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ABOUT THE UNIVERSITY

Working at the University of Chicago is a unique and enriching experience. The University of Chicago is one of the world’s great intellectual communities with professional museums, theaters, concerts, and lectures. Located in the community of Hyde Park on Chicago’s South Side, just 15 minutes from the city center, the University of Chicago is uniquely positioned to contribute to, and draw from, the strength and diversity of this world-class metropolis. We also have made an unforgettable mark on the world at large.

Our faculty and students are pioneers, discoverers, teachers, scholars, and change agents. We ask tough questions and pursue knowledge with rigor because we believe in the power of ideas. Committed to scholarship of the highest order, our faculty has made major contributions to existing bodies of knowledge and to the creation of new fields of study. REM sleep was discovered and carbon 14 dating was developed here. Our scientists laid the mathematical foundations of genetic evolution; executed the first controlled, self-sustaining nuclear chain reaction; conceived the study of black holes; and performed the nation’s first living-donor liver transplant. Researchers here have expanded our understanding of dinosaur evolution; reconstructed the evolution of the early universe; proved that chromosomal defects can lead to cancer; and pioneered scientific archaeology of the ancient Near East.

Our impact on American higher education is legendary. It was here that the four-quarter system was developed and adult extension courses in the liberal arts were first conceived. We forever changed business education with the first executive MBA program, in 1943. Our program of general education for undergraduates has been copied nationwide, and college curricula throughout the country reflect our conception of the liberal arts undergraduate education.

Chicago, campus and community are interconnected in partnerships that serve to support the community and train future policymakers, social workers, artists, and social and political leaders. The University of Chicago Charter School, run by the Center for Urban School Improvement, serves Chicago public school students with four campuses for students in pre-
kindergarten through high school. The Mandel Legal Aid Clinic teaches Law School students advocacy skills, professional ethics, and the effect of legal institutions on the poor. While the University of Chicago contributes specifically to the metropolis, the city in turn serves as a living laboratory for addressing social issues on a national and global scale.

What a unique opportunity to be a part of and support such a dynamic and unique organization.
INTRODUCTION

Welcome to the University of Chicago!

As a leading institution of higher learning, our goal is excellence in teaching, research, community engagement, and patient care. In order to maintain our leadership role, we depend on each staff employee to act as a representative of and support the University. We value integrity and open communication and expect our employees to be honest, innovative, and industrious.

The purpose of the Employee Handbook is to provide information and guidance to staff employees about working at the University of Chicago. We encourage staff employees to read and become familiar with the policies of the University and their department.

This handbook supersedes all prior versions, and the contents are subject to change at any time at the sole discretion of the University. This Handbook is presented for informational purposes only and is not intended to create a contract or agreement. Also, departments may have additional procedures or guidelines, which are specific to their needs and supplement these policies.

Staff employees working in positions covered by a collective bargaining agreement should refer to the agreement, which also governs the terms and conditions of employment. To the extent these policies conflict with any applicable collective bargaining agreement, the collective bargaining agreement will govern.

All other staff employees at the University are at-will employees, and their employment may be terminated at any time for any or no reason.

Staff employees are expected to be familiar and comply with the policies in this Handbook, the University’s Human Resources Policies (http://humanresources.uchicago.edu/fpg/policies/index.shtml) as well as other University policies (http://adminet.uchicago.edu/adminpols/pols-index.shtml).

The University’s policies may change at any time, and staff employees are expected to comply with the most current versions. To the extent this Handbook conflicts with any applicable University policy, the policy will govern. Supervisors are key resources concerning policies and procedures of the University, department, or unit. If you have questions concerning this Handbook or a policy, consult your supervisor for clarification.
WORKPLACE CONDUCT

Attendance (Absenteism, Tardiness, and Job Abandonment)

Purpose
It is vital to the University for all employees to have reliable attendance. Absenteeism and tardiness negatively impact our ability to effectively provide University services. The purpose of this policy is to establish the requirements for reporting absences, to provide guidelines for the handling of tardiness, early departures, and unscheduled absences, and to outline employees' need to adhere to established work schedules to maintain efficient, effective operations throughout the University.

Who is governed by this policy?
This policy applies to all employees.

Policy
Staff employees must arrive and be prepared to commence work at their scheduled start time. Employees are responsible for notifying their supervisor of absences, late arrivals, or early departures each day of the absence, tardiness, or early departure, in accordance with their unit’s call-in procedure. Unscheduled absences, tardiness, and unscheduled early departures (whether excused or unexcused), failure to provide appropriate notification, or abuse of sick leave or other paid time off may result in corrective action up to and including termination of employment. (See Policy 703 Progressive Corrective Action.) Absences, tardiness, and early departures due to approved FMLA leave, Short-Term Disability leave, military leave, jury duty, workers’ compensation, other approved leave, or reasonable accommodation as required by law will not be counted as occurrences. These rules apply to all staff employees whose departments do not have more specific rules, or when department attendance rules do not address certain areas covered by this policy.

1. Departments should communicate to staff employees the importance of timely and regular attendance and develop written unit rules with a call-in procedure. The call-in procedure should define when and whom an employee should call if he/she is going to be absent or tardy. It should also address a time frame when an employee who will be delayed is required to notify supervision.

2. Time approvers are responsible for reviewing and approving time before each time approval deadline. It is the responsibility of the time approver to ensure the time submission is accurate

3. Employees must notify their supervisor of any unscheduled absence, tardiness, or unscheduled early departure as far in advance as possible. An employee who will be unable to report to work as scheduled, who will be tardy, or who plans to leave early must contact his/her supervisor or the department’s designated call-in number as far in advance as possible and, at the latest, prior to the start of the shift or the early
departure. Notification and acknowledgment by a supervisor of tardiness, unscheduled early departure, or unscheduled absence will not excuse it.

4. Employees must record attendance and absences in the attendance tracking system. Immediate supervisors are responsible for reviewing and verifying attendance records (at least monthly) and recording occurrences, if applicable, to ensure the accuracy of the records and consistent application of department attendance rules and University policy.

5. An unscheduled absence will be recorded as one (1) occurrence. Each tardy or unscheduled early departure will be recorded as one-half (1/2) an occurrence. No occurrences will be recorded for scheduled absences or use of accrued sick leave as provided under University and department policy. However, pattern absences, failure to provide timely notification, or failure to comply with the Sick Leave Policy may result in absences being counted as unscheduled absences.

6. Occurrences will be tracked by each department based on a rolling twelve (12) month period.

7. Supervisors should follow the corrective action progression described below to address unscheduled absences, tardiness, and unscheduled early departures. When an employee has accumulated four occurrences, each two occurrences thereafter will advance the corrective action process, up to and including termination of employment. However, depending on the situation, corrective action may be accelerated, repeated, or taken out of sequence, and the University reserves the right to effect immediate termination should it be warranted.

- Verbal warning upon four (4) occurrences.
- Written warning upon six (6) occurrences.
- Final warning or suspension upon eight (8) occurrences.
- Termination of employment upon ten (10) occurrences.

8. Employees will be subject to immediate corrective action for no call/no show. Two (2) or more consecutive workdays of no call/no show may be considered job abandonment and result in termination of employment.

9. Supervisors should be observant and identify pattern absences. Employees will be subject to immediate corrective action for pattern unscheduled absences.

10. Typically, employees who work for six (6) months without an occurrence since the last occurrence resulting in corrective action will not have the corrective action process progress to the next level. For example, if an employee receives a written warning due to the sixth occurrence on October 1st and receives two additional occurrences in the following June, the employee should receive another written warning.

11. Bi-weekly employees will not be compensated for time lost due to tardiness. However, an employee who is late six minutes or less is considered tardy but will be paid for the time. Tardiness of more than six (6) minutes will be unpaid. Meal periods
and breaks may not be used to cover for absences or tardiness. An employee may not extend the normal workday or work beyond his/her scheduled shift to make up for being tardy without the prior approval of the employee’s supervisor.

12. An unscheduled absence typically is unpaid unless an employee’s supervisor approves the use of accrued vacation, sick leave, or personal holiday time in accordance with University policy. Acceptable means of verifying the reason for the unscheduled absence may be required. An employee will not be compensated for unscheduled absences that extend beyond his/her accrual balances.

13. Requests for scheduled absences, including jury duty, emergency time off (vacation or personal holiday), bereavement, military leave, medical leave, and personal leave must be requested as far in advance as possible consistent with University and department policy and applicable law. It is the employee’s responsibility to request leave or excused time off and to submit appropriate documentation. Employees who will be unable to report to work as scheduled (except for a University preapproved block of leave time) or using intermittent FMLA leave or other leave are required to contact their supervisor or the department each day unless otherwise instructed by their supervisor. Denied leave or other requested time off, failure to return to work after an approved leave, or failure to comply with these guidelines or other applicable University policy may result in the treatment of time away from work as an unscheduled absence, tardiness, or unscheduled early departure under this policy.

14. Employees absent more than three consecutive days due to illness or who are suspected of abuse of sick leave may be required to submit a proof of illness certificate, issued by a health care provider, identifying when the employee was seen and treated. Failure to submit such proof upon request may result in corrective action.

15. Employees who are eligible to use paid sick leave may use accrued sick time for routine doctor’s appointments. The employee must notify the supervisor in advance of the appointment, up to seven days prior when possible. When possible, such appointments should be scheduled at the beginning or the end of the shift.

16. Due to the nature of the services that employees provide we are rarely able to close our operations. With that in mind, employees are expected to report for work on severe weather days and plan ahead to anticipate any difficulties that might be encountered. If an employee will be late or unable to report to work, the employee must notify his or her supervisor as soon as possible. The departments will decide whether employees will receive occurrences for tardiness or unscheduled absences on severe weather days.

**Definitions**

*Unscheduled Absence:* Failure to report to work on a scheduled workday or working less than half of a scheduled workday due to tardiness or leaving early without a written and approved time off request from at least the previous day. Absences on consecutive days for the same reason will count as one unscheduled absence under this policy. Some examples of
unscheduled absences include absences due to car trouble, caring for a family member who has the flu, and home emergency.

*Scheduled Absence:* A scheduled absence occurs when an employee requests time off in a timely manner in accordance with department and University policies and applicable union contract. Some examples of scheduled absences include approved vacation, personal holidays, jury duty, military related, bereavement leave, FMLA leave, and Short-Term Disability leave.

*Tardy:* Failure to report to an employee’s assigned work area at his or her scheduled start time, including returning from breaks and meal periods.

*Pattern Absences:* Unscheduled absences the day before or after a scheduled holiday, vacation, or personal day; on a desirable day off, a specific day of the week, or a weekend; a specific or unique work day; or as sick leave or other paid time off is accrued.

*No Call/No Show:* An unscheduled absence without proper notification to the employee’s supervisor or department.

*Unscheduled Early Departure:* Failure to work a complete workday due to an early departure without a written and approved time off request. Please refer to Unscheduled Absence above when an early departure results in working less than half of a scheduled workday.

### Business Conduct

#### Purpose
The purpose of this policy is to promote the University’s commitment to maintaining the highest ethical standards in its internal and external business dealings.

#### Policy
To this end, University staff employees must conduct themselves with honesty and integrity and exercise sound judgment when engaging in activities and performing responsibilities on behalf of the University. In addition to these principles, all University staff employees must comply with University and department policies, professional standards, and the letter and spirit of applicable laws and regulations.

#### Guidelines

1. **Working at the University** - The University values diversity and champions the fundamental principle of treating others with respect. The University also is committed to providing a safe work environment in which discrimination, harassment, and acts or threats of violence are not tolerated. The University expects its staff employees to treat each other and those with whom they have business dealings on behalf of the University with respect, honesty, integrity, and civility. Additional guidance is available in the following policies:
   - Equal Employment Opportunity
2. Conflicts of Interest - The University understands that its staff employees may have or be involved in outside financial, business, professional, academic, public service, or other activities. However, outside activities or commitments, familial or other relationships, private financial or other interests, and benefits or gifts received from third parties may create an actual or perceived conflict of interest between the staff employee and the University. A conflict of interest is a situation, arrangement, or circumstance where the staff employee’s outside or private interests or relationships interfere or appear to interfere with those of the University or cast doubt on the fairness or integrity of the University’s business dealings. Every staff employee is responsible for disclosing to his or her supervisor, Human Resources (HR), or the Office of Legal Counsel any financial or personal interests, activities, or personal or familial relationships that create an actual or perceived conflict of interest. Additional guidance is available in the Conflict of Interest and Nepotism Policies.

3. Confidentiality and Privacy - The University entrusts its staff employees with the confidential information of the University and, at times, others. Each University staff employee is responsible for protecting this information and preventing misuse or unauthorized disclosure. Confidential Information must only be accessed, disclosed, transmitted, used, stored, or disposed of with care and for appropriate University purposes. Please refer to the Treatment of Confidential Information Policy for detailed guidance.

4. University Records - All University accounting, financial records, expense reimbursements, time and attendance records, and submissions to governmental agencies must be truthful, timely, complete, and accurate. Specific guidance regarding University financial transactions and records is available on the Finance and Administration website and in the Attendance Policy.

5. Use of University Resources - All University staff employees are responsible for protecting and preventing the misuse of University resources, property, and other assets, including, but not limited to, funds, information, intellectual property, facilities, office supplies, equipment, computers, networks, software, telephone and internet services, voice mail, and e-mail. University resources are reserved for University business and may only be used for lawful and authorized purposes. University systems such as computers and e-mail may be used for reasonable and incidental personal use. Additional guidance is available in the following:
   - Financial Policy Manual
   - Information Technology Policies
   - Property Management Manual

6. Purchasing and Vendor Practices - All University staff employees must act in a fair and professional manner when engaging in commercial activities on behalf of the University, e.g., purchasing goods and services. Commercial transactions must take place in a
competitive environment free from conflicts of interest. The University’s goal is to have a
diverse pool of vendors and suppliers and to obtain the best possible value based on
quality, price, service, reliability, and delivery terms. Goods and services may only be
purchased by authorized individuals consistent with the University’s
Procurement/Disbursements Policies. Purchasing and Payment Services can provide
guidance concerning the full spectrum of University commercial activities involving the
purchase of goods and services.

7. Reporting Responsibilities and Procedures - All University staff employees must promptly
notify the University of inappropriate conduct so that it can be properly addressed. University
staff employees who are aware of or suspect fraud, misappropriation of funds, theft, other
misuse of University resources or assets, accounting irregularities, or other violation of these
principles or University policy, should report their concerns immediately to their supervisor,
Risk Management, Human Resources (staff employee related), the Office of the Provost
(faculty or other academic personnel related), or the Office of Campus and Student Life
(student related). Alternatively, concerns may be reported to the University’s Whistleblower
hotline at 800-971-4317.

8. Retaliation - The University prohibits retaliation against any person for making a report in
good faith or cooperating in an investigation. Individuals who take retaliatory action will be
subject to corrective action up to and including termination of employment.

9. Violations - Every staff employee is responsible for complying with these principles and for
taking action or reporting violations. Employees who fail to comply with the principles,
including not reporting known unethical conduct, or who fail to cooperate in an investigation
will be subject to corrective action up to and including termination of employment.

CONFLICT OF INTEREST

Purpose
The purpose of this policy is to establish guidelines for conflicts of interest or commitment that
might arise in the course of staff employees' duties and external activities. This policy does not
seek to unreasonably limit external activities, but instead seeks to emphasize the need to
disclose conflicts and potential conflicts of interest and commitment, to manage such conflicts
and to ensure that the University’s interests are not compromised.

As a basic condition of employment, all University staff employees have a duty to act in the
University’s best interest in connection with matters arising from or related to their employment
and other University activities. In essence, this duty means that staff employees must not
engage in external activities that interfere with their obligations to the University, damage the
University’s reputation, compete with the University’s interests, or compromise the
independence of the University’s research and business activities, or can reasonably be seen
as doing so. Staff employees likewise must not profit or otherwise gain advantage from any
Policy
Staff employees must disclose and avoid actual and perceived conflicts of interest or commitment between their University responsibilities and their external activities. Depending on the circumstances, employee participation in activities in which a conflict or perceived conflict of interest exists may be prohibited or may be permitted but affirmatively managed.

Definitions
Staff Employee: All part-time and full-time University staff employees, including officers who are not primarily academic employees within the meaning of the University’s statutes or policies.

External Activity: Outside financial, business, political, professional, public service and academic activities.

Business Activity: The full spectrum of University commercial activities, including but not limited to purchasing, selling, hiring, contracting, investing, licensing, and leasing.

Financial Interest: Anything of monetary value, including but not limited to compensation, payments for service (e.g. consulting fees or honoraria), royalties, equity or ownership interests (with the exception of owning not more than 1% of any publicly traded class of shares of any company), and intellectual property rights.

Conflicts of Commitment: When a staff employee’s external activities (e.g., consultation arrangements, service on boards, leadership positions in external organizations) involve a dedication of time or other obligations that interfere with the staff employee’s fulfillment of University responsibilities or when a staff employee uses University resources for external activities without appropriate authorization.

Relative: The spouse, domestic partner, and, whether by blood, adoption, marriage or domestic partnership, the child, parent, grandparent, sibling, grandchild, aunt or uncle, niece or nephew, or any person residing in the immediate household (or the household of the spouse or domestic partner of any of these relatives) of the University employee, or his or her spouse or domestic partner.

Guidelines
1. A staff employee must fully disclose any external activity or financial interest of the staff employee or relative that would reasonably appear to be affected by or to affect the staff employee’s decisions, actions or participation in University business activities. Put another way, if a staff employee or staff employee’s relative is engaged in an external activity or has a financial interest then full disclosure is necessary if: (i) there is a chance that the interest or activity could reasonably appear to affect the staff employee’s decisions, actions or
participation in University business activities; (ii) or there is a chance that the staff employee's job duties or participation in other University activities could reasonably appear to affect the external activity or the interests of the external entity in which the staff employee or relative has a financial interest.

2. A staff employee must also disclose when they provide non-University related services to another entity, including a corporation, business, association, government agency, or nonprofit organization as an officer, director, owner, agent, consultant, or employee when the services may involve the commitment of time during business hours or otherwise conflict in any way with the University's interests or their responsibilities to the University.

3. All disclosures required by this policy must be in writing to the department/unit head or to the appropriate University vice president as soon as a staff employee becomes involved in covered external activities, aware of an actual or potential conflict of interest or involved in a sexual, romantic, or external business relationship. Disclosures should provide details such as the nature of the external activity or financial interest, expected or actual role in the external activity, and whether there is compensation or other financial remuneration associated with the external activity. The department/unit head or appropriate University vice president shall respond in writing to acknowledge the disclosure and identify whether a written management plan is necessary. Depending on the nature of the conflict, a written management plan should be devised by, as appropriate, the unit's lead, senior human resources representative or Human Resources (HR), and must be approved by the head of the organizational unit (e.g., Dean, Director, Chairperson) with a copy maintained by the unit. At a minimum, management plans must: (i) address the external activity, interest, or commitment in a way that will ensure that it will not interfere with the interests of the University, (ii) ensure the staff employee is not participating in making decisions on the University's behalf, which the external activity, interest, or commitment will cast doubt on the fairness or integrity of the University's business dealings and (iii) establish a review and approval process as appropriate. To ensure continuity and appropriateness, review and, as needed, revision of the approved management plan should occur at least annually and also whenever there is a germane change in reporting relationships. If the at-issue relationship involves the leader of an organizational unit, the management plan must be reviewed and approved by the organizational leader to whom the at-issue unit leader is accountable.

4. Staff employees who knowingly have or reasonably should know that they have (i) a financial interest in, (ii) a familial relationship with, or (iii) a relative who has a financial interest in, an individual or entity with whom the University is engaged or is actively considering engaging in a business activity, must disclose the interest or relationship and must not act on behalf of the University or otherwise participate in, or seek to directly or indirectly influence, any University decision or transaction regarding or related to that individual or entity. The following are examples of financial interests and relationships that must be disclosed:
   - The landscaping business owned by the father of a staff employee in the Facilities Department seeks to bid on a University landscaping contract.
• A consulting firm bids on a contract to provide statistical analysis, and a staff employee is a partner in the firm.
• A staff employee recommends using an office supply company with an excellent reputation and owned by the staff employee’s brother.

5. The University encourages staff employees’ participation in professional, charitable, community, government, and other public service organizations, which can be beneficial to the staff employee and the University. However, staff employees must not allow external activities to interfere with fulfilling their responsibilities to the University. To avoid conflicts of commitment all external activities involving a significant time commitment during business hours or other obligations that may impact fulfilling responsibilities to the University must be disclosed to the department/unit head or the appropriate vice president of the University, who may approve (with or without modification and/or a management plan) the external activity if it advances or otherwise serves the University’s interests. The following are examples of external activities that must be disclosed:

- Serving as an officer of an organization when the commitment will require substantial travel and work during University business hours
- Providing expert witness services in any civil or criminal case
- Serving on the board of a nonprofit organization
- Working as an editor or reviewer for a professional or academic journal
- Serving on a panel or committee for a professional organization

6. Staff employees must refrain from external activities involving personal gain or financial benefit for themselves or relatives (e.g., the purchase or sale of securities, real property, or other goods or services) in which they use, appear to use or likely have the opportunity to use, confidential information or special knowledge gained as a result of their employment by the University and/or participation in other University activities.

7. Staff employees must use confidential information consistent with U601 Confidential Information Policy and must refrain from unauthorized disclosure of non-public information concerning the University’s business activities, including but not limited to its investments, property development, sale or acquisition, and purchasing and contracting activities.

8. Staff employees must not engage in the unauthorized use of University resources for his/her personal benefit or for the benefit of any other person or external organization. The following are examples of prohibited conduct:

- Using University property such as photocopiers or printers for an employee’s cosmetic business
- Purchasing personal items with a University credit card or account
- Spending considerable time on a telephone call for the staff employee’s consulting business during University business hours
- Donating old computers to a nonprofit organization without appropriate authorization

9. Staff employees must exercise good judgment in giving or receiving gifts or entertainment. It is sound practice to discourage personal gifts and favors from entities and individuals with
whom the University engages in business activities or is considering engaging in business activities. Personal gifts of more than nominal value should be declined or returned to avoid any appearance or suggestion of improper influence. Entertainment or travel with a more than nominal value paid for by an external individual or entity must first be disclosed to and approved by the department head or an appropriate vice president of the University. Staff employees may only take vacations with individuals or other entities with which the staff employee directly engages in University business activities, regardless of who pays for the vacation, if the vacation is first disclosed to and approved by the department head or appropriate vice president of the University. The following are examples of prohibited conduct:

- An employee travels and speaks at a conference at a vendor’s expense without prior approval from the department head
- An employee receives a $100 gift card from a vendor and uses it for personal use
- A department attends a dinner paid for by a potential vendor without prior approval by the appropriate vice president

10. Staff employees involved in awarding or administering contracts using federal or other government funds are prohibited by law from soliciting or accepting gratuities, favors, or anything of monetary value from contractors or potential contractors.

11. Staff employees must not make, participate in or attempt to influence other University employees’ decisions in University business activities involving a relative. Staff employees should refer to U206 Nepotism Policy for additional guidelines. The following are examples of prohibited conduct:

- A staff employee’s nephew applies for a Research Assistant position, and the staff employee pressures the hiring manager to hire the nephew
- A vice president’s son wants a schedule change, and the vice president calls the son’s supervisor and encourages the schedule change
- A staff employee learns of his/her spouse’s possible termination of employment and encourages the supervisor to issue a warning instead of termination

12. Staff employees must avoid favoritism or the appearance of favoritism that may be associated with making employment or business decisions related to a person with whom the staff employee has a romantic, sexual or external business relationship. A staff employee must disclose a personal, romantic, sexual, or external business relationship if it appears to create a conflict of interest or casts doubt on the fairness or integrity of the University’s employment or business decisions. Additionally, a staff employee may not make, participate in, or attempt to influence employment or other business decisions involving a person with whom the staff employee has a sexual or romantic relationship. Sexual and romantic relationships also may be proscribed by the University’s Policy on Harassment, Discrimination and Sexual Misconduct. The following are examples of relationships that must be disclosed:

- Pat, a staff employee has been dating another staff employee, Chris, and Chris applies for a position indirectly reporting to Pat.
• An employee at a business owned, in part, by a staff employee applies for a position in the department at the University in which the staff employee works, and the applicant may report, directly or indirectly, to the staff employee if hired.
• An employee’s neighbor and longtime friend applies for a position reporting directly to the employee.

13. Staff employees are strongly encouraged to disclose any other financial interest or external activity that could present an actual conflict of interest or commitment, or might reasonably be perceived to create a conflict of interest or commitment. Disclosure is a key factor in protecting one’s reputation and career from embarrassing or harmful allegations of inappropriate conduct. Staff employees are encouraged to seek guidance from their supervisor or HR even if their situation is not directly covered by the disclosure obligations in this policy.

14. Failure to disclose an actual or potential conflict of interest or commitment or comply with an applicable management plan, is a violation of this policy and may result in corrective action up to and including termination of employment.

**EQUAL EMPLOYMENT OPPORTUNITY (EEO)**

**Purpose**
To express the University's continuing practice of nondiscrimination in employment.

**Policy**
The University of Chicago provides equal employment opportunities to all employees, applicants, and job seekers, and is committed to making decisions using reasonable standards based on each individual’s qualifications as they relate to a particular employment action (e.g., hiring, training, promotions). No person shall be discriminated against in employment or harassed because of race, color, religion, sex, sexual orientation, gender identity, national or ethnic origin, age, status as an individual with a physical or mental disability unrelated to ability, protected veteran status, military status, unfavorable discharge from military service, citizenship status, genetic information, marital status, parental status, ancestry, source of income, credit history, housing status, order of protection status, actual or perceived association with such a person, or other classes protected by law. This policy includes the commitment to maintaining a work environment free from unlawful harassment.

Under this policy, no employee or applicant shall be subject to retaliation (including harassment, intimidation, threats, coercion, or discrimination) because he/she has engaged, in good faith, in the following activities: (i) filing a complaint under this Policy with the University, or with federal, state, or local equal employment opportunity agencies; (ii) assisting or participating in an investigation or other activity related to the administration of any federal, state, or local equal employment opportunity or affirmative action law; (iii) opposing any act or practice prohibited by this Policy or federal, state, or local equal employment opportunity or affirmative action law; or (iv) exercising any other right protected by federal, state, or local equal employment opportunity or affirmative action law. Staff employees and applicants for staff jobs should immediately bring
any complaint or retaliation under this Policy to the attention of Human Resources (Labor/Employee Relations) or the Affirmative Action Officer.

Guidelines

1. This Policy applies to all terms, conditions, and privileges of employment including: recruitment, hiring, probationary period, training and development opportunities, job assignment, supervision, promotion or transfer, compensation, benefits, layoff and recall, termination, and retirement.

2. The Vice President & Chief Human Resources Officer (VP & CHRO) is responsible for ensuring that University policies (including this Policy) regarding the fair and equitable treatment of staff employees are implemented.

3. The Affirmative Action Officer coordinates the University's compliance with and interpretation of this Policy and advises employees, supervisors, and managers about the policy as needed.

4. Department heads, managers, and supervisors have primary responsibility for ensuring that employment decisions and the work environment are in compliance with this policy. Their own work performance will be evaluated, in part, on the basis of their efforts and results in the area of EEO.

5. Staff employees who believe they have been discriminated against, harassed, or have knowledge of such conduct should discuss their concerns or bring any work-related concerns to their supervisor. However, a staff employee may elect to contact Human Resources (Labor/Employee Relations) or the Affirmative Action Officer. Every reasonable effort will be made to conduct a prompt investigation and to treat complaints impartially and confidentially with a view to arriving at fair resolutions. If an investigation leads to a determination that this Policy was violated, corrective action up to and including termination of employment will be taken.

6. The University will provide, upon request by a job seeker or an applicant, reasonable accommodations for a disability, to complete the application process.

7. In accordance with the Americans with Disabilities Act, the University shall provide, upon request by an employee with a disability, reasonable accommodations for the employee when doing so will enable the employee to successfully perform the essential duties of the job. Staff employees should contact Human Resources (Labor/Employee Relations) to initiate the disability accommodation process.
NEPOTISM

Purpose
The purpose of this policy is to avoid favoritism, the appearance of or potential for favoritism, and conflicts of interest and loyalty often associated with nepotism. Nepotism is inconsistent with the University’s longstanding policy of making employment and other business decisions based solely on University needs and individual qualifications, skills, ability, and performance.

Policy
No University staff employee may make, participate in, or attempt to influence employment or other business decisions involving a relative or pressure or cause others to do so.

Definitions
Nepotism: Favoritism in the workplace based on kinship, which ordinarily consists of making employment or other business decisions based on a family relationship.

Staff Employee: All part-time and full-time University staff employees, including officers who are not primarily academic employees within the meaning of the University’s Statutes or Policies.

Employment Decisions: The full spectrum of employment-related actions, including but not limited to decisions related to hiring, supervision, direction of work, promotion, compensation, work hours, performance evaluation, termination, and all other terms and conditions of employment.

Business Decisions: Decisions related to full spectrum of University commercial activities (e.g., buying, hiring, selling, contracting, licensing, leasing).

Relative: The spouse, domestic partner, and, whether by blood, adoption, marriage or domestic partnership, the child, parent, grandparent, sibling, grandchild, aunt or uncle, niece or nephew, or any person residing in the immediate household (or the household of the spouse or domestic partner of any of these relatives) of the University employee, or his or her spouse or domestic partner.

Guidelines
1. This policy does not prohibit the University from simultaneously employing relatives or engaging in commercial activities with the relatives of employees. For example, relatives are permitted to work in the same University department or unit so long as the relatives comply with the requirements outlined above, e.g., there is no direct reporting or supervisory relationship between the relatives and all employment decisions are made by others.

2. Exceptions to this policy are at the discretion of the Vice President & Chief Human Resources Officer (VP & CHRO). For example, if one of the related parties is uniquely qualified to work for the other based on qualifications for a position and performs work in direct support of teaching, research or patient care, the VP & CHRO may permit the related
persons to continue to work together, provided that an appropriate management plan is developed, implemented, and administered, as described below in Paragraph 6.

3. Staff employees must self-report in writing to the head of their organizational unit before they make, participate in, or attempt to influence (or cause others to make, participate or attempt to influence) decisions covered by this policy. If the at-issue relationship involves the leader of an organizational unit (e.g., a Director or Associate Vice President), the report must be made in writing to the next most senior leader to whom the employee is accountable.

4. This policy applies to instances of nepotism that existed before the enactment of this policy. Any existing relationships or situations must be disclosed immediately, evaluated, and managed as provided in this policy.

5. Legitimate issues may arise and thus must be disclosed and managed under this policy with regard to: (i) relatives who do not fit the definition of relative provided above; or (ii) situations where the staff employee is directly or indirectly involved in the University’s engagement or potential engagement (e.g., as a contractor) of a relative.

6. As noted, if the VP & CHRO permits an exception to this policy, a management plan must be developed, implemented, and administered. The fundamental goal of the management plan is to mitigate actual and perceived favoritism and conflicts of interest and loyalty by establishing appropriate processes for employment decisions. Depending on the employment classification (e.g., staff, academic) of the individual with whom the staff employee has a relationship, a management plan should be devised by, as appropriate, the unit’s academic affairs administrator, senior human resources representative or Human Resources, and must be approved by the head of the organizational unit (e.g., Dean, Director, Chairperson). At a minimum, management plans must: (i) address reporting relationships, supervision, and evaluation in a way that will assure that there will be no participation in employment decisions as prohibited by this policy and (ii) establish a review and approval process for expenditures to sufficiently mitigate or preclude favoritism or the appearance of favoritism. To ensure continuity and appropriateness, review and, as needed, revision of the approved management plan should occur at least annually and also whenever there is a germane change in reporting relationships. If the at-issue relationship involves the leader of an organizational unit, the management plan must be reviewed and approved by the organizational leader to whom the at-issue unit leader is accountable.

7. Concerns or complaints about possible violations of this policy should be submitted to the VP & CHRO. All such complaints will be treated as confidentially as feasible and will be addressed by the VP & CHRO or their designee.

8. Violations of this policy may result in discipline up to and including termination of employment.
PERSONAL BUSINESS, VISITORS, AND PETS

Non-work-related activities or business should be conducted outside of your scheduled work hours. Personal phone calls during scheduled work time should not disrupt the work of staff employees or other University activities and should be limited. Non-work-related visitors should not visit the work area during working hours and typically should be limited to common, lobby, or break areas.

For the safety and protection of staff employees, faculty, students, and others on campus, pets are not permitted in University buildings unless otherwise required by law (e.g. service dogs).

SMOKING/NONSMOKING

Purpose
To comply with the 2005 Chicago Clean Indoor Air Ordinance, which protects the health of faculty, staff, students, and visitors.

Policy
Smoking is prohibited in all University buildings in accordance with the City of Chicago Clean Indoor Air Ordinance 7-32-010.

Exceptions
1. Apartments in buildings managed by Real Estate Operations (REO) and dormitories. However, smoking is prohibited in public spaces of apartment buildings and dormitories.

2. Smoking will be prohibited within 25 feet of any entrances to the Searle Chemistry Laboratory building at 5735 South Ellis Avenue and the building at 6045 South Kenwood Avenue. This prohibition is necessary to meet and maintain the LEED (Leadership in Energy and Environmental Design) standards of the U.S. Green Building Council (USGBC). This exception will apply to any University building that pursues LEED certification. Buildings which receive LEED certification shall display the 25 feet requirement through modification of the current signage.

Guidelines
1. This policy covers the smoking of all tobacco, nicotine, and other products, and includes cigars, cigarettes, “smokeless” cigarettes, and other such delivery systems.

2. Smoking is permitted outdoors at least 15 feet away from the entrance or enclosed area of any building including dormitories and residential properties.

3. Any person who smokes within a University building or outdoors less than 15 feet away from the entrance or enclosure is subject to a fine of not less than $100 and not more than $500 as set forth in the City Ordinance. It should be noted that the University, as building owner, can also be subject to the same City fine, or a greater amount, for repeated infractions.
4. Smoking complaints under the University policy are to be submitted to the University’s Safety and Environmental Affairs Office (phone 702-9999). This office will assign an officer to investigate and evaluate the complaint and route the complaint along with the findings to the administrative officer or academic dean of the unit against which the complaint is lodged. It is the responsibility of the appropriate administrative officer or academic dean to ensure that this policy is observed.

5. Enforcement of non-smoking areas in all buildings shall be in accordance with the City of Chicago Building Code and the City of Chicago Clean Indoor Air Ordinance, which allows an employee to designate his or her own work area as a non-smoking area.

6. Any employee who violates this policy will be subject to corrective action up to and including termination of employment.

* University employees located in the Medical Center shall be subject to the provisions of the University of Chicago Hospitals’ smoking/nonsmoking policy.

**SOCIAL MEDIA**

**Purpose**
To provide guidelines for the responsible use of blogs, networking sites, and other social media for staff employees.

**Policy**
The University recognizes blogs, networking sites, and other social media (collectively referred to as “social media”) as possible tools to support the University’s educational and operational goals. This policy applies to staff employees when they participate in social media as part of their job duties. It also applies to staff employees’ participation in social media at any time that they give the appearance of speaking on behalf of the University or its affiliates; identify themselves as University employees or as affiliated with the University; or discuss the University or its affiliates. Staff employees are responsible for the content they publish on social media and should use good judgment. Staff employees should be mindful that the things they say or do on social media are publicly available and searchable and may be forever accessible. As provided in the University’s Business Conduct Policy, comments, expressions, and other postings on social media must be honest and respectful of others; respect confidential, personal, and proprietary information; and comply with applicable law and University policies.

**Definitions**
*Social media:* Online, electronic, or Internet media, tools, communities, and spaces for social interaction, sharing user-generated content, or public or semi-public communication. Social media typically uses web-based technologies to turn communication into interactive dialogues. Social media can take many different forms, including internet forums, blogs and microblogs, online profiles, wikis, podcasts, pictures and video, email, text, instant messaging, music-sharing, and chat, to name just a few. Examples of social media include but are not limited to the following: LinkedIn, Facebook, MySpace, Wikipedia, YouTube, Twitter, Skype and blogs.
**Blogging:** Making an entry into a written online journal or forum that is accessible to users of the forum, blog, or Internet.

**Cyber-vetting:** Refers to accessing publicly available social media or using search engines such as Google and Yahoo to review the online activity or suitability of staff employees, applicants, or job seekers.

**Guidelines**

1. Staff employees are reminded that the use of University property is primarily for the purpose of performing University business. Staff employees should make sure they are aware of department/unit specific standards regarding Internet and social media usage on University property and during business hours. Staff employees should consult with their immediate supervisors before using social media for work-related purposes. Personal use of the Internet including social media must be consistent with the Eligibility and Acceptable Use Policy for Information Technology.

2. It often is difficult to distinguish between personal and professional activity in social media; thus, staff employees who identify themselves as an employee of the University or use their University email address must state, “The opinions expressed are my own, and they do not necessarily represent the views or opinions of my employer” unless the University has formally designated the staff employee as an official spokesperson of the University. If you have questions regarding whether a staff employee is formally designated as an official spokesperson, please contact University Communications. The following are examples of postings on social media that violate this or other University policies:
   a. I support Jane Doe for City Council…John Doe (Director of Account Management, University of Chicago)
   b. We are using Brand X software at the University of Chicago, and it’s the worst. Sara Smart (Technology Analyst)

3. Staff employees must safeguard and use confidential information consistent with 601 Treatment of Confidential Information. Thus, staff employees must not disclose or post Confidential Information on social media. In addition, staff employees must not use trademarks, logos, copyrighted, or other proprietary information of the University or others in personal blogs, personal postings, or other social media.

4. Staff employees must not use social media to harass, threaten, discriminate, or disparage employees or others affiliated with the University. Staff employees’ postings and use of social media must comply with 201 Equal Employment Opportunity, 606 Workplace Violence, and 609 Harassment, Discrimination & Sexual Misconduct. The following are examples of postings on social media that violate this or other University policies:
   a. A rear-view picture of a coworker bending over
   b. “I work in the Lab at the University of Chicago, and my supervisor, Tara is a liar and an idiot” - tomthumb@uchicago.edu
c. Derogatory comments about a coworker and his religious beliefs

5. Staff employees’ communications on social media should be consistent with the University’s policies, standards, and principles and should not denigrate or insult others.

6. Staff employees should contact Human Resources and use caution before deciding to “cyber-vet” a staff employee, applicant, or job seeker. Cyber-vetting must be consistent with applicable law and University and department/unit policy including but not limited to 201 Equal Employment Opportunity, 202 Recruitment and Selection Process, and 609 Harassment, Discrimination & Sexual Misconduct.

7. Managers and supervisors should consult with Human Resources before providing employment references for current or former staff through social media.

8. Staff employees should not request, pressure, or require employees or others affiliated with the University to share passwords to social media nor should employees or others affiliated with the University be pressured or required by a staff employee to “friend” or otherwise establish an online or social media relationship. Managers and supervisors should be especially cautious and exercise good judgment when communicating on social media with employees, students, alumni, or others affiliated with the University.

9. If a staff employee has questions about this policy or a specific posting out on the web or wishes to report a posting that may not comply with this policy, please contact the staff employee’s supervisor, the Human Resource Partner (HRP) for the department/unit, or Human Resources.

10. The University may require staff employees to remove posts that violate this policy or applicable law.

11. Staff employees who violate this policy may be subject to corrective action up to and including termination of employment.

SOLICITATIONS

To avoid disruption of University activities, the University prohibits: (i) the distribution of literature for any purpose by employees in working areas on University property; (ii) the distribution of literature for any purpose by employees in non-working areas of University property during employees’ working time; (iii) personal solicitation of any kind in both working and non-working areas by employees during working time; and (iv) solicitation or distribution for any purpose to employees, customers or visitors by non-employees at any time on University property and premises within the University’s control. For the purpose of this Handbook, “working time” does not include lunch periods or other duty-free time periods, but does include the time spent on...
work tasks by both the employee engaging in the distribution of literature or solicitation and the employee to whom the distribution or solicitation is directed.

**SUBSTANCE ABUSE**

**Purpose**
To define the University's policy regarding substance abuse and to provide guidelines in handling an employee whose work performance has been impaired by the use of such substances as alcohol or drugs. This statement implements the requirements for a drug-free workplace as required by federal law.

**Policy**
The University recognizes alcohol and drug abuse as potential health, safety, and security problems. The University expects all employees to assist in maintaining a work environment free from the effects of alcohol, drugs (including marijuana), or other intoxicating substances and further encourages any employee who may suffer from an addiction or substance abuse disorder to seek professional care and treatment. Compliance with this substance abuse policy is made a condition of employment, and violations of this policy will result in serious reprimand, up to and including termination.

**Guidelines**

1. The University prohibits employees from the manufacture, possession, use, distribution, sale or purchase of non-prescribed controlled substances and intoxicants while on University premises or working off-site, and from working under the influence of alcohol, drugs (including marijuana) or other intoxicating substances. The only exception to this provision will apply to moderate consumption and/or possession of alcohol by legally aged employees at University approved functions (e.g., receptions, parties).

2. Any employee who violates any aspect of this substance abuse policy, who intentionally abuses prescription drugs, who tampers with the drug testing process or who tests positive to a drug test will be seriously reprimanded, up to and including discharge.

3. Employees may not report to work if impaired by drugs or alcohol. If an employee is or may be impaired because of taking medication according to a doctor's prescription, (s)he is expected to discuss it with his/her supervisor before commencing work that day. If the University has a reasonable basis to verify prescription information with the treating physician, the employee will be expected to authorize release of such information.

4. As required by federal law, any employee who is convicted of any violation of any criminal drug statute (including misdemeanors) for a violation occurring on University property or during working time shall notify Human Resources (HR) within five (5) days of the date of conviction. A conviction includes any plea or finding of guilty, any plea of "nolo contendere" and/or imposition of a fine, jail sentence or other penalty. Pursuant to
federal law, if the convicted employee is working on a project funded through a federal contract or grant, the University is required to notify the relevant federal contracting or granting agency within ten (10) days of receiving such notice of conviction.

5. When in the judgment of a supervisor, there is reasonable suspicion that an employee (i) is engaged in the unauthorized use or possession of alcohol, drugs, or other intoxicating substances or (ii) is impaired in the workplace due to the consumption of alcohol, drugs, or other intoxicating substances, the supervisor must immediately notify the HR Representative. In considering whether an employee is impaired in the workplace, the HR representative will assess and document whether there is a good faith belief an employee manifests specific (i) scents associated with alcohol, drugs, or other intoxicating substances and/or (ii) articulable symptoms while working that decrease or lessen the employee’s performance of the duties or tasks of the employee’s role, including:

1. Speech
2. Physical dexterity
3. Agility
4. Coordination
5. Demeanor
6. Irrational or unusual behavior
7. Negligence or carelessness in operating equipment or machinery
8. Disregard for the safety of the employee or others
9. Involvement in any accident that results in serious damage to equipment or property
10. Disruption of a production or manufacturing process
11. Carelessness that results in any injury to the employee or others

6. The HR representative will communicate their assessment to Employee and Labor Relations and accompany the employee to the Office of Occupational Medicine in the University of Chicago Medical Center, where the employee will undergo drug or alcohol testing. If it is outside of Occupational Medicine’s business hours, the HR representative will accompany the employee to the emergency room for drug or alcohol testing. Refusal by an employee to take a reasonable suspicion test as instructed or failure to comply with all necessary elements of the testing program may result in the employee being disciplined up to and including discharge.

7. Employees who dispute the results of a drug or alcohol test have the right to have the initial sample independently re-tested by a US Department of Health and Human Services-certified laboratory of their choice, at their own expense, within five (5) working days of when they were notified of the test results.

8. The legalization of marijuana under state law does not change the University's policy or its obligations under federal law as a federal contractor and recipient of federal
funds. The manufacture, possession, use, distribution, sale or purchase of marijuana is prohibited on University premises and constitutes a violation of this policy. Working under the influence of marijuana is likewise prohibited and violates this policy.

9. Any employee who feels (s)he may have a substance abuse problem is urged to contact his/her supervisor or a representative of HR Employee and Labor Relations. The employee is also urged to seek the services of the Employee Assistance Program. Such an employee will not be disciplined or retaliated against for such contact. The University is interested in a safe workplace, and a healthy and productive workforce, not in punishing employees who come for help.

10. An employee who requests treatment or a leave of absence for treatment will not be disciplined for making such a request. An employee may not, however, escape discipline by first requesting such treatment or leave after being selected for testing or violating the University's policies and rules. Requests for such treatment will be kept confidential in accordance with federal and state law.

11. The employee must begin and complete satisfactorily an approved treatment program and the ongoing requirements of the program, and consent in writing to the disclosure by the program of its recommendations, any dangers it perceives in connection with the employee's continued performance of his/her job, and whether the employee is complying with, and has successfully completed the program and the ongoing requirements of the program. The employee will also submit to further testing as required by the University.

12. The University retains full and final discretion on whether, when, and under what conditions an employee may remain employed or be re-employed after an instance where an employee has violated this substance abuse policy.

**TREATMENT OF CONFIDENTIAL INFORMATION**

**Purpose**
To identify information that is considered confidential and to establish guidelines for the use of confidential information.

**Who is Governed by this Policy**
This policy applies to all employees.

**Policy**
1. Employees must not misuse confidential information.

2. Confidential information generally consists of non-public information about a person or an entity that, if disclosed, could reasonably be expected to place either the person or the entity
3. The University is bound by law or contract to protect some types of confidential information, and in other instances the University requires protection of confidential information beyond legal or contractual requirements as an additional safeguard.

4. Confidential information includes but is not limited to:
   - Payroll records, salary and non-public benefits information
   - Social Security numbers, driver’s license numbers, state identification card numbers, passport numbers
   - Credit and debit card information; financial account information
   - Personnel records, including but not limited to information regarding an employee’s work history, credentials, salary and salary grade, benefits, length of service, performance, and discipline (see Policy U705 Employee Access to Personnel Records)
   - Individual criminal background check information
   - Individual conflict of interest information
   - Computer system passwords and security codes
   - Unpublished grant proposals and unpublished research data
   - Unpublished manuscripts and correspondence
   - Budgetary, departmental, or University planning information
   - Non-public financial, procurement, health/safety, audit, insurance, and claims information
   - Internal investigation information, pre-litigation, and non-public litigation and administrative agency charge, audit and inquiry information
   - Student records, including but not limited to student education records within the meaning of the Family Educational Rights and Privacy Act
   - Proprietary or intellectual property in which the University asserts ownership that is created by University employees in connection with their work
   - Non-public law enforcement records generated or maintained by the University of Chicago Police Department
   - All University attorney-client communications and University attorney work product
   - Non-public donor and alumni information
   - Patient care records including patient benefit plan enrollment, claims, billing matters, and data concerning human research subjects
   - Medical records, genetic information, personally identifiable medical information, and all information designated as “Protected Health Information” under the Health Insurance Portability and Accountability Act (HIPPA), or otherwise protected by law
   - All information, materials, data and records designed confidential by a University unit, by law or by contract, including information obtained by the University from third parties under non-disclosure agreements or any other contract that designates third party information as confidential
5. All employees with job duties that require them to handle confidential information are required to safeguard such information and only use it or disclose it as expressly authorized or specifically required in the course of performing their specific job duties.

6. Misuse of confidential information can be intentional (acts and/or omissions), or a product of negligence or inadvertence. Misuse includes but is not limited to:
   - Accessing information not directly germane or relevant to the employee's specifically assigned tasks
   - Disclosing, discussing, and/or providing confidential information to any individual not authorized to view or access that data, including but not limited to third parties, volunteers, vendors and other University employees
   - Reckless, careless, negligent, or improper handling, storage, or disposal of confidential data, including electronically stored and/or transmitted data, printed documents and reports containing confidential information
   - Deleting or altering information without authorization
   - Generating and/or disseminating false or misleading information
   - Using information viewed or retrieved from the systems for personal or any other unauthorized or unlawful use

Employee Access Codes
1. Employees who have been assigned personal access codes to work with systems that generate, store, or manage confidential information bear the responsibility for preserving the complete confidentiality of such codes to ensure against unauthorized use by any other person. Employees who negligently or intentionally share their system passwords or accounts with anyone else for any reason will be held responsible for any resulting misuse of the system by others.

2. Employees who have any reason to believe or suspect that someone else is using their personal access codes must immediately notify their supervisor.

3. Employees are prohibited from logging onto University databases and administrative systems with their personal access codes and then permitting another person to access information in those data bases and/or systems.

Student Education Records
1. Student education records are governed by the Family Educational Rights and Privacy Act (FERPA) and applicable University policy (see the University of Chicago Student Manual). FERPA-protected student education records must not be disclosed under any circumstances absent the express consent of the University student (or former student) or as authorized by the University's Office of Legal Counsel or the University's Registrar. Although FERPA also permits the University to disclose student directory information (as defined by FERPA), no such information may be disclosed until the Office of the Registrar
has confirmed that the student has not elected to block his or her directory information, as permitted by FERPA.

**Employee Duties Related to Confidential Information**

1. Employees are expected to:
   - Identify confidential information and materials
   - Proactively seek information regarding and comply with any restrictions on the use, administration, processing, storage, or transfer of the confidential information in any form, physical or electronic
   - Learn about and comply with any procedures regarding the appropriate handling of such information and materials
   - Understand their responsibilities related to information security

2. In many instances, employees will be required or expected to attend training relevant to the information/materials being handled. Employees who are hired into positions that require adherence to government-mandated compliance (e.g., HIPAA, Medicare Compliance, grant and contract administration, pathogens or select agents) will be subject to strict procedures for handling such materials, must attend all mandated training sessions, and comply with compliance-specific policies and applicable law.

3. Employees must notify the University of any violation of these rules.

**Consequences for Misuse of Confidential Information**

1. Employee misuse of confidential information and/or the systems in which the information is stored is a serious breach of job responsibilities and will result in discipline such as:
   - Immediate dismissal from work and disqualification from future University employment
   - Other personnel and/or student conduct code disciplinary action
   - Civil and/or criminal legal action as appropriate

**Definitions**

**Center of Expertise- Employee and Labor Relations**: Employee and Labor Relations partners with department/division/unit HR professionals and Supervisors to provide guidance in the areas of policy, contract administration, performance management, leaves of absence, employment law compliance and various other employment matters.

**HR Partner**: Department/division/unit personnel who serve as the representatives for the department in all human resources issues and initiate key HR processes in campus HR systems on behalf of their department/division/unit.

**Local Unit**: Campus department/division/unit.

**Shared Services Office**: The centralized body that processes transactions, reviews and verifies documentation, enforces policies and regulations, and ensures consistency and accuracy of processes.
Supervisor: Unit personnel who oversee and regulate employees in their performance of assigned or delegated tasks, as well as enforce compliance with policy.

Roles and Responsibilities
Center of Expertise- Employee and Labor Relations: The Center of Expertise – Employee and Labor Relations is responsible for working with the HR Partner and Supervisor to determine disciplinary action needed in the case of employee misuse of confidential data and approve disciplinary actions.

Employee: Employees are responsible for maintaining confidentiality of information they have access to in the course of their employment at the University. Employees are responsible for notifying their supervisor of any breach of confidentiality. Employees are also responsible for attending training related to system access and signing a confidentiality agreement during the onboarding process. Employees are also responsible for using two-factor authentication when accessing core systems at the University.

HR Partner: The HR Partner is responsible for following policies and procedures relating to the confidentiality of information. The HR Partner, together with the Supervisor, is also responsible for initiating system access requests for onboarding employees, as well as submitting revoke system access or “quick closure” requests in the case of a terminating or transferring employee. The HR Partner is also responsible for reviewing system access when an employee’s position or responsibilities are updated. The HR Partner is also responsible for working with the Center of Expertise – Employee and Labor Relations to determine disciplinary action needed when employee misuse of confidential information has been identified.

Supervisor: Supervisors are responsible for enabling system access during the onboarding process or communicating system access requirements to HR Partners during the onboarding process. Supervisors are also responsible for requesting system access removal or notifying HR Partners to responsibility changes which alter an employee’s system access requirements.

Shared Services Office: Shared Services is responsible for processing system access requests for core systems, as well as processing revoke system access or quick closure requests in the case of employee job changes or terminations.

WORKPLACE VIOLENCE

Purpose
To define the University’s policy on workplace violence.

Policy
The University is committed to providing a safe work environment for all its employees and students. To foster this environment, the University has a zero-tolerance policy for any acts of
intimidation or threats of violence committed by any employee, student, customer, or vendor at any University workplace or while conducting University business. Conduct that interferes with the University's commitment to maintaining a violence-free workplace will not be tolerated.

**Guidelines**

1. A staff employee must conduct himself/herself in a professional manner which excludes behaviors for which the University has zero-tolerance, including:
   - Direct or indirect intimidation or threats of violence
   - Acts of a violent or aggressive nature (e.g., communicating threatening messages, pushing, hitting, fighting, throwing objects, or otherwise intentionally injuring another person), whether conducted in a verbal, physical or electronic mode
   - Vandalism, destruction, attempted destruction or threats of such to the University or its property
   - Physical or verbal harassment or intimidation, including any behavior or threat of behavior that would place a reasonable person in fear of physical injury or aggressive physical contact
   - Possession of firearms or dangerous weapons at any University workplace or while conducting University business

2. Harassment of a sexual nature will be governed by the University's Harassment, Discrimination & Sexual Misconduct Policy, which includes sexual harassment.

3. An employee who commits acts of intimidation or threats of violence, whether intentional or unintentional, will be subject to immediate disciplinary action up to and including termination of employment, arrest, criminal prosecution, and/or civil action.

4. If the incident of violence results in an injury or death to an employee, the event is recordable for purposes of the Occupational Safety and Health Act (OSHA) Log and should be immediately reported to the Workers’ Compensation Administrator.

5. Any employee who feels he/she has been the subject of workplace violence or has identified a situation where workplace violence has or could occur must immediately bring it to the attention of his/her supervisor, manager, unit head, or HR - Employee/Labor Relations.

6. The University forbids retaliation against any employee for reporting a violation of this policy. Any employee who engages in retaliation is in violation of this policy and will be subject to disciplinary action up to and including termination. An employee who feels he/she is the subject of retaliation should contact HR – Employee/Labor Relations.

7. If a student commits acts or threats of violence or intimidation, he/she will be subject to the student disciplinary procedures.
8. For guidance or advice regarding workplace violence and unacceptable employee conduct, contact HR – Employee/Labor Relations.

**UNIVERSITY POLICY ON HARASSMENT, DISCRIMINATION & SEXUAL MISCONDUCT**

Click here for full policy: https://harassmentpolicy.uchicago.edu/policy/

**UCHICAGO POLICY ON TITLE IX SEXUAL HARASSMENT**

I. **Introduction**

The University of Chicago is a community of scholars dedicated to research, academic excellence, and the pursuit and cultivation of learning. Members of the University community cannot thrive unless each is accepted as an autonomous individual and is treated without regard to characteristics irrelevant to participation in the life of the University. Freedom of expression is vital to our shared goal of the pursuit of knowledge and should not be restricted by a multitude of rules. At the same time, unlawful discrimination, including sexual harassment, compromises the integrity of the University. The University is committed to taking necessary action to prevent, correct, and, where indicated, discipline unlawful sexual harassment.

Title IX Sexual Harassment violates the law, as well as the standards of our community, and is unacceptable at the University of Chicago. Sexual harassment can be devastating to the person who experiences it directly and can adversely impact family, friends, and the larger community. Regardless of the definitions provided below, people who believe they have experienced any form of sexual misconduct are encouraged to report the incident and to seek medical care (as appropriate) and support as soon as possible.

Matters that do not meet the definition of Title IX Sexual Harassment (as described in this Policy) are not within the scope of this Policy, but may still constitute misconduct that is incompatible with University’s standards and may be addressed by the University of Chicago’s Policy on Harassment, Discrimination, and Sexual Misconduct, or other applicable University policies or procedures.

II. **Policy Basis and Application**

This policy expresses the University’s commitment to an environment free from sexual harassment and conforms to legal requirements under Title IX of the Education Amendments of 1972 (“Title IX”), a civil rights law that prohibits sex discrimination by recipients of federal financial assistance, like the University of Chicago, and the U.S. Department of Education’s implementing regulations for Title IX.

All students, faculty, other academic appointees, postdoctoral researchers, staff, affiliates and others participating in University of Chicago education programs and activities are subject to this policy. This policy only applies to Title IX Sexual Harassment, as defined in this policy, that takes place in an educational program or activity of the University against a person in the United
States. An educational program or activity includes (1) locations, events, or circumstances over which the University exercised substantial control over both the Title IX Respondent and the context in which Title IX Sexual Harassment occurs, and (2) any building owned or controlled by a student organization that is officially recognized by the University.

This policy applies to all of the University’s education programs or activities in the United States, regardless of whether such programs or activities occur on-campus or off-campus. Study-abroad programs and off-campus locations that are not within the University’s education program or activity are not covered by the Title IX regulations or by this Policy.

III. Notice of Non-Discrimination

In keeping with its long-standing traditions and policies, the University of Chicago considers students, employees, applicants for admission or employment, and those seeking access to University programs on the basis of individual merit. The University does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity, national or ethnic origin, age, status as an individual with a disability, protected veteran status, genetic information, or other protected classes under the law (including Title IX of the Education Amendments of 1972). Sexual harassment, is a form of sex discrimination prohibited by Title IX, which provides that: No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program or activity receiving Federal financial assistance.

For information regarding the University of Chicago’s Policy on Harassment, Discrimination, and Sexual Misconduct, please see: http://harassmentpolicy.uchicago.edu/page/policy.

IV. Reporting and Notice to the Title IX Coordinator or Official(s) With Authority

When the University has Actual Knowledge of Title IX Sexual Harassment in an education program or activity of the University against a person in the United States, the University must promptly respond promptly, as described in Section XI under this Policy. Individuals should report Title IX Sexual Harassment or allegations of Title IX Sexual Harassment to the University’s Title IX Coordinator or to an Official with Authority, using the information below, and even if the individual is not sure whether the allegations amount to violation of this policy.

**Associate Provost for Equal Opportunity Programs and Title IX Coordinator for the University**

The University official responsible for coordinating compliance with this this Policy is Bridget Collier, Associate Provost for Equal Opportunity Programs. Ms. Collier also serves as the University’s Title IX Coordinator, Affirmative Action Officer, and Section 504/ADA Coordinator. You may contact Ms. Collier in person, by mail, by telephone, by electronic mail, or by any other means that results in Ms. Collier receiving a verbal or written report, using the following contact information:

Bridget Collier  
The University of Chicago, Office of the Provost  
Associate Provost for Equal Opportunity Programs and Title IX Coordinator for the University  
bcollier@uchicago.edu,
You may contact the Associate Provost for Equal Opportunity Programs and Title IX Coordinator, or her designee, to report any complaints of discrimination or unlawful harassment including Title IX Sexual Harassment, and sexual misconduct. The Associate Provost for Equal Opportunity Programs or her designee can also assist you in the following ways:

- If you are unsure of where to turn for help.
- If you have questions regarding this Policy, or the University’s Policy on Harassment, Discrimination, and Sexual Misconduct.
- If you have questions regarding Title IX of the Education Amendments of 1972 or the Department of Education’s regulations implementing Title IX.
- If you are seeking information regarding the implementation of supportive measures and accommodations related to a matter involving Title IX Sexual Harassment or harassment, discrimination, or sexual misconduct.
- If you have a complaint or question regarding postdoctoral researchers, staff, faculty members, or other academic appointees engaging in Title IX Sexual Harassment, other forms of harassment or discrimination, sexual misconduct, dating violence, domestic violence, stalking, or retaliation.
- If you need information regarding campus accessibility and accommodations for individuals with disabilities.

**Official(s) with Authority**

In addition to reporting sexual harassment or allegations of sexual harassment to the University’s Title IX Coordinator, any person may report Title IX Sexual Harassment to an “Official with Authority”, as defined in this Policy. Officials with Authority must promptly forward any report of Title IX Sexual Harassment to the Title IX Coordinator. The following are designated Officials with Authority:

- For faculty, other academic appointees, postdoctoral researchers: the President of the University, the Provost of the University, Academic Deans, and members of the Title IX Hearing Panel.
- For staff: Academic Deans, Unit supervisors, and members of the Title IX Hearing Panel.
- For students: the Dean of Students in the University, the Area Deans of Students, members of the Area Disciplinary Committees, and members of the Title IX Hearing Panel.

**Individuals with Reporting Obligations**

Pursuant to the Policy on Harassment, Discrimination, and Sexual Misconduct, an Individual with Reporting Obligations is any faculty member, other academic appointee, postdoctoral researcher, or staff employee who would reasonably be expected to have the authority or duty to report or take action to redress sexual misconduct. An Individual with Reporting Obligations may not have the authority to institute corrective measures on behalf of the University (and thus is distinct from an Official with Authority), but is nonetheless responsible for promptly notifying
the Title IX Coordinator for the University of all known details related to a possible incident of sexual misconduct (including sexual harassment), dating violence, domestic violence, and stalking that is reported to them directly, indirectly, or through a third party, or that they may have observed. Individuals with Reporting Obligations include (among others) faculty and instructors, RAs, Resident Heads, Resident Masters, TAs, preceptors, UCPD staff, and other University employees.

**Confidential Reporting**

The Confidential resources listed in this Policy do not have an obligation to report any form of sexual misconduct to the Title IX Coordinator, including Title IX Sexual Harassment, and will not do so without the explicit consent of the complaining party. For more information about and a complete list of Confidential Resources, see Appendix I (Support Services and Resources for Those Who Have Experienced Sexual Assault) or [https://equalopportunityprograms.uchicago.edu/title-ix/confidential-resources/](https://equalopportunityprograms.uchicago.edu/title-ix/confidential-resources/).

**Students** may confidentially report a violation of this Policy to:

- Sexual Assault Dean-on-Call (SADoC) by calling 773-834-HELP.
- Confidential Advisor by calling Student Counseling Service at 773-702-9800 and asking for an appointment with the Confential Advisor.
- Student Counseling Service by calling 773-702-9800.
- Ordained Religious Advisors by calling 773-702-2100 or emailing spirit@uchicago.edu.

**Employees** may confidentially report a violation of this Policy to the Employee Assistance Program (Perspectives) 24-hours: 800-456-6327 [http://www.perspectivesltd.com/](http://www.perspectivesltd.com/).

**Electronic Reporting; Anonymous Reporting**

Any person may report a potential violation of this Policy to the University’s Title IX Coordinator by filling out the electronic reporting form available at: [https://cm.maxient.com/reportingform.php?UnivofChicago&layout_id=6](https://cm.maxient.com/reportingform.php?UnivofChicago&layout_id=6).

Such a report will be anonymous if filed without disclosing one’s name or contact information.

**University of Chicago Police Department (UCPD)**

773-702-8181 or 1-2-3 from a campus phone (24-hours) or in-person at 6054 South Drexel Ave.

Responsibilities of the UCPD when receiving a report of sexual assault, dating violence, domestic violence, or stalking include:

- Attending to the immediate needs of the victim, including personal safety and prompt medical care.
- When appropriate, broadcasting a description of the offender.
- Notifying the Title IX Coordinator for the University when a report involves a member of the campus community.
- Notifying the Sexual Assault Dean-on-Call if the victim is a student.
• Providing victims with information concerning the importance of preserving evidence, and the rights of victims and the University’s responsibilities regarding orders of protection, no-contact orders, and other similar court orders.

Third-Party/Bystander Reporting

Any person may report a potential violation of this Policy through any of the means listed above.

Designees of the Title IX Coordinator

Director, Office for Access and Equity and Deputy Title IX Coordinator

Elizabeth Honig, who serves as the Director of the Office for Access and Equity and Deputy Title IX Coordinator, and as a designee for the Associate Provost for Equal Opportunity Programs, is also available to assist the community on all matters related to this Policy, Title IX, the Policy on Harassment, Discrimination, and Sexual Misconduct and Section 504/ADA. You may contact Ms. Honig by emailing ehonig@uchicago.edu, by calling 773-702-4913, or by writing to Elizabeth Honig, Office of the Provost, The University of Chicago, 5525 S. Ellis Ave., Suite B, Chicago, IL 60637.

Associate Director, Office for Access and Equity and Lead Investigator

Jackie Hennard, who serves as the Associate Director of the Office for Access and Equity and Lead Investigator, and as a designee for the Associate Provost for Equal Opportunity Programs, is also available to assist the community on all matters related to this Policy, Title IX, the Policy on Harassment, Discrimination, and Sexual Misconduct Section 504/ADA. You may contact Ms. Hennard by emailing jacquelineh1@uchicago.edu, by calling 773-702-1032, or by writing to Jackie Hennard, Office of the Provost, The University of Chicago, 5525 S. Ellis Ave., Suite B, Chicago, IL 60637.

Director, Office for Affirmative Action and Deputy Title IX Coordinator

Scott Velasquez, who serves as the Director of the Office for Affirmative Action and Deputy Title IX Coordinator, and as a designee for the Associate Provost for Equal Opportunity Programs, is also available to assist the community on matters related to this Policy, Title IX, the Policy on Harassment, Discrimination, and Sexual Misconduct and Affirmative Action. You may contact Mr. Velasquez by emailing svelasquez@uchicago.edu, by calling 773-702-7994, or by writing to Scott Velasquez, Office of the Provost, The University of Chicago, 5525 S. Ellis Ave., Suite B, Chicago, IL 60637.

Director, Office for Sexual Misconduct Prevention and Support, Deputy Title IX Coordinator for Students

Renae DeSautel is the Director of the Office for Sexual Misconduct Prevention and Support, and Deputy Title IX Coordinator for Students, and as a designee for the Associate Provost for Equal Opportunity Programs, is available to assist the student community on supportive measures and matters related to this Policy and the Policy on Harassment, Discrimination, and Sexual Misconduct. You may contact Ms. DeSautel by emailing desautel@uchicago.edu, by calling 773-702-0438, or by writing to Renae DeSautel, Office of the Provost, The University of Chicago, 5525 S. Ellis Ave., Suite B, Chicago, IL 60637.
**Associate Director, Office for Sexual Misconduct Prevention and Support, Deputy Title IX Coordinator for Students**

Megan Heckel-Greco is the Associate Director of the Office for Sexual Misconduct Prevention and Support, and Deputy Title IX Coordinator for Students, and as a designee for the Associate Provost for Equal Opportunity Programs, is available to assist the student community on supportive measures and matters related to this Policy, and the Policy on Harassment, Discrimination, and Sexual Misconduct. You may contact Ms. Heckel-Greco by emailing mheckel@uchicago.edu, by calling 773-702-8251, or by writing to Megan Heckel-Greco, Office of the Provost, The University of Chicago, 5525 S. Ellis Ave., Suite B, Chicago, IL 60637.

**Associate Dean of Students in the University for Disciplinary Affairs**

Jeremy Inabinet, who serves as the Associate Dean of Students in the University for Disciplinary Affairs, and as a designee for the Associate Provost for Equal Opportunity Programs, is available to assist the student community on matters related to this Policy, Title IX, and the Policy on Harassment, Discrimination, and Sexual Misconduct. You may contact Mr. Inabinet by emailing inabinet@uchicago.edu, by calling 773-702-7994, or by writing to Jeremy Inabinet, The University of Chicago, 5711 Woodlawn Avenue, Chicago, IL 60637.

**Assistant Dean of Students in the University for Disciplinary Affairs**

Melissa Vergara, who serves as the Assistant Dean of Students in the University for Disciplinary Affairs, and as a designee for the Associate Provost for Equal Opportunity Programs, is available to assist the student community on matters related to this Policy, Title IX, and the Policy on Harassment, Discrimination, and Sexual Misconduct. You may contact Ms. Vergara by emailing mbmvergara@uchicago.edu, by calling 773-702-2610, or by writing to Melissa Vergara, The University of Chicago, 5711 Woodlawn Avenue, Chicago, IL 60637.

**Executive Director of Employee and Labor Relations**

Brett Leibsker, who serves as the Executive Director of Employee and Labor Relations, and as a designee for the Associate Provost for Equal Opportunity Programs, is available to assist the staff community on matters related to this Policy, Title IX, and the Policy on Harassment, Discrimination, and Sexual Misconduct. You may contact Mr. Leibsker by emailing bleibsker@uchicago.edu, by calling 773-834-2657, or by writing to Brett Leibsker, The University of Chicago, 6054 South Drexel Avenue, Chicago, IL 60637.

**V. Title IX Sexual Harassment**

In compliance with Title IX and for purposes of this policy, sexual harassment is conduct, on the basis of sex, that satisfies one or more of the following:

1.A. A University employee conditions the provision of an aid, benefit, or service on an individual’s participation in unwelcome sexual conduct (“**Quid Pro Quo Harassment**”) or

1.B. Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the University’s education program or activity (”**Title IX Hostile Environment**”, see further information in this Section below); or
1.C **Sexual assault**, which as defined under the Title IX regulations, means any sexual act, including Rape, Sodomy, Sexual Assault With An Object, or Fondling, directed against another person, without the consent of the victim, including instances where the victim is incapable of giving consent; also unlawful sexual intercourse.¹

a. Rape—(Except Statutory Rape) The carnal knowledge of a person, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity. There is carnal knowledge if there is the slightest penetration of the sexual organ of the female (vagina) by the sexual organ of the male (penis). Attempted Rape is included.

b. Sodomy—Oral or anal sexual intercourse with another person, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity.

c. Sexual Assault With An Object—To use an object or instrument to unlawfully penetrate, however slightly, the genital or anal opening of the body of another person, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity.

d. Fondling is the touching of the private body parts of another person for the purpose of sexual gratification, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental incapacity.

e. Incest is nonforcible sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by Illinois law.

f. Statutory Rape is sexual intercourse with a person who is under the statutory age of consent. In Illinois, the age of consent is 17 years old. However, if the offender is in a position of trust, authority, or supervision over the victim, the age of consent is 18.

1.D. **Dating violence** means violence committed by a person: (1) who is or has been in a social relationship of a romantic or intimate nature with the victim, and (2) where the existence of such a relationship shall be determined based on a consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship.

¹ The University’s definition of “Sexual Assault” that is contained in this Policy is mandated by federal regulations implementing Title IX of the Education Amendments of 1972. Those regulations require the University to adopt a definition of “Sexual Assault” that incorporates various forcible and non-forcible sex crimes as defined by the FBI’s Uniform Crime Reporting System. See 34 C.F.R. § 106.30(a).
1.E. **Domestic violence** includes any felony or misdemeanor crimes of violence committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Illinois, or by any other person against an adult or youth victim who is protected from that person’s acts under the domestic or family violence laws of Illinois.

1.F. **Stalking** means engaging in a course of conduct (two or more acts) directed at a specific person that would cause a reasonable person to: (1) fear for his/her safety or the safety of others, or (2) suffer substantial emotional distress.

2. **Retaliation** means intimidating, threatening, coercing, or discriminating against any individual for the purpose of interfering with any right or privilege secured by the State or federal Constitution, State or federal statute, this Policy, the Title IX Sexual Harassment Resolution Procedures, or because the individual has made a report or complaint, testified, assisted, or participated or refused to participate in any manner in an investigation, proceeding, or hearing under this Policy.

**Understanding Title IX Hostile Environment Sexual Harassment**

In determining whether a hostile environment exists, the University will consider the totality of circumstances, including, but not limited to, factors such as the actual impact the conduct has had on the Title IX Complainant; the nature and severity of the conduct at issue; the frequency and duration of the conduct; the relationship between the parties (including accounting for whether one individual has power or authority over the other); the respective ages of the parties; the context in which the conduct occurred; and the number of persons affected.

The University will evaluate the totality of circumstances from the perspective of a reasonable person in the Title IX Complainant’s position. A person’s adverse subjective reaction to conduct is not sufficient, in and of itself, to establish the existence of a hostile environment.

The University encourages members of the University community to report any and all instances of sexual harassment, even if they are unsure whether the conduct rises to the level of a Policy violation.

Some specific examples of conduct that may constitute Title IX Sexual Harassment if unwelcome include, but are not limited to:

- Unreasonable pressure for a dating, romantic, or intimate relationship or sexual contact
- Unwelcome kissing, hugging, or massaging
- Sexual innuendos, jokes, or humor
- Displaying sexual graffiti, pictures, videos, or posters
- Using sexually explicit profanity
- Asking about, or telling about, sexual fantasies, sexual preferences, or sexual activities
- E-mail, internet, or other electronic use that violates this Policy
- Leering or staring at someone in a sexual way, such as staring at a person’s breasts or groin
- Sending sexually explicit emails, text messages, or social media posts
- Commenting on a person’s dress in a sexual manner
• Giving unwelcome personal gifts such as lingerie that suggest the desire for a romantic relationship
• Insulting, demeaning, or degrading another person based on gender or gender stereotypes

VI. Definitions

The following definitions as used within this Policy and related Resolution Procedures. To aid searches, definitions are provided in alphabetical order.

“Accused” means a person accused of conduct prohibited by this Policy and does not imply pre-judgment. The term “accused” is used interchangeably with the term “Title IX Respondent” in this Policy.

“Actual Knowledge” means notice of Title IX Sexual Harassment or allegations of Title IX Sexual Harassment to the University’s Title IX Coordinator or to any Official with Authority. Assumption of knowledge based solely on the University’s status as an employer, a report made to an Individual with Reporting Obligations, or other presumption under law does not, without more, constitute Actual Knowledge under this Policy. This standard is not met when the only official of the University with Actual Knowledge is the Title IX Respondent (alleged perpetrator). “Notice” as used here includes, but is not limited to, a report or complaint of Title IX Sexual Harassment to the Title IX Coordinator or any Official With Authority in person, by mail, by telephone, through the electronic reporting form, or by email using the contact information listed for the Title IX Coordinator, or by any other means that results in the Title IX Coordinator or the Official with Authority receiving the person’s verbal or written report.

“Consent” means voluntary, active and clear agreement, communicated by words or actions, to participate in specific sexual activity. Consensual sexual activity happens when each participant willingly chooses to participate.

In cases where a victim asserts that sexual activity occurred without consent, the standard is whether a sober, reasonable person in the same circumstances as the Title IX Respondent should have known that the victim did not or could not consent to the sexual activity in question.

In Illinois, the legal age of consent is 17 but rises to 18 if the Title IX Respondent holds a position of trust, authority, or supervision in relation to the victim. This means that there can be no consent when one participant in the sexual activity is under the legal age of consent and any other participant is at or over the legal age of consent.

Consent is such a critical factor that Section VII is entirely dedicated to discussing it.

“Decisionmaker” is an individual designated by the Title IX Coordinator or designee to reach a determination regarding responsibility in a Formal Title IX Complaint by applying the preponderance of the evidence standard of proof. The Decisionmaker cannot be the Title IX Coordinator or the Title IX Investigator assigned to the same Formal Title IX Complaint and must be free from conflicts of interest or bias against Title IX Complainants and Title IX Respondents generally, and conflicts of interest and bias against an individual Title IX Complainant or Title IX Respondent.
“**Decisionmaker on Relevance**” is an individual who has responsibilities as described in “Decisionmaker” above, and is also designated to respond to matters of relevance during a hearing by the Title IX Hearing Panel. The Decisionmaker on Relevance may be someone who is external to the University community.

“**Formal Title IX Complaint**” is a document filed by a Title IX Complainant or signed by the Title IX Coordinator alleging Title IX Sexual Harassment against a Title IX Respondent and requesting that the University investigate the allegation(s). A Formal Title IX Complaint may be filed with the Title IX Coordinator in person, by mail, or by email, by using the contact information listed for the Title IX Coordinator in this Policy. A Formal Title IX Complaint requires a physical or digital signature by the Title IX Complainant, or an indication that the Title IX Complainant is the person filing the Formal Title IX Complaint. No person may submit a Formal Title IX Complaint on the Title IX Complainant’s behalf. Where the Title IX Coordinator signs a Formal Title IX Complaint, the Title IX Coordinator is not the Title IX Complainant or otherwise a party under the Title IX Sexual Harassment Resolution Process.

“**Informal Resolution Facilitator**” is an individual who is designated to facilitate a voluntary, informal agreement between a Title IX Complainant and a Title IX Respondent according to the procedures in the Informal Resolution Process.

“**Title IX Investigator**” is an individual designated to investigate a Formal Title IX Complaint according to the Title IX Sexual Harassment Resolution Process.

“**Officials With Authority**” means any official designated by the University to have authority to institute corrective measures on behalf of the institution.

“**Review Decisionmaker**” is one or more individuals designated to conduct a request for review under the Title IX Sexual Harassment Resolution Process. The Review Decisionmaker cannot be the Title IX Coordinator or the Title IX Investigator or Decisionmaker assigned to the same Formal Title IX Complaint, must be free from conflicts of interest or bias against Title IX Complainants and Title IX Respondents generally and against an individual Title IX Complainant or Title IX Respondent.

“**Supportive Measures**” are non-disciplinary, non-punitive individualized services offered as appropriate, as reasonably available, and without fee or charge to a Title IX Complainant or Title IX Respondent before or after the filing of a Formal Title IX Complaint or where no Formal Title IX Complaint has been filed. Such measures are designed to restore or preserve equal access to the University’s education program or activity without unreasonably burdening the other party, including measures designed to protect the safety of all parties or the University’s educational environment and deter sexual harassment, including Title IX Sexual Harassment. Title IX Supportive Measures may include but are not limited to counseling, extensions of deadlines or other course-related adjustments, modifications of work or class schedules, campus escort services, mutual restrictions on contact between parties, changes in work or housing locations, adjustments to dining arrangements, leaves of absence, increased security or monitoring of certain areas of the campus, and honoring an order of protection or no-contact order entered by a State civil or criminal court. The University will maintain as confidential any supportive measures provided to the Title IX Complainant or Title IX Respondent, to the extent that maintaining such confidentiality would not impair the ability of the University to provide the Supportive Measures.
“Title IX Complainant” is an individual who is alleged to be the victim of conduct that could constitute Title IX Sexual Harassment and does not imply pre-judgement.

“Title IX Personnel” includes but is not limited to the Title IX Coordinator, Deputy Title IX Coordinator(s), Title IX Investigator(s), Decisionmaker(s), Review Decisionmaker(s), Decisionmaker on Relevance, or Informal Resolution Facilitator(s).

“Title IX Respondent” is an individual who has been reported to be the perpetrator of conduct that could constitute Title IX Sexual Harassment and does not imply pre-judgement.

“Victim” means a person alleging to have been subjected to conduct prohibited by this Policy and does not imply pre-judgment. The term “victim” is used interchangeably with the term “Title IX Complainant” in this Policy.

VII.    Consent

“Consent” means voluntary, active and clear agreement, communicated by words or actions, to participate in specific sexual activity. Consensual sexual activity happens when each participant willingly chooses to participate.

It is the responsibility of the person who wants to engage in a sexual activity to obtain the consent of the other person for that sexual activity. Consent may also be withdrawn or modified at any time by the use of clearly understandable words or actions.

- In cases where a victim asserts that sexual activity occurred without consent, the standard is whether a sober, reasonable person in the same circumstances as the accused should have known that the victim did not or could not consent to the sexual activity in question.

- The definition of consent does not vary based upon a person’s sex, sexual orientation, gender identity, or gender expression.

- Consent is best obtained through direct communication about the decision to engage in specific sexual activity. Consent need not be verbal, but verbal communication is the most reliable and effective way to seek, assess, and obtain consent. Non-verbal communication often is ambiguous. For example, heavy breathing can be a sign of arousal, but it also can be a sign of distress. Talking with sexual partners about desires, intentions, boundaries and limits can be uncomfortable, but it serves as the best foundation for respectful, healthy, positive and safe intimate relationships.

What is not Consent?

- Consent cannot be obtained by threat of harm, coercion, intimidation, or by use or threat of force.

- The lack of explicit consent does not imply consent and likewise, the lack of verbal or physical resistance does not constitute consent. Thus, silence, passivity, submission, and/or the lack of resistance (including the absence of the word “no”) do not—in and of themselves—constitute consent.
Incapacitation

Consent cannot be obtained from someone who is unable to understand the nature of the activity or give knowing consent due to circumstances. A person is mentally or physically incapacitated when that person lacks the ability to make or act on considered decisions to engage in sexual activity, i.e., when a person’s perception and/or judgment is so impaired that the person lacks the cognitive capacity to make or act on conscious decisions, including without limitation the following circumstances:

- The person is incapacitated due to the use or influence of alcohol or drugs, or due to a mental disability. Alcohol and drugs can impair judgment and decision-making capacity, including the ability to rationally consider the consequences of one’s actions. The effects of alcohol and drug consumption often occur along a continuum. For example, alcohol intoxication can result in a broad range of effects, from relaxation and lowered inhibition to euphoria and memory impairment, and to disorientation and incapacitation. Incapacitation due to alcohol or drug use is a state beyond “mere” intoxication or even being drunk. Indicators of incapacitation may include inability to communicate, lack of control over physical movements, and/or lack of awareness of circumstances. An incapacitated person can also experience a blackout state during which they appear to give consent but does not have conscious awareness or the capacity to consent. Some medical conditions also can cause incapacitation.

- The person is asleep or unconscious.

- The person is under the legal age of consent. In Illinois, the legal age of consent is 17 but rises to 18 if the accused holds a position of trust, authority, or supervision in relation to the victim. This means that there can be no consent when one participant in the sexual activity is under the legal age of consent and any other participant is at or over the legal age of consent.

In sum, an act will be deemed non-consensual if a person engages in sexual activity with an individual who is incapacitated, and who the person knows or reasonably should know is incapacitated, or with an individual who is asleep, unconscious, or under the legal age of consent.

Other Important Points regarding Consent

- The existence of a romantic or sexual relationship does not, in and of itself, constitute consent.
- Consent on a prior occasion does not constitute consent on a subsequent occasion.
- Consent to one sexual act does not constitute consent to another sexual act.
- Consent to sexual activity with one person does not constitute consent to engage in sexual activity with another.
- Consent cannot be inferred from a person’s manner of dress or other contextual factors, such as alcohol consumption, dancing, or agreement to go to a private location like a bedroom.
- Accepting a meal, a gift, or an invitation for a date does not imply or constitute consent.
- Silence, passivity, or lack of resistance alone or in combination does not constitute consent.
Incapacitation by the person initiating sexual activity does not in any way lessen their obligation to obtain consent.

VIII. Confidentiality

The University must protect privacy and confidentiality to fulfill its commitment to address complaints of Title IX Sexual Harassment fairly and expeditiously. The University will keep confidential, from persons outside of the investigation process, the identity of any individual who has made a report or complaint under this Policy, including any person who has filed a Formal Complaint of Title IX Sexual Harassment or Retaliation; any Title IX Respondent(s) involved in a Formal Title IX Complaint; and any Witnesses. Please note that the University must disclose to the Title IX Respondent(s) the identity of the person(s) who has filed a Formal Title IX Complaint, and the University may be required to disclose the identity of a person who has filed a Formal Title IX Complaint to other individuals as permitted by FERPA, required by law, and/or as necessary to conduct the investigation process.

While the University will keep matters confidential to the extent possible, the University may have to disclose information related to the matter, such as in the following situations:

1. to those to whom it is necessary to give fair notice of the allegations and to conduct the investigation;
2. to law enforcement consistent with state and federal law;
3. to other University officials as necessary for coordinating Supportive Measures or for health, welfare, and safety reasons;
4. to government agencies that review the University’s compliance with federal law; and
5. to third parties as permitted or compelled by law (e.g., in response to a lawful subpoena or in compliance with federal privacy law).

The University will not restrict the ability of either party to discuss the allegations of a Formal Title IX Complaint under investigation. A party may discuss the allegations under investigation and/or gather and present evidence. Retaliation of any kind, however, is prohibited under the Policy. Retaliation includes, but is not limited to, intimidating, threatening, coercing, or discriminating against any individual for the purpose of interfering with any right or privilege provided by this Policy. A complaint of retaliation may result in a separate complaint and disciplinary action under this Policy.

IX. Conflicts of Interest

All Title IX Personnel who have responsibilities under this Policy must be free of any conflict of interest or bias for or against the Title IX Complainant or Title IX Respondent, or for Title IX Complainants or Title IX Respondents generally.

The Title IX Complainant and Title IX Respondent will be notified of the identities of those involved in the investigation and resolution procedures, before those individuals initiate contact with either party, and may report a potential conflict of interest or bias relating to any Title IX Personnel to the Title IX Coordinator, along with a written statement detailing the nature of the conflict or bias.
The Title IX Coordinator will review the particular facts of the situation and use an objective, common sense approach to evaluate whether a particular person serving in a role under this Policy is conflicted or biased (i.e., whether a reasonable person would believe a material conflict or bias exists). An example of a conflict of interest could be the identification of a personal or social relationship between a person serving in a Title IX Personnel role under this Policy and one of the parties, which may have a real or perceived effect on the judgement of the Title IX Personnel.

The Title IX Coordinator will exercise caution not to apply generalizations that might unreasonably conclude that bias exists, for example, assuming that all self-professed feminists or self-described survivors are biased against men, or that a man is incapable of being sensitive to women. Past experience, including prior work as a victim advocate or as a defense attorney, does not in and of itself constitute a conflict of interest. The training required under this Policy is intended to provide Title IX Personnel with the tools needed to serve impartially and without bias.

Based on the review described above, the Title IX Coordinator may remove Title IX Personnel from their roles, and another trained University official or external subject matter expert will be assigned to investigate and/or resolve the case. Both parties will be notified in writing in the event of a removal or change in Title IX Personnel.

X. Leniency for Other Policy Violations

To encourage reports of Title IX Sexual Harassment, the University normally will offer leniency to a student who reports an alleged violation of this Policy in good faith with respect to other student conduct violations that come to light as a result of such reports. For example, the University ordinarily will not pursue disciplinary charges related to underage drinking by the reporting person if that policy violation comes to light as the result of a sexual assault complaint. The University will not discipline a reporting student for such conduct violations unless the University determines that the violation was egregious, including without limitation an action that places the health or safety of any other person at risk.

XI. Response to a Report of Title IX Sexual Harassment

If the Title IX Coordinator has Actual Knowledge of a report of Title IX Sexual Harassment, and, following a preliminary assessment of the initial report, determines the conduct reported could fall within the scope of this Policy, the Title IX Coordinator or their designee will promptly contact the Title IX Complainant to discuss the availability of Supportive Measures and to explain to the Title IX Complainant the process for filing a Formal Title IX Complaint. If applicable, the Title IX Coordinator or their designee will provide information regarding the importance of preserving physical evidence and the availability of a medical forensic examination at no charge to the victim.

The Title IX Coordinator or their designee will explain that a report may be resolved by: 1) the imposition of Supportive Measures only; 2) the filing of a Formal Title IX Complaint by the Title IX Complainant; 3) the filing of a Formal Title IX Complaint by the Title IX Coordinator (as
discussed under the Institutional Obligation to Respond section below); or, 4) Informal Resolution that involves voluntary participation and agreement by both parties.

Upon receipt of a Formal Title IX Complaint, the Title IX Coordinator or their designee will conduct an individualized safety and risk analysis and determine if there is an immediate threat to the physical health or safety of any student or other individual arising from the allegations of Title IX Sexual Harassment.

The Title IX Coordinator or their designee will provide the Title IX Complainant and Title IX Respondent with a written document (separate from this Policy) listing the available rights, options, and resources, including Supportive Measures, and describing the University’s Title IX Formal Resolution Process for Title IX Sexual Harassment in plain, concise language.

XII. Institutional Obligation to Respond

If the University has Actual Knowledge of Title IX Sexual Harassment but the Title IX Complainant asks to remain anonymous during the investigation and/or asks that the University refrain from investigating, the Title IX Coordinator for the University will consider how to proceed. The Title IX Coordinator will take into account the Title IX Complainant’s wishes, and factors including, but not limited, to the following: (a) was a weapon involved in the incident, (b) were multiple assailants involved in the incident, (c) is the accused a repeat offender, (d) does the incident create a risk of occurring again, (e) the results of the individualized safety and risk analysis, (f) the University’s obligation to provide a safe and non-discriminatory environment, and (g) the Title IX Respondent’s right to have specific notice of the allegations and an opportunity to be heard if the University were to take action that affects them. In such circumstances, the Title IX Coordinator may arrange for limited fact-finding to better understand the context of the complaint and explore viable options for addressing safety concerns, and any options for investigation, adjudication, and remediation.

Because Title IX Sexual Harassment may constitute a serious crime that threatens the community as a whole, in some instances the University may be obliged to address allegations through internal resolution procedures without the cooperation of the individual making the allegation. In such instances, the Title IX Coordinator may file a Formal Title IX Complaint and initiate investigation and resolution procedures. In such instances, the University will respect the parties’ privacy to the extent possible consistent with its legal obligations and will inform the victim of its obligation to address a community safety issue. All publicly available recordkeeping, including Clery Act reporting and public disclosures, will not contain personally identifying information about the victim.

XIII. Emergency Removals or Leaves of Absence

The University may remove a Title IX Respondent from an education program or activity on an emergency basis while an investigation is pending. The University will only remove a Title IX Respondent on an emergency basis if, after making an individualized safety and risk analysis, it determines that an immediate threat to the physical health or safety of any student or other individual arising from the allegations of Title IX Sexual Harassment justifies removal. The University also may place a non-student employee that is a Title IX Respondent on paid administrative leave during the pendency of a Title IX Sexual Harassment Resolution Process. The University will provide the Title IX Respondent with notice and an opportunity to request a
review of the decision immediately following the removal. Requests for review may be submitted in writing to Ingrid Gould, Associate Provost for Faculty Affairs, igould@uchicago.edu.

Such emergency removals/leaves of absence must comply with any other relevant laws, policies, administrative procedures, and agreements governing removals of students and/or employees from the University’s education program or activity.

XIV. Filing a Formal Complaint

A Title IX Complainant may file a Formal Title IX Complaint with the Title IX Coordinator requesting that the University investigate and adjudicate a report of Title IX Sexual Harassment in accordance with the Formal Resolution Process for Title IX Sexual Harassment (“Formal Resolution Process”). Provided, however, that at the time the Title IX Complainant submits a Formal Title IX Complaint, the Title IX Complainant must be participating in, or attempting to participate in, one or more of the University’s education programs or activities.

As described in Section XII, the Title IX Coordinator may file a Formal Title IX Complaint on behalf of the University if doing so is not clearly unreasonable. Such action will normally be taken in limited circumstances involving serious or repeated conduct or where the alleged perpetrator may pose a continuing threat to the University community.

Upon receipt of a written and signed Formal Title IX Complaint, the Title IX Coordinator will conduct an initial assessment to determine whether the alleged conduct in the Formal Title IX Complaint, if substantiated, would constitute Title IX Sexual Harassment or Retaliation under this Policy. Following the initial assessment, if the allegations forming the basis of the Formal Title IX Complaint would, if substantiated, constitute Title IX Sexual Harassment the Title IX Coordinator or their designee shall assign a Title IX Investigator, who will initiate an investigation of the allegations under this Policy. However, upon request and with the consent of both parties, the Title IX Coordinator may instead refer the matter to the Informal Resolution process, as described in Section XVIII.

Dismissal of Formal Title IX Complaint

If the allegations forming the basis of the Formal Title IX Complaint would not, if substantiated, constitute Title IX Sexual Harassment or Retaliation as defined in this Policy, the Title IX Coordinator shall dismiss the Formal Title IX Complaint from the Formal Resolution Process (Mandatory Dismissal). If appropriate, the Title IX Coordinator may refer the matter for review under the Policy on Harassment, Discrimination, and Sexual Misconduct and related procedures, or to another office or applicable policy for review.

In addition, at any time prior to the hearing, the Title IX Coordinator may dismiss a Formal Title IX Complaint if (i) the Title IX Complainant notifies the Title IX Coordinator in writing that the Title IX Complainant wishes to withdraw the Formal Title IX Complaint or any allegations therein (in which case those discrete allegations may be dismissed), (ii) the Title IX Respondent is no longer enrolled or employed by the University, or (iii) specific circumstances prevent the University from gathering sufficient evidence to reach a determination as to the Formal Title IX Complaint or any discrete allegations therein (in which case those discrete allegations may be dismissed) (collectively, Voluntary Dismissal).
Upon Mandatory Dismissal or Voluntary Dismissal, the Title IX Coordinator shall promptly send written notice of the dismissal and reason(s) therefor simultaneously to the parties via electronic format. Both parties will have equal right to request review of the dismissal through the request for review process described in the Formal Resolution Process.

The determination regarding dismissal becomes final either on the date that the parties are provided with the written determination of the result of a request for review, if filed, or if a request for review is not filed, the date on which an request for review would no longer be considered timely. Once a dismissal is final, a Title IX Complainant cannot file a Formal Title IX Complaint under this Policy concerning the same alleged conduct.

XV. Notice of Formal Title IX Complaint

Within five (5) days of the Title IX Coordinator receiving a Formal Title IX Complaint, the Title IX Coordinator will transmit a written notice to the Title IX Complainant and Title IX Respondent that includes:

- A physical or electronic copy of this Policy,
- A list of allegations,
- The identities of known involved parties,
- The conduct being reported,
- The date and location of the reported conduct,
- A timeframe for scheduling an initial meeting,
- A statement that the Title IX Respondent is presumed not responsible for the reported conduct in accordance with Title IX and this Policy,
- A statement that a determination regarding responsibility is made at the conclusion of the resolution process,
- Information about having an advisor of choice who may be, but is not required to be, an attorney,
- A statement that the University prohibits knowingly making false statements or knowingly submitting false information during the resolution process,
- A statement about the University’s policy on retaliation,
- A statement that the parties may inspect and review evidence obtained during the investigation prior to any hearing,
- The name of the Title IX Investigator(s) and information on how to raise a conflict of interest regarding the investigator, decision-makers, or other personnel involved in the Title IX Resolution Process,
- Information about confidentiality, as described in this Policy, and
- Information regarding the ability to voluntarily request that the matter be resolved through the Informal Resolution Process.

Should the University, at any point, start to investigate allegations that are materially beyond the scope of the initial investigation and allegation letter. The University will provide a supplemental written notice describing the additional allegations to be investigated.

XVI. Formal Resolution Process for Title IX Sexual Harassment

Timeframe
The University is committed to providing a prompt, fair, impartial, and thorough investigation and resolution that is consistent with the University’s policies and is transparent to the Title IX Complainant and the Title IX Respondent. In most cases, the University’s Formal Resolution Process will be complete within 60-90 days of receiving a Formal Title IX Complaint. The University, in its discretion, may extend its investigation for good cause. If the timeframe for the investigation is extended, the University will provide written notice to the Title IX Complainant and the Title IX Respondent of the delay and the reason for the extension.

Investigative Process and Resolution Procedures

The investigative process will generally include: (1) interviewing the Title IX Complainant (and the alleged victim, if that person is not the Title IX Complainant), (2) interviewing the Title IX Respondent, (3) interviewing witnesses, (4) collecting evidence, (5) if applicable, contacting and cooperating with law enforcement; (5) preparing an investigative report that fairly summarizes relevant evidence. Such an investigation may occur alongside an independent law enforcement investigation.

Formal Title IX Complaints will be heard by a Title IX Hearing Panel. The Formal Resolution Process for Title IX Sexual Harassment, and any related request for review, is described in full and can be accessed in the following locations:

- If the person accused of a violation of this Policy is a faculty member or other academic appointee, the Formal Title IX Complaint shall be resolved using the procedures in the Faculty Handbook.
- If the person accused of a violation of this Policy is a postdoctoral researcher, the Formal Title IX Complaint shall be resolved using the procedures in the Postdoctoral Researcher Policy Manual.
- If the person accused of a violation of this Policy is a student, the Formal Title IX Complaint shall be resolved using the procedures for student discipline described in the Student Manual.
- If the person accused of a violation is a staff member, the Formal Title IX Complaint shall be resolved using the procedures in the Employee Handbook.

Advisor of Choice

The Title IX Complainant and the Title IX Respondent have the opportunity to have others present during any resolution proceeding, including the opportunity to be accompanied to any related meeting or proceeding by the advisor of their choice, who may be, but is not required to be, an attorney. The University will not limit the choice or presence of an advisor in any meeting or resolution proceeding, however the University may establish expectations of advisors related to their participation in proceedings, which will apply equally to both parties.

Sexual History and Privileged Information

The Title IX Complainant’s and/or Title IX Respondent’s sexual history with others will generally not be sought or used in determining whether sexual assault has occurred. However, in certain circumstances the sexual history between the parties may have limited relevance to explain context. Specifically, questions and evidence about the Title IX Complainant’s sexual predisposition or prior sexual behavior may be relevant if the evidence is offered to prove that someone other than the Title IX Respondent committed the reported conduct, or it addresses the Title IX Complainant’s prior sexual behavior with respect to the Title IX Respondent and is
offered to prove Consent. Additionally, under limited circumstances necessary to understand the context, sexual history between the parties may be relevant to explain an injury, to provide proof of a pattern, or to address an allegation within a Formal Resolution Process.

The Title IX Complainant’s and/or Title IX Respondent’s medical and counseling records, such as by a physician, psychiatrist, psychologist, or other recognized professional or paraprofessional acting in the professional's or paraprofessional's capacity, or information protected under a legally recognized privilege, will generally not be sought or used unless the Title IX Investigator obtains that party’s voluntary, written consent that the privilege has been waived.

Access to Information

The Title IX Complainant, the Title IX Respondent, and appropriate University officials will receive timely and equal access to information that will be used during a Formal Resolution Process. As described in the procedures, which the Title IX Complainant and Title IX Respondent are simultaneously informed, in writing, of the result of the Formal Resolution Process, the procedures for seeking review of the result and when the result becomes final.

This notification will include (i) identification of the allegations potentially constituting Title IX Sexual Harassment under this Policy; (ii) a description of the procedural steps taken from the receipt of the Formal Title IX Complaint through the determination, including any notifications to the parties, interviews with parties and witnesses, site visits, methods used to gather other evidence, and hearings held; (iii) findings of fact supporting the determination; (iv) conclusions regarding the application of the Title IX Sexual Harassment Resolution Process to the facts; (v) a statement of, and rationale for, the result as to each allegation, including a determination regarding responsibility, any disciplinary sanctions the University will impose on the Title IX Respondent; (vi) whether remedies designed to restore or preserve equal access to the University’s education program or activity will be provided by the University to the Title IX Complainant; (vii) and the University’s procedures and permissible bases for the Title IX Complainant and Title IX Respondent to file a request for review.

The University shall create an audio or audiovisual recording, or transcript, of any hearing and make it available to the parties for inspection and review.

XVII. Standard of Evidence and Presumption of Non-Responsibility

The standard used in such proceedings is a preponderance of the evidence, i.e., whether it is more likely than not that this Policy has been violated. The Title IX Respondent is presumed to be not responsible for the alleged conduct unless and until a determination regarding responsibility is made at the conclusion of the Title IX Sexual Harassment Resolution Process.

XVIII. Informal Resolution

The Informal Resolution process is voluntary and is separate and distinct from the University’s Formal Resolution Process under this Policy or any resolution procedures under the University Policy on Harassment, Discrimination, and Sexual Misconduct. The University may offer the Informal Resolution process only if (i) a Formal Title IX Complaint has been filed by the Title IX Complainant, (ii) the Title IX Coordinator has determined that the alleged conduct, if
substantiated, would constitute Title IX Sexual Harassment, and (iii) the Title IX Coordinator has determined that the Informal Resolution process is appropriate for this matter.

In making a determination as to whether the Informal Resolution is appropriate, the Title IX Coordinator will consider factors, including, but not limited to, the following: (i) the outcome of an individualized safety and risk analysis of the Title IX Respondent relating to sexual misconduct, physical violence, failure to comply with a No Contact Directive (NCD) or a Civil No Contact Order (CNCO), and/or other relevant conduct, (ii) the nature of the alleged conduct, whether allegations involve multiple victims and/or a pattern of conduct, or other evidence-informed factors indicative of increased risk to campus safety, and (iii) whether the circumstances warrant the Title IX Coordinator filing a Formal Title IX Complaint as described in Section XII.

A Title IX Complainant or Title IX Respondent may request an Informal Resolution process by informing the Title IX Coordinator for the University (or designee) in writing using the contact information provided in this Policy. The Informal Resolution procedures are described in full in the Student Manual.

Elements of the Informal Resolution Process

Initiation of Informal Resolution

- Participation in an Informal Resolution Process is voluntary and the University will not require, encourage, or discourage the parties from participating in the Informal Resolution process.

- The Title IX Complainant and Title IX Respondent must consent in writing to participation in the Informal Resolution process, and either party may request that the University facilitate Informal Resolution after the parties are provided written notice of the Formal Title IX Complaint. This request can be made at any time up until 5 days before a scheduled hearing by the Title IX Hearing Panel.

- Following review and approval by the Title IX Coordinator, a trained Informal Resolution Facilitator will be assigned to work with the parties to attempt to facilitate an Informal Resolution agreement.

Informal Resolution Timeline and Process

- In most cases, the Informal Resolution process will be completed within 30 days of receiving the written request. The University, at its discretion, may extend this timeframe for good cause. Agreements reached in the informal resolution process are not subject to a request for review.

Informal Resolution Outcomes

- No Agreement Reached: The Informal Resolution process may be discontinued at any time by either the Title IX Coordinator (or designee), the Title IX Complainant, or the Title IX Respondent. If the Informal Resolution process is discontinued for any reason or if the parties fail to reach a mutually agreeable outcome for the alleged conduct, the Title IX Complainant may request to re-engage an investigation and Formal Resolution Process.
If an Informal Resolution is terminated, the Informal Resolution process will no longer be made available as a remedy to resolve the Formal Title IX Complaint. If an informal resolution process ends without an agreement, any information obtained may be used in any pending or subsequent Formal Resolution Process.

- **Agreement Reached:** Once both parties and the Title IX Coordinator sign an Informal Resolution agreement, the agreement is final, the parties are bound by its terms, and the allegations addressed by the agreement are considered resolved and will not be subject to further investigation, adjudication, remediation, or discipline by the University, except as otherwise provided in the agreement itself, absent a showing that a party induced the agreement by fraud, misrepresentation, or other misconduct or where required to avoid a manifest injustice to either party or to the University. The University may also investigate and discipline a party alleged to have breached an informal resolution agreement. Except as noted above, there will be no disciplinary action taken against a Title IX Respondent under the Informal Resolution process, and the resolution will not appear on the Title IX Respondent’s transcript or disciplinary record at the University.

**Breaches of Agreement; Subsequent Use**

- Alleged violations of an Informal Resolution agreement, or allegations that the agreement was induced by fraud, misrepresentation, or any other misconduct, should be reported to the Title IX Coordinator, and may be subject to review and resolution by a Title IX Hearing Panel or under the administrative resolution procedures of the Policy on Harassment, Discrimination, and Sexual Misconduct, which may lead to disciplinary action.

- A Title IX Respondent’s participation in a prior Informal Resolution process will generally not be considered relevant or taken into account in the resolution of a subsequent, unrelated Formal Title IX Complaint filed by a different Title IX Complainant under this Policy or the University Policy on Harassment, Discrimination, and Sexual Misconduct.

- Other language in this section notwithstanding, The Informal Resolution process is limited to matters involving students and will not be permitted if the Title IX Respondent is a non-student employee accused of committing Title IX Sexual Harassment against a student.

**XIX. Right to Pursue Other Remedies**

Someone with a complaint of Title IX Sexual Harassment may also opt to pursue their complaint via the legal system without engaging the University’s disciplinary process, although, in the interest of community safety, the University may be obliged to address alleged incidents of Title IX Sexual Harassment through internal disciplinary procedures.

Use of this Policy and the resolution procedures are not a prerequisite to the pursuit of other remedies. If a person is pursuing another remedy to address the same allegations related to a Formal Title IX Complaint under this Policy, the University will conduct its own investigation, although in some cases delays due to another process may be warranted or required.

**XX. Time Limits**
There is no time limit for filing a Formal Title IX Complaint of Title IX Sexual Harassment. However, Title IX Complainants should report as soon as possible to maximize the University’s ability to respond promptly and effectively. Delayed reporting often results in the loss of relevant evidence, and/or in faded and unreliable memories; it also impairs the University’s ability to summon witnesses, assess evidence, and, if appropriate, adjudicate claims and impose sanctions and other remedies. Furthermore, if the Title IX Respondent is no longer affiliated with the University at the time of the Formal Title IX Complaint, it is likely that the University will be unable to summon the Title IX Respondent or take disciplinary action against them, although the University will take reasonable steps to understand the facts, assess whether the Title IX Respondent poses a present or ongoing risk of safety to the University community, and take any measures necessary to mitigate safety risk.

XXI.  Bad Faith Complaints and False Information

It is a violation of this Policy for any person to submit a report or Formal Title IX Complaint that the person knows, at the time the report or Formal Title IX Complaint is submitted, to be false or frivolous. It is also a violation of this Policy for any person to knowingly make a materially false statement during the course of an investigation, hearing, or request for review under this Policy. Violations of this Section are not subject to the Title IX investigation and hearing processes; instead, they will be addressed under the Student Manual in the case of students and other University policies and standards, as applicable, for faculty, other academic appointees, postdoctoral researchers, or staff, or other participants in University education programs and activities.

XXII.  Required Training for Title IX Personnel

All Title IX Personnel will participate in 8-10 hours of training annually. Depending on the individual’s role, the training may include some or all of the following subject matters: the definition of Title IX Sexual Harassment, the scope of the University’s Education Program or Activity, how to conduct the Title IX Sexual Harassment Resolution Procedure, how to conduct a Request for Review, how to conduct an Informal Resolution process, and as applicable, how to serve impartially, including by avoiding prejudgment of the facts at issue, conflicts of interest, and bias.

Any person serving as a Decisionmaker or Review Decisionmaker under the Title IX Sexual Harassment Resolution Procedures will receive training on the issues of relevance of questions and evidence, including about when questions and evidence about the Title IX Complainant’s sexual predisposition or prior sexual behavior are not relevant.

Any person serving as a Title IX Investigator under the Title IX Sexual Harassment Resolution Procedure will receive training on issues of relevance to create an investigative report that fairly summarizes relevant evidence.

Any materials used to train Title IX Coordinators, their designees, Title IX Investigators, Decisionmakers, Review Decisionmakers, and Informal Resolution Facilitators must not rely on sex stereotypes and must promote impartial investigations and adjudications of Formal Title IX Complaints. The University will make all materials used to train Title IX Team members publicly available on the Equal Opportunity Programs website.

XXIII.  Required Title IX Recordkeeping
The Title IX Coordinator or designee will maintain, for a period of at least 10 years, records of:

- Any actions, including any Supportive Measures, taken in response to a report or Formal Title IX Complaint of Title IX Sexual Harassment. In each instance, the Title IX Coordinator or designee must document the basis for the conclusion that the University’s response was not deliberately indifferent, and document that it has taken measures designed to restore or preserve equal access to the University’s Education Program or Activity. If no Supportive Measures are provided to the Title IX Complainant, then the Title IX Coordinator or designee must document the reasons why such a response was not clearly unreasonable in light of the known circumstances. The documentation of certain bases or measures does not limit the University in the future from providing additional explanations or detailing additional measures taken,

- Each Title IX Sexual Harassment investigation, including any determination regarding responsibility and any disciplinary sanctions imposed on the Title IX Respondent, and any remedies provided to the Title IX Complainant designed to restore or preserve equal access to the University’s Education Program or Activity,

- Any request for review and the result therefrom,

- Any records from an Informal Resolution process and the result therefrom,

- Any transcript or recording from a hearing under this Policy, and

- All materials used to train Title IX Personnel.

XXIV. Prevention and Education Programs

The University provides numerous education programs and awareness campaigns to prevent and promote awareness of sexual harassment, including Title IX Sexual Harassment, sexual assault, sexual abuse, domestic violence, dating violence, and stalking. In addition to covering the information addressed in this Policy, these programs will, among other things, provide information regarding options for bystander intervention and information on risk reduction strategies. Descriptions of these prevention and education programs can be found in the University’s annual security report titled Annual Security and Fire Safety Report.

XXV. Additional Information and Inquiries

Inquiries about Title IX Sexual Harassment may be directed to the Title IX Coordinator or the United States Office for Civil Rights (contact information available online at: https://www2.ed.gov/about/offices/list/ocr/addresses.html).

Appendices

I. Support Services and Resources

The needs of someone who has experienced sexual harassment, including Title IX Sexual Harassment, sexual assault, sexual abuse, domestic violence, dating violence, or stalking, vary from person to person and may vary over time. The University offers a diverse array of services and external resources, many of which may be accessed 24 hours a day, so that a person may
choose whatever would be most helpful and healing. Written information regarding these services and resources will be provided to individuals who report being victims of sexual harassment, including Title IX Sexual Harassment, sexual assault, sexual abuse, domestic violence, dating violence, or stalking. Exercising reasoned discretion, the University will provide supportive measures and accommodations including, but not limited to, University no-contact orders, changes to academic, living, dining, transportation, and working situations, and honoring an order or protection or no-contact order entered by a State civil or criminal court, to any victim who asks for them, so long as they are reasonably available, regardless of whether the victim reports the incident to law enforcement. Information regarding accommodations and interim protective measures may be obtained from the Title IX Coordinator for the University. Any accommodations or protective measures will be confidential so long as confidentiality will not impair the University’s ability to provide the accommodations or protective measures.

The University urges anyone who has experienced sexual assault, domestic violence, dating violence, or stalking to seek support as soon as possible to minimize and treat physical harm, assist with processing the unique and complex emotional aftermath, and help preserve and understand options for pressing charges. Individuals have many options with regard to reporting sexual assault, domestic violence, dating violence, and stalking, including reporting to the University of Chicago Police Department, the Chicago Police Department, and to various campus authorities. Additionally, victims have recourse through the civil and criminal court systems, by being able to seek orders of protection, no-contact orders, and other similar court orders. As feasible, the University will honor an order of protection or no-contact order entered by a State civil or criminal court so long as it has been notified of the order and its terms. Victims also have the option to decline to notify such authorities.

Even for someone who does not wish to report the event to the police or pursue disciplinary action, seeking medical attention as soon as possible is important. This may assist with preserving evidence, which may be necessary to the proof of criminal sexual assault, domestic violence, dating violence, or stalking, or to obtain an order of protection.

**Medical Facilities**

**Hyde Park**

*University of Chicago Medicine Adult Emergency Room: Medical and Counseling Services: 773-702-6250, 5656 S. Maryland Ave., Chicago (24-hours)*

The University of Chicago Emergency Room is the nearest medical facility to the Hyde Park campus and follows specific policies and procedures, approved by the State, in treating an individual who has been sexually assaulted. The State will pay for emergency room care for victims who have been sexually assaulted and do not have health insurance; if a victim provides health insurance information to the emergency room, the emergency room will bill the insurance company and the policy holder will be notified as usual.

- The victim is placed in a private room.
- Medical care is given as soon as possible.
- A Sexual Assault Survivor Advocate or a Sexual Assault Dean-on-Call (for a student) may be called based on a victim’s preferences.
- By law, city police are notified, and the victim may choose to file a report.
• The victim may have a medical forensic examination completed at no cost, pursuant to the Sexual Assault Survivors Emergency Treatment Act.

**Gleacher Center**

**Northwestern Memorial Hospital Emergency Department** is the medical facility offering sexual assault evidence collection and treatment nearest to the Gleacher Center. 251 E. Huron St., Chicago (24-hours) Telephone: 312-926-2000

**Other Campuses**

Medical providers near each of the University of Chicago’s other campuses are listed below. However, please note that outside the state of Illinois, hospitals are not subject to the Illinois law requiring the provision of certain services to sexual assault survivors free of cost.

**Beijing**

**Haidian Hospital:** 29th Zhongguancun Dajie, Haidian District, Beijing, Telephone: 62583042/62583093

**Beijing United Family Hospital**
Beijing United Family Hospital is farther from campus than Haidian Hospital, but offers English-speaking staff. #2 Jiangtai Road, Chaoyang District, Beijing, China, 100015 Telephone: 400 891 9191

**Delhi** (All public or private medical hospitals in Delhi are required by law to provide free medical assistance to victims of sexual assault.)

**Primus Super Specialty Hospital**
2, Chandragupt Marg, Chanakyapuri, New Delhi 110 021, India Telephone: (011) 66206620/30/40

**Hong Kong**

**Queen Mary Hospital**
102 Pok Fu Lam Road, Hong Kong Emergency Room (24 hours): +852-2255-3838 Private Clinic (limited hours): +852-2255-3001

**London**

**The Havens**
The Havens are self-contained centers located near London hospitals which are dedicated to providing assistance to victims of sexual assault. Among other things, the Havens offer forensic medical examinations, first aid, advice, emergency contraception, medical aftercare, and specialist support (e.g., counseling, psychology, and advocacy).

The Havens locations are: Camberwell Haven, near to King’s College Hospital (south); Whitechapel Haven, near to Royal London Hospital (east); and Paddington Haven, near to St Mary’s Hospital (west). Before visiting any of the Havens, you must first call 020-3299-6900 (available 24/7) to make an appointment.
Marine Biological Laboratory (Woods Hole, Massachusetts)

Falmouth Hospital
100 Ter Heun Drive, Falmouth, MA 02540
Telephone: 508-548-5300

Paris

Hôpital Saint Joseph
85 Rue Raymond Losserand, 75014 Paris
Telephone: 01 44 12 33 33

Please note that hospitals in France will not conduct a medical forensic examination without a police order. Local law enforcement nearest to the Paris campus is: Commissariat du 13ème arrondissement de Paris, 144 boulevard de l’Hôpital, 75013 Paris.

Singapore

Raffles Hospital
585 North Bridge Road Singapore 188770
Telephone: (65) 6311 1555 (emergency); (65) 6311 1111 (24/hr hotline for appointments)

Law Enforcement

University of Chicago Police Department: 773-702-8181 or 1-2-3 from a campus phone (24- hours)

The University of Chicago Police Department (UCPD) urges anyone who has been sexually assaulted to call immediately in order to strengthen the likelihood of successful prosecution. A UCPD officer can be summoned by calling 773.702.8181, pressing the red button on any of the emergency phones located throughout the community, or coming directly to the UCPD office at 6054 South Drexel Ave. Responsibilities of the UCPD when receiving a report of sexual assault, dating violence, domestic violence, or stalking are described in Section IV of this Policy.

The UCPD recommends the prompt reporting of sexual assault, domestic violence, dating violence, and stalking. Nevertheless, individuals should not be reluctant to file a report at a later date. Reporting an incident does not obligate a person to press charges.

Chicago Police Department: 911 (24-hours) or 9-911 from a campus phone

Anyone preferring not to report a matter to the University of Chicago Police Department may contact the Chicago Police Department.

Religious Organizations

A variety of groups offer pastoral care and a community of faith to address individual needs. For more information, visit http://spirit.uchicago.edu/
Office of International Affairs: 773-702-7752; international-affairs@uchicago.edu

The Office of International Affairs can provide information and assistance regarding visas and immigration. For more information, visit https://internationalaffairs.uchicago.edu/.

Resources Especially for Students

Sexual Assault Dean-on-Call: 773-702-8181, via University Police (24-hours) or 773-834-HELP (4357), a direct paging system.

At any time, students may contact a Sexual Assault Dean-on-Call, who is trained to respond to sexual assault, domestic violence, dating violence, and stalking emergencies. A student may contact this Dean-on-Call even before deciding whether to report the sexual assault, domestic violence, dating violence, or stalking to the police. The Sexual Assault Dean-on-Call is available to answer any general or personal questions related to sexual assault, domestic violence, dating violence, and stalking, and can help with:

- Finding emotional support
- Getting medical care
- Reporting the crime to the police
- Preserving evidence, and pressing charges
- Obtaining information regarding the rights of victims and the University’s responsibilities regarding orders of protection, no-contact orders, and other similar court orders.
- Adjusting living arrangements
- Managing academic obligations
- Getting counseling

Director/Associate Director of the Office for Sexual Misconduct Prevention and Support and Deputy Title IX Coordinators for Students

Renae DeSautel (Director) can be reached at desautel@uchicago.edu or 773-702-0438. Megan Heckel-Greco (Associate Director) can be reached at mheckel@uchicago.edu or 773-702-8251. You may contact Renae or Megan:

- If you are a student in need of any support services related to an incident of sexual assault, sexual abuse, sexual harassment, dating violence, domestic violence, or stalking (referred to here as “sexual misconduct”).
- If you are a student who has questions regarding the University’s Policy on Harassment, Discrimination, and Sexual Misconduct.
- If you are a student who has questions regarding Title IX of the Education Amendments of 1972.
- If you are a student seeking information regarding or the implementation of Supportive Measures and accommodations related to a sexual misconduct matter.

Student Wellness: 773-702-4156, 840 East 59th Street

Physicians and certified nurse practitioners provide for students ongoing follow-up health care and services, including pregnancy testing, counseling, and referral services; and sexually transmitted disease testing, diagnosis, and treatment. There is a 24-hours-a-day advice line available to students for consultation. While acute, immediate post-assault treatment is provided
at the Emergency Room at 5656 S. Maryland Ave, the Student Health Service offers follow-up care, including health care services for students who have chosen not seek care immediately after an assault. For more information, visit https://wellness.uchicago.edu/

**Student Health Service Nurse Triage Line:** 773-834-WELL

**Student Counseling Service:** 773-702-9800, 5555 South Woodlawn Avenue (SCS Staff Member-on-Call 24-hours)

SCS supports students who are working through an experience of sexual assault, domestic violence, dating violence, or stalking, or questions about relationships and sexuality.

Consultation with a staff member is available in person during regular business hours and by telephone for after-hours emergencies. For more information, visit http://counseling.uchicago.edu/.

**Confidential Advisor:** 773-702-9800, 5555 South Woodlawn Avenue (Ask to Speak with a Confidential Advisor)

A Confidential Advisor is available by appointment through the Student Counseling Service. This is a licensed clinician who has received an additional 40 hours of training on Sexual Violence. Communication with a Confidential Advisor is considered privileged communication.

**Area Deans of Students**

At any time, students may contact their area Dean of Students or Campus and Student Life. Deans of Students are available to help and work with students throughout the process, addressing short-term and long-term personal or academic issues that arise, including options for with changing academic, living, transportation, and working situations if requested and available. http://csl.uchicago.edu/get-help/dean-call-program/area-dean-students.

**Resources for Sexual Violence Prevention (RSVP): 773-834-7738**

RSVP organizes interactive peer workshops and educational programs on acquaintance rape prevention, sexual violence, and gender issues. For more information, visit https://equalopportunityprograms.uchicago.edu/title-ix/rsvp-programming-center/.

**Peer Health Educators: 773-702-8935**

Organized by Health Promotion and Wellness, this group of students develops programs and presentations for students on a variety of sensitive subjects, including sexual health. For more information, visit http://wellness.uchicago.edu/.

**Financial Aid**

The University's financial aid offices can provide information regarding and assistance navigating the University’s financial aid programs. Students may find contact information for
their applicable financial aid office here:
http://csl.uchicago.edu/policies/disclosures#financial_aid_information.

Resources Especially for Faculty, Other Academic Appointees, Postdoctoral Researchers, and Staff

**Equal Opportunity Programs**

The Office of the Provost’s Equal Opportunity Programs leads and coordinates University efforts to address reports of discrimination, unlawful harassment, and sexual misconduct; to ensure accessibility; and to provide equal employment opportunities. EOP staff contact information is located in Section IV of this Policy, you may find more information at:
https://equalopportunityprograms.uchicago.edu/

**Human Resources Employee and Labor Relations (for Staff)**

Brett Leibsker serves as the Executive Director for the University Employee and Labor Relations Team. You may contact Mr. Leibsker regarding complaints of misconduct by a staff member. You may contact Mr. Leibsker by emailing elrelations@uchicago.edu, or by calling 773-834-2657, or by writing to Brett Leibsker, University of Chicago Human Resources, 6054 South Drexel Avenue, Chicago, IL 60637.

**Perspectives (Employee Assistance Program) 24-hours: 800-456-6327**

Counseling services are provided to staff, faculty, other academic appointees, and postdoctoral researchers affected directly and indirectly by sexual harassment, including Title IX Sexual Harassment, sexual assault, sexual abuse, domestic violence, dating violence, and stalking. http://www.perspectivesltd.com/.

**Non-University Resources for Everyone**

**Community-based, State, and National Sexual Assault Crisis Centers**

**Chicago Rape Crisis Hotline (24 hours): 888-293-2080**
Immediate and long-term referrals, information, and counseling.

**LGBTQ Crisis Hotline (24 hours): 773-871-2273**
Information, counseling, and referrals

**Chicago Women’s Health Center: 773-935-6126**
Gynecological care and counseling
1025 W. Sunnyside Ave., Suite 201, Chicago, 60640
http://www.chicagowomenshealthcenter.org

**YWCA Metropolitan Chicago: 312-372-6600**
Counseling and legal advocacy
1 N. LaSalle St. #1150, Chicago, 60602
http://www.ywcachicago.org

**Parks Francis YWCA: 773-955-3100**
Counseling and legal advocacy
6600 S. Cottage Grove Ave., Chicago, 60637

The Center on Halsted: 773-472-6469
Services for the LGBTQ community
3656 N. Halsted, Chicago, 60613
http://www.centeronhalsted.org

Resilience: 312-443-9603
Counseling and legal advocacy
180 N. Michigan Ave. #600, Chicago, 60601
https://www.ourresilience.org/

Mayor's Office for Domestic Violence Help Line (24 hours): 877-863-6338
Information and referrals for shelters, counseling, legal advocacy, and more

Chicago Bar Association: 312-554-2000
Lawyer referral service

For more Illinois community-based sexual assault crisis centers, visit the Illinois Coalition on Sexual Assault, http://www.icasa.org

Marine Biological Laboratory (Woods Hole, Massachusetts)
Independence House, Inc.
Counseling, advocacy, and group counseling for survivors of rape, incest, stalking, sexual harassment, molestation, childhood sexual assault and intimate partner violence.

220 Main St. Fl. Ste. 200, Falmouth, MA 02540
800-439-6507

International Resources for Victims of Sexual Assault

Delhi

Rape Crisis Cell Delhi
Free legal services for rape victims; also assists with contacting law enforcement and obtaining medical examinations

2nd Floor, 'C' Block, Vikas Bhawan, I.P. Estate, New Delhi - 110002.
Nearest Metro Station: ITO Telephone: 23378317, 23378044

Hong Kong

RainLily
24-hour crisis support, coordination with healthcare workers, social workers and police, forensic medical examinations

Room 405-410, Kin Man House, Oi Man Estate, Ho Man Tin, Kowloon, Hong Kong Telephone: 2392 2569; 2375 5322 (hotline)
Additional information regarding Hong Kong resources may be found on the U.S. Consulate’s website.

**London**

**The Havens**

*As described above, the Havens are self-contained centers located near London hospitals which are dedicated to providing assistance to victims of sexual assault. In addition to medical examinations and first aid, the Havens offer advice, emergency contraception, medical aftercare, and specialist support (e.g., counseling, psychology, and advocacy).*

Locations: Camberwell Haven, near to King’s College Hospital (south); Whitechapel Haven, near to Royal London Hospital (east); and Paddington Haven, near to St Mary’s Hospital (west). Before visiting any of the Havens, you must first call 020-3299-6900 (available 24/7) to make an appointment.

**Rape Crisis England and Wales**

*Counseling, advocacy, and support to rape victims (women and girls only)*

East London: PO Box 58203, London, N1 3XP  
Telephone (helpline): 020 7683 1210

North London: Head Office, Unit 5-7 Blenheim Court, 62 Brewery Road, London, N7 9NY  
Telephone (helpline): 0808 801 0305

South London: P.O. Box 383, Croydon, London, CR9 2AW  
Telephone (helpline): 0808 802 9999

West London: PO Box 56663, London, W13 3BJ  
Telephone (helpline): 0808 801 0770

**Singapore**

**Sexual Assault Care Center (SACC) at Association of Women for Action and Research (AWARE)**

*Counseling, legal services, and social work services for victims of sexual assault*

Drop-in center: 5 Dover Crescent #01-22  
Telephone (hotline): 6779 0282

**II. Yearly Report on Harassment and Sexual Misconduct to the Council of the University Senate**

A yearly report will be made to the Council of the University Senate: (1) detailing the number of different types of incidents of harassment and sexual misconduct brought to the attention of the University-wide Student Disciplinary Committee, Title IX Coordinators, Human Resources, and the Panel on Unlawful Harassment; and (2) describing the goals of the University-wide program to prevent harassment and sexual misconduct and the ways in which those goals were implemented during the year. The report will be prepared by the Associate Provost for Equal Opportunity Programs and reviewed and approved by the Panel on Unlawful Harassment, the Chair of which will present the report to the Council.
III. Compliance and Locating This Policy

Regulations Prohibiting Discrimination

The University’s Policy on Title IX Sexual Harassment is consistent with federal, state, and local regulations governing non-discrimination and harassment including: the Age Discrimination in Employment Act, the Americans with Disabilities Act (as amended), the Civil Rights Acts of 1964 and 1991, Executive Order 11246, the Equal Pay Act of 1963, the Rehabilitation Act of 1973 (as amended), Title IX of the Education Amendments of 1972, Genetic Information Nondiscrimination Act of 2008, Lilly Ledbetter Fair Pay Act of 2009, the Illinois Human Rights Act, the City of Chicago Human Rights Ordinance, and the Cook County Human Rights Ordinance.

The crimes of domestic violence, dating violence and stalking were added by VAWA (effective March 7, 2014) as crimes reportable under the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (“Clery Act”). Pursuant to the Clery Act, these crimes are reported in the publication Annual Security and Fire Safety Report.

IDHR, IHRC, OCR, and EEOC Legal Recourse and Investigative/Complaint Process

A University of Chicago employee has the right to contact the Illinois Department of Human Rights (IDHR) for further information or to file a formal charge of unlawful discrimination, harassment, or retaliation. Charges must be filed within 180 days of alleged sexual harassment or other alleged discrimination unless it is a continuing offense. An appeal process is available through the Illinois Human Rights Commission (IHRC) after IDHR has completed its investigation of the complaint. The investigative, charge, and complaint process, and legal recourse processes are described in more detail at http://www2.illinois.gov/dhr/FilingaCharge/Pages/Employment.aspx.

<table>
<thead>
<tr>
<th>IDHR may be reached at:</th>
<th>IHRC may be reached at:</th>
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| Illinois Department of Human Rights  
100 W. Randolph St., 10th Flr.  
Intake Unit  
Chicago, IL 60601  
(312) 814-6200  
(866) 740-3953 (TTY) | Illinois Human Rights Commission  
100 W. Randolph St., Suite 5-100  
Chicago, IL 60601  
(312) 814-6269  
(312) 814-4760 (TTY) |
| Other IDHR Offices:  
Springfield:  
(217) 785-5100  
(866) 740-3953 (TTY) | Other IHRC Office:  
Springfield:  
(217) 785-4350  
(217) 557-1500 (TTY) |
| Marion:  
(618) 993-7463  
(866) 740-3953 (TTY) | |

All members of the University community may also contact the Office for Civil Rights (a division of the United States Department of Education) to file a complaint pertaining to Title IX:
Members of the University community may also contact the U.S. Equal Employment Opportunity Commission, which enforces federal anti-discrimination laws. An individual may file a complaint with the EEOC within 300 days from the alleged harassment or discrimination unless it is a continuing offense. Additional information on the investigation process is available at https://www.eeoc.gov/employees/index.cfm.

EEOC may be reached at:
Equal Employment Opportunity Commission
Chicago District Office
JCK Federal Building
230 S. Dearborn St.
Chicago, IL 60604
(800) 669-4000

There may be additional federal, state, and local complaint processes available to University of Chicago employees.

Access to Information on Harassment, including Title IX Sexual Harassment, Discrimination, and Sexual Misconduct

This Policy and the University's Policy on Harassment, Discrimination, and Sexual Misconduct can be found in the Student Manual of University Policies and Regulations (http://studentmanual.uchicago.edu/), on the Human Resources' Web site (https://humanresources.uchicago.edu/fpg/policies/), and at http://harassmentpolicy.uchicago.edu.

IV. Related Policies


Counseling Service-Staff and Faculty Assistance Program (Personnel Policy U402) http://humanresources.uchicago.edu/fpg/policies/400/p402.shtml


Discipline for Faculty and Other Academic Appointees https://provost.uchicago.edu/handbook/clause/termination-or-removal-cause

Nepotism Policy for Faculty and Other Academic Appointees http://provost.uchicago.edu/handbook/clause/nepotism-policy-faculty-and-other-academic-appointees
Nepotism Policy for Staff (Personnel Policy U206)  
https://humanresources.uchicago.edu/fpg/policies/200/p206.shtml

Progressive Corrective Action (Personnel Policy U703)  
http://humanresources.uchicago.edu/fpg/policies/700/p703.shtml

Termination of Employment Information (Personnel Policy U208)  
http://humanresources.uchicago.edu/fpg/policies/200/p208.shtml

Treatment of Confidential Information (Personnel Policy U601)  
http://humanresources.uchicago.edu/fpg/policies/600/p601.shtml

Policy effective: August 14, 2020

NO TRESPASS/ BAN POLICY

Purpose
The purpose of this policy is to establish guidelines for the University of Chicago’s issuance of a no-trespass warning to a person who is, has been, or is threatening to be present on University property and who has engaged, or is reasonably likely to engage, in criminal activity, a violation of University policy, or conduct that is or may reasonably be deemed to be threatening, disruptive, or violent. A no-trespass warning, also called a ban notice, constitutes an official prohibition against entering University property. Any person who violates a no-trespass warning will be arrested and charged with criminal trespass under the Illinois Criminal Code.2

Policy
The University has substantial and meaningful ties to the surrounding communities and, indeed, the rest of the world. For this reason, even though the entire campus is private property, most outdoor areas and some buildings on campus are, in a general sense and during normal business hours, “open to the public.” At the same time, the University is committed to safeguarding the people who learn, research, live, work and visit here, to ensuring the safe operation of University activities, and to protecting University assets. The University thus can, and does, restrict access to buildings and some outdoor areas during non-business hours. Additionally, from time to time, the University exercises its right to deny access to some or all University property after a reasoned determination has been made that a person has engaged, or is reasonably likely to engage, in criminal activity, a violation of University policy, or conduct that is or may reasonably be deemed to be threatening, disruptive, or violent.

A no-trespass warning remains in effect until modified or withdrawn in writing by an authorized University official. Regardless of whether a no-trespass notice has been issued, any person who is deemed to have committed a crime may be arrested by law enforcement and referred for

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2 The University also has the authority, exercised in its reasoned judgment, to ban current employees, students and visitors, using existing processes. For example, under the University’s disciplinary systems, any student who receives a disciplinary suspension is automatically banned from University property and prohibited from using all University resources. Likewise, the University may ban an employee on an interim basis if he or she is deemed to pose an imminent threat to University property or operations, to the safety or wellbeing of others, or otherwise has engaged in unacceptably disruptive conduct.
prosecution. For purposes of this policy, “University property” includes all indoor and outdoor spaces owned or leased by or from the University, including but not limited to all buildings that constitute the University of Chicago Medical Center.

**Process**

Persons who have engaged, or are reasonably likely to engage, in criminal activity, a violation of University policy, or conduct that is or may reasonably be deemed to be threatening, disruptive, or violent may be issued a no-trespass warning. The warning may be given orally or in writing at the time of the concerning conduct, or later via a written notification sent to the banned person via email, first class mail, and/or certified mail. Generally, a written no-trespass notice will inform the person: (i) that he/she is barred from all University property or parts of University property (specifying the portion, e.g., the Medical Center, solely for purposes of obtaining medical treatment); (ii) of the duration of the ban; (iii) of the reason for the ban; and (iv) that if he/she returns to University property (or the designated portion) he/she will be subject to arrest for criminal trespass. No-trespass warnings are effective immediately.

Designated officials within the following University administrative units are authorized to issue a no-trespass warning: UCPD, the Office of Legal Counsel, College Housing, Campus Life and Student Services, the Office of the Provost, Residential Real Estate, and Human Resources. A UCPD General Order also governs UCPD’s issuance of no-trespass warnings. If feasible, an administrative unit that wishes to issue a no-trespass warning should first consult with the Office of Legal Counsel. No-trespass warnings are circulated to University officials and others on a need-to-know basis.

**Review**

A person who has received a no-trespass warning may make a written petition for the review of the warning by directing the request to the Associate Provost for Faculty and Student Affairs or his or her designee. The petition must include the reasons for the review request, a complete and candid explanation for the conduct that precipitated the no-trespass warning, the basis for the desire to be on University property, and any other information the person wishes to be considered. Normally, a substantive determination on the petition will be made and communicated in writing within thirty days of receipt. The no-trespass warning remains in effect during and after the review process, unless the warning is modified or withdrawn.

**TIME OFF**

**BEREAVEMENT LEAVE**

**Purpose**

To provide employees with time off from work when death occurs in their families.

**Policy**
In the event of the death of certain members of employees’ families, and upon request, it is the University’s policy to grant paid time off and/or unpaid leave.

**Guidelines**

**A. Bereavement Leave for the Death of a Child or Spouse**

In the event of the death of an employee’s Child or Spouse (as defined in this Policy), the employee may take up to 20 work days (four work weeks) of bereavement leave, if requested. Bereavement leave for the death of a Child or Spouse need not be taken on consecutive work days but must be taken within one year of the death.

**B. Bereavement Leave for Other Family Members**

In the event of the death of an employee’s parent or foster parent, sister, brother, son-in-law, daughter-in-law, father-in-law, mother-in-law, step-parent, grandparent, grandchild or father or mother of the employee’s University-approved domestic partner, the employee may take up to 5 consecutive work days of bereavement leave immediately following the death, if requested.

**C. Administration of All Bereavement Leave**

An employee should communicate the need for bereavement leave as soon as is practicable.

For benefits-eligible staff employees, bereavement leave of up to 5 work days, or 20 work days in the event of the death of a Child or Spouse, will be paid and will not be deducted from the employee’s allotment of sick leave, vacation days, or personal holidays. In the case of paid bereavement leaves, the employee will be paid only for those days that fall on his/her regularly scheduled work days.

Bereavement leave for non-benefits-eligible staff employees is generally unpaid; however, such employees may (but are not required to) use accrued sick leave during a bereavement leave.

An employee may request additional time off to be charged against accrued vacation days, sick leave, or personal holidays, or as unpaid time off. The supervisor may contact Human Resources (HR) to discuss other options.

Supervisor considerations will be given on an individual basis to requests for bereavement leave in the event of the death of a person not bearing one of the relationships listed above to the employee.

An employee may be requested to verify the relationship and death. Documentation requested may include a death certificate, a published obituary, or written verification of death, burial, or memorial services from a mortuary, funeral home, burial society, cremation, religious institution, or government agency.
Bereavement leave, when paid, is paid on a regular, straight-time basis and is not counted as time worked when computing overtime.

**Definitions**

*Child:* An employee's son, or daughter who is a biological, adopted, or foster child, a stepchild, a legal ward, or child of a person standing in loco parentis (in the place of a parent). This definition applies only to this Bereavement Leave Policy 506, and not to other University policies or benefits referencing a Child or similar terminology.

*Spouse:* An employee's spouse, or domestic partner with a Statement of Domestic Partnership registered and approved by the Benefits Office.

**COURT APPEARANCES**

**Purpose**

To permit staff employees to meet their civic obligations to make court appearances.

**Policy**

The University will grant time off for staff employees who are obligated to make court appearances. Staff employees may use vacation and/or personal holidays to receive pay for time lost from work or may use unpaid time to appear in court.

**Guidelines**

- If a staff employee is subpoenaed to make a court appearance for a matter unrelated to his/her University employment, the employee is expected to use his/her own vacation and/or personal holiday time or unpaid time off.
- If a staff employee is subpoenaed to make a court appearance on behalf of the University, the employee is paid his/her regular pay.
- If a staff employee is subpoenaed to make a court appearance on behalf of another University employee, the subpoenaed employee is expected to use his/her own vacation and/or personal holiday time or unpaid time off.
- A staff employee is responsible for notifying his/her supervisor immediately after receiving a subpoena to appear at court during scheduled work hours. A supervisor may request a copy of this notice for the department's files.

**BLOOD DONATION LEAVE**

**Purpose**

To establish guidelines for employees to donate blood in compliance with the Illinois Employee Blood Donation Leave Act.

**Who is Governed by this Policy**

This policy applies to all staff employees, temporary employees, and seasonal employees.
Policy
2. Any employee may take up to one hour with pay, or more if approved by their supervisor, to donate or attempt to donate blood once every 56 days in accordance with appropriate medical standards established by the American Red Cross, America’s Blood Centers, the American Association of Blood Banks, or other nationally recognized standards as determined by the University.

3. Time taken for Blood Donation Leave will not be deducted from the employee’s vacation, personal holiday, or sick leave accruals.

4. In order to use Blood Donation Leave, the employee must request and obtain supervisory approval in advance and in accordance with the Department’s time off request procedures. See Policy U502 Attendance (Absenteism, Tardiness, and Job Abandonment).

5. The employee must request Blood Donation Leave at least two (2) days in advance and must consult with their supervisor to schedule the leave to avoid disrupting the operations of the unit.

6. A supervisor may require an employee to provide documentation for the requested time off. Failure to timely submit a verification statement from the donation center upon request may result in an unexcused absence and/or disciplinary action. See Policy U703 Progressive Correction Action.

7. An employee who has a complaint or dispute about Blood Donation Leave may initiate the Employee Complaint Resolution Procedure set forth in Policy U704.

Roles and Responsibilities
Employee: The Employee is responsible for allowing the Supervisor’s time off request procedures.

Supervisor: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate, and approving time off use in the time off calendar.

FMLA

Purpose
The University is committed to compliance with the Family and Medical Leave Act of 1993 (the “FMLA”). The purpose of this policy is to provide employees with a basic understanding of their rights and obligations under the FMLA.

Who is Governed by this Policy
This policy applies to all employees eligible for leave under FMLA. An employee who has been employed at the University for at least 12 months and has worked at least 1,250 hours during the 12-month period preceding the request for leave is eligible for family medical leave (“FML”). Paid absences (including Workers’ Compensation, Temporary Seasonal Shutdown, Short Term
Disability, and other paid or unpaid time off) prior to taking FML, are not included in the 1,250 work hours referenced above.

Policy
The University will grant eligible employees leave under the FMLA (“Family Medical Leave” or “FML”) for up to 12 workweeks during any 12-month period.

Basic Leave Entitlement
7. An eligible employee is entitled to take up to 12 weeks of job-protected FML for the following reasons:
   - Because they are unable to perform their job due to pregnancy, prenatal medical care or child birth
   - To care for the employee’s child after birth, or placement for adoption or foster care
   - To care for the employee’s spouse, son, daughter or parent, who has a serious health condition
   - For a serious health condition that makes the employee unable to perform the employee’s job

Military Family Leave Entitlements
1. Eligible employees whose spouse, son, daughter, or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain "qualifying exigencies."

2. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

3. The FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period.

4. A covered servicemember is:
   - A current 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
   - A veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FML to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness. (Note, the FMLA definitions of "serious injury or illness" for current service members and veterans are distinct from the FMLA definition of serious health condition).

Employee Benefits During FML and Job Restoration After FML
1. **Health Insurance:** During an employee’s FML, the University will maintain health insurance and other group health benefits on the same conditions as if the employee was working subject to applicable plan documents and law. If the employee wants benefits to continue during FML, he/she must continue to pay the share of the premiums for those benefits at the same contribution rate as if he/she were an active employee. If any portion of FML is paid, the employee’s share of the benefit premiums will be paid through automatic payroll
deductions. For unpaid FML, the employee will be billed and must make payments for his or her share of the premiums on a monthly basis. The University's obligations to maintain health benefits cease if an employee fails to pay his/her share of premiums for which he/she is billed.

2. **Accrual of Vacation, Personal and Sick Leave during FML**: Consistent with the University's policy for all types of leave, employees will not accrue vacation or other benefits while on unpaid FML.

3. **Holidays during FML**: Employees will not be paid for holidays that fall during FML unless the holiday falls on a day covered by accruals (i.e. vacation leave, sick leave, or a personal day).

4. **Job Restoration**: Most employees will be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms after FML.

5. **Benefits Accrued Before FML**: Use of FML will not result in the loss of any employment benefit that accrued prior to the start of the leave.

6. **Retirement Plans**: FML will be treated as continuous service (i.e. no break in service) for purposes of vesting and eligibility to participate in the University's retirement plans.

**Eligibility Requirements**

1. Employees are eligible for FML if they have worked for the University for at least 12 months and have worked at least 1,250 hours during the 12-month period before a request for FML.

**FML “Leave Year”**

1. For the purposes of this policy, the University will use a “rolling” 12-month period measured backward from the date an employee uses any FMLA leave.

2. Available leave is determined by subtracting the number of weeks of FMLA leave taken during this 12-month “look back” period from the 12-week total allowed.

**Use of Leave**

1. An employee does not need to use FML in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary.

2. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the University’s operations. Employees may also take leave due to “qualifying exigencies” (defined above) or “bonding leave” (leave to bond with a newborn child or newly-adopted child) on an intermittent basis.

**Pay During FML**

1. Under the FMLA, Family Medical Leave generally is unpaid. However, the University has made provisions for employees to receive pay during FML under certain circumstances, described below.
2. Non-exempt employees taking intermittent leave must use available time off accruals, as described below, on an hour-for-hour basis in increments of at least 30 minutes before taking unpaid time.

3. Exempt employees taking intermittent leave will not be charged for time off for less than a full day, but the hours taken as FML must be submitted using the absence tracking system for FML hours tracking purposes.

4. **Sick Leave**: An employee must use his/her accrued sick leave concurrently with FML.

5. **Vacation and Personal Leave**: An employee must use accrued vacation and personal days concurrently with FML. However, an employee may choose to keep a total of five combined vacation and personal days to use at another time. (Refer to Personnel Policy U509 Vacation and U511 Personal Holidays).

6. **Short Term Disability (STD)**: An employee may be eligible for STD payments during FML. Refer to the chart below and U513 Short-Term Disability for rules regarding the use of STD during FML.

7. **Workers Compensation “Lost Time”**: FML runs concurrently with Workers’ Compensation Lost Time if the basis for the Lost Time also meets the definition of a serious health condition under the FMLA.

The following is a breakdown of the types of paid leave that apply during FML

### Types of pay available during FML

<table>
<thead>
<tr>
<th>Reason for Leave</th>
<th>Sick Leave</th>
<th>Personal Days</th>
<th>Vacation Leave</th>
<th>STD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee’s own serious health condition</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
</tr>
<tr>
<td>Birth of a child (Mother)</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴ (6 to 8 weeks)</td>
</tr>
<tr>
<td>Adoption, foster care placement or birth/care of a child (Mother)</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>No</td>
</tr>
<tr>
<td>Adoption, foster care placement or birth/care of a child (Father)</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>No</td>
</tr>
<tr>
<td>Serious health condition of spouse, child, or parent</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>No</td>
</tr>
<tr>
<td>Military qualifying exigency</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
</tr>
<tr>
<td>Military caregiver leave</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>Yes⁴</td>
<td>No</td>
</tr>
</tbody>
</table>
How to Request Leave

1. An employee must provide 30 days advance notice to his or her manager of the need to take FML when the need for leave is foreseeable.

2. When 30 days' notice is not possible, the employee must provide notice to his or her manager as soon as practicable and must comply with the University's normal call-in procedures.

3. Employees requesting FML will also be required to complete the FML [Request Form](#) and return it to their unit HR Professional.

4. The unit HR Professional and/or HR-Leave Administration will inform employees of additional obligations, including the need for a medical certification supporting the need for FML.

5. Generally, when requesting FML, employees must be prepared to provide sufficient information for the University to determine if the leave is covered by the FMLA and the anticipated timing and duration of the leave. Sufficient information may include the following: whether the employee is unable to perform job functions; whether the employee’s family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, whether the leave is for a reason for which the employee previously took FML; the circumstances supporting the need for military family leave.

The University’s Responsibilities

1. The University will inform an employee requesting FML whether he or she is eligible under FMLA.

2. If he or she is eligible, the University will notify the employee of any additional information required as well as the employee’s rights and responsibilities.

3. If the University determines that the leave is not FMLA-protected, it will notify the employee and provide a reason for ineligibility.

4. The University will also inform an employee if leave will be designated as FMLA-protected and the amount of leave counted against the employee’s FML entitlement.

The Employee’s Responsibilities

1. Consistent with the University's policy regarding all types of leave, the following conduct is strictly prohibited in relation to FMLA leave:
   - Engaging in fraud, misrepresentation or providing false information to the University or any health care provider
   - Having other employment during the leave, without prior written approval from the University
   - Failure to comply with the employee’s obligations under this policy
o Failure to timely return from the leave

2. Employees who engage in conduct described above will be subject to loss of benefits, denial or termination of leave, and corrective action, up to and including termination.

The University’s Commitment
1. The University will not interfere with, restrain, or deny the exercise of any right provided by the FMLA, nor will it discharge or discriminate against any individual for opposing any practice or involvement in any proceeding relating to the FMLA.

2. The University recognizes the co-existence of state and/or local laws regarding family and medical leave. Where such laws apply and provide greater family and medical leave rights than the FMLA, the University will comply with those laws.

Definitions
Serious Health Condition: A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an oversight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities. Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity (inability to work) of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regiment of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Roles and Responsibilities
Employee: The Employee is responsible for submitting a completed FMLA Leave Request Form and any additional necessary documentation to their supervisor, HR Partner or Leave Administration.

Supervisor: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, staying in contact with the employee on leave as appropriate, and approving the time off calendar.

HR Partner: The HR Partner is responsible to act as a liaison to ensure employees and Leave Administration have all necessary information.

Key Contacts
Center of Expertise – Benefits: Leave Administration
leaveadministration@uchicago.edu
Extension: 2-9634
JURY DUTY

Purpose
To permit staff employees to meet their civic obligations to serve as jurors, when called.

Who is Governed by this Policy
This policy applies to all benefits eligible staff employees.

Policy
The University will grant time off to staff employees who are called for jury duty.

Guidelines
8. The employee is responsible for notifying their supervisor immediately after receiving a summons to appear for jury duty. A copy of the notice should be given to the supervisor for the department's files.

9. If the jury does not convene on the employee's regularly scheduled workday, the employee is expected to report to work.

10. The supervisor is responsible for ensuring the absence is entered on the appropriate time off calendar. This absence does not count as hours worked when computing overtime.

11. A staff employee may keep the court's compensation and reimbursements for travel expenses.

Roles and Responsibilities
Employee: The Employee is responsible for following the Supervisor’s time off request procedures.

Supervisor: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate including collecting the jury duty notice, and entering or approving jury duty use in the time off calendar.

MEDICAL LEAVE OF ABSENCE (MLOA)

Purpose
To provide a means for departments to offer employees medical leave when they are unable to work due to a serious health condition and are not eligible for leave under Short Term Disability (STD) and the Family and Medical Leave Act (FMLA) or have exhausted STD and FMLA and need a bridge between Short Term and Long Term Disability (LTD).

Who is Governed by this Policy
This policy applies to all regular staff employees.
Policy
Employees may apply for an unpaid medical leave for up to three (3) months; however, employees are only eligible for medical leave under this policy as follows:

- They are ineligible for STD or FMLA (e.g., they have worked for the University for fewer than 6 continuous months or work less than 19.5 hours per week); or
- They have exhausted STD or FMLA, have applied for LTD, and have not received an approval or denial from the LTD insurance carrier.

The decision whether to grant a medical leave is at the discretion of the University. Any leave or absences without an approved medical or other leave may be considered unexcused or unscheduled as provided under University and department policy and result in corrective action up to and including termination of employment. See Policy U502 Attendance (Absenteeism, Tardiness, and Job Abandonment).

Guidelines

1. To request a leave, an employee must submit a completed Leave Request Form to the employee’s supervisor and the unit’s Human Resource Partner (HRP). When an employee has advance notice of the need for a leave, the employee must submit a completed Medical Leave Request Form to the employee’s supervisor and the HRP for their signatures.

2. After the employee’s supervisor and HRP sign the request form, the employee must submit the form to Leave Administration.

3. The employee must also submit a fully completed Health Care Provider’s Certification demonstrating the need for the leave directly to Leave Administration.

4. Both forms should be submitted thirty (30) days before the leave is requested to begin. If an employee cannot provide thirty (30) days’ notice, the employee must submit the completed request form as soon as practicable. Failure to provide a complete and timely medical certification may result in the denial of medical leave, absences being deemed unexcused and unscheduled, and termination of employment.

5. The decision whether to grant a medical leave is at the discretion of the University. Considerations should include, but are not limited to: the department’s operational and staffing needs, the availability of replacements, the reason for the employee’s request, and the employee’s job performance and attendance.

6. If an employee applies for LTD before the end of STD or other approved leave, the employee may apply for a medical leave so the employee can remain employed in an unpaid leave status pending a determination on the LTD application.
7. Accrued sick leave, vacation, and personal holidays must be used during any medical leave before the leave becomes unpaid.

8. Employees do not accrue sick leave, vacation, and personal holidays during medical leave.

9. During medical leave, the University will maintain benefits on the same conditions as if the employee is working, subject to applicable plan documents and law. An employee must continue to pay the employee's portion of insurance benefit premiums if the employee wishes coverage to continue during the leave.

10. Employees on a medical leave are expected to be reasonably responsive to, and communicate with, their supervisor and unit during the leave.

11. Before returning from medical leave, the employee must provide the employee's supervisor or HRP a health care provider's release to return to work indicating that he/she is able to perform the essential functions of the job with or without reasonable accommodation. The HRP must provide Leave Administration with the release to return to work. If an employee fails to provide a release to return to work as of the first scheduled workday after a medical or other approved leave, he/she will not be allowed to return to work and absences may be deemed unexcused or unscheduled, which may result in termination of employment.

12. Approval of the leave request does not guarantee job reinstatement. Reinstatement after a leave is at the discretion of the department; however, the University may make an effort to reinstate the employee to the same or a comparable job if available. If the employee is not reinstated, he or she may apply for vacant positions. (See Policy U202 Talent Acquisition).

13. If an employee does not return to work when the medical leave ends, and has not been approved for an additional leave of absence or other reasonable accommodation as required by law, employment will be terminated as of the last day of the approved leave of absence.

Roles and Responsibilities

Employee: The Employee is responsible for requesting the Medical Leave of Absence using the required form, and maintaining communication with the unit and Leave Administration, including providing additional information, as necessary.

HR Partner: The HRP is responsible for submitting any received requests for a Medical Leave of Absence, return to work slips, and other relevant information to Leave Administration, as well as working with the unit to determine whether reinstatement is possible when the employee’s leave will be ending.

Leave Administration: Leave Administration is responsible for determining whether a Medical Leave of Absence is approved and monitoring the Leave through communication with the employee and the unit representatives, such as the HRP and Supervisor.
MILITARY LEAVE

The University of Chicago is committed to supporting our staff employees who are uniformed service members. The University provides military leave and other benefits to staff employees for military training and service. For additional information please refer to the Leave of Absence for Active Military Service and Military Reserve Training Leave Policies and contact HR Leave Administration.

PARENTAL LEAVE

Purpose
To provide non-union benefits eligible staff employees who have completed one (1) consecutive year of service with paid parental leave for the birth or adoption of a child and to establish guidelines for the use of such leave.

Who is Governed by this Policy
This policy applies to all benefits eligible staff employees who have completed one (1) consecutive year of service prior to the birth or adoption of a child. Employees represented by a union may be governed by the appropriate bargaining unit.

Policy
Benefits eligible staff employees who have completed one consecutive year of service prior to the birth or adoption of a child may take up to six weeks of paid parental leave at the employee’s full pay to be completed within 12 months of the event. Pay is determined by the employee’s primary position’s regular base rate of pay and scheduled weekly hours of work at the time of the leave. Employees taking Parental Leave who are also eligible for FMLA leave shall have FMLA time run concurrently.

When both parents are eligible staff employees, each is entitled to paid parental leave for the birth or adoption. However, where both parents are University employees working in the same department, the department may elect to allow only one of the parents to take parental leave at a time. Staff employees who are receiving a foster child placement should refer to Policy U522 FMLA.

Administration of Parental Leave
1. Use of Leave: Except as allowed to cover the waiting period for Short-Term Disability (see 2.b below), parental leave must be taken in one block within twelve months of the birth or adoption. See Policy U513 Short-Term Disability. Births of twins/multiples do not extend the leave allotment.

2. How to Request Leave:
   o An employee who anticipates a parental leave should provide written notice and discuss the plan with the supervisor at least 30 days in advance, if possible. When 30 days’
written notice is not possible, the employee must provide notice to the supervisor as soon as practicable and must comply with their unit's normal call-in procedures.

- Employees requesting parental leave will also be required to complete the Leave Request Form and return it to their unit HR Professional and to HR-Leave Administration. If the employee is also requesting FMLA leave and/or Short Term Disability due to the same event, only one Leave Request Form needs to be completed. The unit HR Professional and/or HR-Leave Administration will inform employees of additional obligations, including the need for documentation supporting the need for parental leave.
- Generally, when requesting parental leave, employees must be prepared to timely provide sufficient information to the University to determine if the leave is covered by the parental leave policy.

3. The University's Responsibilities: The University will inform any employee requesting parental leave whether they are eligible under the Parental Leave policy. If they are eligible, the University will notify the employee of any additional information required as well as the employee’s rights and responsibilities. If the University determines that the employee is not eligible for parental leave, it will notify the employee and provide a reason for ineligibility. For employees who are eligible for FMLA leave, the University will inform the employee if the parental leave will be designated as FMLA leave and the amount of leave counted against the employee’s FML entitlement.

4. The Employee’s Responsibilities: Consistent with the University’s policy regarding all types of leave, the following conduct is strictly prohibited in relation to parental leave. Employees who engage in conduct described below will be subject to loss of benefits, denial or termination of leave, and corrective action, up to and including termination.
- Engaging in fraud, misrepresentation, or providing false information to the University or any health care provider
- Having other employment during the leave, without prior written approval from the University
- Failure to comply with the employee’s obligations under this policy
- Failure to timely return from the leave

Additional Considerations Regarding Parental Leave
1. Health Insurance: During an employee’s parental leave, the University will maintain health insurance and other group health benefits on the same conditions as if the employee was working subject to applicable plan documents and law. While on paid parental leave, the employee’s share of the premiums for those benefits will continue through payroll deduction at the same contribution rate as if they were an active employee.

2. Short Term Disability (STD): Employees eligible for STD may elect to use paid parental leave in up to two one-week increments to cover the STD waiting period. Parental leave may be used for this purpose regardless of the employee’s accrual balance. The employee may also elect to use the entire six-week block of parental leave instead of using the STD
benefit. Those electing this option will still be required to provide a release to return to work by a healthcare provider regardless of their eligibility for FMLA. See Policy U513 Short-Term Disability.

3. **Accrual of Vacation, Personal, and Sick Leave during Parental Leave**: Consistent with the University’s policy for all types of leave, employees will not accrue vacation or other benefits while on parental leave.

4. **Holidays During Parental Leave**: Employees will be paid for holidays that fall during parental leave, however it will not extend the duration of their leave.

5. **Job Restoration**: Most employees will be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms after parental leave.

6. **Benefits Accrued Before Parental Leave**: Use of parental leave will not result in the loss of any employment benefit that accrued prior to the start of the leave.

7. **Retirement Plans**: Parental leave will be treated as continuous service (i.e. no break in service) for purposes of vesting and eligibility to participate in the University’s retirement plans.

**Roles and Responsibilities**

*Employee*: The Employee is responsible for timely submitting a completed Parental Leave Request Form and any additional necessary documentation to their supervisor, HR Partner, and Leave Administration.

*Supervisor*: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, staying in contact with the employee on leave as appropriate, and entering and approving the time off calendar.

*HR Partner*: The HR Partner is responsible to act as a liaison to ensure employees and Leave Administration have all the necessary information, and to complete the required return to work business process in Workday.

**Key Contacts**

Center of Expertise – Benefits: Leave Administration
leaveadministration@uchicago.edu

**Extension**: 2-9634

**PERSONAL HOLIDAYS**

**Purpose**
To provide eligible staff employees with paid time off (personal holidays) and to establish guidelines for personal holiday accrual and use.

Who is Governed by this Policy
This policy applies to all benefits eligible staff employees.

Policy

1. Benefits-eligible staff employees begin accruing personal holidays at their most recent date of benefits eligibility. It is intended that employees take the annual personal holidays to which they are entitled each year. Use of paid time off (personal holidays) is subject to supervisory approval.

2. An eligible staff employee accrues personal holiday time as follows:
   - January 1st - 2 days
   - April 1st - 1 day
   - July 1st- 1 day
   - September 1st- 1 day

3. Personal holidays accrue at a rate equivalent to one-fifth (1/5) the employee's average scheduled workweek.
   - Example #1: An employee with a standard workweek of 37.5 hours per week will accrue 7:30 hours for each credited personal holiday. To calculate: 37.5 hours per week x 1/5 = 7:30 hours per personal holiday.
   - Example #2: An employee with a standard workweek of 30 hours will accrue 6.0 hours for each credited personal holiday. To calculate: 30 hours per week x 1/5 = 6 hours per personal holiday.
   - Example #3: An employee with a standard workweek of 20 hours will accrue 4.0 hours for each credited personal holiday. To calculate: 20 hours per week x 1/5 = 4 hours per personal holiday.

4. Personal holiday time should be requested and approved in advance by the staff employee's supervisor following unit time off request procedures. Employees must record personal holidays that are taken on the appropriate time off calendar.

5. Exempt employees may only use personal holiday time in full day increments, which are calculated based on the employee’s average scheduled hours per day. Absences of less than a full day may not be charged to the accrued personal holiday time or deducted from the pay of exempt staff employees.
   - Example #1: An employee who works a five-day, 37.5-hour standard workweek will have 7:30 hours deducted from his/her personal holiday accrual balance for each personal holiday taken. To calculate: 37.5 hours per week / 5 days per week = 7:30 hours per personal holiday.
Example #2: An employee who works a four-day, 30-hour standard workweek will have 7.5 hours deducted from his/her personal holiday accrual balance for each personal holiday taken. To calculate: 30 hours per week / 4 days per week = 7.5 hours per personal holiday.

Example #3: An employee who works a four-day, 20-hour standard workweek will have 5.0 hours deducted from his/her personal holiday accrual balance for each personal holiday taken. To calculate: 20 hours per week / 4 days per week = 5.0 hours per personal holiday.

6. Non-exempt employees may use personal holiday time for time off for durations of 30 minutes or more.

7. An employee's accrued personal holiday balance expires each calendar year. An employee who fails to request accrued personal holidays during the calendar year following unit guidelines is not entitled to carry over personal holidays into the next calendar year.

8. An employee will not accrue personal holidays while they are in an out-of-pay status (i.e. on leave of absence), on Workers' Compensation, or on Short-Term or Long-Term Disability.

9. It is intended that each employee take the annual personal holidays to which they are entitled each year. An employee may be reimbursed in lieu of taking personal holidays if the unit requests the employee to forego all or any part of their personal holidays and the employee has previously requested to take a personal holiday according to unit guidelines.

10. Pay for personal holidays will be at the employee's regular base rate of pay when personal holiday time is used. Bonuses and other variable compensation are not included in calculating personal holiday pay. Personal holiday hours are not considered hours worked in calculating overtime.

11. At an employee's request, and upon the exhaustion of all sick leave, absence due to non-work-related illness or injury may be taken as a personal holiday. (See Policy U512 Sick Leave).

12. When an employee is absent due to personal reasons and personal holiday accruals are exhausted, the employee is in out-of-pay status unless they elect to use accrued vacation time and have received supervisory approval to do so. (See Policy U509 Vacation).

13. Personal holidays must not be used as compensatory time off in lieu of overtime pay. (See Policy U222 Compensable Time, Record-Keeping, and Tracking Absences).

14. Upon termination of employment, an employee is to be paid for any unused personal holidays accrued within the calendar year.

Roles and Responsibilities
**Employee:** The Employee is responsible for following the Supervisor’s time off request procedures.

**Supervisor:** The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate, and approving time off use in the time off calendar.

### PERSONAL LEAVE OF ABSENCE

**Purpose**
To provide a means for departments to offer employees an approved leave without pay when circumstances (such as education, research, or family needs) necessitate.

**Who is Governed by this Policy**
This policy applies to all regular staff employees.

**Policy**
After one (1) year of continuous active employment with the University regular employees may apply for an unpaid Personal Leave of Absence for one to twelve consecutive months. The decision whether to grant a personal leave of absence is at the discretion of Leave Administration.

**Guidelines**

**Administration of a Personal Leave of Absence**
1. An employee must submit a [Leave Request Form](mailto:leaveadministration@uchicago.edu) to the employee’s supervisor and the department’s Human Resource Partner (HRP). The form must specify the reason for the request and its expected duration, and must be submitted at least three months in advance unless an emergency situation arises. The HRP should submit the completed form and supporting documentation to Leave Administration at leaveadministration@uchicago.edu. Leave Administration will review the request and provide final approval based on consultation with the appropriate individuals.

2. Approval of the leave request does not guarantee job reinstatement and indeed the employee’s position may be filled, modified or eliminated during Personal Leave of Absence. If the employee is not reinstated, he or she may apply for vacant positions. (See Policy U202 Talent Acquisition).

3. In deciding whether to grant a Personal Leave of Absence request, the department’s and the University’s operational and staffing needs, the availability of replacements, the reason for the employee’s request, and the employee’s job performance and attendance should be considered.

4. Vacation and personal holiday accrual will be paid in a lump sum as soon as practical after the commencement of the Personal Leave of Absence.

5. During a Personal Leave of Absence, employees are expected to be reasonably responsive and communicative with their supervisor and department.
6. Reinstatement after a leave is at the discretion of the department.

7. Prior to reinstatement, an employee may be subject to a reference or background check based upon the department's policies and procedures or another legitimate reason. (See Policy U204 Reference and Background Checks).

8. If the employee is reinstated, the employee's service will be bridged to the original hire date.

9. An employee on an approved personal leave of less than 12 consecutive months may request an extension of the leave for up to a total of 12 consecutive months by submitting a completed Personal Leave of Absence form detailing the reason for the extension request.

10. If an employee is not reinstated or does not return to work when the Personal Leave of Absence ends, and has not been approved for other reasonable accommodation as required by law, employment will be terminated as of the last day of the approved leave of absence. A Personal Leave of Absence should not be used as an alternative to a resignation or other termination of employment.

11. Some University departments may reduce or suspend operations at the end of an academic term or year. Employees in these departments may be placed on a Personal Leave of Absence during the period of reduced or suspended operations. Affected employees may use their vacation and personal holiday accrual balances until they have been exhausted. Individuals in this situation may elect to continue medical, vision and dental insurance as follows: the first three months will be at the employee’s current rate, and the remaining 15 months will be at the full COBRA rate.

**Benefits While on a Personal Leave of Absence**

1. An employee on a Personal Leave of Absence may elect to continue medical and dental insurance at COBRA rates for up to 18 months.

2. Life and personal accident insurances may be maintained at the employee’s option.

3. During an approved Personal Leave of Absence, an employee participating in the Retirement Income Plan for Employees (ERIP) will not continue to contribute, but the previously credited income will not be affected.

4. Employees cannot participate in a Flexible Spending Account (FSA), Health Savings Account (HSA), or the University's Educational Assistance Plan while on a Personal Leave of Absence.

5. Paid time-off accruals cease while on a Personal Leave of Absence; accrued sick leave remains intact.

**Roles and Responsibilities**
**Employee**: The Employee is responsible for requesting the Personal Leave of Absence using the required form, and maintaining communication with the unit and Leave Administration, including providing additional information, as necessary.

**HR Partner**: The HRP is responsible for submitting any received requests for a Personal Leave of Absence, and other relevant information, to Leave Administration and working with the unit to determine whether reinstatement is possible when the employee’s leave will be ending.

**Leave Administration**: Leave Administration is responsible for determining whether a Personal Leave of Absence is approved and monitoring the Leave through communication with the employee and the unit representatives, such as the HRP and Supervisor.

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### SCHOOL VISITATION

**Purpose**
To establish guidelines for staff employees to attend their children’s school conferences and activities in compliance with the Illinois School Visitation Rights Act.

**Who is Governed by this Policy**
This policy applies to all benefits eligible staff employees.

**Policy**
1. The University encourages employees’ involvement in their children’s school-related activities.

2. Employees who have children in primary and/or secondary school may receive an additional eight (8) hours of unpaid school visitation time per school year after accrued vacation and personal holiday leave time have been exhausted.

3. In general, employees may elect to use accrued vacation or personal holiday time for school visitation at any time. (See Policies U509 Vacation and U511 Personal Holidays).

4. Employees can use an additional eight (8) hours of unpaid leave for school visitation per school year once their accrued vacation and personal holiday leave time have been exhausted.

5. Additional unpaid time off will be given in increments of no more than four (4) hours. A staff employee is not required to make up this time, however, supervisors should make a good faith effort to permit non-exempt employees to make up this time.

6. An employee must consult with their supervisor to schedule the leave so as not to disrupt the operations of the unit unduly. Requests for time off for school visitation purposes must be made in writing at least seven (7) days in advance. In case of emergencies, 24-hours advance notice should be given if practicable.

7. An employee may be required to provide documentation for the requested time off to their supervisor. Failure to submit a verification statement from the school may be considered an unexcused absence and may result in disciplinary action.
8. Employees should indicate any unpaid school visitation time taken on the appropriate time off calendar.

Roles and Responsibilities

Employee: The Employee is responsible for following the Supervisor’s time off request procedures.

Supervisor: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate, and approving time off use in the time off calendar.

SHORT-TERM DISABILITY

Purpose
To provide guidance regarding an employee's status and compensation when a non-work related injury or illness renders the employee unable to work.

Policy
A benefits eligible employee, who has completed six months of continuous and active employment, is eligible to apply for Short Term Disability (STD) when he or she is unable to perform the duties of his or her job due to a non-work-related injury or illness (including a pregnancy-related disability). STD pays 60% of an employee’s regular salary minus all regular deductions. STD payments begin once an employee is totally disabled for a continuous period of fourteen (14) days or an employee’s accrued sick leave is exhausted, whichever is longer. STD ends after 13 weeks of disability.

Guidelines

1. To apply for STD, an eligible employee must submit the Short Term Disability Leave Request form to the employee’s supervisor and the department/unit’s Human Resource Partner (HRP) for signature as soon as the employee becomes aware of the need for leave. Upon receipt of the supervisor’s and the HRP’s signature, the employee must submit the completed Short Term Disability Leave Request Form to Human Resources (HR) Leave Administration.

2. The employee also must submit directly to HR Leave Administration a completed Short Term Disability – Health Care Provider’s statement describing the reason for the leave, diagnosis, and anticipated date of return.

3. STD leave will be counted toward the twelve (12) week allotment of Family and Medical Leave. For guidelines on Family and Medical Leave of Absence, see 522-Family and Medical Leave of Absence.
4. Following the first day of absence, there is a waiting period of fourteen (14) calendar days before STD payments begin. If an employee does not have accrued sick leave to use during the waiting period, then accrued personal holidays and vacation must be used as provided under University policy or collective bargaining agreement, if applicable. Otherwise, the waiting period is unpaid. Employees may reserve a total of five (5) days of vacation and personal holiday to use at another time.

5. An eligible employee may receive STD payments beginning fourteen (14) days after the first day of absence and the exhaustion of sick leave, whichever is longer, through the thirteenth week of disability, i.e. a maximum of eleven (11) weeks of STD paid benefits. The following are examples:

   Example 1: An employee is approved for 6 weeks STD leave for a new disability and has 10 weeks accrued sick leave. The employee will use 6 weeks of sick leave and will not receive STD payments because the employee has enough sick leave accruals to cover the duration of the absence.

   Example 2: An employee is approved for 13 weeks of STD leave for her own disability and has 3 days accrued sick leave. The employee must use 3 days of accrued sick leave and other accrued paid time off during the fourteen-day waiting period and thereafter will receive 11 weeks of STD payments.

6. Unless there are medical complications, six (6) weeks after the birth of a child is the approved timeframe for STD payments. However, a cesarean delivery will be approved for eight (8) weeks.

7. HR Leave Administration is responsible for approval or denial of STD payments. If approved, payments begin after accrued sick leave has been exhausted or after the fourteen (14) day waiting period, whichever is longer. The University reserves the right to require a medical examination of any employee applying for STD at any time by a health care provider selected by the University. The cost of such examination shall be borne by the employee's department.

8. In addition to receiving STD payments, an employee:
   - Maintains all benefits for which s/he is enrolled, provided s/he continues to pay the employee’s share of the premiums, subject to applicable policies and plan
   - Maintains his or her original benefits-eligible (service) date
   - Maintains previously-earned personal holiday and vacation accrual balances

9. An employee receiving STD payments is NOT permitted to:
   - Accrue sick leave, vacation or personal holidays
   - Apply for STD payments within two weeks following a return to work from STD
   - Receive University holiday pay
   - Supplement STD payments with vacation or personal holidays
10. Employees on STD leave are expected to reasonably communicate with and be responsive to their supervisors and department during their leave and regarding their return to work.

11. An employee on STD leave must contact HR Leave Administration immediately upon learning of the need for an extension. An employee on a STD leave who has a medical release to return to work earlier than expected should contact HR Leave Administration and his/her supervisor immediately.

12. Before returning to work from STD leave, an employee must provide his or her supervisor and the HRP with a release to return to work by a health care provider indicating that he/she is able to perform the essential functions of the job with or without reasonable accommodation. The supervisor or HRP will forward the original release to return to work to HR Leave Administration. An employee who fails to provide a release to return to work as of the first scheduled workday after a medical or other approved leave will not be allowed to return to work and subsequent absences will be deemed unexcused or unscheduled, which may result in termination of employment.

13. An employee who returns to work and suffers a relapse of the same disability may apply for and use his or her remaining STD benefits without satisfying another fourteen (14) day period so long as the employee has not exhausted his or her STD allotment.

14. To be eligible for STD payments for a different disability or a new medical condition, an employee must return to work following the receipt of STD payments and work continuously for at least two weeks. The employee also is subject to a new fourteen (14) day waiting period.

15. An employee remains financially responsible for payroll deductions such as taxes, insurance, credit union and other deductions. These deductions are made against STD payments in accordance with payroll schedules.

16. If an employee has not returned to work when the STD leave expires and has not applied for Long Term Disability or been approved for an additional leave of absence or other reasonable accommodation as required by law, employment will be terminated effective on the first scheduled workday that is missed following the expiration of the STD leave.

**LONG-TERM DISABILITY**

**Purpose**
To provide guidance regarding Long Term Disability (LTD) status, eligibility, departmental staffing, and cost considerations.

**Who is Governed by this Policy**
This policy applies to all benefits eligible staff employees to who elect LTD coverage.
Policy
1. LTD benefits are not available until three months after the onset of disability. Therefore, between the onset of disability and the determination of whether the application for LTD is approved, a disabled employee must use accrued sick, vacation, and personal holiday time as well as short term disability (STD). (See Policies U512 Sick Leave, U509 Vacation, U511 Personal Holidays, and U513 Short Term Disability). If necessary, the employee may need to use an unpaid Medical Leave of Absence to bridge benefits and/or pay until the insurance company comes to a determination on the application. (See Policy U515 Medical Leave of Absence).

2. LTD is a form of insurance that provides income replacement to qualified individuals in the event of long term disability. It is not a leave of absence nor does it provide job protection. The Long Term Disability Summary Plan Description (SPD) provides information about the University’s LTD program, including rules about eligibility and enrollment, benefit options, limitations on benefits, and specific coverage. Copies of the SPD are available on the University’s Benefits Office website or from the Benefits Office.

3. The University treats an individual who is receiving long term disability income payments from the insurance company as an active employee for benefit plan purposes only as follows; the status may be subject to change.
   - **Medical, Dental and Vision:** Coverage for medical, dental and vision insurance that is in effect immediately before the LTD effective date may be continued at the employee rate as long as the individual is on LTD. The individual is responsible for paying the individual’s portion of insurance premiums and will be billed directly for his/her share of the premium for continued benefit coverage. When premium rates change, the new rate must be paid. Failure to pay premiums as required will result in termination of benefits coverage. During the annual Open Enrollment period, an individual on LTD may change medical, dental and vision plans and add or drop dependents.
   - **Life Insurance:** Certain life insurance benefits may be continued for up to twenty-four (24) months after the first day of absence/disability by payment of the applicable premium unless subject to any waiver of premium provision in the insurance contract. While on LTD, coverage may not be increased, but may be decreased at any time.
   - **CRP and ERIP:** Participation in CRP or ERIP continues while on LTD (subject to plan documents and law). If an individual on LTD was a participant in CRP or ERIP at the time of disability and receipt of benefits under the LTD plan, the University will fund the individual’s required contribution as well as continue to fund the University’s contribution.
   - **Education Assistance Benefits:** An individual on LTD remains eligible for education benefits to which he/she was eligible at the onset of disability as provided in the Educational Assistance Plan.
Flexible Spending Accounts and the Supplemental Retirement Program: An individual on LTD cannot make pre-tax contributions to a Flexible Spending Account (FSA) or to a Supplemental Retirement Program (SRP).

4. An individual on LTD does not pay a premium for LTD coverage once he/she is receiving benefits under the LTD plan.

5. If an individual on LTD becomes employed outside the University (including self-employment), the individual must immediately notify the University. The individual’s employment with the University for benefits purposes will end, and the individual will no longer be eligible to continue any University benefit, except as required by applicable law.

6. If an individual is released to return to work after a period of disability and collecting LTD he/she may apply for vacant positions. (See Policy U202 Talent Acquisition).

7. The University does not hold the position of an individual while on LTD, subject to applicable law, and the individual is not entitled to reinstatement to his/her position when no longer eligible for LTD.

8. During any period of LTD the individual remains employed for the sole purpose of benefit continuation as provided for in this policy and related plan documents, which are subject to change from time to time.

Roles and Responsibilities

Employee: The Employee is responsible for applying for LTD as appropriate and communicating with Leave Administration, including providing additional information, as necessary.

Leave Administration: Leave Administration is responsible for communicating with the LTD provider, the Employee, and the HRP and other representative as appropriate.

SICK LEAVE

Purpose
To provide for the administration of sick leave accrual and usage.

Who is Governed by this Policy:
This policy applies to all benefits eligible staff employees, non-benefits eligible staff employees, seasonal employees, temporary employees, and student employees.

Policy
Employees begin accruing sick leave at their most recent date of hire. Sick leave may be used in accordance with the procedures set forth below for absences due to the employee’s own illness or injury, or for receiving medical care, treatment, diagnosis, or preventive medical care
and for absences due to a family member’s illness or injury, or to care for a Family Member receiving medical care, treatment, diagnosis or preventive medical care. Employees may also use sick leave if they or a family member are a victim of domestic violence or a sex offense, or if they need to care for a child whose school or place of care has been closed by order of a public official due to a public health emergency.

Guidelines

Benefits Eligible Staff Employee Sick Leave Information

1. A benefits eligible staff employee accrues two (2) standard workweeks of sick leave per year.

   Example 1: A benefits eligible staff employee with a standard workweek of 37.5 hours per week accrues 75 hours of sick leave per year; a benefits eligible staff employee with a standard workweek of 40 hours per week accrues 80 hours of sick leave per year; and a benefits eligible staff employee with a standard workweek of 20 hours per week accrues 40 hours of sick leave per year.

2. A benefits eligible staff employee is credited with earned sick leave in the amount of one-twelfth (1/12) of his/her annual accrual after each completed month of service to the University.

3. A benefits eligible staff employee scheduled to work irregular hours each week will accrue at a rate based on the average weekly hours scheduled per month, with a minimum accrual rate of 40 hours per year.

4. A benefits eligible staff employee will not accrue sick leave during any month in which he/she is in an out-of-pay status (i.e., on leave of absence), on sick leave, on Workers’ Compensation, or on Short-Term/Long-Term Disability, for more than one-half (1/2) his/her standard working hours. (See Policy U513 Short-Term Disability and U514 Long-Term Disability).

   A benefits eligible staff employee who transfers to a non-benefits eligible, temporary, or student employee position may retain a maximum of 60 hours of their accrued, unused sick leave. Upon transfer the employee will accrue sick leave as described under Section B of this Policy.

Non-Benefits Eligible Staff, Temporary Staff, Seasonal Staff, and Student Employee Sick Leave Information

1. Any employee not eligible for benefits (including non-benefits eligible staff, temporary staff, seasonal staff, and student employees) accrues sick leave at a rate of one hour of sick leave for every 40 hours worked. For exempt employees in these categories, the accrual is calculated using their total scheduled weekly hours for active jobs as indicated in the human resources system.

2. Sick leave accruals will be available for employees covered by this Section B after the close of the payroll where the accrual occurred.
3. For employees covered by this Section B, the sick leave year is each January through December.
   - Sick leave accrual is capped at 40 hours per year
   - A maximum of 60 hours of accrued sick leave may be carried over from year to year
   - A maximum of 60 hours of accrued sick leave may be used within one year

4. An employee covered by this Section B who transfers to a benefits eligible position will retain their accrued, unused sick leave, and upon transfer the employee will begin accruing sick leave as described under Section A of this Policy.

**Administration of Sick Leave for All Employees**

1. Each unit is responsible for ensuring the accuracy of an employee’s record of accrued and used sick leave. Each unit should establish and communicate rules for requesting sick leave and call-in procedures.

2. Employees must record sick leave that is taken on the appropriate time off calendar.

3. An employee who has been granted time off under the Family and Medical Leave Act (FMLA) or Victims’ Economic Security and Safety Act (VESSA) may use sick leave to be paid for what would otherwise be unpaid time under the FMLA or VESSA. (See Policy U522 Family and Medical Leave of Absence and Policy U526 Victims’ Economic Security and Safety Leave).

4. For an exempt employee, absences of less than one full day are neither to be charged to accumulated sick leave time, nor to be deducted from pay. Exempt employees who use sick leave to be paid while granted time off under FMLA may have sick leave accruals deducted on an hour-for-hour basis.

5. Sick leave use for an exempt employee is based on the employee’s average scheduled hours per day. An exempt employee who takes a full-day absence will have accruals deducted at a rate equal to the employee’s average scheduled hours per day for each day of sick leave taken.
   - Example 1: An exempt employee who works a five (5) day, 37.5 hour standard workweek will have 7:30 hours deducted from his/her sick leave accrual balance for each day of sick leave taken. To calculate: 37.5 hours per week ÷ 5 days per week = 7:30 hours per sick day.
   - Example 2: An exempt staff employee who works a four-day, 20-hour standard workweek will have 5.0 hours deducted from his/her sick leave accrual balance for each day of sick leave taken. To calculate: 20 hours per week ÷ 4 days per week = 5.0 hours per sick day.

6. A non-exempt employee will have accruals deducted on an hour-for-hour basis. Accrued sick leave must be used in increments of at least 30 minutes.

7. When an employee is absent for a reason covered by this Policy, and sick leave accrual is exhausted, the employee is in out-of-pay status unless he/she is benefits eligible, elects to use accrued vacation and/or personal holiday time, and has received supervisory approval to do so. (See Policy U509 Vacation and U511 Personal Holidays).
8. An employee who is absent and who is compensated under the Illinois Workers’ Compensation Act or the Illinois Occupational Diseases Act will not have sick leave accruals deducted. In these cases, an employee can use sick leave accruals to supplement the difference between Workers’ Compensation payments and the employee’s regular salary.

9. Pay for sick leave will be at the employee’s regular base rate of pay at the time the sick leave is used. Bonuses and other variable compensation are not included in calculating sick leave pay. Sick leave hours are not considered "hours worked" in calculating overtime. (See Policy U222 Compensable Time, Record-Keeping, and Tracking Absences).

10. An employee’s accrued sick leave balance expires upon termination of employment, unless the employee is rehired within thirty (30) days. Accrued, unused sick leave is not paid out upon termination of employment.

11. When the need to use sick leave is reasonably foreseeable, such as a scheduled appointment with a healthcare provider, the employee should notify the unit seven days in advance when possible. When the need to use sick leave is not reasonably foreseeable, the employee should notify the unit as soon as is practicable.

12. When using sick leave, an employee must follow unit sick leave request and call-in procedures. The notification required may be via phone, email or text message.

13. Employee attendance records may be reviewed to determine if there has been an excessive use of sick leave. Excessive use of sick leave may result in corrective action. (See Policy U703 Progressive Corrective Action).

14. An employee who is absent for more than three (3) consecutive work days may be required to provide certification that the use of sick leave was permissible under this Policy. Failure to provide such certification if requested may result in corrective action. An absence of this length may also implicate time off under the Family and Medical Leave Act. (See Policy U703 Progressive Corrective Action and Policy U522 Family and Medical Leave of Absence).

**Definitions**

*Family Member:* An employee’s child, legal guardian or ward, spouse under the laws of any state, domestic partner, parent, spouse or domestic partner’s parent, sibling, grandparent, grandchild, or any other individual related by blood or whose close association with the employee is the equivalent of a family relationship. A child includes not only a biological relationship, but also a relationship resulting from an adoption, step-relationship, and/or foster care relationship, or a child to whom the employee stands in loco parentis. A parent includes a biological, foster, stepparent or adoptive parent or legal guardian of an employee, or a person who stood in loco parentis when the employee was a minor child. This definition applies only to this Sick Leave Policy 512, and not to other University policies or benefits referencing Family Members or similar terminology.

**Roles and Responsibilities**

*Employee:* The Employee is responsible for following the Supervisor’s time off request procedures and recording sick leave use.
**Supervisor**: The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of sick leave is appropriate, monitoring for pattern absences, and approving sick leave use in the time off calendar.

**HR Partner**: The HR Partner is responsible for ensuring employees are categorized accurately to ensure sick leave is accrued and used correctly.

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**UNIVERSITY HOLIDAYS**

**Purpose**
To provide University-recognized paid holidays for benefits-eligible staff employees.

**Policy**
The University recognizes eight (8) days during the year as paid holidays for its regular, benefits-eligible staff employees. Those holidays are New Year's Day, Martin Luther King, Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the day after Thanksgiving, and Christmas Day.

**Guidelines**
1. A staff employee who is scheduled to work twenty (20) or more hours per week is eligible for University holiday pay.

2. University holiday pay is the regular, straight-time rate for the number of hours in an average workday. If a staff employee's schedule is irregular or part-time, holiday pay will be equal to one-fifth (1/5) the number of regularly scheduled hours in the workweek.

3. A staff employee must be in pay status on the day before and the day following the holiday to be eligible for University holiday pay.

4. When a regular holiday falls on Saturday, the preceding Friday will be considered the University holiday. When the regular holiday falls on Sunday, the following Monday will be considered the University holiday.

5. A staff employee is not allowed holiday pay while in an out-of-pay status, such as leave of absence, layoff or while receiving Short-Term disability payments.

6. A benefits-eligible, biweekly staff employee, who may be required to work on a University holiday, will be paid at one and one-half (1.5) times his/her regular rate. A benefits-eligible monthly staff employee who is required to work on a University holiday will be paid his/her regular salary and is entitled to another day off.

7. A biweekly staff employee, who is required to work on a University holiday that falls on his/her regularly scheduled day off, will be paid at twice his/her regular rate and will also receive another day off with pay, either thirty (30) days before or after the holiday.
8. When a holiday falls on a staff employee’s day off in conjunction with a flexible work option, the employee is to be given another day off with pay either thirty (30) days before or after the holiday.

9. Holiday pay is not to be considered hours worked in the computation of overtime.

10. A staff employee covered by a negotiated agreement will receive paid time-off for holidays in accordance with that agreement.

**VACATION**

**Purpose**
To provide eligible staff employees with paid vacation time and to establish guidelines for vacation time accrual and use.

**Who is Governed by this Policy**
This policy applies to all benefits eligible staff employees.

**Policy**
Benefits-eligible staff employees begin accruing vacation time at their most recent date of benefits eligibility. It is intended that they take the annual vacation to which they are entitled each year.

Each unit should establish and communicate to employees the guidelines for requesting vacation time. Employees should request vacation leave in advance, following unit guidelines for requesting vacation time. All vacation leave is subject to supervisory approval. Employees must record vacation time that is taken on the appropriate time off calendar.

**Guidelines**

**Accruing Vacation**

1. Employees accrue three (3) standard workweeks of vacation per year for the first eight (8) years of continuous service.

2. Upon completion of eight (8) years of continuous service, an additional standard workweek of vacation will be added to the employee's vacation balance and vacation is accrued, thereafter, at the rate of four (4) standard workweeks per year through the twentieth (20th) year of continuous service.

3. Upon completion of twenty (20) years of continuous service, an additional standard workweek of vacation will be added to the employee’s vacation balance and vacation is accrued, thereafter, at the rate of five (5) standard workweeks per year.
4. Employees are credited with accrued vacation time after each completed month of service to the University.

5. Vacation is accrued monthly at the rate of one-twelfth (1/12) the employee's annual accrual. Monthly vacation accruals for an eligible full-time and part-time staff employee are calculated by multiplying the number of the employee's standard workweek hours by the number of annual accrued standard workweeks of vacation and then dividing by twelve (12).

   Example 1: An employee with a standard workweek of 37.5 hours per week accrues three (3) standard workweeks of vacation per year: 37.5 hours per week x 3 weeks per year ÷ 12 months per year = 9:23 hours per month.

The most common vacation accruals for employees are as follows:

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Standard Workweek (Hours per Week)</th>
<th>Monthly Accrual (Hours/ Minutes)</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
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<tr>
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<td>30</td>
<td>10:00</td>
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<td>After 8</td>
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<td>12:30</td>
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<tr>
<td>After 8</td>
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<tr>
<td>After 20</td>
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<td>12:30</td>
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<tr>
<td>After 20</td>
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<td>40</td>
<td>16:40</td>
</tr>
</tbody>
</table>

6. An employee scheduled to work irregular hours each week will accrue at a rate based on the average weekly hours scheduled per month.

7. An employee cannot accrue more than one and one-half (1.5) times his/her annual vacation accrual.
   Example 1: An employee with a standard workweek of 37.5 hours accrues three (3) standard workweeks of vacation per year; he/she cannot maintain an accrual balance of more than 168.5 hours of vacation, the equivalent of four and one-half (4.5) standard workweeks.
The following table indicates the maximum vacation accrual balances for employees:

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Standard Workweek (Hours per Week)</th>
<th>Maximum Accrual (Hours/ Minutes)</th>
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<td>1-8</td>
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<tr>
<td>After 8</td>
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<tr>
<td>After 20</td>
<td>40</td>
<td>300:00</td>
</tr>
</tbody>
</table>

8. An employee will not accrue vacation during any month for which he/she is in an out-of-pay status (i.e., on leave of absence including FMLA), on sick leave, on Workers' Compensation or on Short-Term/Long-Term disability for more than one-half (1/2) the standard working hours for that month. (See U512 Sick Leave, U513 Short-Term Disability, U514 Long-Term Disability, U522 FMLA).

9. An employee who is hired or terminated but works at least one-half (1/2) the standard working hours during their first or last month of service will accrue vacation time for that month. An employee who is newly hired or terminated but works less than one-half (1/2) the standard working hours during their first or last month of service will not accrue vacation time for that month.

**Utilizing Accrued Vacation**

1. An employee may take no more vacation at any one time than is earned in one year, even if the number of vacation hours accrued exceeds this amount.

2. An exempt employee, absences of less than one full day are neither to be charged to accumulated vacation time nor deducted from pay. Vacation usage for an exempt employee is based on the employee's average scheduled hours per day.
Example 1: An exempt employee who works a five-day, 37.5-hour standard workweek will have 7.5 hours deducted from his/her vacation accrual balance for each day of vacation taken. To calculate: 37.5 hours per week ÷ 5 days per week = 7.5 hours per vacation day.

Example 2: An exempt employee who works a four-day, 20-hour standard workweek will have 5.0 hours deducted from his/her vacation accrual balance for each day of vacation taken. To calculate: 20 hours per week ÷ 4 days per week = 5.0 hours per vacation day.

3. A non-exempt employee will have accruals deducted on an hour-for-hour basis in increments of at least 30 minutes.

4. If an authorized University holiday falls within an employee’s vacation period, and the employee is eligible for paid holiday allowance for that particular day, it shall be counted as a holiday rather than a vacation day.

5. It is intended that each employee take the annual vacation to which they are entitled each year. An employee may be reimbursed in lieu of vacation time if the unit requests the employee to forego all of any part of their vacation and the employee has requested vacation time according to unit rules and procedures. The employee’s vacation accrual balances must be reduced by the amount of vacation accruals paid out. The payment request must be submitted during the pay period the vacation was cancelled.

6. At the employee’s request, and upon the exhaustion of all sick leave, absence due to non-work-related illness or injury may be taken as vacation time. (See Policy U512 Sick Leave).

7. Units may grant paid or unpaid time off as part of a newly hired employee’s job offer. This time off can only be for a one-time arrangement within the first year of employment (e.g. if the employee has predetermined travel plans prior to accepting the position), it cannot be made into an ongoing arrangement, and it may be recorded as an excused absence in lieu of vacation time. Otherwise, when an employee is absent due to personal reasons and vacation accruals are exhausted, the employee is in out-of-pay status unless they elect to use accrued personal holiday time and have received supervisory approval to do so. (See Policy 508 Personal Leave of Absence).

8. Paid vacation must not be used as compensatory time off in lieu of overtime pay. (See Policy U222 Compensable Time, Record-Keeping, and Tracking Absences).

9. Pay for vacation time shall be at the eligible employee’s regular base rate of pay when vacation time is used. Bonuses and other variable compensation are not included in calculating vacation pay. Vacation hours are not considered hours worked in calculating overtime.

10. When an employee transfers between University departments their vacation accrual dollars must be transferred using Comptroller Form 60, Journal Voucher. The form should be
forwarded to the Payroll Department for processing. (For transfers from the University of Chicago Medical Center, see Policy U209 Staff Employee Hires to the University of Chicago from the University of Chicago Hospitals).

11. When an employee has a reduction of work hours, the vacation accrual rate and corresponding balance will be reduced to align with the new scheduled weekly hours. Any vacation time that exceeds the new balance, plus two full months’ worth of accruals (based on the new accrual rate), will be paid out to the employee upon reduction of hours.

12. Upon termination of employee, an employee is to be paid for any accrued, unused vacation.

R**oles and Responsibilities**

**Employee:** The Employee is responsible for following the Supervisor’s time off request procedures.

**Supervisor:** The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate, and approving time off use in the time off calendar.

**VIS**T**IC**MS’ ECONOMIC SECURITY AND SAFETY LEAVE (VESSA)

**Purpose**
To provide guidelines when employees need time off due to domestic or sexual violence.

**Who is Governed by this Policy**
This policy applies to all employees of the University.

**Policy**
The University will grant employees who are victims of domestic or sexual violence or who have a family or household member who is a victim of domestic or sexual violence unpaid leave under the Victims’ Economic Security and Safety Act (VESSA) for up to 12 weeks during any rolling 12-month period to address issues arising from domestic or sexual violence. The University will protect the confidentiality of information provided as part of a VESSA leave.

**Guidelines**
1. All employees of the University are eligible to take VESSA leave.

2. Employees may request VESSA leave for absences for the following reasons:
   - Medical treatment
   - Victim services
   - Counseling
   - Safety planning including temporary or permanent relocation or other actions to increase the safety of the victim
   - Court proceedings
3. To request a leave, an employee must submit a completed VESSA Leave Request Form and related documents to the employee’s supervisor, the department’s Human Resource Partner (HRP), or the Benefits Analyst - HR Leave Administration (leaveadministration@uchicago.edu). Employees should submit the request at least 48 hours prior to the need for leave. If an employee cannot provide advance notice, the employee must submit the request as soon as feasible under the circumstances.

4. In addition to the completed request form, an employee must submit the following documentation to HR Leave Administration:
   - Documentation from a victim services organization, attorney, health care provider, or other professional from whom assistance has been sought
   - A police record
   - Other corroborating written evidence of the need for leave

5. If a department/unit learns that an employee's absence may be for a VESSA-qualifying reason, the employee's supervisor or HRP should contact Leave Administration immediately. The leave tentatively may be designated as VESSA leave pending the employee's completion of the application process and notification from Leave Administration.

6. VESSA leave may be taken in a block of time, on an intermittent basis, or in the form of a reduced work schedule.

7. Employees on VESSA leave are expected to be reasonably responsive to and communicate with their supervisor and department during the leave. Employees may be required to provide certification for absences. Employees also must follow attendance rules and call-in procedures for reporting an absence or the absence may be deemed unexcused or unscheduled.

8. An employee may use his/her accrued sick leave during VESSA leave. (See Policy U512 Sick Leave.) Accrued vacation and personal holidays also may be used during any VESSA leave. (See Policy U509 Vacation and U511 Personal Holidays.) An employee may be eligible for Short-Term Disability payments for VESSA leave for his/her own illness. (See Policy U513 Short-Term Disability and U512 Sick Leave for guidelines regarding the use of accrued sick leave and STD as part of VESSA and/or FMLA leave.)

9. If the VESSA leave also qualifies for FMLA leave, the leaves will run concurrently.

10. During VESSA leave, the University will maintain benefits on the same conditions as if the employee is working, subject to applicable plan documents and law. During VESSA leave, an employee must continue to pay the employee’s portion of insurance benefit premiums if the employee wishes coverage to continue during the leave.
11. An employee returning from a VESSA leave of up to twelve (12) weeks will be reinstated to his/her former or an equivalent position with the same pay, benefits, and conditions of employment unless the employee is unable to perform the essential functions of his/her former job with or without reasonable accommodation.

12. If an employee does not return to work when the VESSA leave expires and has not been approved for an additional leave of absence or other reasonable accommodation as required by law, employment will be terminated effective on the first scheduled workday that is missed following the expiration of the VESSA leave.

13. If this policy conflicts with applicable law, the law governs.

Definitions
*Family or Household Member:* A family or household member for employees with a family or household member who is a victim of domestic or sexual violence, means a spouse, parent, son, daughter, other person related by blood or by present or prior marriage, other person who shares a relationship through a son or daughter, and persons jointly residing in the same household. This definition applies only to this VESSA Policy 526, and not to other University policies or benefits referencing family members or similar terminology.

Roles and Responsibilities
*Employee:* The Employee is responsible for submitting a completed VESSA Leave Request Form and any additional necessary documentation to their supervisor, HR Partner, or Leave Administration.

*Supervisor:* The Supervisor is responsible for setting time off request procedures, ensuring they are followed, staying in contact with the employee on leave as appropriate, and approving the time off calendar.

*HR Partner:* The HR Partner is responsible to act as a liaison to ensure employees and Leave Administration have all necessary information.

**VOTING**

**Purpose**
To permit staff employees to exercise their right and responsibility to vote in national, state, or municipal elections.

**Policy**
Staff employees are expected to vote during their non-working hours. In those situations when a staff employee is unable to vote during non-working hours and also works the regular scheduled hours, up to two (2) hours off with pay may be allowed to vote.
Guidelines
1. Permission for paid time off to vote should be requested by a staff employee early enough to permit adjustment in the work schedule, in no case later than two (2) days prior to election day.

2. A staff employee may be required to show evidence of eligibility to vote (a current voter registration card) when requesting time off for this purpose.

3. Time off without pay may be granted to a staff employee wishing to serve as judge, clerk, or official watcher, provided that the request is made at least two (2) weeks in advance and is verifiable.
MISCELLANEOUS

AMERICANS WITH DISABILITIES ACT (ADA)

The University of Chicago complies with all federal and state laws concerning the employment of persons with disabilities and acts in accordance with such regulations and guidance including the Americans with Disabilities Act (ADA) as amended. Employees with any questions or requests related to these laws and guidelines, including the ADA as amended, should contact their unit/division Human Resources point of contact, the University’s Director of Employee Relations, or the Affirmative Action Officer.

COMPENSABLE TIME, RECORD-KEEPING, AND TRACKING ABSENCES

Purpose
To ensure University compliance with laws governing compensable time and overtime, including the Fair Labor Standards Act (FLSA), Illinois Minimum Wage Law, and Illinois One Day Rest in Seven Act.

Who is Governed by this Policy
This policy applies to all employees.

Policy
1. The University’s pay practices and procedures are governed by the FLSA and its regulations, relevant state and local laws, and University policy.

2. The FLSA regulations establish criteria for exemption from the FLSA’s overtime payment requirements. The University must follow these regulations in determining whether a position is exempt or non-exempt from the FLSA’s overtime requirement.

3. The FLSA Exemption Review Protocol describes the process for reviewing and determining the FLSA exemption status of positions at the University of Chicago.

Overtime
1. Non-exempt employees are subject to the overtime provisions of the FLSA and must be compensated for all hours worked, either at a straight time or overtime rate as defined below. By contrast, exempt employees are not eligible for overtime payment.

2. As governed by the FLSA, a non-exempt employee who works more than 40 hours in a workweek must be paid an overtime rate of 1.5 times their regular hourly rate of pay for all time actually worked in excess of 40 hours in the workweek. If a non-exempt employee works more than the regularly scheduled hours in a workweek, but less than forty 40 hours per week, the employee is paid at the hourly straight-time rate.
3. When calculating overtime at 1.5 times the regular rate of pay for time worked in excess of 40 hours in a given workweek, only actual time worked is used. Time charged to vacation, sick, personal holiday, University holiday or other paid/unpaid time off must not be included in this calculation.

4. A non-exempt employee should not work in excess of their regularly scheduled work hours without prior supervisor approval. When overtime hours are required, the University will communicate to the employee as early as possible. Additionally, the University will seek to equalize overtime opportunities among employees performing similar work within a unit, as appropriate.

5. Where an employee, in a single workweek, works at two or more different jobs at the University for which different straight-time rates have been established, the rate to be used for paying the employee for any overtime worked is the weighted average of both rates (i.e., the earnings from all such rates are summed together and the total is divided by the hours worked in all jobs). If there are two or more units involved, the unit where the overtime work occurred will pay for the overtime hours.

6. The FLSA does not permit private institutions to give compensatory time off in lieu of overtime pay, therefore employee overtime may only be compensated with pay and may not be compensated with additional time off.

**Deductions from Pay**

1. Deductions from an exempt employee’s pay may only be taken in full-day increments. The University may make deductions from an exempt employee’s pay for full day absences for personal reasons or sickness if the employee’s vacation, personal holiday, and/or sick leave accruals have been exhausted.

2. Deductions from an exempt employee’s pay are not permitted for disciplinary reasons (i.e., as a form of corrective action), for performance deficiencies, or for excused absences caused by jury duty, subpoenaed attendance as a witness in court, or temporary military leave in any week in which an exempt staff employee performs any work.

**Rest/Meal Periods**

1. A non-exempt employee who works 7.5 continuous hours or more must be provided with a 20-minute meal period within the first five (5) hours of work. Departments may choose to count meal periods as compensable time but an employee may not skip a meal period to offset late arrival or early departure from work. If an employee receives a 30 minute to 1-hour lunch period within the first 5 hours of work, this satisfies the meal period requirement.

2. The University generally provides an employee with a lunch period of 30 minutes to 1 hour. Under the FLSA, meal periods of 30 minutes or longer generally do not count as compensable time if the non-exempt employee is completely relieved from work. During an unpaid meal period, a non-exempt employee may not perform any work.
Training
1. If an employer requires a non-exempt employee to attend trainings, meetings, or lectures during the employee’s regular work hours, the time is compensable.

2. Training time is paid unless all of the following criteria are met:
   o Attendance is voluntary
   o The training is scheduled outside of the employee’s regular work hours
   o The training is not directly related to the employee’s job
   o The employee does not perform any productive work during such training

On-Call Time
1. A non-exempt employee who is required to remain on-call on University premises is working while on-call and must be compensated.

2. An employee who is required to remain on-call at home, or who is allowed to leave a message where they can be reached, is not working (in most cases) while on-call and may not need to be compensated. Additional constraints on the employee’s freedom could make this time compensable.

Travel Time
1. To determine whether time spent in travel is compensable time for a non-exempt employee, the type of travel involved must be considered. For example:
   o A non-exempt employee who travels from home before the regular workday and returns to their home at the end of the workday is engaged in ordinary home to work travel (i.e., commuting), which is not work time and is not compensable.
   o If a non-exempt employee regularly works at a fixed location and commutes to a different location to work, the time spent traveling is work time and it is compensable. The University may deduct (not count) the time the non-exempt employee would normally spend commuting to the regular work site.
   o Time spent by a non-exempt employee in travel as part of their principal activity, such as travel from jobsite to jobsite during the workday, is work time and is compensable.
   o Travel that keeps a non-exempt employee away from home overnight qualifies as work time if it takes place during the non-exempt employee’s regularly scheduled workday. This travel qualifies as work time even if it occurs during the employee’s corresponding working hours on nonworking days. Time spent traveling outside of the employee’s regular working hours is not considered work time and is not compensable.
   o Regular meal period times are not considered compensable time while traveling.

2. An exempt staff employee is not subject to the travel time provisions of the FLSA. Since an exempt staff employee is not paid per hour, the employee does not receive additional pay for time spent traveling.
Record-Keeping/Tracking Absences
1. Each unit is required to maintain a record of each employee's paid and unpaid absences.

2. An exempt staff employee must record full-day absences and the reason for each absence (i.e., vacation, personal holiday, sick leave, bereavement leave, jury duty) for every monthly pay period. This monthly report must be completed even if no absences occurred that month. (See Policy U519 Monthly Absence Reporting).

3. A non-exempt staff employee must record time worked according to unit procedures. A non-exempt staff employee tracks actual hours worked on the appropriate timesheet for every two-week pay period. Exceptions to normal scheduled hours must be noted. Absences must be reported on the appropriate time off calendar.

Benefits Eligibility & Dependent Coverage

Depending on your position and job classification, you may be eligible for a variety of benefits offered to employees of the University of Chicago. Details on benefits eligibility and the benefits offered such as medical and other insurance, Staff and Faculty Assistance Program, flexible spending accounts, educational assistance, retirement, and many other benefits are available on the Human Resources website.

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<thead>
<tr>
<th>Hours Per Week</th>
<th>Status</th>
<th>Duration</th>
<th>Benefits Eligibility</th>
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<tbody>
<tr>
<td>35 or more</td>
<td>Full-Time</td>
<td>Regular</td>
<td>Yes</td>
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<td></td>
<td></td>
<td>Temporary</td>
<td>No</td>
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<tr>
<td>Less than 35, but greater than 20</td>
<td>Part-Time</td>
<td>Regular</td>
<td>Yes</td>
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<td></td>
<td>Temporary</td>
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Dependents of staff employees may be eligible for medical and dental benefits, educational assistance, and other University benefits and privileges. Staff employees must inform HR Benefits within thirty-one days of any change in dependent status that may affect their eligibility. Staff employees must submit appropriate documentation proving dependent eligibility to HR Benefits. For the purpose of determining eligibility for University benefits, a “dependent” typically is defined as follows:

- Spouse (if not legally separated)
- Registered same-gender domestic partner
- Children to age 26 (natural children, stepchildren, legally adopted children, children for whom the staff employee is the legal guardian, children placed with the staff person for adoption, or children of the staff employee’s registered domestic partner who live with and depend on the staff employee for support in a regular parent-child relationship)
Unmarried children for whom the staff employee is legally responsible to provide health coverage under the terms of a Qualified Medical Child Support Order (QMCSO)

Unmarried child over 26 if the child depends on a staff employee for primary financial support and maintenance due to a physical or mental disability, is incapable of self-support, and was disabled before reaching age 19

Please refer to the Human Resources website and applicable plan documents for information regarding dependent definitions and eligibility for University benefits and privileges.

**EMPLOYEE WORK SCHEDULES**

**Purpose**

To define the schedules of staff employees.

**Policy**

The University’s standard schedule begins on Sunday at 12:00:00 a.m. and concludes on Saturday at 11:59:59 p.m. Units have the flexibility to use different schedules and to offer flexible work arrangements.

**Guidelines**

1. The University's standard work schedule for base pay purposes begins on Sunday at 12:00:00 a.m. and concludes on Saturday at 11:59:59 p.m.

2. The normal business hours of the University are 8:30 a.m. - 5:00 p.m., Monday through Friday. Units have the flexibility to set different business hours to meet their unit needs.

3. Most employees work a weekly schedule of 37.5 hours per week which consists of 5, 7.5-hour days, Monday through Friday, including one unpaid hour for lunch.

4. Unit leaders will determine work schedules, communicate expectations, and notify employees of changes.

5. Units have the flexibility to offer flexible working arrangements. Please refer to Policy 307 Flexible Work Arrangement for additional details.

6. Circumstances may arise in which a non-exempt staff employee is required to work overtime with little or no advance notice.

7. Both employment status and benefit eligibility is determined by the number of hours worked, the regularity of the work schedule, and the duration of the position. Please refer to Employment Policy 203 for additional details.
**EMPLOYEE ACCESS TO PERSONNEL RECORDS**

**Purpose**
This policy provides guidance regarding employee personnel record documentation and establishes how often current and former employees, as well as their representatives, can request their personnel records. This policy also establishes how to properly request personnel records, defines documentation to which employees have access, and addresses corrections to personnel records.

Generally, employee personnel records are University documents that capture an employee's qualifications for employment, promotion, transfer, compensation, discharge or other disciplinary action.

**Who is Governed by this Policy**
This policy applies to all staff, temporary staff, and seasonal staff employees.

Employees represented by a union may be governed by the appropriate bargaining unit agreement.

**Policy**
1. There is one University employee personnel record housed within the University human resources system. Employee personnel records should not be stored in the department or unit.

2. HR Partners are responsible for uploading relevant documents to the human resources system in a timely manner in order to ensure completeness of records.

3. Personnel records that will be made available for review by current or former employees contain documents which have been used or which are intended for use in determining the employee's qualifications for employment, promotion, transfer, additional compensation, discharge or other disciplinary action.

4. Certain documents are not subject to employee access. These may include: documents which contain confidential information about other people; documents which are being developed or prepared for use in civil, criminal or grievance procedures; documents relating to the investigation of a possible criminal offense; and medical and hospital records.

5. Current or former employees or their representatives may request their personnel records twice per calendar year at reasonable intervals.

6. Former University of Chicago employees have access to their personnel records for one year after termination of employment, according to Illinois state law.

7. Legal representatives of the estate have the same access rights as the deceased employee.
8. An employee who is involved in a current grievance can designate, in writing, a representative to request the employee's records which may have no bearing on the resolution of the grievance.

9. To correct or remove information from the personnel record, the employee or the employee’s unit must consult with the Center of Expertise - Employee and Labor Relations. An employee may attach an explanatory statement to any disputed document in their personnel record.

Definitions

Center of Expertise- Employee and Labor Relations: Employee and Labor Relations partners with department/division/unit HR professionals and Supervisors to provide guidance in the areas of policy, contract administration, performance management, leaves of absence, employment law compliance and various other employment matters.

HR Partner: Department/division/unit personnel who serve as the representatives for the department in all human resources issues and initiate key HR processes in campus HR systems on behalf of their department/division/unit.

Local Unit: Campus department/division/unit.

Shared Services Office: The centralized body that processes transactions, reviews and verifies documentation, enforces policies and regulations, and ensures consistency and accuracy of processes.

Roles and Responsibilities

Center of Expertise- Employee and Labor Relations: Center of Expertise – Employee and Labor Relations is responsible for reviewing all personnel records. The Center of Expertise is also responsible for reviewing any requests for corrections.

Employee: Employees are responsible for submitting personnel record requests. Employees are also responsible for providing appropriate supporting documentation when requesting corrections to a personnel record.

HR Partner: The HR Partner is responsible for following policies and procedures relating to personnel records. HR Partners must upload relevant personnel records in a timely manner. HR Partners should enforce the policy of not storing documentation within the Local Unit. HR Partners are also eligible for requesting personnel records for internal candidates or individuals within their unit.

Local Unit: The Local Unit is responsible for following procedures and policies related to personnel records and document retention. Documentation should not be stored in paper form at the local unit.
Shared Services Office: The Shared Services Office is responsible for processing records requests. The Shared Services Office is also responsible for compiling documentation and conferring with the Local Unit in the case of incomplete or missing documentation.

FLEXIBLE WORK ARRANGEMENTS

Purpose
To provide guidance for managers in establishing flexible work arrangements for staff employees whose work can be performed outside of a University office and/or traditional work schedule for part or all of the workweek.

Policy
The University recognizes that there may be situations where flexible work arrangements are appropriate. Flexible work arrangements offer alternative approaches to getting work done through nontraditional work hours, locations, and/or job structures. They offer employees creative approaches for completing work, while promoting balance between work and personal commitments.

Typical flexible work options include flextime, flexplace, compressed work schedules, part-time, and job-sharing assignments. These arrangements must support unit goals and must be approved by unit leadership.

Guidelines
1. A flexible work arrangement is valuable tool for supporting an employee's efforts to balance work responsibilities and personal life commitments.

2. Employees on a flexible work arrangement remain obligated to comply with all University rules, policies, and procedures.

3. Typical flexible work arrangements include:
   - Flextime: The most requested, easiest to manage, and most affordable option, flextime offers flexibility in arrival, departure, and/or lunch times, typically with a designated core midday schedule during which employees are customarily at the work site.
   - Flexplace: Often referred to as telecommuting assignment, this arrangement allows for a portion of the job to be performed off-site, on a regular, recurring basis. The majority of work time is spent at the office and the off-site work typically is performed at home. It may be the most complicated flexible work option to arrange, since it involves special issues (i.e., workers' compensation considerations, and purchase and/or management of equipment and systems away from the workplace).
   - Compressed Work Schedule: traditional 37.5- to 40-hour workweek is condensed into fewer than 5 days of work. Common compressed work schedules for the traditional workweeks include: four 10-hour days for a 40-hour week; and three 10-hour days and one 7.5-hour day for a 37.5-hour workweek.
   - Part-time work: A regular arrangement for workweek of 34 hours or fewer. Part-time work is different from a temporary work assignment, which is where an employee is
expected to have a temporary, nonrecurring relationship to the workplace. Regular part-time employees who work 20 hours per week or more are eligible for benefits.

- Job sharing: Allows two staff employees to share the responsibilities of one full-time position. Each staff member shares a specific proportion of a full-time position. Creative and innovative schedules can be designed to meet the needs of the job sharers and the unit. The two employees are considered regular part-time employees.

4. Employees may submit written flexible work arrangement requests to both the manager and unit HR Partner for consideration. If accepted, the manager, unit HR Partner, and the employee will create a flexible work arrangement agreement.

- A flexible work arrangement agreement should provide details of the arrangement, including any change in job responsibilities (time commitments, availability) and/or condition of employment (i.e. compensation, benefits, work location, work schedule, and/or duration of the arrangement).
- Additionally, the agreement should include provisions to recognize how busy timeframes or special projects will be addressed (i.e. may need to return to original schedule during these times).
- If at any time a flexible work arrangement no longer serves the employee's purposes or the needs of the University, the arrangement may be discontinued.
- The agreement should include a provision for the modification or termination of the agreement should either the University or the employee need to change it. Two calendar weeks' notice of modification or termination will be given to the employee, unless such notice is impractical.
- In the case of a flexplace arrangement, the agreement should also include clear delineation of responsibility for telephone costs, supplies, computer set-up and maintenance, security of any University-owned equipment that would be used away from University premises (including responsibility for loss), and any additional applicable items.

5. A pilot should be conducted to evaluate a requested flexible work arrangement before a long-term commitment is made by either the University or the employee.

- The manager and employee should meet periodically (i.e. every two weeks) to discuss the arrangement and to make adjustments as needed.
- The pilot should be reviewed after a period of 3 - 6 months to make appropriate adjustments and to determine whether or not the flexible work arrangement should be continued.

6. A copy of the approved flexible work arrangement agreements should be sent to the unit HR Partner.

7. In allowing flexible work arrangements, the University will abide by all federal, state and local wage and hour laws.

8. An employee working in a flexible work arrangement remains an at-will employee, meaning he/she or the University can terminate employment at any time and for any reason, with or without advance notice. If, for any reason, the flexible work arrangement is terminated, and the employee decides not to return to his/her former traditional work schedule/arrangement and leaves the position, the employee will be considered to have resigned.
IDENTIFICATION CARD

The I.D. card remains the property of the University and must be returned to the University upon request or termination of employment. If you lose your I.D. card, notify the I.D. and Privileges Office immediately at 773-702-3344. You will be charged a fee to replace your lost card. Misuse of an I.D. card may result in deactivation and/or corrective action up to and including termination of employment. The University will deactivate your I.D. card upon termination of employment or other circumstances as deemed appropriate.

INFORMATION SYSTEMS

The University’s information technology systems and the information served by those systems are valuable and vital assets to the University. The Information Systems Security Policy includes all computer systems (hardware and software), communication systems (networks, telecommunications, video, and audio broadcast systems), and information (data, text images, etc.) in any form on any media.

The University's information technology systems and data that reside on them are University property and may only be used in compliance with applicable law and University and department policy. As a user of information resources, you are responsible for knowing about appropriate and ethical use of information in all environments you access, protecting the information you are using from corruption or unauthorized disclosure, working in such a manner as to consider the access rights of others, and following applicable guidelines concerning the use and nondisclosure of passwords and other means of access control.

The University has the right to monitor all of its information technology system and to access, monitor, and intercept any communications, information, and data created, received, stored, viewed, accessed, or transmitted via those systems. Staff employees should have no expectation of privacy in any communications and/or data created, stored, received, or transmitted on, to, or from the University’s information technology systems.

For more information, please review the University of Chicago Policy on Information Technology Use and Access, or find answers to commonly asked questions by reading the policy FAQs.

INVENTIONS, DISCOVERIES, AND SOFTWARE

Purpose
To inform employees about the University’s rights to intellectual property created by employees as part of their jobs.
Policy
Any invention, discovery, product, or device-like software which results from activities carried out at the University or with substantial aid of its facilities or funds must be disclosed to the University, will become the property of the University, and will be assigned to the University or a University-designated organization.

For the University’s full policy regarding inventions, discoveries, and software, see Statute 18 of the University Statutes.

Guidelines:

1. If a researcher, staff employee, or student develops an invention in the course of his/her work, and/or with the aid of unit/University facilities and/or funds administered by it, there is an obligation to disclose the invention or discovery to the University.

2. Inventions should be disclosed at the earliest possible date in their development.

3. Disclosure should be made using the Invention Disclosure Form on the Polsky Center for Entrepreneurship and Innovation’s website.

4. For more information about the University’s policies and procedures related to inventions, see the Polsky Center for Entrepreneurship and Innovation website.

NURSING MOTHERS IN THE WORKPLACE

Purpose
To provide guidance regarding break time and locations for nursing mothers to express breast milk while in the workplace.

Policy
Supervisors, colleagues, and co-workers should be supportive, respectful, and sensitive to an employee’s choice to nurse. The University will provide suitable private locations and reasonable break time for employees to express breast milk. The University prohibits discrimination against and harassment of nursing employees who exercise their rights under this Policy.

Guidelines
1. An employee who plans to express milk during the workday should discuss her plans with her supervisor or the department/unit Human Resource Partner in advance to allow adequate time to plan and identify a suitable private location.

2. Reasonable break time will be provided for expressing milk. Employees may use their regular rest and meal break time for this purpose. Employees should discuss scheduling with their supervisors, and supervisors are encouraged to be flexible.
3. The supervisor or Human Resource Partner will identify a private room or other suitable location, other than a restroom, in close proximity to the employee’s work area for the employee to express milk. The supervisor or Human Resource Partner (HRP) should contact HR – Employee Relations if assistance is needed to identify a suitable private location.

4. Employees may report any concerns related to this policy to their supervisor, HRP, Human Resources (staff employee related), or the Office of the Provost (faculty or other academic appointee related).

MONTHLY ABSENCE REPORTING

Purpose
To establish procedures for the reporting of absences of exempt staff employees.

Who is Governed by this Policy
This policy applies to all exempt staff employees.

Policy
1. Units are required to maintain a record of exempt staff employees’ absences.

2. Absences for exempt staff employees should be reported on the appropriate time off calendar. The exempt staff employee will report full-day absences and the corresponding absence code for each absence as it occurs. If there were no absences, the employee should submit the report with no absences. Regardless of whether absences were submitted, the supervisor is required to review and approve the monthly report submitted for the employee at the end of each month.

3. Vacation, sick leave, and personal holiday accrual records for an exempt staff employee may be maintained in hourly increments. Absences of less than one full day, however, are neither to be charged to accumulated time, nor are they to be deducted from pay. Certain leaves may require hour-by-hour tracking for time-tracking purposes only, such as FMLA. (See Policy U522 FMLA).

4. Unpaid time off for an exempt employee should be entered into the employee’s monthly report in full day increments only, and will route automatically to Payroll.

5. The employee can access their leave balances through the time and attendance system, in accordance with the vacation, personal holidays, and sick leave policies. (See Policies U509 Vacation, U511 Personal Holidays, and U512 Sick Leave).
Roles and Responsibilities

_Employee:_ The Employee is responsible for following the Supervisor’s time off request procedures and for submitting their monthly absence information.

_Supervisor:_ The Supervisor is responsible for setting time off request procedures, ensuring they are followed, verifying the use of time off is appropriate, and approving the employee’s monthly absence information.

**PROBATIONARY PERIOD**

The probationary period is an initial period of employment during which the University carefully assesses new employee performance to determine whether the employee is able to adequately perform the role for which the employee was hired and thus should be retained as a “regular” employee. During this time, the University assesses the full spectrum of job performance, including but not limited to the employee’s ability to perform job duties, to learn a new work environment, the quality of work, attendance, and professionalism. Any probationary employee who is not meeting the requirements of the job may be released at any time during the probationary period.

The probationary period lasts six months for staff employees paid monthly and three months for staff employees paid biweekly, but may be extended upon the written approval of HR-Employee and Labor Relations.

The job performance of staff employees who apply and are promoted, demoted, or transferred into new positions will be closely reviewed (similar to a probationary period) during the first six months for staff employees paid monthly and three months for staff employees paid biweekly.

**PROGRESSIVE CORRECTIVE ACTION**

**Purpose**
To define the University’s policy on Progressive Corrective Action and to establish guidelines for the Corrective Action Process.

**Policy**
Corrective action is a process designed to identify and correct problems that affect an employee’s work performance and/or the overall performance of the department. The progressive corrective action process should be handled consistently within each unit and for each problem.

**Guidelines**
1. The Progressive Corrective Action Process refers to the following actions:
   - Counseling or verbal warning
   - Written reprimand and warning
   - Suspension
   - Suspension pending investigation and final determination
2. Depending on the situation, any step may be repeated, omitted, or taken out of sequence; however, the University reserves the right to effect immediate termination should the situation be warranted. Each case is considered on an individual basis by the department and HR.

3. Typically, a preliminary meeting is held with the employee to allow the employee an opportunity to understand the nature of the concern and to explain his/her position on the matter. If necessary, the corrective action documentation would then be put together which would summarize the issue, taking into account any additional information the employee may have provided during the preliminary meeting.

4. When issuing corrective action, there should be clear and direct communication between the employee and his/her immediate supervisor (or other University official with responsibility for the unit in which the employee works). This communication should include a meeting between the employee and the supervisor (usually after an investigative meeting described in Guideline 3 above is held between the employee and the supervisor). The supervisor should discuss the nature of the problem and how it affects the employee's overall performance and/or the overall performance of the department. During the meeting, the supervisor should make it clear to the employee that there are specific performances/behavioral expectations of the position, that he/she has failed to meet the outlined expectations, and a corrective action is being issued. It should also be clearly established that the employee must work on correcting the problem within a defined time period to avoid more serious progressive discipline.

5. Disciplinary action should be taken within a time frame that will allow for a positive change in the employee’s behavior or work performance. All disciplinary actions should be documented in writing, preferably on the Notice of Corrective Action form, which includes instructions for the approval and routing process.

6. Except for serious offenses, the progressive corrective action ordinarily should not be advanced if six (6) months or more have elapsed since the previous corrective action. The employee’s prior disciplinary record is never expunged from his or her personnel file. However, when the progressive correction action occurs six (6) months or more after the previous discipline, the last disciplinary step taken should be repeated.

7. In the case of serious misconduct, an employee may be suspended and/or discharged on the first offense. Serious workplace misconduct includes, but is not limited to:
   - Theft (to include unauthorized removal and/or use of University property)
   - Sleeping on the job
   - Fighting
   - Behavior/language of a threatening, abusive or inappropriate nature
- Misuse, damage to or loss of University property
- Falsification, alteration or improper handling of University-related records
- Unsatisfactory customer service (mishandling of or unsatisfactory service to the public, students, patients, staff, or faculty) as defined by the department;
- Disclosure or misuse of confidential information, including government-mandated regulations that outline the treatment of confidential information (i.e., HIPAA, Medicare compliance, etc.)
- Unauthorized possession or concealment of weapons
- Possession, use, sale, manufacture, purchase or working under the influence of non-prescribed or illegal drugs, alcohol, or other intoxicants; refusal to submit to a required drug screen; and tampering with the drug testing process in any manner
- Insubordination (e.g., refusal to carry out a direct assignment)
- Misuse of the University's electronic information systems, including:
  i. Deleting or altering electronic information without authorization
  ii. Generating false, misleading or defamatory information
  iii. Disregarding copyright and other intellectual property rights
  iv. Unreasonable use of available information technology which is not relevant to the employee's assigned task or to core University purposes
  v. Other actions that conflict with ITS's Policy on Information Technology Use and Access

8. Supervisors initiating corrective action should consult with their own immediate supervisor and/or their divisional Human Resources representative prior to issuing discipline. HR should be contacted in order to give measured feedback, suggest alternative action(s), or approve the impending corrective measure.

9. In cases of suspension, suspension pending investigation/outcome or of termination, HR's approval is required prior to any action being taken against the employee. Disciplinary action that is issued may be reversed, amended or negated by HR, pending a review with the appropriate supervisor or departmental Human Resources representative.

## TERMINATION OF EMPLOYMENT

### Purpose
This policy provides rules governing the termination of University employees. This policy sets requirements for initiating and processing different types of terminations within the human resources system and establishes documentation requirements and roles and responsibilities for each termination situation.

### Who is Governed by this Policy
This policy applies to all staff, including temporary staff and seasonal staff employees.
At-Will Employment
Other than employees covered by Collective Bargaining Agreement, University staff employees have an “at will” relationship with the University. This means that employment is a matter of continuing agreement between the employee and the University. Either the employee or the University may decide to end the employment relationship for any reason not prohibited by law, at any time.

Policy
Terminations must be handled pursuant to the rules that follow and procedures contained in Appendix A. Layoffs must also comply with Policy 207—Layoff. Employees terminated for misconduct or who resign in lieu of termination will not be eligible for rehire with the University.

Resignations and Transfers
1. Employees who voluntarily resign from the University should give the University at least two (2) weeks' advance written notice, four (4) weeks’ notice being preferable.

2. The employee’s written resignation should include, at a minimum, the employee’s name and anticipated last day of employment.

3. The Supervisor or HR Partner is required to send a written acknowledgment to any employee who resigns. The HR Partner must upload the employee’s resignation letter to the human resources system when initiating the termination process.

4. For temporary or seasonal employees, advance written notice of resignation and notice is requested, but not required.

6. An employee who transfers from one position to another within the University is required to comply with the above rules or to coordinate an alternative arrangement agreed upon by both their current and prospective supervisors.

Return of University Property
1. On or before the last day of employment, a terminating employee is required to turn in to their HR Partner or Supervisor all University property, including identification card, keys, uniforms, tools, parking permits, library books, electronic equipment, and electronically stored data.

2. A terminating employee is required to make arrangements for clearing all of their University debts.

Exit Survey
4. Employees will be asked to complete an exit survey on or before their last day of employment. Employees will receive an email from the human resources system with a link to complete the exit survey.
5. A representative of the Shared Services office will invite voluntarily terminating employees to participate in an in-person exit interview prior to their last day.

3. Alternatively, an employee may choose to participate in an in-person exit interview with their Supervisor or HR Partner, in lieu of Shared Services’ Office staff.

**Payout of Vacation and Personal Holiday Time**

1. Upon termination of employment, a benefits-eligible employee shall be paid for all accrued but unused vacation and personal holidays as allowable under University policy.

2. Accrued sick leave is not paid upon termination.

3. Generally, a terminating employee will be paid vacation and personal holiday accruals in the next pay cycle after the termination is submitted in the human resources system.

**Definitions**

*At-Will Employment:* Employment that is a matter of continuing agreement between the employee and the University. Either the employee or the University may decide to end the employee’s employment for any reason not prohibited by law, at any time.

*Benefits Eligible Position:* A position that is scheduled to work an average of 20 hours or more per week.

*Center of Expertise—Employee and Labor Relations:* Employee and Labor Relations is responsible for (among other things) policy oversight and approving all involuntary terminations, including layoffs.

*HR Partner:* Department/division/unit personnel who serve as the representative for the department in all human resources issues and initiates key HR processes in human resources systems on behalf of their department/division/unit.

*Local Unit:* Campus department/division/unit.

*Shared Services Office:* The centralized university body that processes transactions, reviews and verifies documentation, enforces policies and regulations, and ensures consistency and accuracy of processes.

*Supervisor:* Unit personnel who oversees and regulates employees in their performance of assigned or delegated tasks, as well as enforces compliance with policy.

*Temporary Position:* A position that is expected to continue for less than twelve (12) months or 1,000 hours, whichever comes first.
Roles and Responsibilities

Center of Expertise and Employee and Labor Relations: ELR is responsible for advising HR Partners and Supervisors about, and approving in advance, all involuntary terminations, including layoffs.

Employee: Employees are responsible for providing written resignation with at least two weeks’ advance notice. Employees are responsible for returning University property (summarized above) on or before the date of termination. Employees are also responsible for updating or verifying any benefits or personal contact information prior to termination date, and completing any exit interviews or surveys. Additional information regarding exit procedures is outlined in the exit checklist (employees will receive a link for the human resources information system).

HR Partner: The HR Partner is responsible for following policies and procedures relating to the termination process. This includes acknowledging resignations in writing, processing terminations in the human resources system, uploading resignation letters, correctly choosing the termination reason, submitting system access closure requests, processing payments, and ensuring that University property is collected. Additional information regarding exit procedures is outlined in the exit checklist (HR Partners will receive a link from the human resources information system).

Shared Services Office: The Shared Services Office is responsible for verifying documentation such as resignation letters and approving exits in the HR system. The Shared Services Office is also responsible for managing the quick closure process, system access removal for core systems, and other payroll payments. The Shared Services Office schedules and conducts exit interviews, and analyzes data from exit surveys and interviews.

Appendix: Procedural Information

Information for staff, temporary staff, and season employee terminations include:

<table>
<thead>
<tr>
<th>Termination Category Name</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involuntary</td>
<td>Attendance (Absenteism and Tardiness)</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Layoff (with severance)</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Layoff (without severance)</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Misconduct, violation of rules, or serious misconduct*</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Unsatisfactory Performance</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Deceased</td>
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<tr>
<td>------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Involuntary</td>
<td>End of Temporary Assignment</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Dissatisfied with Job</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Dissatisfied with Pay</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Dissatisfied with Management</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Family Obligation</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Left/Graduated from School</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Retirement</td>
</tr>
<tr>
<td>Voluntary</td>
<td>To Attend School</td>
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<tr>
<td>Voluntary</td>
<td>Relocation</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Disability Claim Awarded</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Commute Time</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Accepted Better Job Opportunity</td>
</tr>
<tr>
<td>Voluntary</td>
<td>Resigned in Lieu of Termination*</td>
</tr>
</tbody>
</table>

1 This reason includes intoxication on the job, insubordination, sleeping on the job, among other reasons.

* Use of these reasons on the termination will make the employee ineligible for future employment at the University of Chicago.

**Processing the Termination**

1. All involuntary terminations, including layoffs, must be reviewed in advance by the Center of Expertise—Employee and Labor Relations, and recommendations must be provided.

2. When an employee resigns, the HR Partner must initiate the termination process promptly after the employee submits the resignation. For involuntary terminations, the HR Partner must initiate the process on or before the employee’s last day of employment.

3. The Shared Services Office will review all terminations for staff, temporary staff, and seasonal employees in the human resources information system. This includes verifying documentation and alignment of the reason and dates with the documentation.
4. The Shared Services Office will also ensure biweekly employee pay through dates allow for correct payroll processing.

5. The Shared Services Office (in consultation with Center of Expertise—Employee and Labor Relations, as appropriate) is also responsible for reviewing the employee’s bonus history and attached documentation.

Return of University Property
1. It is the responsibility of the Local Unit (HR Partner or Supervisor) to take reasonable steps to inventory and remove (or request removal of) the terminated employee’s access privileges to University, departmental, school, or other information systems in a timely manner. The “quick closure” process (immediate removal of employee’s systems access) should only be used to in cases of involuntary termination. Information on how to submit a quick closure request or remove system access is included in the section entitled Related Information.

2. The HR Partner should advise a terminating employee to contact Center of Expertise—Benefits regarding retirement benefits and insurance coverage, including retiree health insurance, the purchase of a conversion policy for life insurance, and other coverage from an outside provider.

Death of an Employee
1. The Local Unit (HR Partner or Supervisor) must promptly inform the Center of Expertise—Benefits Office upon first learning of the death of an employee.

2. Survivors of a deceased employee must be referred to the Center of Expertise—Benefits Office to complete the necessary documents for insurance claims and for release of a deceased employee’s final paycheck.

LAYOFF

Purpose
This policy provides guidelines to units for layoffs due to reorganization, operational changes or financial constraints. This policy establishes the documentation and appropriate approvals for conducting layoffs, as well as outlines notice periods, severance payments, benefits administration, removal of system access, and service bridging for reduction of employees through layoffs.

The layoff process must not be used when corrective action or termination for cause are more appropriate.

Who is Governed by this Policy
This policy applies to all staff.
Policy
1. When it becomes necessary to reduce the number of employees through layoffs, reductions are made in view of the needs of the unit.

2. For purposes of this policy, a layoff consists of an involuntary loss of employment due to organizational restructuring, position elimination (including reduction in force), operational changes or financial constraints.

3. All layoffs must be approved in advance by the Center of Expertise - Employee and Labor Relations and conducted in accordance with the procedures set forth in the Appendix to this policy.

Definitions
At Will Employment: Employment that is a matter of continuing agreement between the employee and the University. Either the employee or the University may decide to end the employee's employment for any reason not prohibited by law, at any time.

Benefits Eligible Position: A position that is scheduled to work an average of 20 hours or more per week and is therefore eligible for benefits.

Center of Expertise-Employee and Labor Relations: Employee and Labor Relations partners with department/division/unit HR professionals and Supervisors to provide guidance in the areas of policy, contract administration, performance management, leaves of absence, employment law compliance and various other employment matters.

COBRA: The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives workers and their families who lose their health benefits the right to choose to continue group health benefits provided by their group health plan for limited periods of time under certain circumstances such as voluntary or involuntary job loss, or reduction in the hours worked.

HR Partner: Department/division/unit personnel who serve as the representatives for the department in all human resources issues and initiate key HR processes in campus HR systems on behalf of their department/division/unit.

Local Unit: Campus department/division/unit.

Shared Services Office: The centralized body that processes transactions, reviews and verifies documentation, enforces policies and regulations, and ensures consistency and accuracy of processes.

Supervisor: Unit personnel who oversee and regulate employees in their performance of assigned or delegated tasks, as well as enforce compliance with policy.
Roles and Responsibilities

*Employee*: Employees are responsible for returning University identification card, keys, all library books and other University property before or upon the effective date of termination. Employees are also responsible for updating or verifying any benefits or personal contact information before the effective termination date. Additionally, employees should review and consider any separation agreements offered in a timely manner as outlined within the separation agreement.

*Employee and Labor Relations*: Center of Expertise - Employee and Labor Relations is responsible for reviewing and approving all layoffs, including justifications and documentation. Center of Expertise - Employee and Labor Relations is also responsible for preparation of separation agreements, approving severance amounts, outplacement services and other services offered to affected employees.

*HR Partner*: The HR Partner is responsible for following policies and procedures relating to the layoff process. This includes processing terminations within the human resources system and uploading severance agreements, correctly choosing the termination reason that aligns with the employee’s eligibility for rehire, submitting system access closure requests, processing any payroll payments and ensuring that University property is collected prior to the last day of the employee’s service.

*Local Unit*: The Local Unit is responsible for following procedures and policies related to layoff or reduction in force. Local Units are responsible for assessing the feasibility of avoiding layoffs, selecting each position to be affected by a layoff and providing layoff justification to Employee and Labor Relations via the lay-off justification form. When feasible, units must first consider non-benefits-eligible employees for layoff.

*Shared Services Office*: The Shared Services Office is responsible for verifying documentation such as layoff justification form and separation agreement have been correctly signed and uploaded. The Shared Services Office is also responsible for managing the quick closure process, system access removal for core systems, severance payments and other payroll payments.

**UNSCHEDULED CLOSINGS**

*Purpose*
To establish notice and pay procedures for both unscheduled University-wide and non-University-wide instances when unusual conditions such as extreme weather, power outages, and equipment failures make it impracticable to operate the workplace.

*Policy*
Certain conditions that affect the safety and well-being of employees may be reason to close an operation.
Guidelines
1. In the event of a University-wide condition, procedures can be found in the University's Emergency Management Plan.

2. In the event of a site-specific condition, the unit administrator at the site is responsible for making a decision with respect to the operation of the site. Factors to consider are the safety of employees, departmental property, and the critical need for the operation.

3. Some emergency conditions may result in assigning alternative duties or work space to staff employees to avoid loss of work, pay, or accruals. If an assigned staff employee has not received any required safety and performance training, the employee should receive it before beginning alternative duties. Such duties should be as consistent as possible, under the circumstances, with the staff employee's current job duties. In the event that a staff employee's work space at the University is unavailable and an alternative work space is unavailable, a staff employee should be excused with pay.

4. In the event a site-specific condition occurs before a staff employee reports to work and alternative work or work space is unavailable, a unit may excuse the employee and provide regular pay for the full day. (Note: In such cases, union employees are not paid when advised in advance, unless they use personal or vacation time).

5. In the event of a site-specific condition, a unit should enact emergency notification procedures (i.e. phone trees) to advise staff employees where or whether to report for work.

6. A unit administrator may contact the Employee/Labor Relations Office of Human Resources (702-4411) regarding pay or notification issues, and the Safety and Environmental Affairs Office (702-9999) regarding questions concerning safety processes.

7. In the event of extraordinary weather conditions, reasonable tardiness should be excused.

Workers Compensation

Purpose
To provide guidelines for Workers’ Compensation required insurance payments to employees for injury or illness which arises out of and in the course of employment.

Policy
The University will provide compensation for lost wages when an employee is found to have suffered a compensable injury or illness which arises out of and in the course of employment. Reimbursement for associated medical bills and services for treatment and recovery is included.

Guidelines
1. If an injury or illness is severe, immediate medical care should be sought through the University Occupational Medicine Clinic or a local Emergency Room.
2. A University employee is required to notify a supervisor or administrator of an accident and submit a written statement of the injury or illness as soon as it occurs (and no later than 45 days later than the date of occurrence) and complete the Employee Statement of Injury or Illness.

3. A supervisor or a Human Resource Partner (HRP) for the department will be required to complete the Supervisor’s First Report of the accident.

4. The supervisor or HRP must submit the report of the injury or illness to the University Safety and Environmental Office (SEO) for investigation. The SEO may provide plans to correct any defects or problems found, if so warranted.

5. An employee who has a compensable injury or illness and is unable to report to work in order to recover and receive treatment, will be eligible to receive compensation for lost wages based upon a rate of 66-2/3% of his/her Average Weekly Wage established by the State of Illinois Workers’ Compensation Commission, up to a maximum amount set by the Commission. (See http://www.iwcc.il.gov/benefits.htm.) Payments are made independent of payroll and are not taxed.

6. Compensation payments begin on the fourth day of lost time, unless lost time is 14 days or more, at which time the first three days will be compensated retroactively.

7. Related medical and rehabilitation expenses including medications, therapy, supportive devices, and doctors’ appointments will be paid directly by the University or an employee with a compensable injury or illness will receive reimbursement if expenses were paid.

8. An employee may, but is not required to, use any accrued sick leave, vacation or personal holiday to supplement Workers’ Compensation payments.

9. FMLA leave will run concurrently with Workers’ Compensation Lost Time.

10. Prior to returning to work, an employee will be required to provide a release to return to work from the treating physician if there was any lost time from work.

11. The University prohibits retaliation against any employee who, in good faith, seeks Workers’ Compensation benefits.

Talent Acquisition

Purpose
To describe University’s policies for staff talent acquisition throughout the four core phases of workforce planning, strategic sourcing, talent pool assessment, and successful selection.
Who is Governed by this Policy
This policy applies to all Hiring Units and associated HR Partners and Hiring Managers involved in staff talent acquisition and all phases of workforce planning, strategic sourcing, talent pool assessment, and selection.

Policy
Overall
1. The University of Chicago is committed to attracting and engaging a high performing, diverse workforce. As a federal contractor, the University has legal obligations to develop and implement affirmative action programs to recruit, hire, and promote women, minorities, people with disabilities, and Vietnam-era and disabled veterans.

2. The Center of Expertise—Talent Acquisition maintains a dedicated online library of resources to support diversity and excellence.

3. The University is an Affirmative Action/Equal Employment Opportunity/Disabled/Veterans Employer (AA/EEO).

4. Searches, promotions, and lateral movements are conducted in compliance with the laws of the United States, the State of Illinois, local jurisdictions, and the Affirmative Action Plans of the University.

5. To facilitate achievement of our talent acquisition philosophy, we apply the following learning design objectives:
   o Enable strategic talent delivery and optimization of talent investment
   o Fill positions with the best qualified applicants based on job-related factors, including work experience, applicable education, knowledge, skills, and abilities
   o Provide opportunity for internal mobility of qualified applicants to build strong institutional capacity
   o Continually extend and support a diverse workforce and to create equal opportunities for underrepresented groups as part of our affirmative action efforts.

2. All staff talent acquisition efforts must be coordinated through the Center of Expertise—Talent Acquisition.

3. The HR Partner and Hiring Manager have the flexibility to partner with University HR for full service offerings (i.e. workforce planning through successful selection) or single service offerings (i.e. talent pool assessment).

Posting Requirements
1. All new and vacant benefits eligible staff positions must be posted in Workday.
2. As an AA/EEO employer, promotional opportunities require a competitive process and posting must occur when there are similarly situated employees.

3. Under extremely rare circumstances, an HR Partner can request a posting exception on behalf of the hiring unit. In those instances, the HR Partner must submit a justification rationale in Workday as part of the Create Position process. This will route to the Associate Vice President of Human Resources (AVP) and the EEO/AA Office for the University for consideration. The AVP and the University’s Affirmative Action Officer, in conjunction with review by the Office of Legal Counsel, have the exclusive authority to review and grant posting exceptions. The final decision will be communicated to the HR Partner. The request and outcome documentation will be included in the University’s annual Affirmative Action Audit, and if the exception was granted, will be reflected as a non-competitive promotion. The Change Job, Non-Competitive Promotional process in Workday is used to capture posting exceptions.

4. The University requires newly hired staff employees (benefits eligible, non-benefits eligible, and temporary) to undergo a background check. Minors are excluded from background check requirements, though there may be other hiring requirements specific to minors. (See U204 Reference and Background Checks and U216 Safety of Children in University Programs).

Position Description
1. After the hiring unit identifies a talent acquisition need, and the roles and responsibilities of the position have been documented as required, the HR Partner and Hiring Manager should collaborate in developing and documenting objective, nondiscriminatory criteria for a job posting. All criteria and qualifications must be position-related.

2. Qualifications including mental and physical demands must be bona fide occupational qualifications.

Posting Length
1. Each position must be posted for a minimum of seven (7) calendar days, but no longer than six (6) months.

2. A unit may not hire an applicant or close a requisition prior to the seventh calendar day.

3. Any position posted for six months will be closed and removed from Workday.

External Advertising
1. The Hiring Unit or the SSO, if requested, may advertise a job opening with an external vendor after it is posted on Workday.

2. The Hiring Manager selects the external vendors for the postings. If requested, a list of available external vendors can be provided by SSO.
3. Advertising and other notification of a vacancy or new position must reflect the same qualifications and job requirements as listed in the posting on Workday and must be nondiscriminatory.

4. All external advertising must include reference to the University’s commitment to affirmative action through equal employment opportunity using exactly the following language:

   *All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, age, protected veteran status or status as an individual with disability.*

   *The University of Chicago is an Affirmative Action / Equal Opportunity / Disabled / Veterans Employer.*

   *Job seekers in need of a reasonable accommodation to complete the application process may contact the Shared Services Office by calling 773-702-5800 or by emailing sharedservices@uchicago.edu with their request.*

5. To enhance sourcing efforts, in addition to Workday, all postings automatically appear on America's Job Exchange (AJE), which also spiders out to additional job sites.

   **Internal Applicants**
   1. The University encourages the consideration of current employees for open positions (i.e. promotions and lateral movement).

   2. HR Partners and managers are encouraged to allow staff employees to take reasonable time off for interviews.

   3. Pursuit of a job opportunity within the University should not in any way jeopardize a staff employee's present position.

   **Additional AA/EEO Outreach Requirements**
   1. As part of the University's AA/EEO efforts, HR Partners are required to determine when creating the job requisition whether a position requires extra outreach based on the Affirmative Action Plan information located in Workday.

   2. If a job requisition is determined to require extra outreach, the HR Partner must develop a plan and provide documentation with the job requisition in Workday.

   3. The HR Partner is responsible for ensuring the plan is compliant with the University’s affirmative action obligations.

   4. The SSO will review to ensure a plan has been submitted prior to posting.
5. The HR Partner and Hiring Manager are responsible for executing outreach efforts and recruiting applicants if the availability of women or minorities is significantly greater than their incumbency in a job or group.

Search Firms
1. A unit considering the use of a search firm or employment agency must consult with COE – Talent Acquisition and use the standard University search firm agreement template before making any arrangements.

2. All searches conducted by an outside agency or search firm must meet the same federal, state, local, and University guidelines as searches conducted directly through the COE - Talent Acquisition.

3. Units must consult with both the COE - Talent Acquisition and the Office of Legal Counsel before agreeing to any substantive changes to the search firm agreement template.

4. The search firm works on behalf of the University and is responsible for the same applicant tracking the HRP, hiring manager and the COE - Talent Acquisition would otherwise do, including keeping records of Affirmative Action outreach efforts, and the talent acquisition process.

5. The unit that contracts with a firm or agency is responsible for ensuring that any firm or agency is fully informed regarding its responsibilities for meeting the University's (AA/EEO) search documentation responsibilities.

6. The search firm must submit a copy of all search records to the HR Partner or Hiring Manager before the University processes payment of the final invoice or expense reimbursement.

7. The position must be posted in Workday and the applicants provided by the search firm must apply for the position through Workday.

Talent Pool Assessment
1. The HR Partner or Hiring Manager may consider applicants immediately upon receipt of all application materials, including reviewing resumes for basic qualifications.

2. A job seeker who does not meet all the required qualifications as provided in the job posting is not an applicant and should not be considered.

3. Talent pool assessment must be based on job-related qualifications including, but not limited to:
   o Required and preferred education
   o Experience
Knowledge, skills, and abilities as identified in the job description
References

4. An applicant who is hired must meet all required qualifications listed in the job description, and may not, directly or indirectly, provide the University with funding to support the position.

Online Application Process
1. To be considered for a position, a job seeker, including any University staff employee, must complete the online application process. Unsolicited resumes cannot be considered.

2. The Shared Services Office will provide reasonable accommodations upon request by any applicant with a disability to complete the application process.

3. To comply with affirmative action requirements, certain data is requested as part of the online application and new hire process. This information is provided at the individual's discretion and cannot be used in the decision making process. However, the applicant will be required to provide such information (i.e. citizenship, date of birth, and gender) as part of the employment process at time of hire.

Applicant Pool
1. The applicant pool should be sufficient to enable selection of qualified applicants for interviews.

2. To broaden the applicant pool, the HR Partner or Hiring Manager can partner with the COE - Talent Acquisition to discuss additional sourcing strategies.

3. If there are no well-qualified applicants for a position, then the requisition must be cancelled. One of the following things can then take place:
   o Reposting: In an effort to increase the applicant pool, the HR Partner or Hiring Manager has the flexibility to modify qualifications. In these cases, the position must be re-posted for at least seven calendar days, and all applicants for the re-posted position must be considered.
   o Reopening: As an AA/EEO employer, we cannot take actions which would potentially impact the applicant pool. To ensure compliance, positions cannot be closed and re-opened, regardless of the passage of time.
   o Language Updates: Similarly, as an AA/EEO employer, we are not able to update job title, job profile, or adjust the language in the job requisition once it has been posted as this would potentially impact the applicant pool.

Interviews and Testing of Applicants
1. The employment interview is a critical step in the talent acquisition process; it provides the Hiring Manager the opportunity to review applicant qualifications and to determine their suitability for the position. It also provides applicants with the chance to learn about the position and its requirements and to present information on their skills and experience.
2. The HR Partner or Hiring Manager must ensure consistent administration of the interview process. The interviewer's questions should address the applicant's qualifications and ability to meet the requirements of the position. Consistent administration includes equal treatment of applicants, avoidance of discriminatory questions, and uniform interview content.

3. An applicant may be tested for job-related competencies using a properly validated test or other selection procedure. If appropriate, job-related assessments will be facilitated through the SSO, who administers a computer based testing system. Assessments include business math, MS Office Suite, data entry, typing, and administrative skills. Prior to administering a job-related assessment, the HR Partner or Hiring Manager must disclose the use to the SSO for recordkeeping purposes. If a third party vendor is used to administer additional testing, the Hiring Unit is responsible for the cost of review and validation by third party vendors.

4. When used, approved tests and selection procedures must be given to applicants under equivalent conditions, must be scored, evaluated, and used as a selection factor equally for applicants, and must be maintained with other application and selection materials.

5. Upon request by an applicant with a disability, the HR Partner or Hiring Manager must provide reasonable accommodations during the interview and testing processes, as determined by the COE - Employee Labor and Relations or the Provost's Office.

**Offers of Employment**

1. An applicant may not be offered or start in a position until the required seven-day (7) posting period has been completed and a proper search has been conducted.

2. In addition, the SSO will verify that a proposed hire is eligible for University employment (e.g. meets the basic qualifications, has applied to the position, has completed the background check and any other job requirements, and has not been deemed ineligible for rehire if previously employed by the University).

3. All staff positions and temporary positions require an offer letter to be provided to the applicant. The offer letter is required to be uploaded to the applicant's file in Workday.

4. The COE - Talent Acquisition will review offer letters upon request, and also authors standard templates to ensure consistency in appearance and to define benefits and other broad employment terms in a consistent manner. Units should share language variations which the COE - Talent Acquisition will maintain for auditing purposes.

5. The COE - Compensation will review the pay level of an offer upon request, and provides base pay references (i.e. external market data and internal peer data via Workday, when available) to inform the level of base pay. If base pay falls outside of the competitive range (i.e., +/- 10%), units should share the rationale, which the COE - Compensation will maintain for auditing purposes.
6. Offers including tuition reimbursement in a way not provided for by the University's Educational Assistance Plan must first be reviewed and approved by the Office of Legal Counsel, as there are tax implications associated with tuition reimbursement outside of the Plan. These offers cannot be extended without an agreement that the employee remains with the University for at least two years after obtaining a degree, maintains an agreed-upon GPA or grade level, and the degree must be related to the industry or area of expertise of the position being offered. Any tuition reimbursement language that does not follow this criteria must receive prior approval from Office of Legal Counsel, the VP of Operations and the Chief Financial Officer.

7. The HR Partner or Hiring Manager must notify an unsuccessful applicant who was interviewed by indicating the applicant's status in Workday and also may send a letter or call the applicant. The HR Partner or Hiring Manager must dispense of the applicant pool (i.e. update the status of applicants in Workday to accurately reflect non-selection reason). The HR Partner or Hiring Manager must not use a reason of “did not meet basic qualifications” if minimum experience and education requirements as reflected in the posting have been met by the applicant. It is imperative to communicate applicant status in a timely fashion throughout the talent acquisition process, as this directly impacts the applicant experience.

**Lateral Movement**

1. After accepting a position, a University staff employee is responsible for giving sufficient notice to his/her former unit; notification for lateral movement involves at least two weeks advance notice. (See U208 Termination of Employment).

2. Upon beginning a new position in another unit or department, a current employee will retain accrued but unused sick, vacation, and personal holiday time, which will be transferred to the new unit.

**Definitions**

**Job Seeker:** An individual who is looking for a job.

**Applicant:** An individual who, in a timely manner: requests to be considered for employment; completes a profile/application as required by the University; identifies a specific position opening; and is minimally qualified (i.e. possesses the required knowledge, skills, education, and experience for the position opening.

**Similarly Situated Employees:** Employees assigned to the same job profile across the University. Note, this is not limited by supervisory organizational structure.

**HR Partner:** Department/division liaison who serves as the representative for the department in all human resource issues and processes staff transactions in campus HR systems on behalf of their department/division.
**University HR**: The central human resources for oversight of the university made up of Centers of Expertise (COE).

**Center of Expertise-Talent Acquisition**: The COE responsible for oversight of the university’s staff talent acquisition process.

**Center of Expertise-Employee and Labor Relations**: The COE responsible for oversight of the university’s staff employee and labor relations policy and processes.

**Center of Expertise-Compensation**: The COE responsible for oversight of the university’s staff compensation policy and processes.

**Shared Services Office**: The Office responsible for providing oversight and approving key transactional HR activities for staff employees and providing assistance to Workday end users.

**Hiring Unit**: Campus unit to which a new or vacant position reports.

**Hiring Manager**: The individual requesting the new or vacant position be filled. Generally, the position being filled with report to the hiring manager.

**Roles and Responsibilities**
Talent acquisition is the mutual responsibility of the units in which the positions exist and University Human Resources (HR). Units know their own organizations best and the type and level of talent they need both now and in the future. University HR brings expertise through its Centers of Expertise in organizational and position design, position-related qualifications, sourcing strategies, assessment and selection techniques, compensation and offer negotiation. The table below describes the roles and responsibilities of each group for all talent acquisition efforts.

<table>
<thead>
<tr>
<th>Hiring Unit</th>
<th>University HR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Know, understand and apply relevant state and federal employment laws and</td>
<td>Develop and maintain a library of resources to support diversity and equal</td>
</tr>
<tr>
<td>University policies necessary for conducting a fair and open search.</td>
<td>opportunity efforts (COE - Talent Acquisition)</td>
</tr>
<tr>
<td>Review and assess the structure and operation of the unit and determine the</td>
<td>Review submitted postings to ensure clarity, relevancy and consistency in job</td>
</tr>
<tr>
<td>talent needed to meet objectives and priorities.</td>
<td>description, qualifications and other posting specific information (SSO)</td>
</tr>
<tr>
<td>When necessary, justify the need to fill a vacant position or create a new</td>
<td>Provide reasonable accommodations to complete the application process upon</td>
</tr>
<tr>
<td>position</td>
<td>request by any job seeker with a disability (SSO)</td>
</tr>
</tbody>
</table>
and ensure sufficient budget exists to fund a position before starting a search.

<table>
<thead>
<tr>
<th>Develop a position description that includes clear job responsibilities, required education, experience, and knowledge, skill and abilities; assigns job profile.</th>
<th>Provide base-pay references to inform the level of as base-pay (COE - Compensation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure a good faith effort is made toward meeting the University's commitment to AA/EEO by conducting a thorough, thoughtful and legally compliant talent acquisition process</td>
<td>Provide standard employment offer letter templates (COE - Talent Acquisition)</td>
</tr>
<tr>
<td>For postings that require expanded outreach efforts, submit specific outreach plans to the SSO via Workday and satisfactorily execute the plans.</td>
<td></td>
</tr>
<tr>
<td>Ensure any external sourcing firms are fully informed regarding their responsibilities for meeting the University’s (AA/EEO) search documentation responsibilities; all contracts with outsourcing firms must first be reviewed and approved by the Office of Legal Counsel if requesting any changes to the standard template.</td>
<td></td>
</tr>
<tr>
<td>Upon request by an applicant with a disability, provide reasonable accommodations during the interview or testing processes.</td>
<td></td>
</tr>
<tr>
<td>Disclose the use of any job related test(s) to the SSO.</td>
<td></td>
</tr>
<tr>
<td>Notify unsuccessful applicants who are interviewed of the position being filled and update all applicant statuses in Workday to reflect the reason why they were not selected.</td>
<td></td>
</tr>
<tr>
<td>Ensure employment decisions are in compliance with University and unit policies and procedures.</td>
<td></td>
</tr>
</tbody>
</table>
REFERENCE AND BACKGROUND CHECKS

Purpose
To provide guidelines for conducting background and reference checks on staff new hires and internal applicants.

Who is Governed by this Policy
This policy applies to applicants with conditional offers of employment for staff positions, both new hires and internal applicants.

Policy
1. The University requires newly hired staff employees (benefits eligible, non-benefits eligible and temporary) to undergo a background check.

2. Minors are excluded from background check requirements, though there may be other hiring requirements specific to minors. (See U216 Safety of Children in University Programs).

3. The background check is to be completed only after a conditional offer of employment has been made and accepted by the applicant. A valid background check report will be conducted prior to the hire or conversion date. Background checks must include the following:
   - Criminal history, which includes a registered sex offender check
   - Academic credential verification (transferring academic employees may be excluded)

4. As described below, the background check also may include credit history, motor vehicle records, employment verification, professional license and certification verification, or other job-related information.

5. A background check must be completed and a satisfactory report received before a new hire may start work.

6. In exceptional circumstances, the Associate Vice President of Human Resources (AVP) (or designee) or the department/unit head may authorize an applicant to begin work before a satisfactory report has been received by submitting a letter of authorization on department letterhead to the Shared Services Office (SSO).

7. If a background check was completed within the past twelve months, the results from the previous background check can be used to confirm eligibility for hire in lieu of initiating a new background check.

8. An employee who terminates employment and is later rehired by the University will be required to have a background check completed if the background check in the employee’s file is older than twelve months.
9. Although Minors are excluded from the background check requirement, they may be subject to reference checks and other pre-hiring requirements.

**Authorization**

1. All applicants who are interviewed for a position must complete and certify the accuracy of a job profile and complete and certify the accuracy of an authorization to complete a background check.

2. Applicants must provide addresses, including international addresses if applicable, for the previous seven years to ensure the appropriate criminal history checks are completed. An applicant who refuses to certify these items will be eliminated from further consideration for employment.

3. After the applicant receives and accepts a conditional job offer, the SSO will initiate the background check for regular staff positions. For those positions, a Standard Background Package will be completed. If noted on the job requisition, for certain regular staff positions in the Biological Sciences Division a Joint Commission Background Package will be completed. The HR Partner or the Hiring Manager will initiate a Voluntary Background Check Package for a temporary position. If a temporary employee is hired into a regular staff position within twelve months of their previous background check, an a la carte Education Only Background Check must be completed. If the previous background check was conducted more than twelve months earlier, a Standard or Joint Commission Background Check Package, whichever is appropriate, must be completed.

4. The University contracts with a third party background check agency which conducts criminal background investigations and employment and academic verification as allowed by applicable law.

**Reference Checks**

1. The HR Partner and/or Hiring Manager should conduct reference checks by contacting at least two (2) professional references. Reference checks can also be completed by requesting the assistance of SSO. Reference checks should be completed prior to conveying an offer to an applicant.

2. If the University does not contact an applicant’s current/most recent employer as part of the pre-offer reference check process, the current/most recent employer should be contacted after a conditional offer of employment has been made and accepted by the applicant.

3. For an internal applicant, the Hiring Manager should take special care to ensure the application is confidential. As a courtesy, the Hiring Manager should only contact the internal applicant’s current manager/unit with the applicant’s agreement, or after the internal applicant has been extended and accepted a conditional offer of employment.

4. Information provided by references and gathered during the reference check must be
retained, along with other application materials, for a minimum of seven years for the applicant who is hired and for three years for all other applicants.

**Motor Vehicle Record Check**
1. The Office of Risk Management and Internal Audit conducts motor vehicle record checks and evaluates driving records.

2. Any applicant for a position that requires the operation of a motor vehicle will be ineligible for the position if his/her motor vehicle record shows driving-related convictions or excessive moving violations, as set forth in the University's Vehicle Loss Control Program.

**Credit History Check**
1. A satisfactory credit history may only be required when it is a bona fide occupational requirement of the position and as allowed by law.

2. A credit history check may be conducted for jobs that must include one or more of the following responsibilities:
   - Management responsibility for setting the direction or control of the department
   - Access to sensitive information that a student or patient authorizes the University to obtain, process, and keep to which only managers and a select few employees have access
   - Access to financial information that is non-public and relates to the overall financial direction of the University
   - Confidential information that is stored in secure repositories not accessible to the public or low-level employees, or national security information
   - Custody of or unsupervised access to cash or marketable assets, which means University property that is specially safeguarded from the public and to which access is only entrusted to managers and select other employees (does not include fixtures, furnishings, or equipment)
   - Signatory power over business assets over $100 or more per transaction

**Use of Background Check Report Information**
1. Upon completion of the background check, the agency conducting the check will provide the SSO with a complete report. To ensure confidentiality of applicant information, the SSO will receive the report, communicate with the HR Partner and/or Hiring Manager, and confirm whether the applicant is eligible for employment in the position.

2. Data and information collected as part of the background check report shall not be used for the purpose of evaluating the applicant for employment unless otherwise permitted or required by law.

3. HR will maintain data collected as part of the background check in separate confidential files. Any employee who is responsible for an unauthorized disclosure of information collected under this policy will be subject to corrective action up to and including termination.
of employment.

4. The HR Partner and/or Hiring Manager will gather, evaluate, and maintain any job-related background check information and verifications not included in the background check conducted by the agency such as reference checks or professional certifications.

5. Having a criminal conviction does not automatically preclude employment. The AVP of Human Resources (or designee), in consultation with the Office of Legal Counsel, when necessary, evaluates the relevance of the criminal history of the individual being considered for hire to the position being filled. The nature of the offense, the circumstances surrounding it, the proximity in time of the conviction, and its relevance to a particular job will be considered on a case-by-case basis. The only data and information that the hiring manager will receive concerning an applicant's criminal history is whether the investigation on the applicant yielded satisfactory or unsatisfactory results.

6. If a current employee's background check information precludes the employee from being hired into a new position, the employee typically will remain in his/her former position. However, if the employee's background check information reflects that the employee is not qualified or casts doubt on his/her ability to safely perform the former job duties, the employee may be precluded from returning to his/her former position and may apply for a vacant position for which he/she is qualified.

7. Hiring an applicant when the background investigation yields unsatisfactory results must be approved in writing by the Office of Legal Counsel.

8. Information obtained in a background check will be compared with information provided by the applicant. An applicant who provides false, incomplete, or misleading information on a profile, resume, or in an interview will be immediately eliminated from further consideration for employment. An employee who provides false, incomplete, or misleading information during the application or interview process may be subject to corrective action up to and including termination of employment. (See U208 Termination of Employment).

Applicant Rights and Obligations

1. Applicants for employment, promotion, or vacant positions must disclose criminal convictions (excluding convictions that have been sealed or expunged) on the Background Check Authorization Form provided by the background check agency. Each applicant will be evaluated based on the nature of the crime, when it occurred, and the duties and responsibilities of the position for which the applicant is being considered.

2. If the University intends to take an adverse employment action because of information in the background check report received from the agency, the University will provide the applicant with a pre-adverse action letter or notice that an adverse action may be taken based at least in part on information provided in the background check report, a copy of the information on which the adverse action will be based, and other information as required by law.
3. An applicant denied employment based on unsatisfactory results of the background check report who believes his or her background information is incorrect as reported by the agency, may contact the agency or other entities to provide correct information. The applicant is ineligible for hire to the position unless the official records confirm the correction to the information.

4. If the University decides to take an adverse employment because of information in the background check report, the University will provide the applicant with an adverse action letter informing the applicant of his/her rights as required by law.

Definitions

Applicant: An individual who, in a timely manner: requests to be considered for employment; completes a profile/application as required by the University; identifies a specific position opening; and is minimally qualified (i.e. possess the required knowledge, skills, education and experience) for the position opening.

Internal Applicant: A current employee who establishes themselves as an applicant.

Temporary Position: A position that is expected to continue for less than twelve months.

Regular Staff Position: A position that is classified as staff and does not serve in a temporary or season capacity.

Benefits Eligible Position: A regular staff position that is scheduled to work an average of 20 hours or more per week and is therefore eligible for benefits.

Non-Benefits Eligible Position: A regular staff position that is scheduled to work an average of 19.5 hours per week or less.

Minor: An individual who is under the age of 18.

Roles and Responsibilities

HR Partner: The HR Partner is responsible as the representative for the department in all human resources issues and processes staff transactions in HR systems.

COE-Talent Acquisition: Talent Acquisition is the Center of Expertise responsible for oversight of the talent acquisition policies and processes of the University.

Hiring Manager: The Hiring Manager is responsible for requesting the new or vacant position, generally the position being filled will report to the Hiring Manager.

Shared Services Office: The SSO is responsible for initiating background checks for all staff positions and offering assistance with reference checks, as requested. SSO will also approving
key transactional HR activities for staff employees and providing assistance to Workday end users.

**SPONSORSHIP OF FOREIGN NATIONALS**

**Purpose**
To provide guidelines for sponsoring full-time benefits-eligible staff employees who are foreign nationals for permanent residency and to ensure compliance with applicable law governing immigration and the employment of foreign nationals.

**Policy**
The University only sponsors full-time, benefits-eligible staff employees for permanent residency under limited and unique circumstances. A department or unit pursue sponsorship when doing so is in the best interest of the University.

**Guidelines**
1. Only a University department or unit, not an employee, may initiate the sponsorship process. The Human Resources Partner (HRP) for the department or unit evaluates and submits requests for sponsorship for permanent residency to HR-Talent Acquisition.
2. Requests for sponsorship of a staff employee must be in writing and meet the following minimum requirements:
   - The position requires at least thirty-seven and one-half (37.5) hours per week
   - The position requires a bachelor’s or higher degree or its equivalent and specialized and complex knowledge
   - The uniqueness of the position has made it difficult to recruit qualified applicants
   - There is sufficient justification that the proposed foreign national is uniquely qualified through experience, skill, and background for the position
3. In addition, the foreign national must be an employee of the University for a minimum of four consecutive years (i.e. completed four consecutive years). HR- Talent Acquisition may waive this requirement if the request is endorsed in writing by the responsible Dean, unit Vice President, or their designee.
4. In those instances where the University decides to sponsor a staff employee for permanent residency, there is no guarantee that permanent residency can be obtained. The process depends upon approval by multiple government agencies, employee eligibility, and factors outside of the University’s control.
5. Thus, no one is authorized to promise a current or prospective employee that the University will obtain permanent residency on the individual’s behalf.
6. Privately retained attorneys may represent the University in immigration matters only if they are first authorized in writing by the Office of Legal Counsel.
7. Costs associated with this process normally will be borne by the employee except costs the employer is required to pay by law.

8. University sponsorship does not have any relationship with an sponsored employee’s status as an at-will employee.

**Definitions**

*HR Partner:* Department/division personnel who serves as the representative for the department in all human resource issues and processes staff transactions in campus HR systems (i.e. Workday and UChicago Jobs) on behalf of their department/division.

*University HR:* The central human resources body for the university made up of Centers of Expertise (COE).

*COE-Talent Acquisition:* The COE responsible for oversight of the university’s staff talent acquisition policy and practices.

*Hiring Manager:* The individual requesting the new or vacant position be filled. Generally, the position being filled will report to the hiring manager.

*Office of Legal Counsel:* The University office responsible for advising University officials on legal and regulatory questions associated with the University’s activities.

*Benefits Eligible Position:* A regular staff position that is scheduled to work an average of 20 hours or more per week.

*Non-Benefits Eligible Position:* Positions that are expected to continue for at least twelve (12) consecutive months at 19.5 hours or less per week and is therefore ineligible for benefits.

*Foreign Nationals:* Individuals who are in nonimmigrant status defined by the IRS.

*Permanent Residency:* Any person not a citizen of the United States who is residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant. Permanent Residents are authorized to live and work in the U.S. permanently.

*At-Will Employment:* Employment that is a matter of continuing agreement between the employee and the university. Either the employee or the University may decide to end the employee’s employment for any reason not prohibited by law, at any time. Applies to employees not covered by a collective bargaining agreement.
STAFF AND FACULTY ASSISTANCE PROGRAM (SFAP)

Purpose
To ensure a healthy and productive workforce.

Policy
The University has contracted with an Employee Assistance Program provider to assist employees, retirees, and their families with a variety of personal matters, including drug and alcohol abuse, stress, emotional difficulties, bereavement, family/personal concerns, financial counseling, and job-related issues.

Guidelines
1. An employee may utilize the Staff and Faculty Assistance Program (SFAP) in one of two ways:
   - Self-referral: An employee may seek assistance on his/her own
   - Supervisory and/or management referral: A supervisor may recommend an employee’s participation when attendance, job performance, or work habits are affected by personal matters

2. A department should consult with the COE-Employee and Labor Relations prior to making a supervisory referral when performance issues manifest, when drug or alcohol use are suspected, or when a last-chance agreement is in place.

3. A department may contact the Program to provide guidance and assistance to employees when a major event has affected a work unit (e.g. death of a coworker, departmental emergency, etc.).

Services Provided
The Staff and Faculty Assistance Program (SFAP) is provided by Perspectives Ltd. to assist you and your family members with the challenges of daily living. The program is confidential, available 24/7 and provides the following services:

- Telephone/in-person counseling: Office on campus with locations throughout Chicagoland and NW Indiana
- Childcare/eldercare: Information and referrals for providers and related needs
- Legal/financial: Consultation, identity theft, and emergency legal assistance
- Convenience: Pet sitters, home cleaning, relocation, fitness and nutrition
- Web based resources: Mobile friendly self-directed assessments, links, articles
- Online skill builders: Tutorials covering over 60 topic areas to enhance both personal and professional growth

Key Features of the SFAP
Key features include:
- Employee, Retiree or family members eligible to use the program
- No cost for any services Perspectives provides
- Confidentiality protected by Federal and State laws
- Information, resources and services for the challenges of daily living

You may call Perspectives Ltd. at 800-456-6327 to speak with a trained counselor about your needs.

You have 24-hour access to an online tool (www.perspectivesltd.com) that provides information on a variety of topics. To login you will need:

Username: UNI500
Password: perspectives

**SFAP WorkLife Online Skill Builders**
Perspectives WorkLife Online provides convenient confidential online access to a vast and continually refreshed library of personal and professional development skill builders. These are 30 to 40 minute tutorials available on demand. Registration through Perspectives website is required so that you can return to your bookmarked page in the future. To review the topics and course descriptions simply visit the Perspectives WorkLife Online Skill Builder section.

**Costs**
Use of the SFAP is free. If you or a family member need referral services or a treatment program, Perspectives Ltd. will assist you in obtaining the best care as reasonably priced as possible. Any costs incurred by the referral service or treatment program are your responsibility.

**Eligibility to Use SFAP**
You can use the services if you are a(n):
- Employee
- Retiree
- Employee or retiree’s family member

**Confidentiality**
Confidentiality is an important aspect of the services provided by Perspectives Ltd. Information you discuss with Perspectives Ltd. will not be shared by them, except as may be required by Federal and State laws. No record of your participation will appear in your personnel file. In an instance where the referral is work-related, with you written permission, your supervisor may be told whether you have followed through with your appointment.
ACKNOWLEDGEMENT

I acknowledge that I understand how to access the University of Chicago Human Resources policies that are housed on the University’s website which I have access to at http://humanresources.uchicago.edu/fpg/policies/index.shtml, including the policies listed below. I understand that the University has the right to modify any policy at any time without prior notification.

I understand that by signing below, I acknowledge that I have been given the website information necessary to familiarize myself with the University’s policies - including those listed below - and that it is my responsibility to become fully informed on their content.

- 104 - Business Conduct
- 600 - Conflict of Interest Policy
- 601 - Treatment of Confidential Information
- 603 - Smoking/Non Smoking
- 604 - Substance Abuse
- 606 - Workplace Violence
- 609 - The University of Chicago Policy on Harassment, Discrimination and Sexual Misconduct
- 1009 - Mandatory Reporting of Child Abuse
- The University of Chicago Policy on Information Technology Use and Access

Name
__________________________________________

Signature
__________________________________________

Date
__________________________________________

Please sign, date, and return to Human Resources.