POLICY COVER SHEET

(See Faculty Staff Handbook 1460 for instructions at UI policy website: www.webs.uidaho.edu/uipolicy)

<table>
<thead>
<tr>
<th>Faculty/Staff Handbook [FSH]</th>
<th>□ Addition □ Revision* □ Deletion* □ Emergency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor Amendment</td>
<td>☑</td>
</tr>
<tr>
<td>Chapter &amp; Title: N/A</td>
<td></td>
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</tbody>
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<tbody>
<tr>
<td>Minor Amendment X</td>
<td>☑</td>
</tr>
<tr>
<td>Chapter &amp; Title: 95.20 – Education/Prevention and Responding to Sexual Assault</td>
<td></td>
</tr>
</tbody>
</table>

All policies must be reviewed, approved and returned by a policy sponsor, with a cover sheet attached to apm@uidaho.edu or fsh@uidaho.edu respectively.

*Note: If revision/deletion request original document from apm@uidaho.edu or fsh@uidaho.edu, all changes must be made using “track changes.”

Originator(s): Erin Agidius, 10/5/18
(Please see FSH 1460 C)

Telephone & Email: 208-885-4285, erina@uidaho.edu

Policy Sponsor: (If different than originator.)

Telephone & Email: ________________________

Reviewed by General Counsel _X__ Yes ___ No Name & Date: Jim Craig, 7/20/18 ________________________

I. Policy/Procedure Statement: Briefly explain the purpose/reason of proposed addition, revision, and/or deletion to the Faculty/Staff Handbook or the Administrative Procedures Manual.

The addition is to align policies with SBOE/Regents policy and federal law. In addition clarifying language was added in response to comments by senators at the 11-6-18 senate meeting.

II. Fiscal Impact: What fiscal impact, if any, will this addition, revision, or deletion have?

None at this time.

III. Related Policies/Procedures: Describe other policies or procedures existing that are related or similar to this proposed change.

FSH 3220, APM 95.33, APM 95.15

IV. Effective Date: This policy shall be effective on July 1, or January 1, whichever arrives first after final approval (see FSH 1460 D) unless otherwise specified in the policy.

If not a minor amendment forward to: ___________________________________________

Track # ____________

Date Rec.: _____________

Posted: t-sheet _________

h/c ___________

web ___________

Register:  ______________

[Office Use Only]

Policy Coordinator
Appr. & Date:
[Office Use Only]

FSH
Appr. ________________
FC ________________
GFM ________________
Pres./Prov. __________

[Office Use Only]

APM
F&A Appr.: _______
[Office Use Only]

Track # ____________

Date Rec.: ____________

Posted: t-sheet _________

h/c ___________

web ___________

Register:  ______________

(Office Use Only)