgrades, fares for nonemployees, itinerary charges, and other travel expenses not covered by the university) should also be made directly with TMC.

If plans change and an airline ticket cannot be used, travelers should immediately cancel all reservations through the travel agency or the airline. If the ticket has value, it must be used for university business.

For federally funded projects, the Fly America Act requires air transportation to, from, between, or within a country other than the U.S. to be performed by a U.S. flag air carrier, if available.

When booking on the Concur Travel site, these carriers will display a small American flag icon. This indicates that the carrier and flights are Fly America Act compliant.

Amounts on expense reports must be converted into U.S. dollars for all foreign travel expenses. Using a charge card eliminates the need to calculate foreign currency conversions as the charges are converted to U.S. dollars. The conversion is generally noted on a charge card receipt/statement and should be included in the report. If a charge card is not used, Concur automatically adjusts the foreign currency to US dollars based on the exchange rate of the Transaction Date field and the City field.

If travel exceeds one week, the IRS requires evidence that business activities constitute at least 75 percent of the total time away from home. In the business purpose section of Concur, the traveler should indicate those business activities and if any of the travel was personal in nature.

5.2 **Ground Transportation: Rail or Bus**

Rail or bus tickets should be purchased at the lowest available rate. Amtrak rail tickets should be purchased through Concur.
5.3 Ground Transportation: Rental Cars
Whenever possible, the use of rental vehicles should be booked using university discounted pricing through Concur. Rental vehicles should only be utilized when less expensive transportation is unavailable. Employees should use the university’s preferred car rental agency. Individual travelers may rent up to a full size vehicle. Larger vehicles may be rented in exceptional cases (for example, several travelers in one car or equipment being transported), and with the business purpose for the larger size vehicle documented on the expense report. All authorized drivers must be listed on the car rental contract at the time of rental.

Allowable costs associated with rental cars include the daily rental fee, mileage fee, tolls, gas, and authorized insurance charges. Unallowable costs include, but are not limited to, vehicle repairs, parking tickets, and fines for traffic violations.

When using the university’s preferred car rental agency in the Continental U.S., Loss Damage Waiver (LDW) and/or liability insurance should not be purchased, as the university has negotiated a separate agreement with the agency.

If the university’s preferred car rental agency is not available, other agencies may be used. Liability insurance and/or LDW must be purchased when renting from these agencies, both internationally and domestically. In such cases, the university’s auto policy will not cover damages associated with rented vehicles.

5.4 Ground Transportation: Car Service and Taxis
Car service and taxis are acceptable for airport transfers. They are also permitted (with prior approval by a supervisor) for employees who work non-scheduled work hours past 8:30 pm or in other special circumstances. For example, if an employee’s normal work schedule is from 9:00 am to 5:00 pm and her supervisor asked her to work past 8:30 pm, it is permitted for the employee to take a taxi or car service. Documentation to support the decision to use a taxi or car service must be attached to expense reports. Employees should use the university’s preferred car service vendor and the car service requisition process.

5.5 Ground Transportation: Personal Vehicles
Business travel by personal automobile is covered at the federal standard mileage rate for actual mileage incurred, or the actual cost of fuel required for a business trip. If the mileage rate method is selected, documentation of mileage should be made using Concur. If the fuel cost method is used, an itemized receipt is required to back up the expense. Parking fees and toll expenses are allowable under both methods when supported by receipts. Cost of oil, repairs, towing, insurance, accidents, traffic violations, or similar expenses are not allowable.

When using personal vehicles it is the traveler’s responsibility to carry adequate insurance coverage for themselves, their vehicles, and any passengers.

In the event of an accident, drivers should immediately contact their insurance company (the university does not have primary insurance coverage on liability claims), the local authorities (as required), and their immediate supervisor.
5.6 **Other Forms of Ground Transportation**

Employees should use complimentary ground transport or shuttles whenever available. However, the university will pay for bus, subway, other mass transportation, shuttle, or taxi service, plus reasonable tips (as previously defined) between hotels, railroad stations, airports, restaurants, workplaces, or meetings, but not for commuting. Whenever possible, university corporate cards should be used for these expenses.

5.7 **Lodging**

Employees are expected to stay in a standard room at a hotel, or other similar accommodation, that is on or close to the location of business. Lodging must be booked through Concur. When necessary, employees are responsible for canceling hotel room reservations. The cancellation number should be requested and recorded in case of billing disputes.

Costs that are charged to the room are deemed valid and allowable if they are related or necessary to university business (such as telephone, internet, fax, copying, printing and postage, and other similar expenses).

The university requires itemized receipts and proof of payment for all lodging. The final hotel folio, which should reflect all charges made to the room, must be submitted with the expense report.

If staying in a private residence, the university will pay for a token, non-cash gift of appreciation for the host (gift cards not allowed). Please consider that the gift may be taxable to the recipient. Supplemental approval and a memorandum detailing the value of the gift and the reason for it should be submitted with the expense report.

**Business Meals**

For purposes of the university’s expense policy, a ‘business meal’ includes at least one external party in attendance. Therefore, for example, the university will not cover the cost of a meal incurred by two staff members while discussing university business. In rare instances when on-campus meetings, without an external party, have to be scheduled during meal times and a meal break cannot reasonably be included or if a meeting has to be scheduled outside of work hours, the university will cover the cost of appropriate refreshments, with supplemental approval. The university will pay for approved, necessary, and reasonable business meals that are hosted by, and paid for by, a university employee and may include guests, business colleagues, donors, or prospective students. Examples include fundraising, recruitment, and recognition of a speaker.

Except where otherwise noted in the per diem section, the university will cover the actual and reasonable cost of a business meal. Costs exceeding a reasonable threshold will be the responsibility of the employee. Payment for business meals in which a spouse and/or dependent is required to attend requires supplemental approval. The cost of alcoholic beverages may not be charged to publicly funded projects.

*University catering* must be used for business meals taking place on campus. External vendors for on-campus events are not permitted (refer to the *Purchasing* website for additional details).
For each business meal, the business justification and guest list is required with the submission of expense reports.

Meetings and Conferences

7.1 Meeting and Conference Fees
Meeting and conference fees are allowable expenses. Conference fees should be paid via a university corporate card or through Purchasing. However, in rare instances when an employee’s personal funds are used, reimbursement will only be made after the conference, as confirmation of attendance is required for reimbursement. The conference flyer or other literature describing the conference such as a registration form, agenda, or receipt for the conference fees must be submitted with the expense report. The documentation must also include the dates and location of the conference, the total amount of the conference fees, and proof of payment.

7.2 Meeting and Conference Meals
Employees are expected to take advantage of complimentary meals offered at meetings, conferences, seminars, or other business events. The university will only pay for meals not provided at the business event.

Business Entertainment Expenses

Business entertainment includes events that are held with guests, business colleagues, donors, students, employees, and/or prospective employees that are directly related to a university business purpose. Entertainment expenses may not be charged to sponsored projects. Payment of entertainment expenses in excess of $500 requires supplemental approval. The business justification and guest list are required with the submission of expense reports for all business entertain expenses.

The following should be considered before incurring any business entertainment expense:
- The “front page test” – will it seem appropriate to others (such as donors or taxpayers) that the university, a tax-exempt non-profit organization, pays for this event?
- Budgetary constraints
- Fair and consistent application across employees

8.1 Celebration of Business Related Accomplishments
These events celebrate business related accomplishments by an employee or group of employees. Departments may consider group celebrations for such occasions, as long as expenses are within reason and subject to budgetary constraints. Departmental funds may be expended for food, drinks and activities depending upon the nature of the event.

Allowable entertainment expenses for business related occasions include welcoming a new hire to the university, retirement, event or performance opening, and recognition of a departmental business achievement or goal.

8.2 Celebration of Personal Occasions
The university strongly suggests that employees consider funding the celebration of personal occasions with their own contributions. In some instances, departments may choose to celebrate personal occasions as a group, such as the departmental celebration of a holiday or collective celebrations of birthdays. University funds may not be used to cover the cost of celebrating individual personal occasions such as showers for the birth or adoption of a baby, engagements, weddings, or anniversaries, individual birthday celebrations or other individual achievements.

**Gifts**

The university may approve gifts to employees in limited instances. Gifts using university funds must be non-cash “de minimus” gifts ($100 or less). The university suggests that departments first consider funding these with their own contributions. The university will approve de minimus gifts for employees in the event of the death of an employee or an employee’s immediate family member, the serious illness or hospitalization of an employee, the birth or adoption of an employee’s child, or the retirement of an employee. The university does not pay for gifts given for other occasions.

Common examples of de minimus gifts include flowers or fruit baskets, which should be purchased using the university approved vendor and requisition process. Non-cash gifts given to an employee with a fair market value of $100 or less for a calendar year are considered non-taxable.

In very rare instances, a gift to an employee may have a value greater than the $100 threshold. Gifts exceeding the respective threshold require a formal written exception request approved by a Vice President or Dean prior to incurring the expense and submitted to Accounts Payable for documentation and evaluation. Also the amount in excess of the threshold will be reported as income to the recipient. The university is required to include the taxable amount in the employee’s W2 and to deduct withholding taxes from his/her paycheck.

Under no circumstances are university funds to be used for the purchase of gift cards or stored value cards of any kind.

**Donations & Contributions**

The use of university funds for donations or contributions, such as those to charities, not-for-profit organizations, or individuals, is not permitted.

**Other Business Expenses**

The reasonable purchase of goods and services necessary to university business should be made using the approved purchasing mechanisms or vendors the university pays directly.

**11.1 Independent Contractors and Consultants**

The university allows departments to engage the services of independent contractors or consultants when the needed skills or expertise are not readily available within the university. The classification and reporting of payments to individuals who provide services to the university as independent contractors and consultants are subject to specific federal regulations. The tax and other requirements appropriate to their designation differ from those applied to individuals classified as employees. Incorrect classification of a service provider as an independent contractor may subject the university to significant tax penalties and other risks. Under no circumstances are employees’ personal funds or
university credit cards to be used for payments of independent contractors and consultants. All such payments are required to go through proper university channels, be preapproved by IC Compliance with payments processed through Accounts Payable (refer to university’s Independent Contractor policy).

11.2 Guest Speakers, Artists, and Honorariums
University funds may be used for an honorarium for guest speakers or artists as a gesture of appreciation. The university requires that such expenses be reasonable and made under conditions that do not create a significant likelihood for the gesture to be deemed as a “disguised” payment. Honorariums are considered taxable income to the individual receiving the benefit. All honorariums should be paid using a university issued check from Accounts Payable.

11.3 Furniture and Equipment
All purchases of furniture and equipment become the property of the university and departments are responsible for tracking and safeguarding these assets. Purchases of all furniture and equipment must be made through university preferred vendors. Refer to the Purchasing website for policy, procedures and listing of preferred vendors.

Furniture and equipment purchases on sponsored projects are subject to funders’ terms and conditions.

11.4 Home Office Costs
University funds may be used for home office costs incurred by certain individuals who are authorized to work from home. Home office equipment purchases must follow general equipment purchase guidelines, be necessary to meet official job duties, and be preapproved by a Dean or Vice President. Appropriate justification and substantiation of home office expenses is required before university funds can be used.

11.5 Employee Recruitment
Recruitment expenses such as moving allowances, search firms, job postings, and advertising expenses are managed through the Human Resources department (HR). Contact HR or refer to their website for additional information.

11.6 Publications, Subscriptions, Memberships and Dues
Membership or professional dues or fees can only be considered business expenses when obtained and primarily used for university purposes. A subscription can also only be considered a business expense when it is specifically related to the subscriber’s job function.

11.7 Telecommunication Devices And Charges
When appropriate, The New School provides employees with wireless devices to help employees carry out their job responsibilities and advance the mission of the university. All such devices should be obtained through the Purchasing department. Refer to the Purchasing website for the wireless device policy and procedure.

Resources

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12.1 **Contacts**

Mary Dixon, Manager of Accounts Payable  
80 Fifth Avenue, 4th Floor, New York, NY 10011  
Tel. (212) 229-5660 Ext. 3669  
Email dixonm@newschool.edu

Antoinette Brown, Director of Accounting  
80 Fifth Avenue, 4th Floor, New York, NY 10011  
Tel. (212) 229-5660 Ext. 3663  
Email BrownA@newschool.edu

Gay Florio, Director of Procurement and Expense Systems  
80 Fifth Avenue, 4th Floor, New York, NY 10011  
Tel. (212) 229-5660 Ext. 3658  
Email floriog@newschool.edu

Edward Verdi, Senior Director of Business Operations  
80 Fifth Avenue, 4th Floor, New York, NY 10011  
Tel. (212) 229-5323 Ext. 3677  
Email verdie@newschool.edu

12.2 **Departments**

- **Finance and Business**
  - The Controller’s Office
  - Purchasing
  - Tax Compliance
  - Business Operations

- **Human Resources Department**

12.3 **Related Forms, Policies and Procedures**

- Credit Card Policy
- Independent Contractor Policy
- Check Disbursement Form
- Purchase Requisition
- Honoraria and Guest Lecturer Payment Request Form

12.4 **External Websites and Resources**

- Internal Revenue Services
- Concur
- University’s Preferred Car Rental Agency
- 1800 Flowers
- WB Mason
INVESTMENT RESPONSIBILITY
Universities are environments characterized by freedom of expression, open inquiry, and respect for the right to disagree. A university’s first institutional obligation is to maintain this environment, to foster the search for truth and understanding. If knowledge is to be pursued and the nature of knowledge explored freely, the integrity of the University as a domain of open intellectual interchange must be preserved. The widest diversity of views must be protected and encouraged. Freedom of thought and expression are the essential conditions for a university’s fulfillment of its mission.

The New School’s influence on society is achieved through the scholarship, teaching, and learning of the individual members of its community. All aspects of society – its institutions, creations, practices, and values – are within the realm of scholarly inquiry, analysis, and criticism. It is through the discovery of knowledge, the exploration of ethical and philosophical principles, particularly where there is controversy, and the application of reason to complex issues and conflicts that individuals within a University community have exercised leadership on the development of social and political values. They are able to serve and influence society by speaking out on issues that concern them and especially on those in which they have expertise.

The university’s ability to fulfill its responsibility to accommodate varying and conflicting views can be jeopardized when it tries to establish an institutional position. Such an official view has the potential to chill the freedom of the individual members of community to form and express their own views. The fundamental commitment of those who govern and administer the University is to preserve the freedoms on which the university’s mission depends. The University thrives on respect for the value of academic freedom.

Policy
The New School, like all universities, is part of a larger community and a larger society. The University has always had a special awareness of its responsibility to conduct its affairs in an ethical manner and to be sensitive to the implications of its actions. Among its administrative functions is the investment of endowment assets and particularly the ownership of securities. The Trustees of the University bear an obligation to maximize the institution’s assets so as to support its educational mission. They also recognize that there are social, environmental and governance (collectively, “SEG”) implications to the management of the university’s assets.

In overseeing the University’s endowment portfolio, the Trustees strive to assure that investment decisions take into account and exhibit a reasoned perspective in respect of SEG factors. Investment activity is conducted in the context of the university’s educational mission which is guided by respect for intellectual freedom, human dignity, and the rights and welfare of others. It is not the objective of investment activity to use the university’s assets as an instrument for bringing about social change, for initiating changes in the behavior of corporations or other institutions, or for influencing the policies of government.
The Trustees’ objective is to fulfill their fiduciary role in a responsible manner. They are committed to a careful and thoughtful analysis of SEG factors related to investment, and they exercise their best judgment on these issues. The Trustees find it helpful in formulating their judgment to be informed of the views which exist within the University community. However, they made determinations in their capacity as Trustees, charged by law with sole responsibility for preserving and enhancing the university’s endowment. They do not act in the name of the members of the New School community, nor do they presume to put the University community on record as having a collective view on a given SEG issue. The Trustees respect the diversity of views within the University community and do not intend their decisions to constrain that diversity nor in any way to infringe on individuals’ right to disagree.

Procedures
The Policy on Investment Responsibility shall be implemented through the following procedures:

1) The President shall appoint an Advisory Committee on Investor Responsibility (“ACIR”) to advise the Trustees on SEG factors that may from time to time arise in the management of investments in the university’s endowment. The ACIR shall be appointed annually and consist of two faculty, two students, two staff members and one trustee. Faculty and student nominations to the President shall come from the Faculty and Student Senates, respectively. Self nominations to the President are also permitted. Staff members will self nominate. All candidates shall submit relevant biographical data and a statement as to why they want to serve and as to relevant training and experience. The President shall designate the chairman from among members of the ACIR... The ACIR shall meet at least quarterly and shall prepare an annual report on its activities during each academic year.

2) The ACIR will set its own agenda within the broad area of taking SEG factors into account in the management of the university’s endowment. Each fall, the ACIR will establish and publish to the University community its agenda for the academic year, which may involve a concentrated effort on one or more particular SEG factors or other subjects related to responsible investing. While the members of the ACIR serve as individuals, they are expected to solicit views on SEG factors from throughout the University community and to communicate those views, as well as their own, to the Investment Committee of the Board of Trustees... It is anticipated that the ACIR and the Investment Committee will meet together periodically.

3) The Investment Committee of the Board of Trustees shall receive advice from the ACIR and, with reasonable promptness, evaluate such advice, including questions of feasibility, effectiveness and impact, and respond to the ACIR. The Investment Committee may, as needed, appoint from its membership and, where appropriate, from other Trustees, a subcommittee to study in depth and evaluate advice received from the ACIR in order to facilitate its timely and thorough review.

4) The Senior Vice President for Finance and Business will appoint a staff member from the Office of Finance and Business to assist the ACIR with its work. This staff member, who reports to the Director of Investment and Treasury Services, will assist the Chair of the ACIR by providing endowment information and research as needed... When possible, student research assistants will be engaged by the staff member to assist in gathering information for the ACIR... The University will establish a budget for membership in associations and subscriptions to services which provide information and data on SEG factors in responsible investing or on any other criteria identified by the ACIR for study.
5) A report on activities related to the Policy and Procedures on Investment Responsibility shall be issued annually by the university. This report will include the annual report of the ACIR.

CLIMATE CHANGE INVESTMENT POLICY

The New School recognizes climate change as one of the defining issues of our time. Consistent with the University's mission and vision, the University is developing a broad climate change action plan that will include: applying design and social research to address societal needs associated with climate change, extensive research in design and public policy in the areas of climate change reduction and resiliency, curricular requirements for students, substantial reductions in the University's carbon emissions through a combination of capital investment and shared commitments by students and staff to change behavior, and extensive outreach and advocacy to lead regional and global change, for example by hosting university presidents and an extensive array of other participants in discussion and planning in New York during the 2014 United Nations Climate Summit.

The Investment Committee has carefully considered its responsibility to protect and grow The New School's endowment in the context of the University's broader climate change action plan which encompasses a wide range of actions by students, faculty, staff, and the administration. In light of this responsibility, the Board of Trustees, the Advisory Committee on Investor Responsibility (ACIR), and the Committee's independent investment consultant Slocum & Associates have all provided input and analysis toward helping the Committee establish a practical and prudent policy to address climate change risk in the endowment's investment portfolio.

In considering climate change investment policy initiatives, Slocum has provided the Investment Committee with analyses on the historical effects of fossil fuel divestment on diversified investment portfolios. The Committee's challenge, however, is assessing the effects of fossil fuel divestment on future portfolio returns, which involves evaluating fundamentally uncertain factors. While forecasting returns and the effects of fossil fuel divestment is uncertain, the Committee, to maintain successful management of The New School's endowment, strives to incorporate proper diversification and flexibility for an ever-changing investment landscape.

Today, the major limiting factors in implementing full fossil fuel divestment within the context of the Committee's fiduciary responsibility are twofold: first is the challenge of constructing portfolios without fossil fuel companies so that the fossil fuel free portfolios have an expectation of risk-adjusted returns similar to those of portfolios that include fossil fuel companies, and second is that the opportunity set of investment managers who are committed to managing fossil-fuel-free portfolios is, according to Slocum, quite small – and the set of those investment managers considered to be “institutional-quality” is even smaller. There are, however, new fossil-fuel-free funds and benchmark indexes currently being developed by both index providers and investment managers. Slocum expects the opportunity set of high quality managers capable of delivering comparable risk-adjusted returns in fossil fuel free portfolios versus portfolios that include the entire market opportunity set will grow over time from a combination of both higher demand from investors like The New School, and the integration of more sophisticated portfolio construction expertise in the portfolio construction process. Therefore, the Investment Committee believes it should become easier, over time, to implement fossil-fuel-free portfolios consistent with the Investment Committee's fiduciary responsibilities.

In light of all of these investment management considerations as well as the University's mission and vision, and in accord with students and faculty seeking to address climate change, The New School's Investment Committee believes that should the Board of Trustees decide to begin a process of fossil fuel divestment, the Committee would support that decision, and believes that the endowment could continue to be managed in an effective and prudent fashion under that mandate. The Investment Committee will also be alert to opportunities to invest in strategies that benefit from providing environmentally beneficial
substitutes to fossil fuels, as well as those that provide products or services requiring substantially reduced fossil fuel consumption.

MAIL AND DUPLICATING SERVICES
The Mail and Duplicating Department, located on the lower level of 55 West 13th Street is the center for mail communication at The New School. The department picks up, sorts, and delivers incoming and outgoing mail from the U.S. Postal Service and all interoffice mail. We strive to assure University compliance with U.S. postal regulations and all other university, local, state, and federal policies that relate to the processing and delivery of mail. For hours of operation you can call 212-229-5301.

The University maintains a Duplicating Department on the lower level of 55 West 13th Street. It is equipped to carry out large duplicating orders, which must be accompanied by a Duplicating request form.

REGISTRATION AND RECORDS OFFICE
The Registration and Records Offices are directed by the University Registrar.

Registrar's Office
The Registrar's Office, located on the 5th floor of 79 Fifth Avenue, processes all course enrollments. Students and faculty taking courses must complete the registration process there, including the filing of Change of Registration forms for dropping and adding or withdrawing from courses. The Registrar's Office produces course rosters each semester for all courses that are being given. The Registrar's Office staff may be contacted at 212-229-5620.

Records Office
The Records Office, which is located on the ground floor of 65 Fifth Avenue, maintains all student records and processes grades for all academic divisions of the university. Grade sheets are issued by that office and, when completed, should be returned to the office. Forms to request transcripts or submit academic petitions (for example, for transfer credits, change of status, change of department, extension of time to complete degree requirements, leave of absence, or withdrawal from study) are available there. The Records Office staff may be contacted at 212-229-5720.

OFFICE OF STUDENT FINANCIAL SERVICES
The Office of Student Financial Services is responsible for all student financial matters in the university, including payment of tuition and fees, student billing, external scholarship and other restricted scholarship processing, student refunds, and management of the student loan program. It also runs the box office for single admission tickets, special programs, and the student meal plan. The Student Financial Services staff may be contacted at 212-229-8930.

Student Financial Services is also responsible for the University Box Office, which is the box office operation for special events and special courses. Office hours are 9:00 a.m. to 5:00 p.m. daily for general business, and 9:00 a.m. to 8:00 p.m. Monday through Friday, 6:00 p.m. on Fridays for any cashiering related activity. The University Box Office is staffed for ticket sales to special events and course, lectures, concerts, and readings during the academic year, and daily during in person registration.

ACADEMIC COMPUTING
There are six computing facilities at the university. Although each has a distinctive educational mission, the four centers increasingly share administrative and technical support. These facilities are core elements -- along with the network-based and RAM-based reference systems of the libraries and audio-visual aids for classroom teaching -- of what the University is planning to integrate into a single system for electronic learning and information resources.
Internet Address
The university's internet address is: http://www.newschool.edu and the university's homepage offers information about the university.

SECURITY
The University has undertaken many measures to provide a safe and secure environment for faculty, students and staff. One of the most important is the use of security guards at all entrances to campus facilities. Security guards have the responsibility to maintain a safe and secure environment, and in the fulfillment of that responsibility they make take inquiries of persons, ask for University I.D. cards (or other identification in the case of visitors), maintain a sign-in list of visitors, and remove individuals from University facilities if necessary. The Director of Security can be reached at 212-229-5101, ext. 4275. Refer to Accidents and Emergencies in this section for additional information.

Accidents and Emergencies
In the event of an accident or illness requiring medical assistance, the person needing assistance should be accompanied to the nearest hospital emergency room. If the person requires an ambulance, 911 should be called and all of the requested information given. The security guard of the facility should then be notified that 911 has been called.

For all other incidents immediately contact the security guard. Whenever an injury or theft occurs in University facilities, an Incident Report must be filed with the security guard for the building in which the incident occurs. If a theft of personal property is discovered, a complaint also should be filed with the local police precinct. Blank Incident Report forms are available at all security guard posts, Student Life offices, and offices of the Deans.

In an event requiring either the Fire Department or the Police Department, dial 911 first, then the emergency hot line or the security guard in your building. The security guard will then be able to provide you and the responding police officers, fire fighters and/or ambulance attendants, with additional assistance.

New School Alerts
New School Alerts is a notification system designed to provide quick and reliable mass communication to students, faculty, and staff regarding potential or actual emergencies. The New School Alerts system will send message to cell phones (text and voice), landlines, and email addresses during a crisis or urgent situation affecting The New School. The system might be used, for example, to alert The New School community about weather-related school closings or a situation that could affect safety on campus.

Please register or update your New School Alerts contact information at my.newschool.edu. For more information about New School Alerts, use the FAQ channel. If you have any questions, please email nsalerts@newschool.edu.

Incident Reports
Whenever an injury, accident or theft occurs in University facilities, an Incident Report must be filed with the security guard for the building in which the incident occurs. Blank Incident Report forms are available at all security guard posts, Student Life offices, and offices of the Deans.

Emergency Hot Lines
   24 Hour Emergency: 212-229-7001
   Security Director’s Office: 212-229-5101
Personal Property
Do not leave personal property unattended. The University is not responsible for the loss or damage of personal property.

Security Guard Information
The security guards have the following telephone numbers at the following buildings:

<table>
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<tr>
<th>Location</th>
<th>Telephone #</th>
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<tbody>
<tr>
<td>2 West 13th Street</td>
<td>212.229.5448</td>
</tr>
<tr>
<td>25 East 13th Street</td>
<td>212.229.5455</td>
</tr>
<tr>
<td>66 Fifth Avenue</td>
<td>212.229.5445</td>
</tr>
<tr>
<td>55 West 13th Street, Lobby</td>
<td>212.229.5165 or 212.229.7001</td>
</tr>
<tr>
<td>72 Fifth Avenue</td>
<td>212.229.1498</td>
</tr>
<tr>
<td>65 West 11th Street</td>
<td>x5105</td>
</tr>
<tr>
<td>66 West 12th Street</td>
<td>212.229.5437</td>
</tr>
<tr>
<td>79 Fifth Ave</td>
<td>x3797</td>
</tr>
<tr>
<td>84 William Street (Dorm)</td>
<td>646.414.0211</td>
</tr>
<tr>
<td>90 Fifth Ave</td>
<td>212.206.0775 x4271</td>
</tr>
<tr>
<td>118 West 13th Street (Catherine House)</td>
<td>646.414.2699/0060</td>
</tr>
<tr>
<td>135 East 12th Street (Loeb Hall)</td>
<td>Red Phone 212.505.3607</td>
</tr>
<tr>
<td>151 Bank Street</td>
<td>212.242.0291</td>
</tr>
<tr>
<td>150 West 85th Street (Mannes)</td>
<td>212.580.0210 x4885</td>
</tr>
<tr>
<td>232 West 40th Street</td>
<td>212.221.3023 OR x3929</td>
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<tr>
<td>300 West 20th Street</td>
<td>646.414.6051 OR 212.255.6152</td>
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<tr>
<td>318 East 15th Street</td>
<td>646.414.6447 Garage 212.260.4305</td>
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<tr>
<td>560 Seventh Avenue</td>
<td>212.229.8900 x5664</td>
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LIBRARY RESOURCES

Employee Privileges
The University is situated in the midst of a wealth of library resources. The university’s library system is composed of three libraries. In addition, the University is a member of a consortium, the Research Library Association of South Manhattan, which was established in 1977. The other Consortium members are New York University and the Cooper Union for the Advancement of Science and Art. The New York Academy of Art is also associated with the Consortium.

Administrative, clerical and maintenance union employees are entitled to reading and borrowing privileges at the university’s libraries. A valid University ID card with a barcode is required for library privileges. Barcodes may be obtained at the Fogelman Library circulation desk. Additional information on library resources is available on request by contacting the Raymond Fogelman Library circulation manager at extension 5308. The following is basic information about New School Libraries:

Raymond Fogelman Library, 55 W 13th Street, New York, NY 10011, 212-229-5307 X3056
The social sciences and philosophy are the core of the book and journal collection (171,000 volumes). The large reserve collection supports study across all areas of the university.

University Center Library 63 Fifth Avenue, 6th floor, New York, NY 10011, 212-229-5307 X4121

The Harry Scherman Library (Mannes College The New School for Music) 150 West 85th Street, New York, NY 10023, 212-580-0210 ext.4803

The circulating collection (25,000 volumes) includes music scores and books on music history and literature, music theory and analysis. There is also a reference collection of 7,300 sound recordings. The overall emphasis is classical music.

Additional Privileges for Faculty and Students of Degree-Granting Programs
Faculty members and students of degree-granting programs are entitled to reading and borrowing privileges at the other consortium libraries, as well as the university’s libraries. Faculty members and students must have a valid I.D. card with a barcode to borrow books.

The other libraries participating in this consortium are:

- The Elmer Holmes Bobst Library (NYU) located at 70 Washington Square South. Bobst Library, with a large open stack collection of 2.5 million volumes, is a valuable resource for University faculty and students. The collection is strong across many subject areas.
- Institute of Fine Arts (NYU) located at 1 East 78th Street at Fifth Avenue. In addition to art, this non-circulating collection is strong in ancient, Near Eastern, and classical archaeology.
- Courant Institute of Mathematics (NYU) located at 251 Mercer Street. The strengths are mathematics and computer science.
- The Cooper Union Library, located at 41 Cooper Square (7th Street at Third Avenue). The collection (87,000 volumes) is strong in architecture, art and engineering. Most architecture books are in open stack reserve and do not leave the library.
- The New York Academy of Art, located at 419 Lafayette Street. This is a small non-circulating collection, specializing in figurative art.

The University is also a member of the New York Metropolitan Reference and Research Library Agency – METRO that provides access to a wide range of library resources. METRO’s members are 245 academic, public, and specialized libraries in the New York City area. Information about the METRO referral card, which allows on-site reading access to material at the other libraries of METRO, can be obtained from reference librarians at The New School’s libraries.

University faculty and students should remember the extraordinary collections of the New York Public Library or the other borough library systems (Brooklyn or Queens Borough). All that is required to borrow from these libraries is to obtain a library card at your local branch. Among the most public libraries are:

- Mid-Manhattan Branch of the New York Public Library, located at 455 Fifth Avenue (40th Street)
- The Research Libraries (of the New York Public Library), located at Fifth Avenue and 42nd Street (non-circulating research collection)
- Jefferson Market Branch, located at 425 Sixth Avenue (at 10th Street)
- Performing Arts Research Center, located at 111 Amsterdam Avenue (at Lincoln Center)
- Schomburg Center for Research in Black Culture, located at 515 Malcolm X Boulevard (at 135th Street)
- Central Library of the Brooklyn Public Library, located at Grand Army Plaza, Brooklyn, New York 11238
Audio-Visual Aids
A broad range of audio-visual aids are available to University faculty and administrative staff for use in teaching and job related presentations. Slide projectors, overhead projectors, 16mm film projectors, videocassette recorders, television monitors, cassette tape players, portable amplifiers, record players, and filmstrip projectors. Please contact New School university’s Audio-Visual Services at ext. 5628 for additional information.
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