# MERCER UNIVERSITY
NON-FACULTY EMPLOYEE HANDBOOK

## TABLE OF CONTENTS
(Updated 1/19/2016)

1. INTRODUCTION
   - A Letter from the President ................................................................. 1
   - About This Handbook ........................................................................ 1
   - Mission Statement ............................................................................. 2

2. EMPLOYMENT POLICIES
   - Equal Opportunity and Affirmative Action ........................................ 3
   - The Health Insurance Portability and Accountability Act (HIPAA) ..... 4
   - Restrictions on Employment ............................................................... 8
   - Outside Employment ......................................................................... 8
   - Categories of Employment ................................................................. 9
   - Orientation ......................................................................................... 10
   - Probationary Period for Non-Faculty Employees ............................... 11
   - Promotional and Transfer Opportunities for Non-Faculty Employees ... 12
   - Resignation or Termination of Non-Faculty Employees ...................... 12
   - Personnel Files ................................................................................. 13

3. COMPENSATION POLICIES
   - Work Hours ....................................................................................... 14
   - Time Records ..................................................................................... 15
   - Pay Periods and Receipt of Checks .................................................... 15
   - Pay Transparency Nondiscrimination Provision .................................... 16
   - Policy of Deductions from Salaries .................................................... 16
   - Inclement Weather ............................................................................ 17
   - Overtime ............................................................................................ 17

4. EMPLOYEE CONDUCT
   - Absenteeism and Tardiness ............................................................... 19
   - Guidelines for Appropriate Conduct ................................................ 19
   - Safeguarding University Property ....................................................... 20
   - Performance Evaluation for Non-Faculty Employees .......................... 21
   - Grievance Procedures for Non-Faculty Employees ............................. 21
   - Sexual Misconduct and Relationship Violence Policy ......................... 24
Policy Prohibiting Other Discriminatory Harassment ..............................................39
Solicitation and Distribution of Literature ..............................................................40
Reporting Suspected Improper Conduct .................................................................41
Gifts and Gratuities .................................................................................................41
Intellectual Property ..............................................................................................42

5.  EMPLOYEE HEALTH AND SAFETY

   Drug-Free Workplace and Campus Program .....................................................47
   Tobacco and Smoke-Free Environment Policy ..................................................57
   Crime Awareness and Campus Security .............................................................58
   Occupational Safety and Health Programs .......................................................58
   Job Related Employee Accident and Injury/Workers’ Compensation ...............59
   Approved Drivers Policy .....................................................................................59

6.  TIME-OFF BENEFITS

   Vacation ..............................................................................................................60
   Holiday Policy and Schedule ............................................................................60
   Medical and Family Leave Policies .....................................................................60
   Bereavement Leave .............................................................................................64
   Military Leave .....................................................................................................64
   Jury and Witness Duty Leave .............................................................................65

7.  OTHER EMPLOYEE SERVICES AND BENEFITS .............................................66
1. INTRODUCTION

A LETTER FROM THE PRESIDENT

I wish to extend greetings to all employees of the University. To the experienced members of the community, I express appreciation for your contributions; and to you who are just now joining us, I offer a sincere welcome to the Mercer family.

No job at Mercer is unimportant or unrelated to the University's pursuit of its purpose, and the successful achievement of its mission depends upon the dedicated performance of each one who serves here. Mercer also has much to give to you, and I hope you will take full advantage of the opportunities for education and enrichment available on campus.

If the University receives from us the best we can give and we fully share in what it has to offer, Mercer will be, for all of us, a happy and rewarding place to work.

William D. Underwood

ABOUT THIS HANDBOOK

The purpose of this Handbook is to provide you with information about Mercer University and its policies. Please read it carefully. The policies described in this Handbook are subject to change at the sole discretion of the University. From time to time, you may receive updated information concerning changes in policy. Should you have any questions concerning any policies, please ask your supervisor or a Human Resources representative for assistance.

This Handbook is not a contract guaranteeing employment for any specific duration. Although we hope that your employment relationship with Mercer will be long-term, either you or the University may terminate the employment relationship at any time.

This Handbook is intended for non-faculty employees. While many of the policies and benefits described in this Handbook are the same for all employees of the University, there are some differences in the terms and conditions of employment for faculty members, and the University Faculty Handbook has been prepared for faculty employees. There are also some differences for employees at the Mercer Engineering Research Center (MERC), including different holidays and different tuition benefits.
MISSION STATEMENT
(Updated 2013)

Mercer University’s mission is to teach, to learn, to create, to discover, to inspire, to empower and to serve.

In fulfilling this mission, the University supports undergraduate, graduate, and professional learning as well as basic research and its application in service to others. As a university committed to excellence and innovation, Mercer challenges members of its community to meet and exceed high standards in their teaching, learning, research, scholarship and service.

Founded by Baptists in 1833, Mercer is an independent university that remains grounded in a tradition that embraces freedom of the mind and spirit, cherishes the equal worth of every individual, and commits to serving the needs of humankind. As a reflection of this heritage:

- We encourage our students to discover and develop fully their unique combination of gifts and talents to become leaders who make a positive difference in the world.

- We seek to inspire members of our community to live virtuous and meaningful lives by using their gifts and talents to serve the needs of humankind as an expression of their love for God and neighbor.

- We seek to enrich the mind and spirit by promoting and facilitating an open and rigorous search for truth and understanding, including an examination of the moral, religious and ethical questions of this and every age.

- We affirm and respect the dignity and sacred worth of every person and celebrate both our commonalities and our differences.

http://about.mercer.edu/mission/
2. EMPLOYMENT POLICIES

EQUAL OPPORTUNITY AND
AFFIRMATIVE ACTION
(Updated 10/05/2017)

Mercer University is committed to a policy of equal opportunity in employment without regard to race, color, national origin, disability, veteran status, sex, sexual orientation, gender identity, genetic information, age, or religion (except in limited circumstances where religious preference is both permitted by law and deemed appropriate as a matter of University policy). This policy applies to all terms and conditions of employment, including but not limited to hiring, placement, promotion, termination, transfer, leaves of absence, compensation and training programs.

In addition, as a federal contractor, the University has adopted an Affirmative Action Plan in accordance with applicable legal requirements. This plan is reviewed and updated annually. Employees and applicants may access, upon request, the full affirmative action plan (absent data metrics) at locations and times posted in the Human Resources office.

Mercer University’s EEO policy, as well as its affirmative action obligations, includes the full and complete support of all divisions of Mercer University, including its President.

Mercer University will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. Mercer University prohibits any form of unlawful employee harassment based on race, color, national origin, disability, veteran status, sex, sexual orientation, gender identity, genetic information, age or religion.

Any employee with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of their immediate supervisor, the Equal Opportunity Officer, the supervisor of the person behaving objectionably, or for sexual violence/sexual harassment with the Title IX Coordinator or the Office of Civil Rights. Employees can raise concerns and make reports without fear of any form of retaliation.

Mercer University maintains an audit and reporting system to determine overall compliance with its equal employment opportunity mandates and to respond to any specific complaints applicants or employees file with the Mercer University’s equal employment opportunity office. The Associate Vice President for Human Resources [1501 Mercer University Drive, Macon, GA 31207, phone (478) 301-2786] is the Equal
Opportunity/Affirmative Action Officer and is responsible for monitoring and coordinating compliance with this policy and applicable laws and regulations, including Titles VI and VII of the Civil Rights Act of 1964, Sections 503 and 504 of the Rehabilitation Act, the Americans with Disabilities Act, the Age Discrimination in Employment Act, Executive Order 11246, and along with Mercer University’s Title IX Coordinator, Title IX of the Education Amendments of 1972.

THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)
(Updated September 23, 2013)

Modification to the HIPAA Privacy, Security, Enforcement and Breach Notification Rules under the Health Information Technology for Economic and Clinical Health Act (HITECH Act) -- Effective Date of March 26, 2013 (Compliance Date September 23, 2013)

Overview:

The HIPAA Law is a regulatory requirement imposed on Healthcare organizations and other organizations that receive, store, and process medical information. The Law is designed to protect patients’ rights and to create the standardization of healthcare information. The Law regarding Healthcare Payment, Treatment, or Healthcare Operations is outlined as the Rules for Administrative Simplification.

The Law became effective in 1996, but the implementation of the Law has been rolled out into regulations since 2002. In addition, modifications were made effective March 26, 2013 (see Department of Health and Human Services 45 CFR Parts 160 and 164).

The regulations of the HIPAA Law cover the following areas of healthcare:

- Privacy of Health Related Information
- Standardization of Electronic Billing Transactions and Code Sets
- Standardization of Healthcare Identifiers
  - Plan
  - Employer (Plan Sponsor)
  - Provider
  - Patient
- Security of Healthcare Facilities and Healthcare Information
  - Physical
  - Electronic
The modifications, effective March 26, 2013:

- Make business associates of covered entities directly liable for compliance with certain of the HIPAA Privacy and Security Rules’ requirements
- Strengthen the limitation on the use and disclosure of protected health information for marketing and fundraising purposes, and prohibit the sale of protected health information without individual authorization
- Adopt the additional HITECH Act enhancements to the Enforcement Rule not previously adopted in the October 30, 2009, interim final rule
- Final rule adopting changes to the HIPAA enforcement Rule to incorporate the increased and tiered civil money penalty structure provided by the HITECH Act
- Final rule on Breach Notification for Unsecured Protected Health Information under the HITECH Act
- Make additional modifications as explained in the Final Rule (45 CFR 160 & 164)

HIPAA is a regulatory requirement, and Mercer University mandates that all Health activities and Health (Medical) information be in compliance. All employees, including staff and faculty, need to be trained in the HIPAA Law and the Mercer HIPAA Policies and Procedures. Students who use, hold or come in contact with Medical information need to be trained in the HIPAA Law and the Mercer HIPAA Policies and Procedures.

Any questions about HIPAA or Mercer’s HIPAA Policies and Procedures need to be directed to the Mercer HIPAA Privacy Officer, Jim Calhoun.

**Procedure:**

Protected Health Information (PHI) is information about you, including demographic information, that may identify you and that relates to your past, present, or future physical or mental health or condition and related health care services. The physical and electronic protection of PHI and transmission of PHI is required by Mercer University under its HIPAA Policies.
PHI must be physically and electronically secured in such a manner as to prevent unauthorized access. Guidelines for maintaining security include, but are not limited to the following:

Physical & Electronic Security of PHI:

- Each organization will designate faculty, staff, and students that have a need to know; the list of authorized individuals will be kept on file with the University HIPAA Privacy Officer.

- All physical PHI will be stored in locking file cabinets with access limited to those with proper authorization. Locking file cabinets should be uniquely keyed.

- All physical PHI will be stored in locking file cabinets in locations secured by locks during times when authorized personnel are not in the area.

- All physical PHI that is outside of the file cabinets during normal operations will be kept confidential and from the view of unauthorized individuals.

- All file folders or documents that contain PHI will be secured when all authorized personnel leave the work area.

- All computer screens containing PHI will have timeouts and screen savers installed that protect the viewing of the information by unauthorized personnel. Computer screens will be oriented in a manner that prevents unauthorized individuals from accessing PHI.

  - When physical or electronic PHI is removed from a secured area, it will be transferred in a format that maintains its confidentiality. This can be accomplished by securing data in closed envelopes, folders, boxes, etc. This information must be kept from casual view. PHI stored or shared through electronic transmission, including e-mails and any other type of electronic transmission should be encrypted. PHI maintained on data storage devices, including tablets, flash drives, phones, laptops, etc., should be password protected. Only authorized users should have access to the password.

These guidelines are to be considered the minimum required by all schools, colleges, departments, or programs. If necessary, more stringent procedures may be initiated.
Communications Guidelines:

Purpose:
The purpose of this information is to provide guidelines on how to handle Protected Health Information that is provided by an individual (student, staff, and faculty) to another individual or authorized third party business associate for decision purposes. This guideline is to protect both the individual and Mercer University from the errant disclosure of Protected Health Information.

Definition:
Protected Health Information (PHI): Information that is covered under the Health Insurance Portability and Accountability Regulations (HIPAA) regarding privacy. The PHI consists of information regarding treatment, diagnosis, medication, or procedures that can be specifically identified to an individual through oral, written, or electronic communication.

Policy:
The following are the policies that govern the HIPAA Communications Guidelines:

- **Receiver’s Responsibility:** According to HIPAA law, the providing of Protected Health Information by the individual is considered confidential in a one on one basis. Therefore, there is no issue with receiving this information. The HIPAA Confidentiality and Privacy requirement is based on what one does with the information received.

- **Communication of Protected Health Information:** If communication or transfer of the information received is required to perform work or accommodation for an individual, care must be exercised in the transmission of the PHI. PHI shared through electronic transmission, including e-mails and any other type of electronic transmission, should be encrypted.

- **HIPAA Privacy Baseline:** All identified Protected Health Information needs to be kept secure, private, confidential and communication of this information needs to follow all established Mercer University HIPAA Policies and Procedures.

All actual and suspected security breaches of Protected Health Information must be reported immediately to Mercer’s HIPAA Privacy Officer, Jim Calhoun, at 478-301-2325.
A. **Employment of Relatives:** Mercer University permits the employment of qualified relatives of employees only where such employment does not, in the opinion of the University, create actual or perceived conflicts of interest. Relatives should not be employed in regular positions in the same department, where one has direct or ultimate administrative responsibility over the other. That is, no employee should work in a regular position within the "chain of command" of a relative such that one relative's work responsibilities, salary, or career progress could be influenced by the other relative. If employment of a relative is proposed and is found to be in the best interest of the University, the recommendation of the department head must be accompanied by a written justification of the need for employment of the relative and approved by the Associate Vice President for Human Resources.

B. **Employment of Minors:** Federal law prohibits the hiring of persons under the age of 16 years for most occupations. In the case of hazardous occupations, this limit is 18 years. The employment of all persons under the age of 18 years must be in compliance with applicable law and approved by the Associate Vice President for Human Resources.

C. **Employment of Students:** Employment of students who are enrolled in the University is coordinated through the Student Financial Planning Office and the Office of Student Employment, which must approve hours of work and rates of pay, in accordance with Federal financial aid regulations. Undergraduate students currently enrolled at Mercer University may not be considered for regular employment with the University unless they are within 30 days of completing a degree.

**OUTSIDE EMPLOYMENT**  
(Updated 12/16/2013)

An employee's job at the University is generally expected to be his or her primary occupation. However, outside employment is allowed if it does not interfere with the individual's University responsibilities and if it is approved in advance by the employee's supervisor. Outside employment is not permitted where, in the opinion of the University, the outside job creates an actual or perceived conflict of interest or brings discredit to the University. No University funds, equipment, or facilities may be used in outside employment without appropriate payment or reimbursement to the University, unless otherwise authorized by the President of the University.

Non-exempt employees are not allowed to accept employment or perform services for additional compensation from another department without prior approval from the
current supervisor and the Associate Vice President for Human Resources. If approved, non-exempt employees must accurately report time worked on additional projects in compliance with the Wage and Hour Laws of the Fair Labor Standards Act. Non-exempt employees are discouraged from taking additional jobs at the University which would cause all hours to be paid at an overtime rate of pay.

CATEGORIES OF EMPLOYMENT

(Updated 12/16/2013)

For purposes of human resource administration, including eligibility for overtime and employee benefits, the University categorizes its employees as follows:

A. Full-time Regular Employees: Employees hired to work a minimum of thirty (30) hours a week on a regular basis. Such employees may be "exempt" or "nonexempt."

B. Part-time Employees: Part-time employees may be "exempt" or "nonexempt" as defined below. There are two categories of part-time employees:

   Category I -- Employees hired to work less than thirty (30) hours a week on a regular basis, but who work at least 1000 hours a year. Employees in this category are sometimes referred to as regular part-time employees.

   Category II -- Employees hired to work less than 1000 hours a year, including those who work an irregular schedule or varied hours.

C. Temporary Employees: Employees engaged to work full time or part time on the University's payroll with the understanding that their employment will be terminated no later than upon completion of a specific assignment, or when the supervisor determines the services provided by the temporary employee are no longer needed. Temporary assignments are for durations of six months or less. Such employees may be "exempt" or "nonexempt" as defined below. (Note: Employees hired from temporary employment agencies for specific assignments are employees of the respective agency and not of the University.) Temporary employees are not eligible for benefits, other than those federally mandated, and service as a temporary employee is not credited for purposes of benefits or seniority if the temporary employee is subsequently employed as a regular employee, except for the eligibility for Family and Medical Leave Act leave as required by federal law.

D. Student Employees: Persons currently enrolled in the University on a full-time basis who work for the University in some capacity. Student employees must
register and coordinate employment activities through the appropriate Financial Aid Office of their college or school. Their hours of employment may be limited, they are not eligible for benefits, and service as a student employee is not credited for purposes of benefits or seniority if the student employee is subsequently employed as a regular employee. Full-time undergraduate students are not eligible for consideration for regular University positions unless they are within 30 days of completing their degree requirements.

E. **Non-exempt Classified Employees:** Employees who are “not exempt” from reporting all leave and hours worked through formal time-keeping methods and are paid overtime at the rate of time and one half (i.e. one and one-half times) their regular rate of pay for all hours worked beyond forty hours in a workweek, in accordance with applicable federal wage and hour laws, or they may opt for compensatory time as long as the time is compensated within the pay period in which it is earned.

F. **Exempt Professional Employees:** Employees who are not required to be paid overtime, in accordance with applicable federal wage and hour laws, for work performed beyond forty hours in a workweek.

G. **Exempt Administrative Employees:** Employees who are not required to be paid overtime, in accordance with applicable federal wage and hour laws, for work performed beyond forty hours in a workweek. These employees include the President’s Executive Council, Deans, Vice Presidents and other executive level managers.

**ORIENTATION**
*(Updated 12/16/2013)*

On the first day of employment, the employee should schedule time in the Human Resources Office to complete the I-9 as required by the Immigration and Naturalization Act as amended, and to complete other forms required for payroll purposes. Generally, during the first month of employment, the employee will be scheduled for a New Employee Orientation Program which will provide them with information regarding University policies, University culture, employee safety, benefit programs, and other information to acquaint them with the University.

We encourage the employee to ask any questions they may have during this orientation so that they will understand all the policies and benefits that affect and govern their employment relationship with the University.
PROBATIONARY PERIOD FOR NON-FACULTY EMPLOYEES
(Updated 12/16/2013)

New non-faculty employees (with the exception of administrators) are required to serve a probationary period. Continuing non-faculty employees may be placed in a probationary status for disciplinary reasons at any time during their employment at the University.

Most non-faculty employees are in a probationary status during the first 90 work days of employment. Law enforcement employees are in an initial probationary status for 180 days. During this probationary period, an employee may not apply for a transfer or promotion outside of their initial employing department, or receive a salary increase. Before this probationary period ends, the employee should be evaluated by the supervisor, and a specific recommendation must be made for continued employment beyond the probationary period. In certain circumstances, such as when there has been a change of supervisors or when there have been deficiencies in performance, the probationary period may be extended. When extensions are granted, the additional probationary period shall include counseling of the employee in order to provide an opportunity to correct the apparent deficiency.

During this probationary period, if job performance is not satisfactory to the supervisor, the employee shall be terminated without prejudice and no formal evaluation of the employee is required. However, even during this period, discussion should be held with the employee notifying them of the performance or behavioral concerns so corrective measures may be taken. Termination of the probationary employee may be done summarily. The successful completion of this probationary or introductory period should not be construed as creating a contract or as guaranteeing employment for any specific duration or as establishing a “just cause” standard for termination.

A supervisor, with the approval of the next level of supervision and the Associate Vice President for Human Resources, may place a non-faculty employee in a probationary status at any time during the employment period to enforce work rules or performance standards. A written notification shall be forwarded to the employee, with a copy to the Human Resources Office, advising the employee that they are being placed on a probationary status for the amount of time specified. This written notification shall state concisely the reason for the probation.

A non-faculty employee who is placed back on probation may not apply for a transfer or promotion until their probationary status has been removed.
PROMOTIONAL AND TRANSFER OPPORTUNITIES
FOR NON-FACULTY EMPLOYEES
(Updated 12/16/2013)

The University provides opportunities for internal transfers and promotions. Vacancies are normally posted on the Mercer University Jobs web site (https://www.mercerjobs.com) so that interested employees may apply.

As vacancies occur, employees interested in transfer or promotion should follow the procedures for application in the posting notice. Because of SACS standards, when a promotional opportunity requires a college degree, the employee must have a degree conferred from an accredited college or university and transcripts documenting degrees conferred must be on file with the Human Resources office within 60 days of employment.

Non-faculty staff who are on probation may not apply for transfer or promotional opportunities to other departments, but may be considered for opportunities within the department in which they are currently employed.

It is advised that employees who are applying for transfer or promotional opportunities outside of their department notify their supervisor if they are selected as a finalist. The employee’s present supervisor will be consulted prior to an offer being extended.

Non-exempt employees who are transferring or receiving a promotion must provide ten (10) working days advance notice, unless both the present and prospective supervisors agree to waive this requirement.

Exempt employees are encouraged to provide at least 30 days’ notice to the present supervisor, unless both the present and prospective supervisors agree to waive this requirement.

RESIGNATION OR TERMINATION OF NON-FACULTY EMPLOYEES
(Updated 12/16/2013)

An employee may resign at any time during the employment period. For non-exempt employees, ten working days of notification should be given to the supervisor. For exempt staff, it is requested that at least 30 days’ notice be given to the supervisor. Accrued vacation is not regarded as part of the notice. A written resignation should be addressed to the supervisor, with a copy sent to Human Resources.
Non-faculty employment relationships at Mercer are on an at-will basis. Thus, although the University hopes that its relationships with employees are long-term and mutually rewarding, the University reserves the right to terminate the employment relationship at any time. Non-faculty employees may be terminated during the initial probationary period without being provided cause. Advance notice to the employee of the termination is not required.

After non-faculty employees have successfully completed the probationary period, if the employee is being terminated due to performance deficiencies or improper employee behavior, normally, corrective measures or disciplinary action short of termination may have been imposed before termination is approved. The recommendation must be reviewed with the Associate Vice President for Human Resources before it is implemented. Normally, ten working days of notification will be given to the employee prior to the actual termination date. In cases of serious misconduct, classified personnel may be terminated immediately. The recommendation for immediate termination must be coordinated with the Associate Vice President for Human Resources.

PERSONNEL FILES
(Updated 12/16/2013)

A personnel record is maintained for each employee in the Human Resources Office and includes such information as the application for employment, resumes, transcripts if applicable, appointment letters, position assignments, transfers, promotions, evaluations, correspondence, and disciplinary actions, etc.

The supervisor must notify Human Resources of any employment related correspondence, i.e., disciplinary actions, etc. for maintenance in the employee’s personnel file.

To ensure that the employee’s personnel file is up to date, the employee should notify Human Resources of any change of name, address, telephone number, or any other relevant personal data, as soon as such a change occurs.

Employees have a right to review their files within normal business hours. No records shall be removed from the employee’s file. If a copy of the file is requested, the employee will be charged a reasonable fee for reproduction.
3. COMPENSATION POLICIES

WORK HOURS
(Updated 12/16/2013)

Monthly Employees:

The workweek is based on the calendar week, Sunday thru Saturday.

The normal workweek schedule for full-time employees is 37.5 or 40 hours, depending upon the job classification and specific departmental and college requirements. However, for purposes of benefit programs, the University considers an employee who works 30 hours a week a full-time employee as well. Employees are expected to report to work on time and to remain on the job throughout their regular working hours. The normal operating hours are 8:30 a.m. to 5:00 p.m.; however, departments in Physical Plant and the Campus Police may have shift hours, and hours which may shift to an earlier starting time due to the weather conditions.

Lunch breaks are normally taken between the hours of 11:00 a.m. and 2:00 p.m. Special arrangements may be made with advance approval of the department supervisor.

The workweek for an employee, or a group of employees, cannot be changed without the approval of an officer of the University for the area affected and with consultation of the Associate Vice President for Human Resources.

Biweekly Employees:

The workweek is based on the calendar week, Thursday through Wednesday.

The normal workweek schedule for full-time employees is 40 hours, depending upon the job classification and specific departmental and college requirements. However, for purposes of benefit programs, the University considers an employee who works 30 hours a week a full-time employee as well. Employees are expected to report to work on time and to remain on the job throughout their regular working hours. Departments in Physical Plant and the Campus Police may have shift hours, and hours which may shift to an earlier starting time due to the weather conditions.

Lunch breaks are normally taken between the hours of 11:00 a.m. and 2:00 p.m. Special arrangements may be made with advance approval of the department supervisor.
The workweek for an employee, or a group of employees, cannot be changed without the approval of an officer of the University for the area affected and with consultation of the Associate Vice President for Human Resources.

**TIME RECORDS**  
*(Updated 12/16/2013)*

In order to comply with the provisions of the Fair Labor Standards Act, federal legislation, and related regulations, the University must require employees who are designated as non-exempt (see “Categories of Employment” - Section 2) to submit a time record for each pay period. The time record is the official document for determining the amount of pay an employee is due for work performed during a given pay period. After reviewing the form and resolving any discrepancies, the supervisor signs the form and forwards it to payroll. Authorizing signatures must be in original form. Signature stamps are not acceptable.

Employees must ensure that their actual hours worked and leave time taken are recorded accurately. Falsification of a time record is a breach of University policy and is grounds for disciplinary action, including the possibility of termination.

Where time clocks are used, employees are responsible for clocking in at the appointed starting time, clocking out for lunch, clocking in after lunch, and clocking out at the end of work time.

**PAY PERIODS AND RECEIPT OF CHECKS**  
*(Updated 10/2015)*

Non-faculty employees are normally paid by check either on a bi-weekly or monthly basis. Employees paid on a bi-weekly basis normally receive paychecks every other Friday. Employees paid on a monthly basis normally receive paychecks on the last working day of the calendar month. Exceptions may be made when the employee designates in writing another individual to receive the check or when the employee will be on an extended leave of absence. All required deductions (such as for federal and state taxes) and all authorized voluntary deductions will be withheld automatically from employee paychecks. Paychecks are generally sent to a designated departmental representative for distribution to individual employees.

All regular employees may authorize direct deposit of their paychecks to their personal bank accounts. Information on direct deposit procedures and authorization forms are available in the Benefits & Payroll Office or online at [http://benefitspayroll.mercer.edu/payroll/](http://benefitspayroll.mercer.edu/payroll/).
All employees should review their paycheck for errors. If a mistake is found or there are questions, the employee should contact his/her supervisor, the Payroll Office, or the Human Resource Office immediately to answer questions and to make corrections.

Questions regarding time and/or hours worked, holiday pay or sick leave pay can be discussed by the employee with his/her supervisor or department head, the Human Resource Office, or the Payroll Office for clarification of questions regarding salary and paychecks.

PAY TRANSPARENCY NONDISCRIMINATION PROVISION
(Updated 01/19/2016)

As a federal contractor, Mercer University will not discharge or in any other manner discriminate against employees or applicants because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant. However, employees who have access to the compensation information of other employees or applicants as a part of their essential job functions cannot disclose the pay of other employees or applicants to individuals who do not otherwise have access to compensation information, unless the disclosure is (a) in response to a formal complaint or charge, (b) in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or (c) consistent with the contractor’s legal duty to furnish information.

POLICY OF DEDUCTIONS FROM SALARIES
(Updated 12/16/2013)

Mercer University is committed to compliance with all provisions of the Fair Labor Standards Act.

Mercer University intends to pay salaried, exempt employees on a salary basis and will not make deductions from salary that are prohibited under the Fair Labor Standards Act. Employees who believe that improper deductions from their salary have been made should notify the Payroll Administrator or the Associate Vice President of Benefits and Payroll as soon as possible. If an investigation reveals a salary was reduced in error, the University will reimburse the employee for any improper deductions and take good faith measures to prevent improper deductions in the future.
INCLEMENT WEATHER
(Updated 12/16/2013)

Mercer University has operations throughout the state; and the decision to close each facility due to inclement weather will be made by the Dean of the respective school or college, Executive Director, or Presidential designee, after consultation with the President or his designee.

Normally, employees excused from work will be paid for such absences.

Essential service personnel include, but are not limited to: Student Health Clinic, Physical Plant, Residence Hall employees and Police. All essential non-exempt personnel will be paid for hours worked as well as time for inclement weather. Compensatory time may be allowed as long as University policies are followed. (See Section 3, Overtime.)

Essential service personnel unable to report during extreme weather conditions must consult their supervisors for instructions.

OVERTIME
(Updated 12/16/2013)

Non-exempt employees may be required to work overtime when the need arises. When overtime is necessary, supervisors will attempt whenever possible to provide reasonable advance notice to the affected employees. Overtime work must be authorized in advance by the appropriate supervisor. Overtime is all work performed by an employee in excess of the employee's regular budgeted hours per week. All overtime up to and including 40 total hours worked in a workweek will be compensated at the employee's regular hourly rate of pay. All overtime in excess of 40 total hours worked in a workweek will be compensated at one and one-half times the employee's regular hourly rate of pay.

When overtime hours have been worked, they must be recorded on the employee's time record form for each workweek. Compensation for overtime is normally paid on the overtime payroll run for monthly employees and on the regular payroll run for bi-weekly employees, unless the overtime hours are offset by a proportionate number of time-off hours in accordance with the following Time-Off Plan.

Time-Off Plan for Overtime: A supervisor may schedule time off within the same pay period to offset the overtime hours worked by non-exempt employees, as long as all the following conditions are met:
1. The employee must either be paid at a fixed hourly rate or paid a regular salary for a fixed number of hours per week.

2. The employee's regular pay period must be longer than a week (i.e. bi-weekly or monthly).

3. The time off granted must be at the rate of one hour off for every hour of overtime worked up to 40 hours in a workweek, and at the rate of one and one-half hours off for every hour of overtime worked in excess of 40 hours in a workweek. Time off should be granted at a time agreeable to both the supervisor and the employee.

4. The offsetting time off must be taken during the same pay period in which the overtime was worked. The time off may be spread over several days of the pay period, and it may be granted before or after the overtime work is performed, as long as it is taken within the same pay period. Any overtime which has not been offset by time off taken within the pay period must be paid in cash on the employee's regular payday.

5. The time report must accurately record hours worked, on the days they are actually worked, and time off taken.
4. EMPLOYEE CONDUCT

ABSENTEEISM AND TARDINESS
(Updated 12/16/2013)

Employees are required to report for work and to be prepared for duty at the beginning of the work period. If the employee expects to be absent or tardy, they should notify their supervisor before the work period begins unless circumstances make this impossible or they are granted an authorized medical leave.

Absenteism or tardiness that is unexcused or excessive may be grounds for disciplinary action, including dismissal.

Absent a known serious health condition, Mercer considers the use of more than one day of sick leave a month excessive and abuse of our sick leave policy.

Employees having an urgent reason for leaving the work site must have authorization from their supervisors prior to departure. Failure to notify the supervisor could result in disciplinary action.

GUIDELINES FOR APPROPRIATE CONDUCT
(Updated 12/16/2013)

Employees of the University are expected to accept certain responsibilities, adhere to acceptable principles in matters of personal conduct, and exhibit a high degree of integrity at all times. Whether they are on duty or off, their conduct reflects on Mercer University. Employees are, therefore, encouraged to observe the highest standards of professionalism at all times.

Types of behavior and conduct that are considered inappropriate for University employees include, but are not limited to, the following:

1. Falsifying employment or other University records, including time cards or time sheets.
2. Violating the University's nondiscrimination and/or harassment policies (described in this Handbook).
3. Soliciting or accepting money and/or gratuities from students or vendors.
4. Excessive absenteeism or tardiness.
5. Excessive, unnecessary or unauthorized use of University supplies or equipment, especially for personal purposes.
6. Reporting to work with prohibited substances or alcohol in your system is prohibited.
7. Violating the University’s drug-free workplace and campus program (described later in this Handbook).
8. Fighting or using obscene, abusive, or threatening language or gestures.
9. Theft of property from co-workers, students or the University.
10. Unauthorized possession of firearms, weapons of any kind, or explosives on University premises or while on University business.
11. Disregarding safety, fire, traffic or parking rules.
12. Smoking in an unauthorized area.
13. Insubordination.
14. Willful failure to perform assigned duties or to follow instructions.
15. Lending or permitting the duplication of University keys to an unauthorized person.
16. Manipulation of computer data banks by causing false input or removal of computer data.
17. Gambling or conducting games of chance on University premises.
18. Conviction of a felony.
19. Charging telephone calls or personal expenses to University accounts.

Should the employee’s performance, work habits, overall attitude, conduct or demeanor become unsatisfactory in the judgment of the University, based on violations of the above or of any other University policies, rules or regulations, they will be subject to disciplinary action, up to and including dismissal.

SAFEGUARDING UNIVERSITY PROPERTY
(Updated 12/16/2013)

All employees who use University property are responsible for its care and security while it is subject to their control.

Employees are not permitted to use University property for personal purposes, and unauthorized use or removal of such property may be cause for immediate dismissal.

Employees who willfully or carelessly destroy University property will be required to pay for the repair, recovery, or replacement of such equipment. In addition, such activity may be construed as cause for immediate dismissal.
PERFORMANCE EVALUATION FOR NON-FACULTY EMPLOYEES  
(Updated 12/16/2013)

The purpose of the performance evaluation is to provide non-faculty employees with clear job expectations and meaningful feedback regarding how well employees have performed their assigned job duties and their established goals. Performance evaluations are an ongoing process that contributes to positive communication, mutual respect, improved performance, individual growth, and career development.

Non-faculty employees in the initial probationary period shall be evaluated just prior to the completion of the probationary period. Such evaluations shall contain specific recommendations for either continued employment or termination.

Performance Evaluation Forms are made available online to each supervisor. Non-faculty employees (except for administrators) are evaluated by their supervisor on an annual basis. Administrators (as defined in Section 2: Categories of Employment) are evaluated on a regular basis, but not less than every three years.

After completing the Evaluation Form, the supervisor must discuss the contents with the employee and set objectives for the coming period. The employee should acknowledge this discussion by signing the form. The employee’s signature does not imply agreement with the evaluation, but only acknowledges that the contents have been reviewed by the employee. If the employee refuses to sign the Evaluation Form, the supervisor should so note on the form before it is sent to the Human Resources Office. The employee may, within five working days, note objections to the evaluation on the form or on a separate memorandum which should be attached to the form. These objections noted by the employee will become a part of the employee's personnel file.

Once the employee has signed the completed form, no changes, additions, or deletions shall be made without the employee's knowledge. Copies of these evaluative documents must be sent to Human Resources for retention in the personnel files for SACS Accreditation Reviews.

GRIEVANCE PROCEDURES FOR NON-FACULTY EMPLOYEES  
(Updated 8/8/2014)

The University has established the following grievance procedures in an effort to resolve complaints by non-faculty employees:

1. These procedures apply to all complaints by non-faculty employees alleging violation of University policies prohibiting discrimination in employment on the basis of race, color, national origin, disability, veteran status, sex, sexual orientation,
gender identity, age or religion (except in limited circumstances where religious preference is both permitted by law and deemed appropriate as a matter of University policy). This procedure is intended to provide the grievance procedure required under Title IX, Section 504 and similar Federal laws and regulations prohibiting discrimination in employment. These procedures also apply to other complaints by employees involving adverse employment actions, including actions with respect to salary, fringe benefits, workload and work assignment. Any complaint must be brought by an individual and shall not be brought on behalf of a class.

2. This procedure is designed to be used only after full consultation and informal negotiation or mediation has failed to produce an acceptable resolution of the complaint. Employees who believe they have been discriminated against in violation of the University’s policy of equal employment opportunity should contact the Equal Opportunity Officer (see Section 2 of this Handbook). The Equal Opportunity Officer will discuss the matter with the employee’s supervisor and/or with the supervisor’s supervisor, as deemed appropriate, in an attempt to resolve the matter informally. The Equal Opportunity Officer may involve an external mediator in an effort to reach a resolution on which the parties can agree. In cases not alleging discrimination, the complaining employee should contact his or her supervisor in an effort to resolve the matter informally.

3. After a period of informal discussion, but within 90 days after the occurrence of the action complained of, an employee who wishes to invoke the formal grievance procedure shall file a written complaint with the Associate Vice President for Human Resources.

4. The complaint shall identify the complainant and the respondent and shall describe the action complained of and the desired remedy. The respondent will generally be the individual responsible for the action that is the subject of the complaint. In questionable cases, the Associate Vice President for Human Resources will designate the respondent. Upon receipt of the complaint, the Associate Vice President for Human Resources shall promptly send copies to the respondent and to the appropriate Dean, Director or other unit head.

5. Within 30 days of receipt of a copy of the written complaint, the respondent shall submit to the Associate Vice President for Human Resources a written answer to the complaint. The Associate Vice President for Human Resources shall promptly send copies of the answer to the complainant and the unit head.

6. Within 30 days of receipt of the written answer, unless the complainant withdraws the complaint, a grievance committee shall be selected. Arrangements for such selection shall be made by the Associate Vice President for Human Resources. The grievance committee shall consist of three employees who have not been involved in the grievance. The manner of selection of the committee shall be as follows:
(a) One member shall be selected by the complainant;
(b) One member shall be selected by the Dean, Director or other head of the unit in which the complainant works;
(c) The third member, who shall chair the committee, shall be selected by the two members selected in steps (a) and (b) above.

7. The grievance committee shall receive copies of the complaint and answer and shall have broad power, in its discretion, to request additional evidence, to conduct personal interviews with the parties to the grievance and with witnesses, and/or to hold a hearing on the matter. Any hearing shall be conducted by the chair under informal procedures. The parties may be assisted in preparation for any hearing by legal counsel of their choice or by other advisors within the University; but in order to preserve the informal, non-judicial nature of these procedures, legal representation shall not be allowed at any hearings that may be conducted.

8. The grievance committee and the parties shall not discuss information of a private or confidential nature obtained in the course of these procedures. Any such disclosure, except where required by law, shall be grounds for disciplinary action.

9. The grievance committee shall prepare a written report of its findings and recommendations within 30 days of its receipt of the complaint and answer unless more time is reasonably required by either party or by the committee. The report shall be sent to the Associate Vice President for Human Resources, the complainant, the respondent, and the appropriate unit head.

10. Within 30 days of receipt of the committee's report of findings and recommendations, the Associate Vice President for Human Resources shall make a decision accepting, rejecting or modifying the committee's findings or recommendations. The decision shall be communicated in writing to the individuals who received the committee's report.

11. Either the complainant or the respondent shall have 10 days after receipt of the decision to request review by the President. Any such request shall be in writing and shall be submitted to the President, who shall make a decision within 30 days of receipt of the request. The President's decision is final.
SEXUAL MISCONDUCT AND RELATIONSHIP VIOLENCE POLICY
(Updated June 2017)

INTRODUCTION
As required by Title IX, Mercer University is committed to maintaining an environment free from discrimination on the basis of sex and/or gender and where the dignity and worth of all members and visitors of the University community are respected. Sex discrimination, which includes, but is not limited to, sexual harassment, sexual violence, intimate partner violence (IPV), stalking, and gender-based harassment, harms the environment the University seeks to maintain and is unequivocally prohibited. Mercer University has developed its policy on Sexual Misconduct and Relationship Violence (SMRV) in accordance with Title IX of the Education Amendments and the Violence Against Women Act to reaffirm the University's commitment to address sexual misconduct and take steps to prevent its reoccurrence and remedy its effects. This policy explains the rights and options for employees, students, and visitors with reports regarding sexual misconduct and relationship violence, as defined below, and provides a grievance procedure for handling reports. Employee reports regarding other forms of sex discrimination will be handled in accordance with the grievance procedures outlined in the faculty and staff handbooks (Faculty Handbook, Section 2.10 and Non Faculty Handbook, Section 4/Grievance Procedures).

This policy applies to all University students and employees, campus visitors, and employees of third parties doing business with the University, regardless of sexual orientation, gender identity, or location. All members of the University community are expected to conduct themselves in a manner that does not negatively affect an individual's school or work experience or the overall school environment, whether on University premises or at any off-campus location. University administrators and supervisors have the responsibility for implementing steps designed to prevent and eliminate sexual misconduct and relationship violence within the areas they oversee.

Under Title IX, individuals reporting an allegation related to sexual misconduct and/or relationship violence have the right to timely resolution; to have the University conduct a prompt, fair, and impartial investigation; and to have interim steps taken to ensure the safety and well-being of the individuals involved and the University community. These procedures will be conducted by officials who receive training on issues related to sexual harassment, sexual assault, sexual exploitation, intimate partner violence, and gender-based harassment, as well as how to conduct a hearing process that protects safety, promotes accountability and ensures fairness. The University will communicate regular investigatory updates to the reporting party and the person against whom the allegation or report of sexual misconduct or relationship violence is made. If a responding party is found to have violated this policy, serious sanctions will be used to prevent the reoccurrence of sexual misconduct and relationship violence and address its effects. Mercer University, Campus Sexual Violence Elimination Act (Campus SaVE) and Title IX prohibit retaliation (See Retaliation), and the University will take reasonably calculated steps to prevent retaliation, and will evaluate responsive actions, as necessary, for any retaliatory acts.

PRESERVING EVIDENCE
A person who has experienced sexual misconduct and/or relationship violence is encouraged to make every effort to preserve evidence, even if he or she has not made a decision regarding whether to report the violation. A medical exam, preferably by a Certified Forensic Nurse (CFN) or Sexual Assault Nurse Examiner (SANE), is an important way for a health provider to properly collect and preserve evidence. In order to assist with this process, the reporting party should not: bathe or shower, use the
restroom, change clothes, comb hair, clean up the area where the incident occurred, or move anything the alleged perpetrator may have touched. While the emergency room and/or a Sexual Assault Nurse is obligated to report the alleged assault to police, the reporting party may choose whether to press charges.

CONFIDENTIALITY, PRIVACY AND REPORTING

If an individual has knowledge of or has experienced sexual violence, it is particularly important, for the protection of both the reporting party and the University community, that the incident be reported immediately.

In order to make informed choices, it is important to be aware of confidentiality and mandatory reporting requirements when consulting campus resources. On campus, some resources may maintain confidentiality – meaning they are not required to report actual or suspected discrimination or harassment to appropriate University officials - thereby offering options without any obligation to inform University officials.

Confidential Reporting

Staff at Counseling Services on all campuses and the University Minister’s office are considered confidential reporters when acting in the capacity of their role as a counselor.

Mandatory Reporters – Responsible Employees

All University employees (faculty, staff, and administrators), and resident advisors are expected to immediately report actual or suspected discrimination or harassment to appropriate University officials, though there are some limited exceptions (see above). Conversations are kept as private as possible, but information about alleged incidents of sexual misconduct and relationship violence must be shared with the Title IX Coordinator. Additionally, information may be shared with relevant administrators to ensure the safety of the campus community.

If University administrators, faculty or staff know, or reasonably should have known, that sexual misconduct and/or relationship violence has occurred, receive a report or obtain other information indicating possible sexual misconduct and/or relationship violence, they must take immediate steps to ensure the problem is addressed, even if the problem or alleged problem is not within their area of oversight. They do so by reporting the behavior of concern to the appropriate authority charged with investigating such reports.

Mercer Police can assist the reporting party in evaluating criminal action as needed and/or notifying the appropriate law enforcement authorities, if the individual so chooses. Reporting the incident to the police does not mean the reporting party must press charges, but it does help assure that the individual receives assistance in deciding how to proceed with criminal charges and preserving and collecting evidence necessary for criminal prosecution. The sooner an incident is reported, the easier it is to preserve and collect necessary evidence. (See Preserving Evidence above).

The University takes requests for confidentiality seriously, and will evaluate a Reporting Party’s request for confidentiality in the context of University’s responsibility to provide a safe and nondiscriminatory environment for all students, including the Reporting Party. However, should University officials receive credible reports that a Responding Party has allegedly perpetrated several acts of sexual violence against different students, and/or that multiple reports are emerging from a particular location or student organization, that pattern of conduct may trigger an investigation into the conduct, and may be expanded to include whether other students have been subjected to sexual violence by that Responding Party or organization. In such cases, as appropriate, the University will take affirmative steps during the investigation to inform the Responding Party that the University made the decision to go forward despite being requested not to do so by the Reporting Party.

TITLE IX COORDINATOR

The University’s Title IX Coordinator oversees compliance with all aspects of the sexual misconduct and relationship violence policy. The Coordinator reports directly to the Vice President for Audit and Compliance. Questions about this policy should be directed to the Title IX Coordinator. Individuals
wanting to make a report relating to discrimination or harassment and/or making inquiries concerning the application of Title IX at Mercer University may contact the Title IX Coordinator:

Melissa Graham
Title IX Coordinator
315 Newton Chapel (Macon Campus)
1501 Mercer University Dr., Macon, GA 31207
478-301-2788
Graham_mm@mercer.edu
TitleIX@mercer.edu

Individuals reporting an incident regarding SMRV where the Title IX Coordinator is identified as the responding party may contact:

James Calhoun
Vice President for Audit and Compliance
310 Newton Chapel
1501 Mercer University Dr., Macon, GA 31207
478-301-2300
Calhoun_j@mercer.edu

Individuals experiencing harassment or discrimination always have the right to also file a formal grievance with government authorities:

Headquarters: Regional Office:
Office for Civil Rights Office for Civil Rights
U.S. Department of Health and Human Services U.S. Department of Health and Human Services
200 Independence Avenue, S.W. Sam Nunn Atlanta Federal Center, Suite 16T70
Room 509F HHH Bldg. 61 Forsyth Street, S.W.
Washington, D.C. 20201 Atlanta, GA 30303-8909
OCR@ed.gov (800) 368-1019
http://www.ed.gov/ocr

UNIVERSITY DEFINITION OF OFFENSES

1. Sexual Harassment:
   Unwelcome sex-based and/or gender-based verbal, non-verbal, written, online, and/or physical conduct of a sexual nature that is:
   • sufficiently severe, or
   • persistent or pervasive, and
   • objectively offensive that it:

   Unreasonably interferes with, denies or limits someone’s ability to participate in or benefit from the University’s educational, employment, social, and/or residential program from both a subjective (the reporting party) and objective (reasonable person) point of view.

   Sexual harassment can occur when submission to the conduct is made a term or condition of employment, status in a course, program, or activity; or submission to or rejection of such conduct is used as the basis for an academic, employment or placement decision affecting the individual. In
these cases (quid pro quo) there is generally a power differential. Sexual harassment can also occur when the conduct has the purpose or effect of unreasonably interfering with an individual's work performance or educational experience or creates an intimidating, hostile or offensive environment for working or learning (hostile environment).

Sexual harassment can occur regardless of the relationship, job title or respective sex and/or gender of the parties. Same-sex harassment violates this policy, as does harassment by a student of a faculty member or harassment by a subordinate employee of a supervisor.

2. **Sexual Assault (defined as follows):**
   A. **Non-Consensual Sexual Intercourse:**
   - any sexual intercourse
   - however slight,
   - of any part of one person's body with any part of another person's body or an object,
   - that is without consent and/or by force.
   
   Intercourse includes:
   - vaginal penetration by a penis, object, tongue or finger; anal penetration by a penis, object, tongue or finger; or oral copulation (mouth to genital contact or genital to mouth contact), no matter how slight the penetration or contact (by one person upon another person regardless of sex or gender).

   B. **Non-Consensual Sexual Contact is:**
   - any intentional sexual touching,
   - however slight,
   - of any part of one person's body with any part of another person's body or an object,
   - that is without consent and/or by force,
   
   Sexual contact includes:
   - intentional contact includes but is not limited to the breasts, buttocks, groin, upper thigh, or genitals, or touching another with any of these body parts, or making one person sexually touch another person or themselves with or on any of these body parts; or
   - any intentional bodily contact in a sexual manner (by one person upon another person regardless of sex or gender).

3. **Sexual Exploitation:**
   Taking non-consensual or abusive sexual advantage of another for one’s own advantage or benefit, or to benefit or advantage anyone other than the one being exploited, and that behavior does not otherwise constitute one of the other sexual misconduct offenses.

   Examples of sexual exploitation include, but are not limited to:
   - invasion of sexual privacy;
   - prostituting another individual;
   - non-consensual observation, either by direct observation or digital, video or audio recording of nudity or sexual activity.
   - unauthorized sharing or distribution of digital, video or audio recording of nudity or sexual activity;
   - knowingly exposing someone to or transmitting an STI (Sexually Transmitted Infection) or HIV (Human Immunodeficiency Virus) to another person;
• intentionally or recklessly exposing one’s genitals in non-consensual circumstances and/or inducing another to expose that individual’s genitals.

4. **Stalking:**
   • a course and/or pattern of conduct
   • directed at a specific person
   • that is unwelcome, and
   • would cause a reasonable person to fear for that individual's or others' safety, or to suffer substantial emotional distress.

Such conduct includes two or more acts by which the stalker directly, indirectly, or through third parties follows, monitors, observes, surveils, threatens, or communicates about a person or interferes with his or her property.

5. **Intimate Partner Violence (IPV)**
   Any physical violence or psychological aggression occurring between intimate partners. Intimate partners include current or former spouses, a person whom the reporting party shares a child with, boyfriends or girlfriends, casual dating partners, romantic partners, and/or sexual partners. IPV can occur between heterosexual or same-sex couples and does not require sexual intimacy. IPV can manifest through both physical violence and/or psychological aggression and can vary in frequency and severity.

   A. **Physical violence** is the intentional use of physical force with the potential for causing death, disability, injury, or harm. Physical violence includes, but is not limited to, scratching; pushing; shoving; throwing; grabbing; biting; strangulation; shaking; aggressive hair pulling; slapping; punching; hitting; burning; use of a weapon; and use of restraints or one’s body, size, or strength against another person. Physical violence also includes coercing other people to commit any of the above acts.

   B. **Psychological Aggression** is the use of verbal and non-verbal communication which impacts another person mentally or emotionally, and/or to exert control over another person. Psychological aggression can include expressive aggression (e.g., name-calling, humiliating); coercive control (e.g., limiting access to transportation, money, friends, and family; excessive monitoring of whereabouts); threats of physical or sexual violence; control of reproductive or sexual health (e.g., refusal to use birth control; coerced pregnancy termination); exploitation of vulnerability (e.g., immigration status, disability); and presenting false information to the victim with the intent of making them doubt their own memory or perception (e.g., mind games, manipulation).

6. **Gender-based Harassment:**
   Acts of verbal, nonverbal, graphic, or physical aggression, intimidation, or hostile conduct based on sex, sex- stereotyping, sexual orientation, gender identity or expression, but not involving conduct of a sexual nature, when a reasonable person would find such conduct:
   • sufficiently severe, or
   • persistent or pervasive, and
   • objectively offensive that it:
     • unreasonably interferes with, denies or limits someone's ability to participate in or benefit from the University's educational, employment, social, and/or residential program from both a subjective (the reporting party) and objective (reasonable person) point of view.
Exclusion from an activity based on sexual orientation or gender identity or persistent disparagement of a person based on a perceived lack of stereotypical masculinity or femininity may also violate this policy.

7. **Retaliation:**
Any adverse action taken in response to an individual who has filed a report, testified, assisted, or participated in any manner in an investigation or proceeding under any University Policy (including the academic honor code, student code of conduct, or Sexual Misconduct and Relationship Policy). Retaliation includes intimidation, threats, harassment, or any type of adverse action taken against an individual in the attempt to deter them from addressing, reporting, or testifying on adverse conduct. This includes action taken against a bystander who intervened to stop or attempt to stop discrimination, harassment, or sexual misconduct.

**ADDITIONAL APPLICABLE DEFINITIONS**

**Reporting Party:** The person directly affected by an allegation or report of sexual misconduct or relationship violence.

**Responding Party:** The person against whom the allegation or report of sexual misconduct or relationship violence is made.

**Third Party Reporter:** The person who reports an allegation of sexual misconduct or relationship violence on behalf of the Reporting Party.

**Reasonable Person Viewpoint:** OCR’s standards require that the conduct be evaluated from the perspective of a reasonable person in the same position, considering all the circumstances.

**Consent:** Clear, knowing, and voluntary words or actions that give permission for specific sexual activity. It is active, not passive.
- Silence, in and of itself, cannot be interpreted as consent.
- Consent can be given by words or actions, as long as those words or actions create mutually understandable, clear permission regarding willingness to engage in sexual activity.
- Consent to any one form or condition of sexual activity cannot automatically imply consent to any other forms or conditions of sexual activity.
- Current and/or previous relationships or prior consent cannot imply consent to future sexual acts.
- Once given, consent can be withdrawn at any time.
- Coercion, force, or threat of either, invalidates consent (see Force).
- In order to give effective consent, one must be of legal age, which is 16 years in Georgia.

**Incapacitation:** A state in which someone cannot make rational, reasonable decisions because he or she lacks the capacity to give knowing consent (e.g., to understand the “who, what, when, where, why or how” of their sexual interaction).
- Sexual activity with someone known to be – or based on the circumstances, should reasonably have been known to be – incapacitated constitutes a violation of this policy.
- Incapacitation can occur mentally or physically, from developmental disability, by alcohol or other drug use, or blackout.
• This policy also covers a person whose incapacity results from mental disability, sleep, unconsciousness, or involuntary physical restraint.

**Force:** the use of physical violence and/or imposing on someone physically to gain sexual access. Force also includes threats, intimidation (implied threats) and coercion that overcomes free will or resistance or produces consent.

• Coercion is unreasonable pressure for sexual activity.

• Coercive behavior differs from seductive behavior based on the type of pressure someone uses to get consent from another. When someone makes clear that they do not want sex, that they want to stop, or that they do not want to go past a certain point of sexual interaction, continued pressure beyond that point can be coercive.

• There is no requirement that a party resist the sexual advance or request, but resistance is a clear demonstration of non-consent. The presence of force is not demonstrated by the absence of resistance. Sexual activity that is forced is by definition non-consensual.

**OTHER REPORTING OPTIONS**

Reports of sexual misconduct and relationship violence may be made to any of the following:

**Atlanta Campus:**
Counseling and Psychological Services (678) 547-6060 (Confidential)
Mercer Police (678) 547-6358
Title IX Coordinator (478) 301-2788
Dean of Students (678) 547-6821
Associate Vice President for Human Resources (478) 301-2005
Residence Life Staff (678) 547-6823

**Columbus Campus:**
Columbus Police Department (706) 653-3400*
Title IX Coordinator (478) 301-2788
Dean, Columbus Campus (706) 223-5119
Associate Vice President for Human Resources (478) 301-2005

**Macon Campus:**
Counseling and Psychological Services (478) 301-2862 (Confidential)
Mercer Police (478) 301-2970
Title IX Coordinator (478) 301-2788
Vice President and Dean of Students (478) 301-2685
Associate Vice President for Human Resources (478) 301-2005
Law School Dean of Students (478) 301-2602
Medical School Dean of Students (478) 301-5570
Residence Life Staff (478) 301-2687

**Regional Academic Centers:**
Henry, Douglas, and Newnan students call Atlanta Mercer Police (678) 547-6358
Title IX Coordinator (478) 301-2788
Associate Vice President for Human Resources (478) 301-2005
Director of Operations for the Centers (678) 547-6370
Center Coordinator for that location

**Savannah Campus:**
Chatham County Police Department (912) 652-6500*
Title IX Coordinator (478) 301-2788
Dean, Savannah Campus (912) 721-8144
Associate Dean for Student Affairs, Savannah Campus (912) 721-8144
Associate Vice President for Human Resources (478) 301-2005
Office of Faculty Affairs, Savannah Campus (912) 721-8144

*As these law enforcement agencies are not affiliated with Mercer University, a Reporting Party must either report the incident to one of the University agencies listed above or request that the police report be forwarded directly to Mercer Police to ensure proper review by the University.

**SERVICES AND RESOURCES**
The following services and resources are available for both the Reporting Party and Responding Party on-campus and in the local community:

**Atlanta (DeKalb County)**
- Counseling and Psychological Services, Atlanta: (678) 547-6060 (Confidential)
- Day League Crisis Center, Decatur: (404) 377-1428 (Crisis Line)
  website: http://www.dayleague.org
e-mail: info@dayleague.org
  Counties: DeKalb, Newton, Rockdale
- DeKalb Medical Center (SANE Nurse available): (404) 501-1000
  2701 N. Decatur Rd., Decatur
- DeKalb Medical Hillandale (SANE Nurse available): (404) 501-8000
  2801 DeKalb Medical Parkway, Lithonia
- DeKalb County District Attorney’s Office: (404) 371-2561
- Stone Mountain Circuit Public Defender Office: (404) 371-2222

**Columbus (Muscogee)**
- Counseling and Psychological Services, Macon: (478) 301-2862 (Confidential)
- Sexual Assault Support Center, Inc., Columbus: (706) 571-6010 (Crisis Line)
  e-mail: ccccenter@aol.com
- Columbus Regional Midtown Medical Center (SANE Nurse available): (706) 571-1000
  710 Center Street, Columbus
  Counties: Chattahoochee, Harris, Marion, Muscogee, Talbot, Taylor
- Columbus District Attorney’s Office: (706) 653-4336
- Chattahoochee Circuit Public Defender Office: (706) 653-4301

**Douglasville (Douglas County)**
- Counseling and Psychological Services, Atlanta: (678) 547-6060 (Confidential)
- Douglas County Task Force (SANE Program): (678) 715-1196 (Crisis Line)
  website: http://www.douglastaskforce.com
  e-mail: dctaskforce@yahoo.com
  Counties: Douglas
- Wellstar Douglas Hospital (SANE Nurse available): (770) 949-1500
  8954 Hospital Dr., Douglasville
Douglas County District Attorney’s Office:  (770) 920-7292
Douglas County Public Defender’s Office:  (770) 949-1096

McDonough (Henry County)
- Counseling and Psychological Services, Atlanta: (678) 547-6060 (Confidential)
- Southern Crescent Sexual Assault Center, Jonesboro
  (All sexual assault examinations are done by a SANE nurse here instead of at the hospital)
  (770) 477-2177 (Crisis Line)
  website: http://scsacinc.wix.com/scsac
  email: support@scsac.org
  Counties:  Butts, Clayton, Fayette, Henry, Lamar, Pike, Spalding
- Henry County District Attorney’s Office:  (770) 288-6400
- Flint Circuit Public Defender Office:  (770) 288-7460

Macon (Bibb County)
- Counseling and Psychological Services, Macon: (478) 301-2862 (Confidential)
- Crisis Line and Safe House of Central Georgia, Inc., (478) 745-9292 (Crisis Line)
  website: http://cl-sh.org
  Counties:  Bibb, Crawford
- Navicent Health Emergency Room: (478) 633-1000
  777 Hemlock Street, Macon
- Coliseum Hospital Emergency Room:  (478) 746-4646
  350 Hospital Drive, Macon
- Bibb County District Attorney’s Office:  (478) 621-6427
- Macon Circuit Public Defender Office:  (478) 621-5950

Newnan (Coweta)
- Counseling and Psychological Services, Atlanta: (678) 547-6060 (Confidential)
- West Georgia Rape Crisis Center, Carrollton:  (770) 834-7273 (Crisis Line)
  website: www.westga.edu/~crcc/
  email: crcc@westga.edu
  Counties:  Carroll, Coweta, Haralson, Heard
- Piedmont Newnan Hospital: (770) 400-1000
  745 Poplar Rd., Newnan
- Coweta County District Attorney’s Office:  (770) 254-7300
- Coweta Circuit Public Defender Office:  (770) 830-1323

Savannah (Chatham County)
- Counseling and Psychological Services, Macon: (478) 301-2862 (Confidential)
- Rape Crisis Center of the Coastal Empire, Inc., Savannah:
  (912) 233-7273 (Crisis Line) or (888) 241-7273 (Tollfree)
  website: http://www.rcssav.org/
  email: advocate@rcssav.org
  Counties:  Bryan, Chatham, Effingham, Evans, Liberty, Long, Tattnall
- Candler Hospital (SANE Nurse available), (912) 819-6000
  5353 Reynolds St., Savannah
- Chatham County District Attorney’s Office:  (478)621-6427
- Eastern Circuit Public Defender Office: (912) 447-4901
The following resources are also available to the Reporting Party and Responding Party:

- National Sexual Assault Hotline (800) 656-4673
- National Domestic Violence Hotline (800) 799-7233
- Georgia Crisis & Access Line (800) 715-4225
- Financial Planning Assistance, AVP of Financial Planning (478) 301-2226
- Immigration and Visa Assistance, Director of International Programs (678) 547-6151

TIMELY WARNING
Community members, students, faculty, staff and guests are encouraged to report all crimes and public safety related incidents to Mercer Police in an accurate and timely manner. Timely warnings will be issued when incidents on or near the campus, in the judgment of the Chief of Mercer Police, constitute an imminent or continuing threat to the University community. Timely warnings will not contain information regarding the Reporting Party's identity. The warning will be issued both through the Mercer email system and text messaging system to students, faculty and staff.

SEXUAL MISCONDUCT AND RELATIONSHIP VIOLENCE GRIEVANCE PROCEDURES

Step 1: A Report is Made
Once an individual Reporting Party reports an alleged incident of Sexual Misconduct and Relationship Violence (SMRV) to a University employee, that University employee must immediately notify his or her supervisor, and/or contact the Associate Vice President for Human Resources or designee (herein after referred to simply as the AVP- HR) if the accused individual (Responding Party) is an employee, or the Dean of Students or designee (herein after referred to simply as the Dean of Students) if the accused individual (Responding Party) is a student. The Dean of Students or the AVP-HR will then notify the Title IX Coordinator of the report. The report may also be filed directly with the Title IX Coordinator. If both the Reporting Party and the Responding Party are employees, grievance procedures are outlined in the Non-Faculty Employee Handbook and in Section 2.10 of the University Faculty Handbook.

The Reporting Party will be encouraged to seek out immediate medical care, offered counseling support, and provided the opportunity to file an official report with either campus or local police. However, the Reporting Party has the right to decline to notify the police at this time. Whether the Reporting Party wishes to speak with the police or not, an intake meeting with the Title IX Coordinator, AVP-HR or the Dean of Students will be scheduled as soon as possible. If a Reporting Party is under the age of 18, the circumstances surrounding the report will be evaluated in order to determine whether contact will be made with the parents, legal guardian, and/or emergency contact person.

Step 2: Intake Meeting
Meeting with the Reporting Party. Upon receipt of notice of any allegation of SMRV, the Title IX Coordinator, Dean of Students and/or AVP-HR will schedule an individual intake meeting with the Reporting Party in order to provide to the Reporting Party a general overview of this policy. This intake meeting should include the following:

- The Reporting Party is advised in writing of his or her rights and options under Title IX and offered the opportunity to report the case to law enforcement (with assistance from the University). The Reporting Party is notified that by doing so, the Reporting Party is not obligated to pursue charges against the Responding Party.

- The Reporting Party is advised of the importance of preserving and providing evidence.
• A discussion of the interim measures that can be taken to protect the Reporting Party from contact and/or potential retaliation from the Responding Party or any related organization (see Interim Measures) including his or her right to seek a protective order, a restraining order, a no contact order, or similar lawful order from a criminal, civil or tribal court, and the University’s obligation to help enforce any protective order.

• The Reporting Party is advised of his or her right to have the case investigated by a trained Title IX investigator, and of the University’s obligation to actively investigate the report to the extent made possible by the Reporting Party (see Investigation).

• Upon completion of the investigation, a student Reporting Party is advised of his or her option to have the case evaluated for possible informal resolution or possible student judiciary charges against the Responding Party (if Responding Party is a student) or to take no further action. (See Resolution below).

• If the Reporting Party does not wish to share any information involving the case at this time, a follow-up meeting should be scheduled after the Reporting Party has had adequate time to process the intake meeting information and their options by the Title IX Coordinator, Dean of Students and/or AVP-HR to obtain written verification of this decision.

Meeting with Responding Party. As appropriate, the Title IX Coordinator, Dean of Students and/or AVP-HR will schedule an initial intake meeting with the Responding Party to provide a general overview of this policy. This intake meeting should include the following:

• The Responding Party is provided with notice that a complaint has been made

• The Responding Party is advised in writing of rights and options under Title IX.

• The Responding Party is advised of the importance of preserving and providing evidence.

• A discussion of the interim measures that can be taken/have been implemented to protect the Reporting Party from contact and/or potential retaliation from the Responding Party or any related organization (see Interim Measures) including the right to seek a protective order, a restraining order, a no contact order, or similar lawful order from a criminal, civil or tribal court, and the University’s obligation to help enforce any protective order.

• The Responding Party is provided with a list of on and off-campus resources services.

Interim Measures
The University will take appropriate interim measures as is reasonably practical under the circumstances to support, protect, minimize contact with and/or potential retaliation by the Responding Party or related organizations toward individuals making a report of alleged sexual harassment, sexual assault, sexual exploitation, stalking, and intimate partner violence. These actions will be assessed and/or coordinated by the Title IX Coordinator, Student Affairs, and/or Human Resources professional. Interim measures may include further protective action deemed appropriate concerning the interaction of the individuals, including, but not limited to, directing appropriate University officials to alter the student’s academic schedule, University housing, and/or University employment arrangements.
Mercer Police, the Title IX Coordinator, Dean of Students and/or AVP-HR may impose a “no-contact” order, which typically will include a directive that the parties refrain from having any contact with one another, directly or through third parties, whether in person or via electronic means, pending the investigation and, if applicable, the hearing. When taking steps to separate the Reporting Party and the Responding Party, the Title IX Coordinator, Dean of Students, and/or AVP-HR will seek to minimize unnecessary or unreasonable burdens on either party. Note, however, that this obligation does not preclude the University from evaluating and implementing an interim suspension, if deemed warranted.

**Step 3: The Investigation**

If the University determines that there is sufficient information upon which to conduct an investigation, the Title IX Coordinator, Dean of Students, and/or AVP-HR will notify both parties on the status of proceeding with the investigation. Upon following up with the Reporting Party and Responding Party, the Title IX Coordinator, and/or the Dean of Students will reiterate the University’s obligation under Title IX and explain the student investigative options being utilized.

Trained Title IX investigators will be assigned to the case. The Title IX Coordinator will notify both parties of the investigation and the names of the investigators. The investigators will conduct a full review of the allegations, including interviewing Reporting Party, Responding Party, and available relevant witnesses. If the Reporting Party wishes to have the case investigated without his/her identity disclosed, the Title IX Coordinator, Dean of Students, and/or AVP-HR will discuss the parameters of the investigation and limits with the Reporting Party before proceeding. The Title IX Coordinator will provide direction and oversight to the investigators to comply with this request. The Title IX Coordinator will retain authority to make decisions regarding the parameters of the investigation. The investigator(s) will compile a summary presented in a written report (Investigative Report) to the Title IX Coordinator. The Title IX Coordinator will share the report with the Dean of Students for student cases, and the Associate VP for Human Resources for cases involving employees. Investigations will be completed as quickly as possible, and reasonable attempts will be made to comply with the Title IX timeline of a 60 day resolution. However, the length of the process may vary depending on the complexity of the case, the number of witnesses, and extenuating circumstances. The Title IX Coordinator will maintain a copy of the final report.

**Investigative Reports:** An official record of the investigation (Investigative Report) shall be made by the presiding Title IX investigators for internal University use only. Interviews by investigators will not be recorded by anyone other than the University. Prior to the completion of the investigation, any person directly participating in the investigation (i.e. Responding Party, Reporting Party, and/or witnesses) may request to and review his/her own (and only his/her own) statements and/or testimony and offer clarifications or additional information as needed. Once the investigation is completed, the Responding and Reporting Parties will be provided an opportunity to review a copy of the Investigative Report, however, identifying information of students and employees may be redacted to protect students’ FERPA rights and employee confidentiality. The Reporting and Responding parties will not be permitted to make a copy of the investigative report in any form (photograph, photocopy, electronic copy, written copy, etc.).

**Law Enforcement Related Investigation.** The Reporting Party has the option to proceed with a law enforcement investigation in conjunction with the non-law enforcement investigation at any point in the process.

**Step 4: Resolution**

Based on the information available from the Title IX investigation, the Dean of Students in consultation with the Title IX Coordinator for student cases, and the AVP for Human Resources for employee cases in...
consultation with the Title IX Coordinator, will review the summary and make a decision on how to proceed. A request may be made by the Title IX Coordinator, Dean of Students or AVP-HR for further information or clarification by the trained Title IX investigator before making this determination. This may include additional interviews or statements. The following options are available at this stage:

A. **No Further Action.** Based on the entirety of the circumstances, the University may choose to take no further action. If no action is taken, both the Reporting Party and Responding Party (except in cases where the Responding Party is unknown, is not covered by this policy, or the Reporting Party has asked to remain anonymous) will be notified in writing and a copy of the investigation and documentation supporting this decision will be sent to the Title IX Coordinator.

B. **Informal Resolution.** A Reporting Party who wishes to file a report, but does not wish to pursue Formal Resolution, may request a less formal proceeding, known as "Informal Resolution." Whether this request for an informal instead of formal resolution is granted is at the discretion of the Dean of Students/AVP-HR in consultation with the Title IX Coordinator. Mediation is not an option for SMRV cases. Informal Resolution will be handled by the Dean of Students for student cases, and by the AVP-HR for employee cases, and may include a formal warning about the Responding Party’s behavior, stipulations on contact, educational activities, or other actions as determined by the Dean of Students/AVP-HR. Informal Resolutions will be held as part of the student’s or employee’s disciplinary record, subject to student and employee confidentiality laws.

Any Informal Resolution must be reviewed by the Title IX Coordinator before being finalized. The terms of the Informal Resolution will be communicated to both the Reporting Party and the Responding Party in writing. In cases where both the Reporting Party and Responding Party are students, if either party does not agree with the outcome and/or stipulations during the Informal Resolution process, the case may be referred for review under the Formal Resolution process.

C. **Formal Resolution.** A review is conducted by the appropriate disciplinary process applicable to the Responding Party(s) (student or employee):

**For Employees:** Within 30 days of receipt of the report of the investigation, the AVP-HR will implement appropriate disciplinary action, up to and including termination, for the employee. The AVP-HR retains the right to request additional information deemed necessary to clarify any questions or issues, and to determine responsibility. The decision of the AVP-HR will be shared simultaneously with both the Reporting Party and Responding Party. A copy will be sent to the Title IX Coordinator for review. If dismissal of a faculty member is recommended by the AVP-HR, faculty members may exercise their rights as outlined in section 2.08 of the Faculty Handbook. Sanctions that may be imposed for employees include but are not limited to: warning, discrimination or harassment education, informal or formal counseling, reassignment, demotion, non-reappointment, restricted access to the University, reprimand, probation, suspension, termination of employment, and/or referral for prosecution.

**For Student Responding Parties:** The case is forwarded for charges and processing under the Student Code of Conduct procedures. For detailed information on charges, options for adjudication, procedures, and Reporting Party and Responding Party rights, consult the Student Code of Conduct.
In the Formal Resolution process for students, both the Reporting Party and Responding Party should be offered the opportunity to be present during the hearing; to make any statements they wish to make prior to concluding the hearing; to have an advisor of their choice present at the hearing or any related meetings; and to submit impact statements. The Reporting Party and the Responding Party will be given similar and timely notice of meetings and access to materials that will be used in meetings or proceedings.

Mercer University uses the preponderance of evidence (also known as “more likely than not”) as a standard of proof of whether a violation of the SMRV policy occurred.

The hearing body retains the right to request additional information deemed necessary to clarify any questions or issues, and to determine responsibility. The final results of this hearing body will be shared simultaneously with both the Reporting Party and Responding Party. A copy will be retained in the Title IX Coordinator’s records.

**SANCTIONS (applies to students only)**

If a violation of this SMRV Policy is found, the determination of sanctions is made in light of the unique facts and circumstances surrounding each individual case and the previous conduct history of the student. Students found responsible for violations(s) of the Student Code of Conduct will be subject to sanctions that include, but are not limited to, one or more of the following:

- **Warning**: Formal written notice to the student and official recognition that a violation has occurred.
- **Counseling Assessment**: A recommendation to be evaluated by psychological services to help the student deal more effectively with his/her conduct issue.
- **Community Service**: Performance of a preapproved service location for a prescribed number of hours to the local or University community.
- **Creative/Educational Sanctions**: Attendance at educational programs, interviews with appropriate officials, planning and implementing educational programs, research papers and other educational activities related to the violation.
- **Restriction**: The withdrawal of specified privilege(s) for a definite period of time. Restrictions may include, but are not limited to requirements such as: not entering certain areas of housing or the campus, not contacting a certain individual or group, or not operating a motor vehicle on campus. Students may also be restricted from holding office in any student organization or participating in some activities.
- **Fines**: Not to exceed $150 per individual or $300 per student organization.
- **Restitution**: A payment of financial injury in cases involving theft, destruction of property or deception.
- **Probation**: A period of time during which any further violations of the Student Code of Conduct may impact or jeopardize the student’s status in a specific manner. The four types of probation that can be imposed are as follows:
  - **Conduct Probation**: A specified period of time in which any future violations of the Student Code of Conduct can result in increased sanctions being imposed that exceed those of a student who is not on conduct probation.
  - **Housing Probation**: A specified period of time in which any future violations of the Student Code of Conduct will result in the termination of housing privileges and access to any University-owned housing facilities.
  - **Social Probation**: Notice to an organization or student that all or a portion of social functions must cease for a designated period of time.
  - **University Probation**: A specified period of time during which any further violation of the Student Code of Conduct may result in suspension or expulsion. As part of this probation, students may be restricted from holding certain leadership positions or participating in some activities.
- **Forced Change of Residence**: The temporary or permanent relocation of a student within housing.
- **Eviction from University Housing**: Permanent removal from the housing system.
• **Suspension.** The termination of the student's attendance or an organization's representation at the University for an indefinite or specified period of time. A suspension means that students may not be on University property or that an organization is prohibited from being recognized at any time without prior approval from the Vice President for Student Affairs or designee. Stipulations may be applied to either the student or organization as a condition for ending the suspension.

• **Expulsion.** The permanent separation of the student from the University.

• **Deferred Degree.** The holding of an academic degree for a specified period of time with or without conditions.

• **Withholding Degree.** The withholding of a student's diploma for a specified period of time and/or denying a student participation in commencement activities if the student has a grievance pending, or as a sanction if the student is found responsible for an alleged violation.

• **Revocation of Degree.** Revoking a degree awarded from the University for fraud, misrepresentation or other violation of University policies, procedures or directives in obtaining the degree, or for other serious violations committed by a student prior to graduation.

**Step 5: Appeal**

Either party may appeal the results of the resolution process. Both parties will be informed simultaneously, in writing, of the procedures for appealing the results.

If the Responding Party is a student, appeals should be handled in accordance with the Student Code of Conduct and directed to the Dean of Students within three (3) working days after receipt of the written results.

If the Responding Party is an employee, appeals from either the Reporting Party or Responding Party should be directed to the Executive Vice President for Administration and Finance within ten (10) working days after receipt of the written results.

**Grounds for Appeal**

Any such appeal shall be in writing and shall state the grounds for the appeal. Grounds for appealing the results are:

1. A significant error in adhering to Mercer's procedural process, which prejudiced the accused to the extent that the student was denied a fundamentally fair hearing as a result of the error. Procedural flaws alone are not grounds for an appeal. Significant procedural errors that may have affected the verdict or sanction will be considered.

2. The emergence of new evidence that could not have been previously discovered and that, had it been represented at the initial hearing, would have substantially affected the original decision.

3. The imposition of sanctions which are disproportionate to the offense.

For cases where the Responding Party is a student, the Dean of Students shall make a decision. The Dean of Student's decision is final.

For cases where the Responding Party is an employee, the Executive Vice President for Administration and Finance shall make a decision within 30 working days of receipt of the appeal. The Executive Vice President's decision is final.

Both parties will be notified simultaneously, in writing, about any changes that occur prior to the time the results become final and the outcomes of any appeal. A copy will be sent to the Office of Human Resources for faculty and staff, and to the Title IX Coordinator. A copy will be sent to the Dean of Students for students and to the Title IX Coordinator. The University will follow the law in protecting the Reporting Party's and Responding Party's privacy. The University will protect Reporting Party privacy, including publicly available records, and will withhold Reporting Party identity to the extent permissible by law.
**Additional Information and Resources**

Mercer University takes the issue of sexual and intimate partner violence seriously; and annually offers a variety of prevention, training, and education programs aimed at creating awareness and increasing safety for our community. For information on these programs, as well as information and resources related to bystander intervention programs, warning signs of abusive behavior, and other safety tips, contact the Title IX Coordinator at (478) 301-2788. It is imperative that Reporting Party of any of the above offenses take immediate steps to preserve evidence after an incident occurs, and report the violation immediately.

**POLICY PROHIBITING OTHER DISCRIMINATORY HARASSMENT**

*(Updated 8/2016)*

Harassment on the basis of race, color, national origin, disability, veteran status, gender (i.e. gender-based harassment that is non-sexual in nature), sexual orientation, gender identity, genetic information, age or religion constitutes discrimination in employment and as such violates the University's equal opportunity policy as well as federal and state laws.

**Definition**

Harassment is defined as verbal or physical conduct that denigrates or shows hostility or aversion toward an individual because of his or her race, color, national origin, disability, veteran status, gender, sexual orientation, gender identity, genetic information, age or religion, or that of his or her relatives, friends or associates, and that:

(a) has the purpose or effect of creating an intimidating, hostile, or offensive work environment;

(b) has the purpose or effect of unreasonably interfering with an individual's work performance; or

(c) otherwise adversely affects an individual's employment opportunities.

**Examples**

Examples of conduct prohibited by this policy include, but are not limited to:

(a) epithets, slurs, negative stereotyping, or threatening, intimidating or hostile acts that relate to race, color, national origin, disability, veteran status, gender, sexual orientation, gender identity, genetic information, age or religion; and

(b) written or graphic material that denigrates or shows hostility or aversion toward an individual or group because of race, color, national origin, disability, veteran status, gender, sexual orientation, gender identity, genetic information, age or religion and...
that is placed on walls, bulletin boards, or elsewhere on University premises or is circulated in the workplace.

The standard for determining whether conduct relating to race, color, national origin, disability, veteran status, gender, sexual orientation, gender identity, genetic information, age or religion is sufficiently severe or pervasive to create a hostile or abusive work environment is whether a reasonable person in the same or similar circumstances would find the conduct intimidating, hostile or abusive. This standard includes consideration of the perspective of persons of the alleged victim's race, color, national origin, disability, veteran status, gender, sexual orientation, gender identity, genetic information, age or religion.

The responsibilities of members of the University community to prevent and eliminate harassment on these bases; the procedures for counseling, advice and informal resolution; and formal grievance procedures are the same as those described above under the Sexual Misconduct and Relationship Violence Policy.

**SOLICITATION AND DISTRIBUTION OF LITERATURE**

*Updated 12/16/2013*

In the interest of maintaining a proper campus environment and preventing interference with work and inconvenience to others, the University regulates solicitation and distribution of literature on its campuses.

For purposes of this policy, solicitation includes (1) soliciting business of any type, including the selling of products or services; (2) soliciting funds, including debt collection, or political or petitionary support of any kind; and (3) conducting opinion, investigatory or other types of surveys or polls. Distribution includes posting, placing on cars, stuffing university mailboxes, handing out or otherwise distributing any type of literature, pamphlets, product samples or other materials.

**By non-employees:** Unauthorized solicitation or distribution for any purposes on the University's property by non-employees is prohibited. Business contacts by unauthorized sales representatives during normal business hours with University employees are not permitted.

**By employees:** Solicitation by the University's employees in working areas during the working time of either the person soliciting or the person being solicited is prohibited. Distribution by employees of materials unrelated to work performance is not permitted in working areas of the University at any time. Solicitation and distribution during non-working time in non-working areas (e.g. cafeterias, break rooms and similar areas) are permitted.
Banners and posters which announce events of interest to students and employees may be displayed in designated areas on the campus after approval. Individuals who have approval to put up banners and posters must take them down at a designated time agreed upon when approval is granted.

REPORTING SUSPECTED IMPROPER CONDUCT  
(Updated 9/23/2013)

In all its business practices, and particularly in its dealings with the Government, the University seeks to conduct itself with the highest degree of integrity and honesty. Through its Internal Audit Department and through external audits, the University periodically reviews its business practices, policies, procedures and internal controls for compliance with standards of business ethics and with the special requirements of Government contracting.

Any employee who suspects that improper or illegal conduct or any other irregularities have occurred, especially in connection with Government contracts, is expected and encouraged to promptly report such concerns so that the matter may be investigated and corrective action taken where appropriate. Such reports may be made to your supervisor, who will refer the matter to the Internal Auditor for investigation, or you may report suspected improper conduct directly to the Internal Auditor, using a Confidential Hotline (Phone: 478-301-4636). The University will not discharge or otherwise retaliate against any employee for disclosing information to appropriate University or Government officials which the employee reasonably believes evidences a violation of any Federal law or regulation relating to Federal contract procurement, charges to the Government, or the subject matter of Federal contracts.

GIFTS AND GRATUITIES  
(Updated 12/16/2013)

Mercer University requires all employees to act with integrity and good judgment and to recognize that accepting personal gifts from current or prospective vendors may cause legitimate concerns about a conflict of interest. In order to avoid a perceived conflict of interest, at no time should an officer or employee of Mercer University solicit or accept any gift, gratuity, or offer of entertainment having a value in excess of $250 from any individual or company that is doing, or seeking to do, business with the University.

Exceptions to this policy may be considered on a case-by-case basis, subject to the requirement that the employee discloses the proposed gift or gratuity in advance, and that acceptance of the gift or gratuity is pre-approved by the employee’s supervisor.
Policy on Inventions, Patents and Licensing

I. Preamble and Objectives

Mercer University is dedicated to teaching, research and the expansion of knowledge. Although the University does not undertake research or developmental work principally for the purpose of developing patents and commercial applications, patentable inventions sometimes result from the research activities carried out wholly or in part with University funds and facilities. It is the policy of the University to assure the utilization of such inventions for the common good and, where appropriate, to pursue patents and licenses to encourage their development and marketing.

Mercer University has established the following policies and procedures with respect to inventions, patents and licensing in order to:

A. promote the University’s academic policy of encouraging research and scholarship;

B. serve the public interest by providing an organizational structure and procedures through which inventions which arise in the course of University research may be made available to the public through established channels of commerce;

C. encourage, assist, and provide tangible rewards to members of the University community — faculty, staff, and students — who make inventions processed under this policy;

D. establish principles and uniform procedures for determining the rights and obligations of the University, inventors, and research sponsors;

E. enable the University to retain title to inventions resulting from federally sponsored research; and

F. produce funds for further investigation and research and for the overall needs of the University.

II. Ownership of Inventions

A. Inventions arising from research financed by the Government are controlled by the terms of the applicable grant or contract. Where the University is permitted to retain title to such inventions and chooses to do so, University patent policies will control.
B. Inventions arising from research or other work sponsored by nongovernmental entities are controlled by the terms of the sponsored agreement, if applicable, and if not, by University patent policies.

C. Inventions arising from research or other work conducted by University employees or students on their own time and without significant use of University funds or facilities shall be considered the sole property of the inventor and may be commercialized by the inventor at his or her own expense. However, by mutual agreement such inventions may be managed by the University under the terms of this policy. The University will not construe the payment of salary from unrestricted funds or the provision of office or library facilities as constituting significant use of University funds or facilities.

D. Inventions resulting from research or other work conducted by University employees or students on University time or with significant use of University funds or facilities shall be considered the property of the University. Any income received by the University as a result of licensing or otherwise commercializing these inventions shall be shared with the inventor as provided below. If the University does not wish to undertake patenting and commercialization of such an invention, and if there are no restrictions by any outside sponsor, the University may release its proprietary interest to the inventor.

E. Any use of the University’s name in connection with the commercialization of an invention by an individual shall be approved in advance by the University.

III. Division of Income

A. Any income resulting from inventions managed by the University under this policy shall be shared as follows:

1. First $10,000 of Net Income received:
   (a) 75% to the inventor
   (b) 15% to the inventor’s College or School
   (c) 10% to the University

2. Net Income received above $10,000:
   (a) 50% to the inventor
   (b) 25% to the inventor’s College or School
   (c) 25% to the University

B. “Net Income” is defined as gross royalties and/or other receipts minus the costs incurred by the University for the patent application, interferences, development, licensing and patent enforcement.
C. Co-inventors share the inventor’s portion in proportions agreeable to themselves.

D. The College or School share shall be administered by the Dean to support research programs in the inventor’s department or division.

E. Fifty percent (50%) of the University’s share, after defrayment of patent-related costs not otherwise covered, shall be used to support, or offset the costs of, research in the inventor’s College or School, with the advice and counsel of the Dean.

IV. Disclosure

A. Inventions arising in the course of sponsored projects should be promptly disclosed to the Office of the Senior Vice Provost for Research, with simultaneous disclosure to the principal investigator or project supervisor where applicable. The circumstances of the invention will be reviewed with those involved and the inventor will be notified in writing of the proposed disposition.

B. Inventions falling within Section D of Article II above, or about which there is a doubt as to ownership, or which the inventor wishes to have managed by the University, should be promptly disclosed to the Office of the Senior Vice Provost for Research. Within six weeks of the receipt of the disclosure, the inventor will be notified in writing of the determination of ownership (if in doubt) and the proposed disposition.

V. Invention Management

A. For all inventions managed by the University under this policy, the University will at no expense to the inventor make reasonable efforts to evaluate the interest of others in commercializing the invention, seek licenses and options for licenses, have applications for patents filed and prosecuted, and otherwise manage the inventions or arrange for their management by recognized patent management organizations.

B. The University will normally evaluate potential commercial use of an invention prior to the filing of a patent application. Options to license and other contractual arrangements appropriate in the circumstances will normally be sought as early as possible as a validation of potential commercial use. If the University determines that neither commercial possibilities nor the potential contribution to the public good warrants proceeding further, the invention will be returned to the inventor and shall belong to the inventor unless such action is precluded by prior agreement with sponsors.

C. In licensing, sale or other disposition of rights to inventions, the University will seek to guard against repressive practices. Royalty rates shall be reasonable and consistent with the goal of effectively transferring technology in the public interest. Where feasible, the University will grant nonexclusive, reasonable royalty-bearing licenses to all
qualified licensees. The University recognizes, however, that nonexclusive licensing may not always be effective in bringing the invention to the commercial market in a satisfactory manner, and thus may grant an exclusive license if it determines that such is required in the public interest to encourage the marketing and eventual public use of the invention. In all cases, the University shall reserve to itself a non-exclusive, royalty-free license to make or have made and to use the invention within Mercer University for its own purposes.

D. In those cases where the University has obtained a patent without obligation to sponsors, if no arrangement has been made for commercial development within a reasonable period from the date of issuance of the patent, ownership of the patent will revert to the inventor upon request.

VI. Publication

Inventors should be aware that a publication disclosing the invention prior to the filing of a U. S. patent application is a bar to the grant of certain foreign patents and can bar the grant of a U. S. patent if the publication occurred a year prior to the filing date. Accordingly, the University may request a temporarily delay in a publication which discloses an invention to permit a U. S. patent application to be filed, but in no event longer than three months.

VII. Disputes

Any disagreement between an inventor and the Office of the Senior Vice Provost for Research concerning rights in an invention shall be resolved by the President, who may appoint an ad hoc committee to make findings of fact and recommendations to him.

VIII. Revision or Termination

This policy may be changed or discontinued at any time by action of the Board of Trustees. Any such change or discontinuance shall not affect rights accrued prior to the date of such action.

IX. Patent Agreements

This policy, as amended from time to time, shall be deemed to be a condition of initial or continuing employment of every University employee and a condition of enrollment and attendance of every student who works on any research project under University control. All such employees and students will be expected, upon request, to sign agreements incorporating the terms of this policy. Failure to sign such agreements, however, shall not affect the applicability of the policy nor relieve any employee or
student from the obligations imposed.

Copyright Policy

Mercer University’s academic mission is to teach, to learn, to create, to discover, to inspire, to empower, and to serve. This mission is best promoted by creating an intellectual environment that encourages and rewards creativity and innovation. Mercer supports the development, production, and dissemination of intellectual property by its faculty, staff, and students.

Mercer affirms its commitment to the personal ownership of original works of authorship by their individual creators, whether the creators work alone or with others, and whether they work privately or as members of the Mercer community (faculty, staff, and students). Accordingly, copyright to unpublished works is held by the author or creator, or heirs or assigns, unless a written transfer of copyright has been made to another party.
5. EMPLOYEE HEALTH AND SAFETY

DRUG-FREE WORKPLACE AND CAMPUS PROGRAM
(Updated 10/2/2017)

Introduction and Purpose

Mercer University shares the widespread national concern with the serious threat to health, safety, and welfare posed by the unlawful use of drugs and the abuse of alcohol, especially in the workplace and on college campuses. As a matter of University policy, growing out of the University’s historic mission and character, and in keeping with applicable Federal and State laws, the University has adopted and has implemented the following program to provide a drug-free workplace and campus/center for all its students and employees and to prevent the illicit use of drugs and abuse of alcohol.

Relationship to Other Policies

This program sets forth the minimum standards of conduct and requirements with respect to drug and alcohol abuse for all students and employees of the University. Other policies and standards of conduct concerning drugs and alcohol are included in other student handbooks, employee handbooks, and other University documents. These remain in full force and effect. Additional policies in this area may also be developed, subject to University approval, provided they are either consistent with this program or impose higher standards of additional requirements in furtherance of the purposes of this program. In the case of faculty members, violation of the standards of conduct in this program shall be considered "adequate cause" for termination of a faculty appointment. All actions taken and sanctions imposed under this program and related drug and alcohol policies shall be reviewed periodically to ensure consistent enforcement. Nothing in this program shall be interpreted to require the University to violate its obligations under other laws, including laws prohibiting discrimination against qualified handicapped individuals.

Standard of Conduct

The unlawful possession, use, distribution, dispensing or manufacture of illicit drugs or alcohol at any time on any University property or as part of any University-sponsored activity is absolutely prohibited. (Professional and graduate schools may adopt policies

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1 Including the Drug-Free Workplace Act of 1988, the Drug-Free Schools and Communities Act Amendments of 1989, the Drug-Free Postsecondary Education Act of 1990 (Georgia), and related laws and regulations.
more in line with the profile of their student body, as long as these policies are reviewed and approved in advance by the Provost.)

Convictions for Drug-Related Offenses

Any student or employee convicted of any drug-related criminal statute must notify the appropriate official, the senior student affairs officer (for students) or the Associate Vice President for Human Resources (for employees), in writing, no later than 5 days after such conviction regardless of where the offense occurred. This is because under Federal and State laws, any student convicted of a drug-related felony offense must be denied all Federal and State assistance, including Pell grants and Georgia Tuition Equalization Grants; and because the University must notify Federal agencies of drug-related convictions in the workplace of employees involved in work under a grant or contract. However, a criminal conviction shall not be necessary to find that a student or employee has violated these standards of conduct, and the University need not, and ordinarily will not, defer its own actions and sanctions pending the outcome of any criminal proceeding. Federal policy requires schools to advise students each semester as to the consequences of drug convictions. The Federal policy is as follows:

2 A federal or state drug conviction (but not a local or municipal conviction) can disqualify a student for FSA funds. The student self-certifies in applying for aid that he is eligible; schools are not required to confirm this unless they have conflicting information. Convictions only count against a student for aid eligibility purposes (FAFSA question 23c) if they were for an offense that occurred during a period of enrollment for which the student was receiving federal student aid—they do not count if the offense was not during such a period, unless the student was denied federal benefits for drug trafficking by a federal or state judge (see the Anti-Drug Act of 1988). Also, a conviction that was reversed, set aside, or removed from the student’s record does not count, nor does one received when she was a juvenile, unless she was tried as an adult. The chart below illustrates the period of ineligibility for FSA funds, depending on whether the conviction was for sale or possession and whether the student had previous offenses. (A conviction for sale of drugs includes convictions for conspiring to sell drugs.)

<table>
<thead>
<tr>
<th># of Offenses</th>
<th>Possession of Illegal Drugs</th>
<th>Sale of Illegal Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Offense</td>
<td>1 year from date of conviction</td>
<td>2 years from date of conviction</td>
</tr>
<tr>
<td>2nd Offense</td>
<td>2 years from date of conviction</td>
<td>Indefinite period</td>
</tr>
<tr>
<td>3+Offenses</td>
<td>Indefinite period</td>
<td></td>
</tr>
</tbody>
</table>

If the student was convicted of both possessing and selling illegal drugs, and the periods of ineligibility are different, the student will be ineligible for the longer period. Schools must provide each student who becomes ineligible for FSA funds due to a drug

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2 Federal Student Aid Handbook published by Dept. of Education; Volume 1, pages 15-16
conviction a clear and conspicuous written notice of his loss of eligibility and the methods whereby he can become eligible again.

A student regains eligibility the day after the period of ineligibility ends (i.e., for a 1st or 2nd offense); or when he or she successfully completes a qualified drug rehabilitation program that includes passing two unannounced drug tests given by such a program. Further drug convictions will make him ineligible again. Students denied eligibility for an indefinite period can regain eligibility after completing any of the following three options:

1) Successfully completing a rehabilitation program (as described below, which includes passing two unannounced drug tests from such a program);
2) Having the conviction reversed, set aside, or removed from the student’s record so that fewer than two convictions for sale or three convictions for possession remain on the record; or
3) Successfully completing two unannounced drug tests which are part of a rehab program (the student does not need to complete the rest of the program).

In such cases, the nature and dates of the remaining conviction will determine when the student regains eligibility. It is the student’s responsibility to certify to you that she has successfully completed the rehabilitation program; as with the conviction question on the FAFSA, you are not required to confirm the reported information unless you have conflicting information. When a student regains eligibility during the award year, you may award Pell Grant, TEACH, and Campus-Based aid for the current payment period and Direct Loans for the period of enrollment.

**Standards for a qualified drug rehabilitation program:**
A qualified drug rehabilitation program must include at least two unannounced drug tests and satisfy at least one of the following requirements:

- Be qualified to receive funds directly or indirectly from a federal, state, or local government program.
- Be qualified to receive payment directly or indirectly from a federally or state-licensed insurance company.
- Be administered or recognized by a federal, state, or local government agency or court.
- Be administered or recognized by a federally or state-licensed hospital, health clinic, or medical doctor.
- If you are counseling a student who will need to enter such a program, be sure to advise the student of these requirements. If a student certifies that he has successfully completed a drug rehabilitation program, but you have reason to believe that the program does not meet the requirements, you must find out if it does before paying the student any FSA funds.
University Sanctions and Procedures

As a condition of employment or enrollment at Mercer, all employees and students must abide by these standards of conduct, and disciplinary sanctions will be imposed for violations. Among the sanctions that may be imposed are: reprimand, probation, suspension, expulsion or termination of employment, and referral for prosecution. Sanctions for drug-related violations may include suspension or termination of employment or enrollment. However, at the University’s sole discretion, an employee or student may be permitted to continue in employment or enrollment if he or she satisfactorily participated in an approved educational and/or rehabilitation program.

Nothing in this policy is intended to affect the procedural rights of students or employees (including faculty members) under existing judicial board, grievance, or review procedures. However, once the University has determined, after reasonable inquiry, that a violation of this policy has occurred, the employee or student may be subject to immediate suspension (without pay, in the case of an employee) pending the conclusion of such procedures. If no existing procedures are in place for an alleged violation by a particular student or employee, the University will adapt other review procedures so as to ensure the individual the opportunity for a fair review, including the right to be heard.

Additional information may be found in your school's handbook.

State and Federal Legal Sanctions

Under Georgia and federal law, it is a crime to possess, manufacture, sell, or distribute illegal drugs. To see a summary of Georgia state drug laws and penalties, go to http://sos.ga.gov/cgi-bin/PLBLaws.asp?Board=03. To learn more about Federal drug trafficking penalties, go to www.justice.gov/dea/druginfo/ftp3.shtml.

Federal sanctions for illegal possession of drugs include imprisonment up to 1 year and/or a minimum fine of $1,000 for a first conviction; imprisonment for 15 days–2 years and a minimum fine of $2,500 for a second drug conviction; and imprisonment for 90 days–3 years and a minimum fine of $5,000 for a third or subsequent drug conviction. For possession of a mixture or substance which contains a cocaine base, federal sanctions include 5–20 years in prison and a minimum fine of $1,000, for a first conviction if the mixture or substance exceeds 5 grams, for a second conviction if the mixture or substance exceeds 3 grams, and for a third or subsequent conviction if the mixture or substance exceeds 1 gram. Additional possible penalties for the illegal possession of drugs are forfeiture of real or personal property used to possess or to facilitate possession of a controlled substance if the offense is punishable by more than 1 year imprisonment; forfeiture of vehicles, boats, aircraft, or any other conveyance used, or intended for use, to transport or conceal drugs; civil fine up to $10,000 per violation; denial of federal benefits, such as student loans, grants, contracts, and professional and commercial licenses for up to 1 year for a first and up to 5 years for a second or
subsequent offense; successful completion of a drug treatment program; community service; and ineligibility to receive or purchase a fire-arm.

Georgia law prohibits the purchase or possession of alcohol by a person under the age of 21, or the furnishing of alcohol to such a person. Driving under the influence of alcohol or other drugs also is illegal. It is against Georgia law, under certain circumstances, to walk or be upon a roadway while under the influence of alcohol or other drugs. The punishment for these offenses may include imprisonment, fines, mandatory treatment and education programs, community service, and mandatory loss of one’s driver’s license.

**Health Risks Associated With Drug or Alcohol Use**

**Drugs**

Narcotics such as opium, morphine, and heroin can cause euphoria, drowsiness, respiratory depression, constricted pupils, and nausea. Heroin causes the body's pain reactions to be weakened and can result in coma due to the reduction in pulse rate. The symptoms of an overdose of narcotics are slow and shallow breathing, clammy skin, convulsions, coma, and possible death. A person experiencing withdrawal from addiction to narcotics can experience watery eyes, runny nose, yawning, loss of appetite, irritability, tremors, panic, cramps, nausea, chills, and sweating.

Depressants such as barbiturates and quaaludes can cause disorientation, slurred speech, and senseless behavior. Depressant overdose results in shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, and possible coma or death. Withdrawal symptoms include anxiety, insomnia, tremors, delirium, convulsions, and possible death.

Stimulants such as cocaine and crack cause increased alertness or euphoria, and increased heart rate, blood pressure, and respiratory rate. Immediate effects of use also include dilated pupils, insomnia, and loss of appetite followed by depression. Stimulant overdose results in agitation, increase in body temperature, hallucinations, convulsions, and possible death. Withdrawal symptoms include irritability, long periods of sleep, depression, and/or disorientation.

Hallucinogens such as Lysergic acid (LSD), amphetamines, mescaline, and phencyclidine (PCP) cause delusions, hallucinations and poor perception of time and distance. Users may experience anxiety, loss of control, confusion, and panic. Flashbacks can occur even when use has stopped. Amphetamines can cause rapid, irregular heartbeat, tremors, and collapse. Heavy users may act out irrationally. The effects of an overdose include psychosis and possible death.

Cannabis (Marijuana, Hashish) can cause euphoria, increased appetite, lowered inhibitions, and disorientation. Marijuana use can alter sense of time, reduce energy level and coordination, and impair short-term memory. The effects of an overdose
include fatigue, paranoia, and possible psychosis. Withdrawal symptoms include insomnia, hyperactivity, and decreased appetite. Long-term users may have a lowered immune system and increased risk of lung cancer.

**Alcohol**

Alcohol is a central nervous system depressant. Consumption of alcohol causes a number of changes in behavior that can result in dangerous and high-risk activities. A low dose of alcohol significantly impairs judgment, mental function, and coordination, and alters decision-making skills.

Alcohol consumption decreases the alertness and coordination needed to drive a car safely, increasing the likelihood of the driver causing an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts, such as spouse or child abuse. Research demonstrates that the majority of violent behaviors and incidents on college campuses, such as date rape, fights, and vandalism, involve the use of alcohol. Moderate to high doses of alcohol cause drastic impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described. Long-term consumption of large quantities of alcohol can lead to permanent damage to vital organs such as the heart, liver, and brain. Studies have also linked an increased risk for various types of cancer, such as esophageal and breast, to heavy, long-term alcohol use.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life threatening.

Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome, resulting in mental retardation and/or irreversible physical abnormalities.

**Counseling, Treatment, and Rehabilitation**

Employees and students who wish information about counseling and treatment programs, either for personal substance abuse or for family members or others, may contact the Human Resources Office (for employees) or the appropriate Senior Student Affairs Officer (for students).

- Human Resources - Atlanta campus: 678-547-6155
- Human Resources - Macon campus: 478-301-2005
- Student Affairs Office - Atlanta campus: 678-547-6824
- Student Affairs Office - Macon campus: 478-301-2685

Information and help is also available from:
- Counseling and Psychological Services - Macon campus: 478-301-2862
- Counseling and Psychological Services - Atlanta campus: 678-547-6060
- Helpline Georgia for Substance Abuse: 1-800-338-6745

**ATLANTA**

Anchor Hospital  
5454 Yorktowne Drive  
Atlanta, Georgia 30349  
(770) 991-6044

DeKalb Crisis Center  
450 Winn Way  
Decatur, GA 30031  
(404) 294-0499

Metro Atlanta Recovery Residences  
(MARR Addiction Treatment Center)  
[www.marrinc.org](http://www.marrinc.org)  
2815 Clearview Place  
Doraville, GA 30340  
(678) 805-5100 or 1-800-732-5430

Northside Hospital Behavioral Health Services  
6105 Peachtree Dunwoody Rd, Bldg F – Suite 155  
Atlanta, GA 30328  
(404) 851-8960

Peachford Hospital  
2151 Peachford Road  
Atlanta, Georgia 30338  
(770) 455-3200

Dr. Tommie M. Richardson  
(Addiction Medicine Specialist)  
4015 S Cobb Dr, SE  
Smyrna, GA 30080  
(770) 431-2354

Ridgeview Institute  
3995 South Cobb Dr., SE  
Smyrna, Georgia 30080  
(770) 434-4567 x3200
SummitRidge Hospital  
250 Scenic Highway  
Lawrenceville, GA 30046  
(678) 442-5800

Talbott Recovery Campus  
5448 Yorktowne Drive  
Atlanta, GA 30349  
(770) 994-0185

**COLUMBUS**

The Bradley Center  
(Substance Abuse Services)  
2000 16th Avenue  
Columbus, GA  31901  
(706) 320-3700

Midtown Medical Center  
710 Center Street  
Columbus, GA  31901  
(706) 571-1000

Talbott Recovery Center  
1200 Brookstone Centre Parkway, Suite 210  
Columbus, GA  31904  
(706) 341-3600

**MACON**

Coliseum Center for Behavioral Health  
340 Hospital Drive  
Macon, Georgia 31217  
(478) 741-1355

Medical Center, Navicent Health  
The Psychiatric Pavilion  
777 Hemlock Street  
Macon, Georgia 31201  
**Inpatient: Psychiatry and Detox**  
(478) 633-1392  
**Crisis Line**  
(478) 743-1971
Dr. Dan E. Phillips  (Psychiatrist)
Department of Psychiatry & Behavioral Sciences
Mercer University School of Medicine
250 Martin Luther King Jr Blvd
Macon, GA 31201
(478) 301-4077

River Edge Behavioral Health Center
175 Emery Highway
Macon, Georgia 31217
Outpatient
(478) 803-7600

River Edge Recovery Center
3575 Fulton Mill Road
Macon, Georgia 31206
Crisis Stabilization Unit
(478) 803-8617

SAVANNAH

Center for Behavioral Medicine
Memorial University Medical Center
(Inpatient Psychiatric Services)
5002 Waters Avenue
Savannah, GA  31404
(912) 350-3023

Manoj Dass, MD  (Psychiatrist)
Integrated Behavioral Center
1121 Cornell Avenue
Savannah, GA  31406
(912) 355-4987

Michael Mobley, M.D.  (Psychiatrist)
4849 Paulsen Street, Suite 201
Savannah, GA  31405
(912) 354-8108
Recovery Place (Outpatient)  
- Alcohol / Substance Abuse Treatment  
835 E 65th Street  
Savannah, GA  31405  
(912) 355-1440

RP Community Services (Outpatient)  
- Alcohol / Substance Abuse Treatment  
515 E 63rd Street  
Savannah, GA  31405  
(912) 355-5938

Savannah Counseling Services, Inc.  
Gateway Behavioral Health  
800 E 70th Street  
Savannah, GA  31405  
(912) 790-6500

Savannah Psychiatry  
635 Stephenson Avenue  
Savannah, GA  31405  
(912) 352-2921

Willingway Hospital  
(Inpatient Alcohol/Substance Abuse/Detox)  
311 Jones Mill Road  
Statesboro, GA 30458  
(912) 764-6236   or   1-800-242-9455

**WARNER ROBINS**

HealthQwest  
Substance Abuse Treatment  
607 Russell Parkway  
Warner Robins, GA 31088  
(Outpatient Drug & Alcohol Rehab)  
(478) 225-9860

Houston Medical Center Behavioral Science and Psychiatry  
1601 Watson Boulevard  
Warner Robins, GA 31093  
(Mental & Substance Abuse Disorders)  
(478) 922-4281 (x7777)
Review of Program

In keeping with Federal law, this program shall be reviewed at least biennially to determine its effectiveness, to make changes where necessary, and to ensure that sanctions are consistently enforced.

TOBACCO AND SMOKE-FREE ENVIRONMENT POLICY
(Updated 9/6/2016)

Mercer University is committed to the health and well-being of the members of its student body, faculty, and staff. The University not only has a vested interest in the vitality of its students and those who administer and operate the University’s programs of education, research, and service, but also wishes to promote the advancement of health in general and the maintenance of a healthful environment. The University and its medical, nursing, pharmacy and health professions schools, moreover, have substantial commitments to health-related research and teaching.

The Surgeon General of the United States has determined that cigarette smoking is the largest preventable cause of illness and premature death in the United States; it is associated annually with the unnecessary deaths of thousands of Americans. Research findings now indicate that users of smokeless tobacco and non-smokers who are regularly exposed to tobacco smoke are also at increased risk.

In response to these considerations, the University has adopted as its goal that of achieving an environment as close to tobacco-free as possible. The following guidelines are designed to achieve a relatively tobacco-free environment on the Mercer campuses:

- Smoking is prohibited in all indoor locations. All buildings on all campuses are tobacco and smoke-free environments. This includes vapor/electronic smoking devices.
- Smoking is prohibited within 25 feet of all building entrances, air intakes, and windows.
- Residence hall public spaces (lobbies, hallways, lounges, recreation areas, restrooms) and rooms are tobacco-free.
Use of smokeless tobacco products is prohibited in all University facilities, except in individual residence hall rooms and apartments.

It is the responsibility of each member of the Mercer community to observe this Tobacco-Free Policy and these guidelines. This policy relies on the thoughtfulness, consideration, and cooperation of smokers and non-smokers for its success. Individuals who are smoking inside a building must be directed to the outdoors. Visitors must observe this Tobacco-Free Policy. Department heads, building stewards, and sponsors/hosts of University events are responsible for visitors’ compliance with the University’s Tobacco-Free Policy. The University expects a good faith, common sense, and courteous approach by students and employees in resolving conflicts within the requirements of this policy.

Violation of policies should be reported to Student Affairs for students and Human Resources for employees.

CRIME AWARENESS AND CAMPUS SECURITY  
(Updated 12/16/2013)

Mercer University places a high priority on keeping its campus safe for its students, employees and visitors. The Mercer Police Department has primary responsibility for the security of the campus. Mercer Police officers are all certified by the Georgia Peace Officer Standards and Training Council as having met the qualifications and training requirements for police officers in Georgia, and they are authorized to exercise law enforcement powers on the campus, including the power of arrest.

More information on campus security policies, crime prevention programs, and campus crime statistics is provided and distributed annually in a Crime Awareness and Campus Security Report for each campus and is available in the Mercer Police Office.

OCCUPATIONAL SAFETY AND HEALTH PROGRAMS  
(Updated 11/15/2013)

The University offers programs and plans to recognize and minimize the risks to specific employees or groups of employees who may be exposed to specific hazards while performing assigned tasks and regular duties. The Environmental, Health & Safety Office offers an OSHA Hazard Communication Program, OSHA Bloodborne Pathogens Program, General Laboratory Safety Program, and other associated Occupational Health Programs which are custom designed for the various specialized work environments within the University. Employees and/or job classifications identified to have potential exposure to hazardous conditions in the workplace can receive information concerning their rights and responsibilities from the Human
Resources Office, the Environmental, Health & Safety Office, and the Office of Research Compliance.

**JOB RELATED EMPLOYEE ACCIDENT AND INJURY/WORKERS’ COMPENSATION**  
*Updated 10/2015*

For information on Workers’ Compensation, please visit  
http://benefitspayroll.mercer.edu/benefits/workcomp.cfm

**APPROVED DRIVERS POLICY**  
*Updated 10/2015*

To view the Approved Drivers Policy, please visit  
http://benefitspayroll.mercer.edu/benefits/approved-drivers.cfm
6. **TIME-OFF BENEFITS**

**VACATION**  
*(Updated 10/2015)*

Because we recognize the importance of vacation time in providing the opportunity for rest, recreation and personal activities, the University grants paid vacations to its regular full-time employees and part-time employees defined as Category I (see Section 2 of this Handbook).

For the full vacation/sick leave policy, please visit:  

**HOLIDAY POLICY AND SCHEDULE**  
*(Updated 10/2015)*

The University usually provides paid time off to all full-time regular employees and Category I part-time employees (see "Categories of Employment" in Section 2 of this Handbook). Category II part-time employees are eligible for holiday pay only if the University is closed on a day they are normally scheduled to work. Temporary and student employees are not eligible for holiday pay.

To see a list of approved holidays and the official holiday policy, please visit:  

**MEDICAL AND FAMILY LEAVE POLICIES**  
*(Updated 8/1/2016)*

The University recognizes that inability to work because of illness or injury or because of pressing family needs may cause hardship to employees. In an effort to accommodate employees’ medical and family leave needs, the University provides paid and unpaid leaves for eligible employees, as follows:

A. **Paid Sick Leave**

See the Sick & Vacation Leave Policy for accrual rates for eligible non-faculty staff:  
B. Family and Medical Leave Act (FMLA) Policy  (Updated 8/1/2016)

In accordance with the Family and Medical Leave Act of 1993 (FMLA), as amended, Mercer University provides up to 12 workweeks of FMLA leave to eligible employees for specified family and medical reasons or up to 26 workweeks for the care of a covered service member during a rolling 12-month calendar. The leave may be paid, unpaid or a combination of paid and unpaid leave as specified in this policy.

Employee Eligibility
To be eligible for FMLA leave, an employee must meet both of the following:
• Worked for Mercer for at least 12 months (need not be consecutive; breaks must not exceed 7 years);
• Worked at least 1,250 hours during the 12 months prior to the start of the FMLA leave.

Leave Entitlement
Eligible employees are entitled to receive up to a total of 12 workweeks of FMLA leave during a rolling 12-month calendar for one or more of the following reasons:
• The birth of a child or placement of a child with the employee for adoption or foster care within the first year of birth or placement;
• To care for a spouse, child*, or parent who has a serious health condition;
• For a serious health condition that makes the employee unable to perform the essential functions of his or her job;
• For any qualifying exigency arising out of the fact that a spouse, child, or parent is a military member on covered active duty or call to covered active duty status.

*The definition of “child” is limited to children under the age of 18 or 18 years of age or older and incapable of self-care because of a mental or physical disability.

Eligible employees are entitled for up to 26 workweeks of leave during a rolling 12-month calendar to care for a covered service member with a serious injury or illness if the employee is the service member’s spouse, child, parent or next of kin (military caregiver leave).

Serious Health Condition
For this policy, a serious health condition includes an illness, injury, impairment, or physical or mental condition of the employee or covered family member that involves:
• any period of incapacity or treatment connected with inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility; or
• a period of incapacity requiring absence of more than 3 consecutive work days that also involves continuing treatment by (or under the supervision of) a health care provider; or
• any period of incapacity resulting in occasional absences that persist more than 1 day/month on a recurring basis due to a chronic serious health condition.
Calculation of FMLA Leave
FMLA leave begins the first day of absence for an approved, qualifying event and runs concurrently with any paid leave. **Even if an employee has enough leave accruals to cover an absence, if the need for leave qualifies as FMLA leave, this policy will apply.** The amount of FMLA leave available to an employee at the time of their leave request will be measured on a rolling 12-month calendar. As such, each time an employee takes FMLA leave, the remaining leave entitlement will be the balance of the 12 or 26 weeks which has not been used during the immediately preceding 12 months.

Paid Leave
Although FMLA leave is unpaid leave, the University will apply all available sick and vacation accruals to absences during the FMLA leave period to keep the employee in a pay status for as long as possible. For eligible classified, non-exempt and professional/administrative exempt employees, the University will first use all available sick leave accruals and then vacation leave accruals, beginning with the first day of absence for the qualifying event. For eligible faculty* who do not accrue sick leave, a period of paid leave will be given based on the following and will begin with the first day of absence:

- 1-5 years of service: up to 8 weeks of paid leave
- 6-10 years of service: up to 10 weeks of paid leave
- 10+ years of service: up to 12 weeks of paid leave

*For faculty on 9 month contracts, the FMLA leave period is generally only counted during the base contract term, which begins on the report back date in August and runs through commencement in May.

The University counts the use of sick leave and vacation leave only against regular workdays and will run concurrently with the 12-week FMLA period. Thus, any holidays occurring during the use of sick leave or vacation leave will extend the period allocated as sick leave or vacation leave, but will not extend the 12-week FMLA leave period. Upon exhaustion of all available paid leave, the employee will be placed in an unpaid leave status for the duration of the 12-week period.

Intermittent/Reduced Schedule Leave
Under certain circumstances, FMLA leave may be taken on an intermittent basis (in separate blocks of time) or on a reduced schedule by reducing the employee’s usual working hours per workweek or workday. Intermittent/reduced schedule leave may be taken for the following reasons:

- When medically necessary for employee’s own serious health condition; or
- To care for the employee’s spouse, child, or parent with a serious health condition; or
- Qualifying exigencies; or
• Birth/care of a newborn or newly placed adopted or foster care child (only with the approval of the supervisor and/or Dean and Human Resources).

Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the University’s operations. Where the leave is because of a serious health condition, an employee may take intermittent or reduced schedule leave only when medically necessary, and in such a case, the employee may be required to transfer to an alternative position which better accommodates recurring periods of leave. The use of any vacation leave or sick leave for an absence related to the FMLA qualifying event will count as FMLA leave. However, if a holiday falls during a week where an employee has worked and taken intermittent FMLA leave, the holiday will not count as FMLA leave.

Notifications/Certifications
Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days’ notice is not possible, the employee must provide notice as soon as possible and generally must comply with their department’s normal absence notification procedures. Employees must provide sufficient information for the University to determine if the leave qualifies for FMLA protection and the anticipated timing and duration of the leave. Employees must also inform the University if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees on FMLA leave may be required to report periodically on their status and intent to return to work.

The University will inform employees requesting leave whether they are eligible under FMLA. If eligible, the notice provided will specify any additional information required as well as the employees’ rights and responsibilities. If the employee is not eligible, the University will provide a reason for the ineligibility.

When the leave is for a serious health condition, the employee will be required to provide a medical certification form. Recertification of medical conditions may also be requested at reasonable intervals. Failure to provide the certification when requested could result in disciplinary action up to and including termination. All FMLA related forms are available in Human Resources.

Maintenance of Health Benefits
During FMLA leave, the University will maintain an employee’s coverage under the University's group health plan under the same terms and conditions as if they were not on leave. The employee must continue to pay any share of health plan premiums the employee would have paid, either by prepayment or at the same time as payments would have been due. Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee’s leave.
Return from FMLA Leave
Upon return from FMLA leave, most employees will be restored to their original position or to an equivalent position with equivalent pay, benefits and other employment terms. Where the leave was because of the employee's serious health condition, the employee will be required to present certification from the health care provider that the employee is able to resume work and perform the essential functions of their position with or without reasonable accommodations.

In compliance with the law, the University will not interfere with, restrain, or deny the exercise of any right provided under FMLA, nor will the University discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA. Any concerns regarding FMLA issues should be directed to the Associate Vice President for Human Resources. However, an employee may also file a complaint with the U.S. Department of Labor or may file a private lawsuit. FMLA does not affect any Federal or State law prohibiting discrimination or supersede any state or local law or collective bargaining agreement which provides greater family or medical leave rights.

BEREAVEMENT LEAVE
(Updated 11/30/2017)
To view, please visit http://benefitspayroll.mercer.edu/www/mu-benefitspayroll/payroll/upload/Bereavement.pdf

MILITARY LEAVE
(Updated 5/12/2014)

Reserve Duty
Regular employees will be paid while engaged in the performance of military duty in the reserves, and while going to and from such duty during normal working hours, but the maximum length of military leave with pay is eighteen (18) eight-hour workdays in any one fiscal year. This paid military leave may not exceed eighteen (18) workdays in any one continuous period of absence. At the expiration of paid military leave, at the employee’s discretion, he or she may use accrued annual leave to cover unpaid military leave absences.

Active Duty
Notwithstanding the paid reserve duty military leave limitation of eighteen (18) days set forth above, in the event that the employee is called up to active military duty,
the employee shall be paid his or her salary for a period not to exceed thirty (30) days in any one fiscal year, and not exceeding 30 days in any one continuous period of such active duty service. At the expiration of paid military leave, at the employee’s discretion, he or she may use accrued annual leave to cover unpaid military leave absences.

Employees returning from an active duty military leave of absence will be rehired in accordance with applicable federal and state laws pertaining to re-employment rights. Personal leave without pay may be granted for a period not to exceed one (1) year. Under federal law, individuals returning from up to five (5) year’s active duty may have certain re-employment rights for a period of time.

An employee’s request for a military leave of absence must be accompanied by a written copy of orders placing the employee on active duty. These orders are to be forwarded to the Human Resources Department for inclusion in the employee’s personnel file. The employee’s department must also submit a payroll action form documenting the anticipated dates of absence with orders attached.

**JURY AND WITNESS DUTY LEAVE**

(Updated 12/16/2013)

When an employee is summoned to jury duty or subpoenaed to appear as a witness in a court action in which neither the University nor the employee is a party, the University will continue to pay the employee's regular salary. The employee is responsible for notifying his or her supervisor or department head of impending jury or witness duty immediately upon receipt of the notice to serve. In any case where jury duty is expected to extend beyond two weeks, the employee should contact his or her supervisor and Human Resources to make special arrangements for extended leave (with pay). Mercer will make no attempt to have the employee’s service on a jury postponed except where University conditions necessitate such action. If an employee is temporarily relieved of jury duty on any given day, but still is subject to subpoena, the employee should return to work for the remainder of the day, unless the court directs otherwise.
7. OTHER EMPLOYEE SERVICES AND BENEFITS

(Updated 10/2015)

To view a full list of employee benefits, please visit http://benefitspayroll.mercer.edu/benefits/