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COMMUNITY COLLEGE SYSTEM OF NEW HAMPSHIRE

Section: 600 – Academic Affairs	Subject: 620 Graduation Requirements
Policy: Associate Degree, Diploma, Professional Certificate and Certificate Titles	Date Approved: March 18, 2008
Policy #: 620.01	Last Amendment: July 10, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

620.01 ASSOCIATE DEGREE, DIPLOMA, PROFESSIONAL CERTIFICATE AND CERTIFICATE TITLES

As stated in NH RSA 188-F:1, “The colleges of the community college system of New Hampshire are authorized to grant and confer in the name of the colleges all such degrees, literary titles, honors, and distinctions as other community colleges may of right do.”

The colleges of the CCSNH are authorized by the Board of Trustees to confer Associate in Applied Science, Associate in Science, and Associate in Arts degrees in approved major disciplines.

The colleges may also confer Diplomas, Professional Certificates, and Certificates in approved major disciplines, as well as “microcredentials” (e.g., “Badges”) and non-credit-bearing credentials.

Requests to award credentials with titles other than those defined above must be approved by the Board of Trustees. Once approved, the credential(s) shall be incorporated into this policy.

Section: 600 – Academic Affairs	Subject: 620 Graduation Requirements
Policy: Academic Requirements	Date Approved: March 18, 2008
Policy #: 620.02	Last Amendment: May 5, 2022
Approved: Richard A. Gustafson, Chancellor	Effective Date: November 2, 2021

620.02 ACADEMIC REQUIREMENTS

620.02-A ASSOCIATE DEGREE REQUIREMENTS

- 1) Associate Degrees
 - a. To earn an Associate Degree from any CCSNH college, a student must:
 - i. Successfully complete at least sixty (60) credits in college-level coursework (excluding remedial or developmental coursework/credits – i.e., those identified as being “for institutional credit only”);

- ii. Earn at least fifteen (15) credits in coursework offered by and under the direct control of the college awarding the degree with at least eight (8) of those credits earned in advanced-level courses in the student's major field;
 - iii. Achieve a Cumulative Grade Point Average (cGPA) of 2.0 or higher in all courses taken at the college awarding the degree (including remedial or developmental coursework/credits);
 - iv. Meet all course distribution requirements for the specific type of Associate Degree as described in Sections 1.b-f below.
- b. Associate in Science Degree
- i. In addition to meeting the requirements set forth in Section 1.a above, a student must meet the following course distribution requirements to earn an Associate in Science Degree:
 - 1. Earn at least 30 credits in program-specific courses in a defined major field;
 - 2. Earn at least 20 credits in general education courses, including one course of three (3) credits or more in:
 - a. English Composition (required);
 - b. Humanities/Fine Arts/Foreign Language (required);
 - c. Quantitative Reasoning/Mathematics (required);
 - d. Science (required);
 - e. Social Sciences (required).
 - 3. The remaining general education credits to reach the required total of 20 general education credits may be taken in English, Humanities/Fine Arts/Foreign Language, Quantitative Reasoning, Science, or Social Sciences.
 - 4. The remaining 10 credits to reach the required minimum total of 60 credits may be assigned in any subject area, as deemed by the faculty to be appropriate to the curriculum.
- c. Associate in Applied Science Degree
- i. In addition to meeting the requirements set forth in Section 1.a above, a student must meet the following course distribution requirements to earn an Associate in Applied Science Degree:
 - 1. Earn at least 30 credits in program-specific courses in a defined major field;
 - 2. Earn at least 15 credits in general education courses, including one course of
 - 3. Three (3) credits or more in:
 - a. English (required);
 - b. Humanities/Fine Arts/Foreign Language (required); or Mathematics (required);
 - c. Science (required);
 - d. Social Sciences (required).
 - 4. The remaining 15 credits to reach the required minimum total of 60 credits may be assigned in any subject area, as deemed by the faculty to be appropriate to the curriculum.
- d. Associate in Science in General Studies/Technical Studies/Interdisciplinary Studies

- i. Colleges may also offer programs leading to an Associate in Science in General Studies, Associate in Science in Technical Studies, or Associate in Science in Interdisciplinary Studies degree for students seeking experiential credit, seeking to create a self-designed major to meet personal occupational or career goals, requiring remediation/developmental coursework to meeting admission requirements for a desired program, or wishing to matriculate while awaiting admission to competitive degree programs.
 - ii. Students wishing to earn an Associate in Science in General Studies, Associate in Science in Technical Studies, or Associate in Science in Interdisciplinary Studies degree must meet all of the requirements set forth in Section 1.a above, as well as the general education distribution requirements set forth in 1.b above. The 30 credits of major field coursework (see Section 1.b above) may be taken in any subject area.
- e. Associate in Science with a Concentration
 - i. An Associate in Science Degree program may include the option for a concentration (e.g., the Associate in Science in Business Administration with a Concentration in Sports Management). A Concentration may be awarded when a minimum of twenty (20) credits of specialized coursework related to the more general major are successfully completed. The twenty (20) credits in the concentration are part of the thirty (30) major field credits required for the major.
 - ii. Students wishing to earn an Associate in Science with a Concentration degree must meet all of the requirements set forth in Section 1.a above, as well as the general education distribution requirements set forth in 1.b above.
- f. Associate in Arts
 - i. Students may earn an Associate in Arts degree in Liberal Arts or in a specified major field. In addition to meeting the requirements set forth in Section 1.a above, a student must meet the following course distribution requirements to earn an Associate in Arts degree. Each category below must include at least one course worth at least three (3) credits:
 1. English Composition
 2. English Literature, Composition (requiring English Composition as a prerequisite), or Communications
 3. Quantitative Reasoning/Mathematics or Natural or Physical Sciences (including at least one lab science) or Social Sciences
 4. Humanities/Fine Arts/Foreign Language and either
 5. Electives in Specialized Major Field or (for generic AA in Liberal Arts)
 6. Liberal Arts Electives (from above list) and
 7. Open Electives

620.02-B DIPLOMA AND PROFESSIONAL CERTIFICATE REQUIREMENTS

- 1) To earn Diploma or Professional Certificate from any CCSNH college, a student must:
 - a. Successfully complete at least thirty (30) credits in college-level coursework designed to meet defined competencies in an occupational field (*excluding*

- remedial or developmental coursework/credits – i.e., those identified as being “for institutional credit only”); the thirty (30) credits must include ten (10) credits of general education coursework.
- b. Earn at least eight (8) credits or 25% of total program credits, whichever is larger, in coursework offered by and under the control of the college awarding the degree.
 - c. Achieve a Cumulative Grade Point Average (cGPA) of 2.0 or higher in all courses in the Diploma or Professional Certificate program (only) taken at the college awarding the degree.

620.02-C MICRO-CREDENTIALS

- 1) CCSNH adopts the UNESCO definition of a micro-credential:
 - a. A micro-credential
 - i. Is a record of focused learning achievement verifying what the learner knows, understands or can do;
 - ii. Includes assessment based on clearly defined standards and is awarded by a trusted provider;
 - iii. Has stand-alone value and may also contribute to or complement other micro-credentials or macro-credentials, including through recognition of prior learning; and meets the standards required by relevant quality assurance.
- 2) To earn a micro-credential from an CCSNH college, a student must:
 - a. Successfully complete the program of study published and adopted by the granting institution.

620.02-D CERTIFICATE REQUIREMENTS

- 1) To earn a Certificate from any CCSNH college, a student must:
 - a. Successfully complete all program credits in college-level coursework designed to meet defined competencies in an occupational field (excluding remedial or developmental coursework/credits – i.e., those identified as being “for institutional credit only”).
 - b. Earn at least six (6) credits or 25% of total program credits, whichever is larger, in coursework offered by and under the control of the college awarding the degree;
 - c. Achieve a Cumulative Grade Point Average (cGPA) of 2.0 or higher in all courses in the Certificate program (only) taken at the college awarding the degree.
- 2) Colleges reserve the right to automatic conferral of certificate programs.

620.02-E OTHER DEGREE/CERTIFICATE AWARDS

- 1) Non-Credit Certificates
 - a. Colleges may choose to award a Certificate of Attendance/Participation for a variety of educational experiences including non-credit courses, workshops,

community interest programs, etc. The criteria for the awarding of such certificates are determined by the conferring institution.

- 2) Honorary Degrees
 - a. The President of a CCSNH college may recommend the awarding of an honorary degree to a worthy recipient. Recommendations for such degrees must be approved by the Board of Trustees.
- 3) Posthumous Degrees
 - a. Colleges may award a credential posthumously based on criteria determined by the conferring institution.

620.02-F DEFINITIONS

The colleges of the CCSNH utilize the following definitions related to the distribution requirements for general education:

- 1) Quantitative Reasoning:
 - a. Quantitative Reasoning refers to the ability to critically and analytically apply mathematical concepts and skills to solve “real-world” problems.
- 2) Natural and Physical Sciences:
 - a. The term “Natural Sciences” encompasses any of the biological sciences (e.g., biology, botany, ecology, zoology, biochemistry, etc.). The term “Physical Sciences” includes chemistry, physics, geology, and related disciplines. Environmental Sciences may integrate both Natural and Physical Sciences and meet the definition for fulfillment of this general education category.
- 3) Humanities:
 - a. “Humanities” includes disciplines that study how people process and document the human experience. A non-exclusive list of disciplines that are comprise the Humanities includes Literature; Philosophy; Ethics; Religious Studies; Languages and Linguistics; Ethnic/Cultural Studies; History*; Fine and Visual/Performing Arts.
- 4) Social Sciences:
 - a. The social sciences study society and the behaviors of and relationships between individuals within societies. A non-exclusive list of disciplines that comprise the social sciences includes Sociology; Psychology; Economics; Anthropology; Political Science; Archaeology; Geography; History*.
- 5) Interdisciplinary Courses:
 - a. Colleges may wish to cross-list courses that integrate two or more categories of general education courses as meeting, for example, either a Humanities requirement *or* a Social Science requirement. However, a single course cannot meet two different general education requirements.

[*Note that “History” can be considered in either the Humanities or Social Science category, depending on the nature of the course.]

Section: 600 – Academic Affairs	Subject: 620 Graduation Requirements
Policy: Additional Associate Degrees	Date Approved: March 18, 2008
Policy #: 620.05	Last Amendment: April 17, 2012
Approved: Richard A. Gustafson, Chancellor	Effective Date: April 17, 2012

620.05 ADDITIONAL ASSOCIATE DEGREES

Students may earn additional associate degrees either by concurrent completion of the requirements of the several degrees or by subsequent study after the first degree is received. The requirements for earning additional degrees are as follows:

1. Complete all requirements of each program of study, including general education requirements not in common with the additional program(s), and
2. Earn a minimum of fifteen (15) additional credits at the college, beyond those required for the first and subsequent degrees, excluding Credit by Examination, Credit for Experiential Learning, College Level Examination Program (CLEP), and Transfer Credit.

Section: 600 – Academic Affairs	Subject: 620 Graduation Requirements
Policy: Commencement	Date Approved: March 18, 2008
Policy #: 620.06	Last Amendment: July 10, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

620.06 COMMENCEMENT

Each CCSNH college will hold one Commencement ceremony each year in May. Students participating in the Commencement ceremony must have met all program requirements established in Policy 620.02 above. Exceptions may be made at the discretion of the college for students whose program is scheduled to be completed in the summer semester directly following the Commencement ceremony. Exceptions may also be made for students who have eight (8) or fewer credits in not more than two courses remaining for program completion.

Program completion ceremonies may be held at other times of the year as deemed appropriate by the college.

Under no circumstances will degrees, diplomas, professional certificates, or certificates be awarded or conferred until all program requirements have been met.

Fees associated with Commencement or other program completion ceremonies are non-refundable.

Section: 600 – Academic Affairs	Subject: 630 Curriculum
Policy: Curriculum	Date Approved: March 18, 2008
Policy #: 630.01	Last Amendment: July 10, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

630.01 CURRICULUM

To ensure that “faculty have a substantive voice in matters of educational programs” as required by the New England Commission of Higher Education (NECHE), each CCSNH college will systematically and effectively assure the academic quality and integrity of its curriculum through active participation of its faculty and academic administration in the ongoing development, delivery, assessment/evaluation, and revision of its academic programming.

Each CCSNH college will maintain at least one formal, active committee comprised primarily of full-time faculty that is responsible for reviewing and evaluating proposals for curriculum changes, including proposals for new programs and courses, for consistency with the college’s mission and expectations for academic quality and integrity, as well as consistency with NECHE accreditation requirements. This committee will forward recommended proposals to the college’s and, where required, the system’s leadership for final approval to implement the change.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Program Review and Evaluation	Date Approved: March 18, 2008
Policy #: 640.01	Last Amendment: July 10, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

640.01 PROGRAM REVIEW AND EVALUATION

Each CCSNH college shall have a procedure for program review to ensure that all academic programs offered by each CCSNH college are consistent with the college and CCSNH mission, with the New England Commission of Higher Education standards, and (where appropriate) with specialized program accreditation standards; are consistently maintaining academic integrity and quality; and providing effective instruction; are financially viable; and are meeting the needs and interests of New Hampshire citizens.

The President and Vice President of Academic Affairs will work with program faculty to collect and analyze relevant data (e.g., longitudinal enrollment and retention, graduation rates, student satisfaction, employer satisfaction) and to convene program advisory committees and other stakeholders to assist with evaluation of faculty expertise and program relevance in the marketplace.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: New Associate Degree Program Proposal	Date Approved: March 18, 2008
Policy #: 640.02	Last Amendment: March 10, 2022
Approved: Ross Gittell, Chancellor	Effective Date: March 10, 2022

640.02 NEW ASSOCIATE DEGREE PROGRAM PROPOSAL

New Associate Degree program proposals will be reviewed as follows:

- a. Before substantial work is done on a new program, a letter of intent to plan describing the program, its research, development, and supporting data will be shared with the Vice President of Academic Affairs (VPAA) and leadership team on the host campus. Once the intent to plan a new degree program is approved by the leadership team of the host campus, it will be forwarded to the Vice Presidents of Academic Affairs (VPAA Group) for review and possible development and collaboration.
- b. The Vice Presidents of Academic Affairs will review and discuss the proposed intent to plan a program, and when appropriate, will collaborate on a multi-college implementation proposal. When possible, faculty from the host college will present the program proposal to the VPAA Group and answer questions. The VPAA Group will forward a position on the new proposal to the host college via college VPAA. Should the intent to plan be approved through the VPAA Group, notification will be provided to the host campus and to the System Leadership Team.
- c. While the host campus begins to complete the comprehensive CCSNH Academic Program Proposal Form, the System Leadership Team will review the intent to plan and provide any further feedback to the VPAA Group and will notify the Board of Trustees Student Success Committee of the approval of the intent to plan a degree program. The host campus will complete the CCSNH Academic Program Proposal Form and will then utilize its internal curriculum development and approval processes to prepare and submit a complete program proposal. The complete proposal will also be reviewed once more by the Vice Presidents of Academic Affairs.
- d. If both the Vice Presidents of Academic Affairs (VPAA Group) and internal Curriculum Committee approve the comprehensive program proposal, the Vice President of Academic Affairs of the respective college will request the Chancellor’s approval so the proposal can be presented to the Student Success Committee.
- e. President or designee of the respective college will present the proposal to the Student Success Committee. Should the Student Success Committee endorse the new program, the proposal is then forwarded to the Board of Trustees with a recommendation for approval by the full Board.
- f. The Board of Trustees approves or denies the new program request.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: New Professional Certificate and Credit Certificate	Date Approved: March 18, 2008
Policy #: 640.03 and 640.04	Last Amendment: March 10, 2022
Approved: Ross Gittell, Chancellor	Effective Date: March 10, 2022

640.03 AND 640.04 NEW PROFESSIONAL CERTIFICATE AND CREDIT CERTIFICATE

All new diploma, professional certificate and credit certificate programs will require a formal review by the Vice Presidents of Academic Affairs (VPAA Group) with a recommendation to approve or disapprove to the Chancellor. The Chair of the Board of Trustees Student Success Committee will also be informed. The Chancellor will make the final determination on approval. The Chancellor will report all action taken to the College Presidents. Requests will follow the process outlined below:

- a. Before substantial work is done on a new program, a letter of intent to plan describing the program, its research, development, and supporting data will be shared with the Vice President of Academic Affairs (VPAA) and leadership team on the host campus. Once the intent to plan a new certificate program is approved by the leadership team of the host campus, it will be forwarded to the VPAA Group for review and possible development and collaboration.
- b. The Vice Presidents of Academic Affairs will review and discuss the proposed intent to plan a program and when appropriate, will collaborate on a multi-college implementation proposal. When possible, faculty from the host college will present the program proposal to the VPAA Group and answer questions. The VPAA Group will forward a position on the new proposal to the host college via college VPAA. Should the intent to plan be approved through the VPAA Group, notification will be provided to the host campus and to the System Leadership Team.
- c. While the host campus begins to complete the comprehensive CCSNH Academic Program Proposal Form, the System Leadership Team will review the intent to plan and provide any further feedback to the VPAA Group and will notify the Board of Trustees Student Success Committee of the approval of the intent to plan a certificate program. The host campus will complete the CCSNH Academic Program Proposal Form and will then utilize its internal curriculum development and approval processes to prepare and submit a complete program proposal. The complete proposal will also be reviewed once more by the Vice Presidents of Academic Affairs.
- d. If both the Vice Presidents of Academic Affairs (VPAA Group) and internal Curriculum Committee approve the comprehensive program proposal, the Vice President of Academic Affairs of the respective college will request the Chancellor’s approval.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Program Elimination	Date Approved: March 18, 2008
Policy #: 640.05	Last Amendment: March 10, 2022
Approved: Ross Gittell, Chancellor	Effective Date: March 10, 2022

640.05 PROGRAM ELIMINATION

- a. Colleges wishing to eliminate a program will submit a letter of intent to eliminate a program describing the program, its rationale for elimination, its effect on the institution and system, and supporting data. This letter will be shared with the Vice President of Academic Affairs (VPAA) and leadership team on the host campus. Once the intent to eliminate a new degree program is approved by the leadership team of the host campus, it will be forwarded to the Vice Presidents of Academic Affairs (VPAA Group) for review with recommendations provided to the host campus. The VPAA Group will also forward a position on the program elimination to the System Leadership Team.
- b. If both the Vice Presidents of Academic Affairs (VPAA Group) and internal Curriculum Committee approve the program elimination, the Vice President of Academic Affairs of the respective college will request the Chancellor’s approval so the proposal can be presented to the Student Success Committee.
- c. President or designee of the respective college will present the proposal to the Student Success Committee. Should the Student Success Committee endorse the elimination, the proposal is then forwarded to the Board of Trustees with a recommendation for approval by the full Board.
- d. The Board of Trustees approves or denies the degree program elimination request.
- e. Only the Chancellor’s approval is required for the elimination of certificate or professional certificate programs.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Program Name Change	Date Approved: March 18, 2008
Policy #: 640.06	Last Amendment: March 10, 2022
Approved: Ross Gittell, Chancellor	Effective Date: March 10, 2022

640.06 PROGRAM NAME CHANGE

If an institution wishes to change any part of, or entire name of a program offered at that institution, the host college will present a letter of intent to the Vice Presidents of Academic Affairs (VPAA Group). The VPAA Group will provide feedback and a position on the name change to both the host college and the System Leadership Team prior to sending the request to the Chancellor for approval. If approved, the Chancellor will provide a letter to the President of the respective college for certificate or professional certificate programs only.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Program Credit Change	Date Approved: March 18, 2008
Policy #: 640.07	Last Amendment: March 10, 2022
Approved: Ross Gittell, Chancellor	Effective Date: March 10, 2022

640.07 PROGRAM CREDIT CHANGE

If an institution wishes to change the number of credits in a degree or certificate program offered at that institution, the host college will present a letter of intent to the Vice Presidents of Academic Affairs (VPAA Group). The VPAA Group will provide feedback and a position on the credit change to both the host college and the System Leadership Team prior to sending the request to the Chancellor for approval. If approved, the Chancellor will provide a letter to the President of the respective college for certificate or professional certificate programs only.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Academic Centers	Date Approved: March 18, 2008
Policy #: 640.08	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

640.08 ACADEMIC CENTERS

The establishment of a college academic center (satellite campus) must have the approval of the Chancellor and the Board of Trustees.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: International	Date Approved: March 18, 2008
Policy #: 640.09	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

640.09 INTERNATIONAL

1. The Chancellor’s Office must approve any agreements between individual colleges and organizations, agencies, countries or individuals with regards to marketing and recruitment of international students.
 - a. All colleges who participate in any programs must designate an international student advisor who will provide a level of support services appropriate to the number of international students enrolled (including problems involving immigration requirements, living arrangements and other non-academic matters).
 - b. All marketing and recruitment activities for international students will be coordinated through the individual college.

2. Study Abroad and Faculty/Student Exchange

The Community College System of NH and its colleges will actively create opportunities for study abroad for its students as well as faculty and staff through:

- a. Contracts with agencies and organizations promoting study abroad for American students.
- b. Coordination with other 2-year and 4-year institutions who have established similar programs.
- c. Contracts and agreements with countries and foreign educational agencies and institutions promoting student exchange.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Running Start Program	Date Approved: March 18, 2008
Policy #: 640.10	Last Amendment: August 26, 2009
Approved: Richard A. Gustafson, Chancellor	Effective Date: August 26, 2009

640.10 RUNNING START PROGRAM

The Running Start Program, inaugurated fall, 1999, is a concurrent enrollment partnership between the Community College System of New Hampshire and secondary institutions allowing high school students to earn college credit while simultaneously meeting the requirements for high school graduation.

College courses are taught at the high school by high school faculty. High school faculty will meet the same hiring qualification as CCSNH adjunct faculty. A CCSNH faculty partner will work with the high school faculty to ensure the course objectives are met.

Students who enroll in the program may be required to take a college readiness assessment test administered by the CCSNH. Students will be required to pay reduced tuition and purchase needed supplies. The cost of a course offered in the Running Start Program will be established by the Board of Trustees annually.

College credit shall be awarded to the participating high school student upon successful completion of the course. Credits awarded shall be in compliance with the grading scale established by the college.

In the fall of 2008, CCSNH began offering the on-line version of Running Start called eStart. eStart is a collaboration between the Community College System of New Hampshire (CCSNH) and the Virtual Learning Academy Charter School (VLACS), a fully accredited online high school, whereby high school students can take online college courses for concurrent high school credit. The online version of the Running Start program uses CCSNH instructors exclusively, rather than utilizing high school teachers in partnership with CCSNH instructors. In the fall of 2009, the Running Start program is offered in the Adult Basic Education Centers.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Early College Program	Date Approved: February 27, 2018
Policy #: 640.11	Last Amendment: February 27, 2018
Approved: Ross Gittell, Chancellor	Effective Date: February 27, 2018

640.11 EARLY COLLEGE PROGRAM

The Early College Program is a concurrent enrollment partnership between the Community College System of New Hampshire and secondary institutions allowing New Hampshire high school students to attend CCSNH classes and earn college credit. New Hampshire students may simultaneously meet the requirements for high school graduation. College courses are taught at the CCSNH College by CCSNH faculty. Students who enroll in the program may be required to take a college readiness assessment test administered by the CCSNH. Students will be required to pay tuition and purchase needed supplies. Tuition for courses offered in the Early College Program will be established by the Board of Trustees annually. College credit shall be awarded to the participating New Hampshire high school student upon successful completion of the course. Credits awarded shall be in compliance with the grading scale established by the College.

Early College is reserved for students who have achieved junior or senior status in a New Hampshire high school program. Exceptions may be made at the discretion of the individual designated by the President with authority for Early College program oversight. Early College students can come from any high school in New Hampshire to any CCSNH institution, with course emphasis on general education courses required for most degree programs. At the discretion of the College President, Vice President of Academic Affairs or designee technical programs may also be available.

Section: 600 – Academic Affairs	Subject: 640 Programs
Policy: Library Mission Statement	Date Approved: November 17, 2009
Policy #: 640.11	Last Amendment: March 20, 2012
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 20, 2012

640.12 LIBRARY MISSION STATEMENT

All programs are supported by the informational resources of the college library. While recognizing the individual missions of its respective colleges, the CCSNH libraries support a common mission to provide access to up-to-date technology and informational resources to all who use their facilities, including students, faculty, staff and the local and wider community. The CCSNH libraries fulfill this mission in an environment that is welcoming, conducive to learning and research, and current in its resources. The library is the

“knowledge hub” of the campus and, as such, provides program and curriculum support, assesses and teaches information literacy, and encourages life-long learning and independent research.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Credit Hour Guidelines	Date Approved: March 18, 2008
Policy #: 650.01	Last Amendment: December 16, 2014
Approved: Ross Gittell, Chancellor	Effective Date: December 16, 2014

650.01 CREDIT HOUR GUIDELINES

1. A credit hour shall be the equivalent of one (1) hour of classroom or direct faculty instruction and a minimum of two hours of out-of- class student work each week for 15 or 16 weeks.
2. A semester credit hour shall be comprised of the following:
 - a. Direct Faculty Instruction (face-to-face or online contact)
 - b. Laboratory or studio
 - c. Clinics
 - d. Practicum, Fieldwork, etc.
 - e. Internships*
 - f. Co-ops**
3. A credit hour shall be allocated based on the below:

Category	Contact Hours per Week	Contact Hours per Sem. (based on minimum 15-week semester)
Direct Faculty Instruction	1	15
Laboratory	2 or 3	30-45
Clinical	3 to 5	45-75
Practicum, Fieldwork	3	45
Internship	3 to 6	45-90
Co-op	Variable by Dept.	Variable by Dept.

4. One instructional hour shall be equal to fifty (50) minutes of classroom/direct faculty instruction or laboratory/studio or sixty (60) minutes of clinical, practicum/fieldwork, internship or co-op.
 - a. Internship Definition: A capstone educational experience that allows a student to independently apply skills and knowledge acquired in major field courses in a workplace setting. While the goals and expected outcomes of the internship experience are determined by faculty, specific daily work activities are assigned by the on-site supervisor, and students are supervised and evaluated on-site by an employee of the company hosting the internship. Individual departments must approve internship sites, determine assessment requirements, and set minimum standards for eligibility. Faculty will typically visit (in person or virtually) students

and supervisors at the internship site a minimum of 1-3 times per semester and will collaborate with the on-site supervisor in the assessment of student performance. Internships may be paid or unpaid, and one credit is awarded for every 3-6 hours of internship per week for a 15/16-week semester (prorated accordingly for shorter semesters).

- b. **Practicum Definition:** An educational experience that allows a student to work with professional practitioners, typically in an education or social work setting, while concurrently enrolled in a course that meets regularly to help groups of students assigned to different practicum sites integrate their experiences with learned theory. Students work collaboratively with on-site professionals to observe and perform activities under the guidance of on-site staff. Faculty work with on-site professionals to determine the appropriate types of activities to ensure that students gain experience that meets specified program goals and outcomes. Individual departments must approve practicum sites, determine assessment requirements, and set minimum standards for eligibility. Faculty will typically visit (in person or virtually) students and supervisors at the practicum site a minimum of 1-2 times per semester and will collaborate with the on-site supervisor in the assessment of student performance. Practicum experiences are typically unpaid, and one credit is awarded for every 3 hours of practicum per week for a 15/16-week semester (prorated accordingly for shorter semesters).
- c. **Clinical Definition:** An educational experience that allows a student to develop skills in applying theory to practice in a patient care setting. Students are supervised directly on site by college faculty, who work collaboratively with on-site staff at the facility, and are directly assessed by college faculty in accordance with published evaluation criteria. Individual departments engage the clinical site through a legal Memorandum of Understanding, which defines criteria for student participation at the site. Clinical experiences are unpaid, and one credit is awarded for every 3-5 hours of clinical experience per week for a 15/16-week semester (prorated accordingly for shorter semesters).
- d. **Co-op Definition:** A co-op is an educational program involving paid, productive work experience in a field related to the student's major or career. The student is a full-time employee of the site and is not required to take classes during the duration of the co-op. Depending on the length of the co-op and criteria established by the sponsoring academic department, up to 4 credits may be awarded.

Each college department will set standards for credit allocation and student eligibility to participate in a co-op. Individual departments must approve co-op sites and will determine requirements (papers, journals, etc.) that must be met during the co-op. The co-op will be graded using the college's grading system and credit will be awarded accordingly.

- 5. Awarding of credits for coursework offered in formats other than face-to-face (e.g., online, hybrid, accelerated, etc.) shall be based on documentation retained by the Academic Affairs Office that demonstrates equivalency to the above allocation chart.

- a) Exceptions to the above may be made with the approval of the Department Head and the Vice President of Academic Affairs.
- b) Colleges offering direct assessment programming shall ensure that the learning and assessment plans in place for students in such programs has been approved by the New England Commission on Higher Education and is in compliance with federal regulations 34 CFR Section 668.10, current as of October 1, 2014.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Continuing Education Units	Date Approved: March 18, 2008
Policy #: 650.02	Date of Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.02 CONTINUING EDUCATION UNITS

The Colleges are authorized to award Continuing Education Units (CEU) for those courses not eligible for credit toward a degree. One CEU will be awarded for every ten hours of instructional time.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Academic Calendar	Date Approved: March 18, 2008
Policy #: 650.03	Date of Last Amendment: June 17, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.03 ACADEMIC CALENDAR

The CCSNH academic instructional year, excluding summer session, shall consist of two semesters (Fall and Spring). The academic instructional semester shall be no less than 15 weeks and no longer than 16 weeks or their equivalent including final exams. The CCSNH Vice Presidents of Academic Affairs Council, under the direction of the Chancellor and approval of the System Leadership Team and Board of Trustees, will develop a two-year calendar with common start and end dates for each semester (amended June 17, 2008).

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Completion & Application of Course Credits	Date Approved: March 18, 2008
Policy #: 650.04	Last Amendment: August 9, 2022
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.04 COMPLETION AND APPLICATION OF COURSE CREDITS

Course credits may be completed in the following ways:

1. Course completion at the CCSNH college
2. Independent study (650.07)
3. Directed study (650.08)
4. Credit for Prior Learning:
 - a) Transfer (650.05)
 - b) Credit by examination (650.06)
 - c) Experiential credit (650.09)
 - d) College Credit for Military Training and Credit given by other agencies recognized by national associations offering college level courses. (650.10)
 - e) Micro-credentials (620.20-C)

To be eligible for application of credits towards a credential award, students must meet published completion requirements (620.02).

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Transfer Credit	Date Approved: March 18, 2008
Policy #: 650.05	Last Amendment: September 4, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.05 TRANSFER CREDIT

Students outside the CCSNH may transfer credits earned at accredited institutions to their CCSNH College programs by providing official transcripts of work completed, evidencing a grade of "C" or better. Catalogs from institutions attended with course descriptions for which transfer credit is sought, if available, may be required. Acceptance of transfer credit shall be determined by the CCSNH College based on the evidence provided and judged by the College to be equivalent in nature and content to program offerings. Students transferring credits from within the CCSNH need not provide an official transcript and can meet with a school official to check for and apply transfer of credit between CCSNH institutions. CCSNH staff must be able

to confirm work completed, evidencing a grade of “C” or better, as well as student consent for the transfer of credit.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Credit By Exam	Date Approved: March 18, 2008
Policy #: 650.06	Last Amendment: August 9, 2022
Approved: Richard A. Gustafson, Chancellor	Effective Date: January 1, 2010

650.06 CREDIT BY EXAM

1. Qualification.
 - a. Individual colleges and departments will be responsible for determining if a course is eligible for credit by examination.
 - b. Students shall pay an examination fee as set by the Board and as published in the college course catalog.
 - c. If the student passes the exam, using criteria developed by the respective department, appropriate credit(s) shall be applied to the student’s academic record and a notation entered on the student’s transcript indicating successful completion. Since a traditional grade (A-F) is not entered, the Credit by Exam is not calculated into the student’s GPA. If the student fails to pass the exam, no entry is made on the academic transcript, but a record of the unsuccessful completion will be maintained in the student’s file.
 - d. Each college will determine its process for application for credit by examination as it is supported by policy.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Independent Study	Date Approved: March 18, 2008
Policy #: 650.07	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.07 INDEPENDENT STUDY

Opportunities for credit-bearing Independent Study are available to matriculated students who wish to explore areas of a discipline not covered in the normal curriculum but related to the student’s program. Independent Study is not available to non-matriculated students. Matriculated students must have a minimum cumulative GPA of 2.0 to be eligible for an Independent Study.

The intent of the Independent Study is to expand a student’s learning experience beyond

the normal program curriculum. Typically undertaken for 1-2 credits, an Independent Study may not be done in lieu of any course existing in the college's catalogue. Students wishing to pursue existing courses in the college's catalogue on an independent basis should consult the policy on Directed Study.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Directed Study	Date Approved: March 18, 2008
Policy #: 650.08	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.08 DIRECTED STUDY

Under certain circumstances a matriculated student may take a course in a semester when the course is not offered either during the day or through the Division of Community Education. A Directed Study allows a matriculated student to pursue the published learning objectives/outcomes for a course independently under the guidance of a qualified faculty member. A matriculated student must have a minimum cumulative GPA of 2.0 to be eligible for a Directed Study.

The student must demonstrate compelling reasons why the course could not be taken in a subsequent semester or was not taken in the semester when it was originally offered in the curriculum. Barring exceptional circumstances, a Directed Study will not be granted for a course currently being offered in the day or DCE divisions.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Experiential Learning	Date Approved: March 18, 2008
Policy #: 650.09	Last Amendment: August 9, 2022
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

650.09 EXPERIENTIAL LEARNING

Experiential Learning offers students the opportunity to demonstrate the knowledge they have gained through life experiences and apply this knowledge towards credit in a degree/professional certificate/certificate/Micro-credential program.

To prepare for this option, students will develop a portfolio of evidence inclusive of licensure or other industry recognized certifications and/or achievement that can be aligned with course or program outcomes.

Students shall pay an assessment fee as set by the Board and as published in the college course catalog.

Section: 600 – Academic Affairs	Subject: 650 Academic Standards
Policy: Credit for Military Training	Date Approved: November 19, 2013
Policy #: 650.10	Last Amendment: August 9, 2022
Approved: Ross Gittell, Chancellor	Effective Date: November 19, 2013

650.10 COLLEGE CREDIT FOR MILITARY TRAINING AND CREDIT GIVEN BY OTHER AGENCIES RECOGNIZED BY NATIONAL ASSOCIATIONS OFFERING COLLEGE LEVEL COURSES

The Community College System of New Hampshire values and respects the sacrifice and contributions made by our service men and women. This policy recognizes their service and the knowledge, skills, and experience gained while in service to our country. It outlines the process by which military education and training shall be recognized and appropriate credit awarded within and among institutions of CCSNH.

1. College credit will be granted to students with military training, experience, or coursework that is recognized by the American Council on Education (ACE) or other similar functioning authoritative bodies.
2. Students seeking credit for their military experience will submit their military transcript as soon as possible to the Admission Office for the review/evaluation process.
3. If the course to which the military training, experience, or coursework is equivalent and fulfills a general education or major course or degree program requirement at the receiving institution, the credit should count towards graduation and meet a requirement accordingly. Otherwise, appropriate course credit including free elective course credit will be granted.
5. Each college of the Community College System of New Hampshire will provide published information on the process of evaluating and awarding of college credit for military training, experience, and coursework.
6. Credits earned via military training, experience, and coursework are transferable within CCSNH if they meet the degree requirements of the program at the receiving institution.

Section: 600 – Academic Affairs	Subject: Admissions and Self-Certification
Policy: Admissions and Self-Certification	Date Approved: March 18, 2008
Policy #: 660.01	Last Amendment: April 8, 2020
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

660.01 ADMISSIONS AND SELF-CERTIFICATION

Students who attend CCSNH, enrolled in courses in college credit programming, should demonstrate high school completion. This can be completed by providing an official high school transcript or diploma, or an equivalency, such as from accredited alternative diploma programs, or proof of HiSET or GED completion. Self-certification of completion of a high school degree is also sufficient, through online application or self-certification form.

Transcripts may be used in course placement, and specific academic programs may require submission of high school transcripts, including for proof of successful completion of specific courses; therefore, students are encouraged to submit transcripts in order to be accurately placed into college courses.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Student Grades	Date Approved: March 18, 2008
Policy #: 670.01	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.01 STUDENT GRADES

The following grading systems shall be used for the CCSNH:

A 4.0	B+ 3.3	C+ 2.3	D+ 1.3	F 0.0
A- 3.7	B 3.0	C 2.0	D 1.0	
	B- 2.7	C- 1.7	D- 0.7	

- W Student initiated withdrawal from a course at any time prior to completion of the drop deadline (60% of the course). Does not affect GPA. Can be initiated by the instructor if the student, because of extenuating circumstances, is unable to initiate the process (e.g., catastrophic illness, injury, job transfer to another state).
- WP Student initiated withdrawal from a course after the drop deadline (60% of the course) student has a passing grade at time of drop, as determined by the instructor. Does not affect GPA. Can be initiated by the instructor if the student, because of extenuating circumstances, is unable to initiate the process (e.g., catastrophic illness or injury, job transfer to another state).
- WF Student initiated withdrawal from a course after the drop deadline (60%) of the course; student has a failing grade at time of drop, as determined by the instructor. Calculates in GPA as an “F.”
- AF Instructor or administrator initiated withdrawal at any time for reasons other than poor grade performance—e.g., failure to meet attendance requirements, as published in the instructor’s syllabus, violation of the Student Code of Conduct, disruptive behavior, etc. The grade may also be issued if a student registered in a clinic, practicum, internship or lab is deemed unsafe or performing in an unsatisfactory manner as determined by an evaluation by a faculty member/agency supervisor in accordance with department criteria and procedure. Calculated in GPA as an “F.”
- AU A course taken as an audit does not earn credit and cannot be used to meet graduation requirements.
Admission by permission of the instructor. Not all courses can be taken for audit. See *full Audit Policy*.
- I Incomplete grade. Indicates that a student has not completed a major course assignment due to extraordinary circumstances. It is not used to give an extension of time for a student delinquent in meeting course responsibilities. The I grade is not

calculated into the GPA. However, all work must be completed by the end of the third week of the subsequent semester or the grade defaults to an F. *See full Incomplete Grade Policy.*

- P Pass (not calculated into GPA).
- PP Provisional Pass; warning (not calculated into GPA).
- NP No Pass; unsatisfactory (not calculated into GPA).
- CS Continuing Study. Allows student to re-register for developmental course if competencies have not been met by end of the course. Intended for students who have demonstrated progress and a commitment to succeeding in the course but who need more time to achieve competencies. Does not affect GPA.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Incomplete Grades	Date Approved: March 18, 2008
Policy #: 670.02	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.02 INCOMPLETE GRADES

An Incomplete Grade (I) indicates that a student has not completed a major course assignment (usually a final exam or culminating final assessment) due to extraordinary circumstances, such as serious illness, death in the family, etc. The grade is applied only in those instances where the student has a reasonable chance of completing the work and passing the course. It is not used to give an extension of time for a student delinquent in meeting course responsibilities.

The work must be completed by the student through formal arrangement with the instructor no later than:

- End of the third week in Spring semester for a grade issued in Fall semester;
- End of the third week in Fall semester for a grade issued in Summer term;
- Three weeks from the earliest start date of the summer term for a grade issued in the Spring semester;

Should the student fail to complete the work within the designated period, the grade will automatically become an “F” grade. The Vice President of Academic Affairs may make exceptions to the above deadlines.

“I” grades will not be included in the computation of Grade Point Average. An “I” grade may affect a student’s financial aid. Students should contact the Financial Aid office on their campus for further information.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Audit	Date Approved: March 18, 2008
Policy #: 670.03	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.03 AUDIT

Under the audit policy, students may enroll in courses, which provide an opportunity to learn more about the challenges of college work, explore a discipline of interest, refresh prior learning, or supplement existing knowledge. Typically, a student attends lectures, seminars, and/or labs but does not complete graded assignments. When enrolled as an audit, the student will not be given a final grade nor will credit towards graduation be given for the course (the academic transcript will reflect an AU for the course). Students must pay the full tuition for the course. Federal Financial Aid does not cover costs for an audited course.

Not all courses can be taken for audit, and entry into a course as an auditing student is by permission of the instructor. Individual colleges may require additional approvals. A student must complete a registration as an audit during the first week of classes. Once admitted as an audit the student may not change to credit status after the designated add period; likewise, a student registered for credit may not change to audit status after the designated add period.

The Vice President of Academic Affairs may make exceptions to the above.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Grade Appeal	Date Approved: March 18, 2008
Policy #: 670.04	Last Amendment: Nov.17, 2009
Approved: Richard A. Gustafson, Chancellor	Effective Date: December 18, 2009

670.04 GRADE APPEAL

Any appeal of a grade must be initiated by the student with the instructor before an ensuing semester has elapsed. Students should be advised that in most instances a grade may be changed only by the instructor. The Vice President for Academic Affairs, the only other individual on campus empowered to change a student's grade, may alter a student's grade *only* in a case of obvious computational error or blatant abuse of the grading prerogative.*

Students who believe they have a valid ground for a grade appeal will use the following process to resolve the issue:

1. Meet with the instructor. The student shall contact the faculty member and schedule a meeting to discuss the grade appeal and attempt to resolve the conflict. The faculty member and student shall meet within the next five (5) work days.**
2. Meet with the Program Director/Department Head. If the issue was not resolved in Step 1, the student has three (3) work days from the date of the faculty member's decision to file a written appeal with the faculty member's Program or Department Head, or with the VPAA if the faculty member is also the Department Head or Program Director. Within three (3) work days the Department Head (or VPAA) will mediate the dispute either through discussion with the instructor, or with the student in the company of the faculty member. If no resolution is reached, proceed to step 3.
3. File a written appeal with the Vice President of Academic Affairs (VPAA). If the issue is not resolved in Step 1, the student has three (3) work days to file a written appeal with the VPAA (or designee). The letter of appeal must include the student's name and contact information, the course name and number, the semester in which the course was taken, the student's grade, the name of the instructor issuing the grade, and **specific evidence of obvious computational error and/or blatant abuse of the grading prerogative.*** The VPAA (or designee) will have ten (10) work days from receipt of the written appeal to render a decision. The decision of the VPAA (or designee) is final.

**Note that "blatant abuse of the grading prerogative" refers to situations in which an instructor has willfully ignored published grading and assessment criteria and/or has exhibited bad faith by acting in violation of published performance/behavior standards for faculty.*

***There are times, especially during the summer, that the schedules of the faculty member, the Department Head, and/or the Vice President are not compatible with the timeframes specified above. Students who have been unsuccessful in their attempts to reach the faculty member may contact the Academic Affairs Office directly. A representative of the Academic Affairs Office will then make every attempt to arrange the required meeting with the course instructor and Department Head within the five (5) days indicated in Step 1. Students are advised, however, that it may not be possible in all cases to do so.*

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Academic Standing	Date Approved: March 18, 2008
Policy #: 670.05	Last Amendment: July 10, 2018
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.05 ACADEMIC STANDING

Failure to meet satisfactory progress will result in either Academic Probation or Academic Suspension. Calculation of Cumulative Grade Point Average (CGPA) will be based on all courses taken at the institution, including developmental or remedial courses. Students with

a GPA less than 2.0 for one semester will receive academic probation. Students with a GPA less than 2.0 for three consecutive semesters will be placed on academic suspension.

- Academic Probation Definition: A warning which indicates the student may not be on track to graduate because of poor academic performance.
- Academic Suspension Definition: A hold on a student taking further courses in a program. A student may continue to take courses outside of the program as a non-matriculated student.

A student may appeal suspension based on a process defined locally by each College.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Course Repeat Policy	Date Approved: March 18, 2008
Policy #: 670.06	Last Amendment: Nov. 17, 2009
Approved: Richard A. Gustafson, Chancellor	Effective Date: January 1, 2010

670.06 COURSE REPEAT POLICY

For purposes of calculating the cumulative GPA (CGPA), when a student repeats a course at the same CCSNH institution, the grade achieved in the most recent course will be the grade used in the CGPA calculation. All previous grades will remain on the transcript but not used in the calculation. Therefore, courses repeated at a CCSNH college or at any college other than where the original course was taken will NOT be used in the calculation of the GPA/CGPA, but may be used as transfer as appropriate.

Third and subsequent attempts to repeat a course will require the approval of an appropriate advisor as determined by the individual college. See individual college catalogues for specific approval process.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Academic Amnesty	Date Approved: March 18, 2008
Policy #: 670.07	Last Amendment: October 21, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.07 ACADEMIC AMNESTY

1. A student who has previously attended a NH Community Technical College/Community College and is admitted at a later time may be eligible for Academic Amnesty, which provides for the following:

- a. All grades taken during the student’s previous time at the college will no longer be used to calculate the student’s new cumulative GPA. However, grades C- and above taken during the student’s previous time at the CCSNH College will be used to meet course requirements (where appropriate), subject to the approval of the Vice President of Academic Affairs.
 - b. Even though previous grades will not be used to calculate the new cumulative GPA, all previous grades will remain on the student’s transcript.
2. In order to be eligible for Academic Amnesty, a student must meet all of the following conditions:
- a. The student has not taken any courses at original college of enrollment for a period of at least three (3) years from the last semester of attendance.
 - b. The student applies for Academic Amnesty before the start of his/her second semester after readmission.
 - c. The student has never before received Academic Amnesty.
 - d. The student achieved a cumulative GPA below 1.7 during previous attendance.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Medical Leave	Date Approved: March 18, 2008
Policy #: 670.08	Date of Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

670.08 MEDICAL LEAVE POLICY

A matriculated student who, due to a serious medical condition that requires extended in-patient treatment in a medical facility and/or ongoing outpatient medical treatment, becomes unable to complete his/her academic requirements and/or who becomes unable to meet the program’s technical standards and/or the requirements of the Student Code of Conduct, may apply for a formal Medical Leave of Absence for up to two consecutive semesters.

Students considering a Medical Leave of Absence should be aware that granting of such leave does not relieve a student from financial responsibility to the college. A student who is seeking a Medical Leave of Absence who is also a financial aid recipient should contact the Financial Aid Office to discuss the leave and any potential implications for changes in financial aid eligibility.

Students requesting Medical Leave of Absence must:

- 1. Provide a letter to the Vice President of Academic Affairs identifying their program of study, the medical reason for the request, the proposed date on which the leave would begin, and the proposed date of readmission, and;

2. Provide the Vice President of Academic Affairs documentation of the medical condition from a licensed health care professional *directly involved in the treatment* of the student’s particular condition that is sufficiently comprehensive to facilitate the decision-making process.

The Vice President of Academic Affairs (or designee) will make a determination regarding the appropriateness of the leave request and notify the student in writing whether the request for Medical Leave of Absence was granted and what conditions for readmission may apply. Students whose requests are granted will not be required to reapply for admission at the end of the leave period provided all conditions for readmission have been met.

Conditions for readmission may include, but are not limited to, submission of documentation from a licensed health care professional *directly involved in the treatment* of the student’s particular condition that is sufficiently comprehensive to provide reasonable assurance that the returning student will be able to meet all college and program academic, technical, and behavioral requirements. Other conditions for readmission may include a required in-person meeting with the Vice President of Academic Affairs and/or the student’s program Department Head; compliance with any new admission criteria implemented in the student’s absence; following a new curriculum plan that may have been implemented in the student’s absence; and/or repeating courses and/or clinical experiences to ensure clinical competence following an extended absence. (Please note that students wishing to return to a residence hall may be required to meet additional, separate criteria from those required for return to an academic program. Students should directly negotiate any return to residence life with the college’s Student Affairs Office.)

Students who choose to seek Medical Leave under the provisions of this policy should be aware that information they voluntarily disclose during the application and readmission processes will be handled under the confidentiality guidelines of the Family Educational Rights and Privacy Act (FERPA) and disclosed only to those persons with a direct academic need to know.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Access to Grades and Transcripts with Outstanding Financial Obligation	Date Approved: June 16, 2009
Policy #: 670.09	Date of Last Amendment: June 16, 2009
Approved: Richard A. Gustafson, Chancellor	Effective Date: July 1, 2009

670.09 ACCESS TO GRADES AND TRANSCRIPTS WITH OUTSTANDING FINANCIAL OBLIGATION

In accordance with FERPA regulations, if a student has a hold on an account because of outstanding financial obligations he/she will be able to view the final grades at the conclusion of the semester in question through Banner Student Web. However, the student will be unable to view his/her entire transcript on Banner Student Web, but may view the entire

transcript in the Registrar's office on request. No official transcript will be released until all outstanding financial obligations are resolved.

Section: 600 – Academic Affairs	Subject: Grading Standards
Policy: Add Period Policy	Date Approved: November 17, 2009
Policy #: 670.10	Last Amendment: Dec.21, 2010
Approved: Richard A. Gustafson, Chancellor	Effective Date: August 1, 2011

670.10 ADD PERIOD POLICY

Up to and including the seventh (7th) calendar day of the semester, students are allowed to add classes (prorated for alternative semester lengths), if space is available. Each campus will develop a process for accommodating course adds during this period.

A course may be added after the seventh (7th) calendar day of the semester (prorated for alternative semester lengths) only with the permission of the instructor.

Section: 600 – Academic Affairs	Subject: 680 Disability Services
Policy: Documentation Requirements	Date Approved: March 18, 2008
Policy #: 680.01	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

680.01 DOCUMENTATION REQUIREMENTS

The following guidelines from the Association on Higher Education and Disability provide the components of documentation necessary to establish eligibility for services and receiving appropriate accommodations.

1. The credentials of the evaluator(s)

The best quality documentation is provided by a licensed or otherwise properly credentialed professional who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated. A good match between the credentials of the individual making the diagnosis and the condition being reported is expected (e.g., an orthopedic limitation might be documented by a physician, but not a licensed psychologist).

2. A diagnostic statement identifying the disability

Quality documentation includes a clear diagnostic statement that describes how the condition was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition. While diagnostic codes from the Diagnostic Statistical Manual of the American Psychiatric Association (DSM) or the International Classification of Functioning, Disability and Health (ICF) of the World Health Organization are helpful in providing this information, a full clinical description will also convey the necessary information.

3. A description of the diagnostic methodology used

Quality documentation includes a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and specific results. Where appropriate to the nature of the disability, having both summary data and specific test scores (with the norming population identified) within the report is recommended.

Diagnostic methods that are congruent with the particular disability and current professional practices in the field are recommended. Methods may include formal instruments, medical examinations, structured interview protocols, performance observations and unstructured interviews. If results from informal, non-standardized or less common methods of evaluation are reported, an explanation of their role and significance in the diagnostic process will strengthen their value in providing useful information.

4. A description of the current functional limitations

Information on how the disabling condition(s) currently impacts the individual provides useful information for both establishing a disability and identifying possible accommodations. A combination of the results of formal evaluation procedures, clinical narrative, and the individual's self report is the most comprehensive approach to fully documenting impact. The best quality documentation is thorough enough to demonstrate whether and how a major life activity is substantially limited by providing a clear sense of the severity, frequency and pervasiveness of the condition(s).

While relatively recent documentation is recommended in most circumstances, common sense and discretion in accepting older documentation of conditions that are permanent or non-varying is recommended. Likewise, changing conditions and/or changes in how the condition impacts the individual brought on by growth and development may warrant more frequent updates in order to provide an accurate picture. It is important to remember that documentation is not time-bound; the need for recent documentation depends on the facts and circumstances of the individual's condition. (* The Community College System of New Hampshire recognizes that in some cases an updated letter from a qualified professional may simply address why prior documentation that has been submitted continues to be relevant. Re-testing that is not medically necessary may be waived.)

5. A description of the expected progression or stability of the disability

It is helpful when documentation provides information on expected changes in the functional impact of the disability over time and context. Information on the cyclical or

episodic nature of the disability and known or suspected environmental triggers provides opportunities to plan for varying functional impacts. If the condition is not stable, information on interventions (including the individual's own strategies) for exacerbations and recommended timelines for re-evaluation are most helpful.

6. A description of current and past accommodations, services and/or medications

The most comprehensive documentation will include a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations, including their effectiveness in ameliorating functional impacts of the disability. A discussion of any significant side effects from current medications or services that may impact physical, perceptual, behavioral or cognitive performance is helpful when included in the report. While accommodations provided in another setting are not binding on the current institution, they may provide insight in making current decisions.

7. Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services

Recommendations from professionals with a history of working with the individual provide valuable information for review and the planning process. It is most helpful when recommended accommodations and strategies are logically related to functional limitations; if connections are not obvious, a clear explanation of their relationship can be useful in decision-making. While the post-secondary institution has no obligation to provide or adopt recommendations made by outside entities, those that are congruent with the programs, services, and benefits offered by the college or program may be appropriate. When recommendations go beyond equitable and inclusive services and benefits, they may still be useful in suggesting alternative accommodations and/or services.

The Community College System of New Hampshire has a responsibility to maintain confidentiality of the evaluation and may not release any part of the documentation without the student's informed consent or under compulsion of legal process.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Classroom Recording Policy	Date Approved: April 4, 2017
Policy #: 681.01	Last Amendment: April 4, 2017
Approved: Ross Gittell, Chancellor	Effective Date: April 4, 2017

681.01 CLASSROOM RECORDING POLICY

Policy Statement:

CCSNH and its colleges are committed to establishing and maintaining an environment that

respects the privacy of students and instructors. Accordingly, the CCSNH and its Colleges recognize that in implementing a classroom recording policy, consideration must be given to the duty to promote a positive, productive environment where instructors and students are able to express themselves without the fear of being recorded and exploited to media outlets.

Policy Purpose:

The purpose of this policy is to promote student learning while maintaining a safe, healthy classroom environment, respecting individual privacy, providing for informed consent, and avoiding potential adverse consequences from the distribution of lectures, activities or discussions occurring within the classroom.

Policy:

1. Students are not permitted to record any class lectures, activities or discussion using electronic video, still photo, or audio recording unless the student first obtains permission from the instructor. If the recording is made as a recommended, reasonable accommodation or modification for a student with a disability, permission shall not be unreasonably withheld.
2. Instructors may record their own class lectures, activities, and discussions using electronic video, still photo, or audio recording for educational purposes, including academic research, professional development, and recording of course content for access through online learning and other formats.
3. Every student present will be informed by the instructor of any recording at the beginning of class.
4. If an instructor records class lectures, activities, or discussions that include any student involvement to support research activities, the instructor must obtain informed consent from students before incorporating student-related data in the research.
5. Student classroom recordings are to be used solely for the student's personal, academic study and review. With the express permission from the instructor, classroom recordings may be used with other students enrolled in the same course. Any further sharing or distribution of student classroom recordings is expressly prohibited.
6. Nothing in this policy should be interpreted to create an expectation that students who are absent from class will be provided with a recording of the class meeting.
7. Violations of this policy may be subject to disciplinary action.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Full-Time Faculty Job Descriptions and Qualifications	Date Approved: March 18, 2008
Policy #: 690.01	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.01 FULL-TIME FACULTY JOB DESCRIPTIONS AND QUALIFICATIONS

Full time faculty job descriptions and qualifications are established within the classification system of the NH Division of Personnel. The CCSNH and the Division of Personnel have established four levels of faculty appointment: Instructor, Assistant Professor, Associate Professor, and Professor. Accountabilities and qualifications are established for each level within each of three areas: (1) General Education/Certain Allied Health/Non-Technical; (2) Professional Technical; and (3) Occupational Technical.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Part-Time and Running Start Faculty Qualifications	Date Approved: March 18, 2008
Policy #: 690.02	Last Amendment: November 20, 2014
Approved: Ross Gittell, Chancellor	Effective Date: November 20, 2014

690.02 PART-TIME AND RUNNING START FACULTY QUALIFICATIONS

Keeping in mind that decisions on faculty credentialing are made on a case-by-case basis, the following guidelines are used by college Vice Presidents of Academic Affairs in evaluating a person’s eligibility to teach a Running Start course or any other college-sponsored course. These guidelines are based on various accreditation standards each college must adhere to:

- In General Education areas* or other Non-Technical Disciplines (Business, Accounting, Early Childhood Education, Human Services, Criminal Justice, Education, Travel and Tourism), possession of a Master’s degree, in the subject/content area closely related to the teaching assignment (e.g., a Master’s in Physics to teach Math); or possession of a Master’s degree in Education with twelve (12) graduate credits in the subject/content area closely related to the teaching assignment and a Bachelor’s degree in the subject/content area or closely related field to the teaching assignment combined with a minimum of two years of related teaching and/or professional work experience is required. Workshops, seminars, licenses, certifications, and other forms of recognized professional achievements in the subject/content area may also be considered in reaching the subject/content area requirement.

- In Technical I areas (Occupational Technical), such as massage therapy, automotive, welding, electrical, HVAC, machine tool--those areas that were once considered “vocational,” a Bachelor’s degree in the subject area closely related to the teaching assignment, or possession of a Bachelor’s degree in Education and an Associate’s degree in a subject/content area closely related to the teaching assignment combined with a minimum of three years of related teaching and/or professional work experience is preferred. Individuals with an Associate’s degree in the subject/content area closely related to the teaching assignment and a minimum of five (5) years related teaching and/or professional work experience directly related to the teaching assignment shall be considered as meeting the subject/content area requirements. Individuals must possess required licenses or certifications as required within the field.
- In Technical II areas (Career/Professional Technical) such as engineering technology, computer technology, spatial information technology, biotechnology, possession of a Master’s degree in the subject/content area, or a Master’s degree in Education with twelve (12) graduate credits in the subject/content area or closely related to the teaching assignment and a Bachelor’s degree in the subject/content area closely related to the teaching assignment combined with a minimum of two years of related teaching and/or professional work experience is preferred. Individuals with a Bachelor’s degree in the subject/content area or closely related field to the teaching assignment, or a Bachelor’s degree in Education and an Associate’s degree in the subject/content area closely related to the teaching assignment combined with three (3) years of related teaching or professional work experience shall be considered as meeting the subject/content area requirements. Individuals must possess required licenses or certifications as required within the field.
- In the area of Allied Health and other programs with national accreditations: variable depending on accreditation requirements (therefore, usually not appropriate for Running Start)

Exceptions to the above may be made by the VP of Academic Affairs if an individual can show equivalent academic and/or work or teaching experience. However, in no case will an individual be required to have qualifications exceeding those outlined above. Please also see 690.03 regarding “Eminence.”

*General Education courses include both college-level and developmental/ remedial course offerings (sub-100 level) in English, Communications, Humanities, Fine Arts, Foreign Language, Social/Behavioral Science, History, Religion, Philosophy, Math, and Science.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Eminence Policy	Date Approved: March 18, 2008
Policy #: 690.03	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.03 EMINENCE POLICY

Candidates for teaching positions who do not meet the system’s “minimum qualifications” for any rank, may still qualify for a position if it can be clearly demonstrated that they are “eminent” in their field. In this context, eminence is defined as “superior knowledge and skill in comparison with the generally accepted standard of achievement in the subject area.” Candidates may demonstrate such “superior knowledge and skill” through positions they have held, publications, creative activities, honors, awards, or other professional and public recognitions. Evidence that the candidate is held in high esteem within his or her field will be the critical determinant and must be well documented. *In no case should the designation of eminence be used to qualify candidates who are close to but below the minimum qualifications, unless eminence can be clearly and objectively established.*

Since candidates may have established eminence in a specific area within their field but lack the broader background and the general education preparation required by the system’s “minimum qualifications,” candidates may be judged eminent for a specified set of courses instead of for an entire discipline.

Candidates who qualify under the conditions stated above must be approved by the Vice President of Academic Affairs and the President.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Faculty Promotion	Date Approved: March 18, 2008
Policy #: 690.04	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.04 FACULTY PROMOTION

1. Qualifications for Promotions
 - a. Academic Qualifications
 - (1) Faculty members submitting requests for promotion consideration must meet the minimum qualifications for the rank (classification), as well as demonstrate the ability to fulfill the accountabilities for the rank they are seeking as set forth by the NH Division of Personnel.

- (2) A certification review shall be conducted by the VP of Academic Affairs or the CCSNH Director of Human Resources to ensure that the education and experience requirements (minimum qualifications) for the faculty rank of promotion are met.

b. Service in Grade Qualifications

- (1) Faculty members submitting requests for promotion from one academic rank to another, must have completed the following years of service in grade.

- Instructor to Assistant Professor: 2 years
- Assist. Professor to Assoc. Professor: 2 years
- Associate Professor to Professor: 3 years

- (2) Faculty serving in the last year of the length of service requirement shall be eligible to make application for promotion.

- (3) Exceptions to “service in grade” shall be considered only in extraordinary circumstances which, if the promotion is not considered, would be detrimental to the college. Such requests must be submitted in writing by the College President to the Chancellor of the Community College System.

- c. General qualifications for all Promotions - In order to qualify for promotion, a faculty member must show evidence of the following since his/her last appointment or promotion. Items listed under each of the following categories (1-5) help define the category and are not meant to be a list of accountabilities that each candidate must meet for that category, nor are they meant to be exhaustive or all-inclusive for that category. The Master Teacher Team should evaluate each candidate individually, recognizing that faculty positions differ across a campus, and expectations that are reasonable in one department may not be appropriate in another. Individual items beneath the categories, therefore, are merely guidelines and not meant to be prescriptive.

- (1) Teaching & Learning Effectiveness - For a faculty member to qualify for promotion, he/she must show evidence of effective teaching techniques which promote student learning since his/her last appointment or promotion. Examples may include, but are not limited to:

- a) Demonstrates teaching excellence through the establishment of an effective learning environment:

- Integrates theory with applications in teaching material.
- Clearly defines program and course goals.
- Promotes the implementation of core competencies and Performance Based Learning.
- Promotes critical thinking and life skills.
- Responds to academic needs of diverse student populations.
- Maintains accessibility and availability.

- b) Prepares students for the workplace.

- Adapts to, and remains current with, changes in technology through links with business, industry and professional organizations.
 - Displays creativity and innovation in the classroom, e.g., use of technology in the classroom.
- c) Demonstrates ethical and professional behavior.
- d) Is able to solve problems and handle difficulties professionally and confidentially.

(2) Academic Contributions - The candidate should demonstrate sustained activity which contributes to the academic vitality and well-being of the institution. Examples may include, but are not limited to:

- a) Curriculum/Program Development.
- Participates in the development of Day/DCE/TDC programs and courses.
 - Provides contacts/linkages with business and industry when appropriate in developing new programs or courses.
 - Shares new teaching and learning methodologies with peers through the presentation of workshops, position papers, etc.
 - Exhibits academic creativity in attracting revenues through new programs, workshops, grants, etc.
 - Promotes/participates in articulation initiatives (i.e. school-to-work, transfer).
- b) Service to the Department/System.
- When appropriate, participates in team activities with faculty in other disciplines.
 - Serves as an academic resource for adjunct faculty.
 - Assists in seeking contacts with employers for development of internships, co-op experiences, practicums, clinics, etc.
 - Actively assists in departmental needs: equipment inventory and orders, course scheduling, new faculty orientation, reviewing placement tests, attending open houses, etc.

(3) Service to Students - It is expected that a candidate would demonstrate an involvement with students outside of the classroom setting. Examples may include, but are not limited to:

- a) Department Related Activities.
- Engages in the Admissions process, including contacting prospective students, participating in interviews, preparing admissions material (brochures, flyers, public relations activities related to Admissions).
 - Advises students on overall academic planning, including registration, course selection, course sequencing, course withdrawal, and commencement.
 - Advises students in job placement, including providing professional contacts, making students aware of relevant professional opportunities, assisting in preparation of job-

- b) Participates in panels, courses or workshops locally, regionally and/or nationally.
- c) Participates as a member of an accreditation visiting team.
- d) Participates as a member of a professional board or advisory board.
- e) Participates in departmental or institutional self-studies.
- f) Attends professional organization meetings.
- g) Maintains contact with appropriate external agencies (businesses, hospitals, etc.) to ensure currency of curriculum.

2. Evaluation Process

- a. A Faculty Promotion Review Team comprised of a maximum of six (6) full-time faculty, designated as “Master Teacher Fellows”, shall be established within each college for the purpose of evaluating candidates for promotion.
 - Representation shall be across disciplines (Health, Technology, Business, and General Education, etc.). The Vice-President of Academic Affairs shall sponsor this team.
 - A minimum of three (3), and a maximum of six (6), Master Teacher Fellows will sit on a review panel as determined by the Vice President of Academic Affairs based on the number of final candidates for promotion.
- b. The Faculty Promotion Review Team shall be responsible for conducting a careful review and evaluation of each candidate’s portfolio, teaching effectiveness, and performance in conjunction with the qualifications criteria established. Such a review shall involve class visits; interviews with students, peers, Department Heads, and individuals outside the institution, where appropriate; a review of class materials, including syllabi and exams; an interview with the candidate regarding teaching philosophy and approach; and non-teaching activities.
- c. It is expected that each Master Teacher Fellow shall complete the following review for each candidate within the respective college for promotion.
 - (1) Conducts one (1) class visit per semester.
 - (2) Reviews all student evaluations from the previous academic year and fall semester of the current academic year.
 - (3) Conducts a minimum of one (1) interview with the candidate to discuss his/her teaching philosophy and practices.
 - (4) Interviews fellow members of the faculty, students currently enrolled in a minimum of one of the candidate’s classes, and the candidate’s department head.
 - (5) Reviews all course syllabi, course material developed and/or utilized, and the candidate’s portfolio.
 - (6) Provides recommendations for improvement and mentorship, where appropriate.
- d. At the conclusion of the review process, the review team shall assign point values to each of the five evaluative criteria identified with the “General Qualifications for

Promotion” and for compiling a written evaluation. The review team’s evaluative findings and decision to recommend or deny promotion shall be submitted to the Vice-President of Academic Affairs. The review team shall provide a professional development plan for each candidate not recommended for promotion.

- e. The Vice-President of Academic Affairs shall conduct a minimum of one (1) class visit for each candidate and shall review all evaluative material submitted by the review team.
- f. The Vice-President of Academic Affairs, in consultation with the President, shall forward those candidates recommended for promotion to the Chancellor or designee(s) for final approval. Written notification shall be provided by the President or designee to each candidate regarding his/her promotional status.

3. Master Teacher Fellows Appointments

- a. A Master Teacher Fellow shall possess a minimum of five (5) years of teaching experience at the postsecondary level, two (2) years of which must have been with the Community College System and shall possess a higher academic rank/classification than the candidates applying for promotion. A Master Teacher Fellow must demonstrate teaching excellence through his/her instructional expertise, academic contributions, ethical and professional behavior, service to students, non-teaching activities within the college and system, and professional growth and development.
- b. Faculty interested in serving as a Master Teacher Fellow must submit a letter of intent/interest to the Vice-President of Academic Affairs for review and appointment by a designated college leadership/ advisory team. It is recommended that Department Chairs not serve as Master Teacher Fellows due to their supervisory role and responsibilities. Under no circumstances shall a Department Chair serve as a Master Teacher Fellow in those instances when he/she is responsible for the supervision of a candidate for promotion.
- c. Each Master Teacher Fellow shall receive a stipend of seven hundred forty dollars (\$740.00) per academic year. In addition, where appropriate and feasible, the Vice-President of Academic Affairs shall develop a more flexible work schedule for each Master Teacher Fellow.
- d. It is expected that Master Teacher Fellows shall serve as members of the Faculty Promotion Review Team. As a team, members shall be responsible for keeping minutes, authoring documents, setting meeting times, and performing other team duties as needed. The Faculty Promotion Review Team shall meet monthly, at a minimum, to discuss and review progress and processes.
- e. Effective September 1997, appointments to the Faculty Promotion Review Team shall be designated as a one (1) year or a two (2) year appointment. All following appointments shall be designated as a two (2) year appointment.

4. Documentation for Promotion Process

- a. Each candidate shall submit a portfolio of materials that address the criteria outlined in the “Qualifications for Promotion.” A promotional portfolio shall include

- a completed state application, an up-dated resume, a copy of college transcripts, and documentation which supports evidence of teaching effectiveness and professional activities outside the classroom. Such documentation includes; syllabi, exams, course evaluations, student evaluations, student testimonials, tapes of classes, letters of support from colleagues, description of innovative practices, etc.
- b. Each candidate shall include a letter of recommendation/support from his/her Department Chairperson in his/her promotional portfolio.
- c. Each candidate shall include copies of his/her performance reviews/evaluations for the previous two (2) academic years in his/her promotional portfolio.
- d. Each candidate may include copies of letters of support/recognition from business, industry, community partnerships, and affiliations, where appropriate.

5. Schedule for Promotion

- a. A schedule for promotion shall be established at the start of each academic year by the CCSNH Human Resources Department. This schedule shall be distributed to the Vice President of Academic Affairs for distribution.

6. Evaluation System

- a. A four (4) point scale, which parallels our existing grading system, shall be used to evaluate each of the five criteria established within the “General Qualifications for Promotion.” Scoring shall be as follows:

<u>Criteria</u>	<u>Point Scale</u>	<u>Cumulative</u>
Teaching Effectiveness	60% x 0-4 points	0.00 - 2.40
Academic Contributions	10% x 0-4 points	0.00 - 0.40
Service to Students	10% x 0-4 points	0.00 - 0.40
Service to Inst. & Comm.	10% x 0-4 points	0.00 - 0.40
Professional Develop.	10% x 0-4 points	0.00 - 0.40

- 0-1 = Below average or do not recommend
- 1-2 = Average or recommend with reservation
- 2-3 = Good or recommend with confidence
- 3-4 = Excellent or strongly recommend

- b. Candidates must receive a minimum of a 3.0 rating in Teaching effectiveness to be considered for promotion. If the minimum score of 3.0 for Teaching Effectiveness is not achieved, candidates will be denied promotion.
- c. Candidates must meet the following cumulative scores for promotion to the designated faculty level.

Instructor to Assistant Professor	2.7
Assistant Professor to Associate Professor	3.0
Associate Professor to Professor	3.4

7. Appeal Process

- a. Appeals of denial for promotion must be made in accordance with the Administrative Rules of the NH Division of Personnel.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Faculty Evaluation	Date Approved: March 18, 2008
Policy #: 690.05	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.05 FACULTY EVALUATION

Faculty performance is evaluated annually in accordance with rules established jointly by the New Hampshire Division of Personnel and the CCSNH. Faculty are evaluated in those areas listed in section 680 above of the CCSNH Board of Trustees.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Academic Freedom	Date Approved: March 18, 2008
Policy #: 690.06	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.06 ACADEMIC FREEDOM

The statement of academic freedom as set forth by the American Association of University Professors, the Association of American Colleges, and the Association for Higher Education, National Education Association, is endorsed by the Board of Trustees.

The statement endorsed follows:

1. "The teacher is entitled to full freedom in research and in the publication of the results, subject to the adequate performance of other academic duties; but research for pecuniary return should be based upon an understanding with the authorities of the institution."
2. "The teacher is entitled to freedom in the classroom in discussing his/her subject but should be careful not to introduce into his/her teaching controversial matter which has no relation to the subject. Limitations of academic freedom because of religious or other aims of the institution should be clearly stated in writing at the time of the appointment."
3. "The college or university teacher is a citizen, a member of a learned profession, and an officer of an educational institution. When the teacher speaks or writes as a citizen, he/she should be free from institutional censorship or discipline, but the teacher's special position in the community imposes special obligations. As a person of learning and an educational officer, the teacher should remember that the public may judge the

teaching profession and the institution by his/her utterances. Hence, the teacher should at all times be accurate, should exercise appropriate restraint, should show respect for the opinions of others, and should make every effort to indicate that he/she is not an institutional spokesman."

8. Code of Ethics for Education Profession (NEA).

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Faculty Compensation for Independent Study and Directed Study	Date Approved: March 18, 2008
Policy #: 690.07	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.07 FACULTY COMPENSATION FOR INDEPENDENT STUDY & DIRECTED STUDY

Faculty who supervise an Independent Study or Directed Study will be paid seventy-five percent (75%) of the tuition paid by a student as compensation for preparing materials, meeting with the student and performing any assessments. Independent Study and/or Directed Study may not be used in lieu of traditional course work to achieve full-time workload status. Exceptions to this policy require the approval of the Vice President of Academic Affairs.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Running Start Faculty Partners Compensation	Date Approved: March 18, 2008
Policy #: 690.08	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.08 RUNNING START FACULTY PARTNERS COMPENSATION

Faculty Partners will be compensated at three hundred dollars (\$300) for each high school course they collaborate on. Multiple sections of the same course at a high school will be treated as one course, unless the high school instructor changes. The same course taught at a separate high school will be treated as a new course.

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Protocols for Research in the Classroom	Date Approved: March 18, 2008
Policy #: 690.09	Last Amendment: March 18, 2008
Approved: Richard A. Gustafson, Chancellor	Effective Date: March 18, 2008

690.09 PROTOCOLS FOR RESEARCH IN THE CLASSROOM

1. All full-time faculty and staff may serve as research investigators. Students, adjunct faculty and other instructional personnel must be sponsored by a full-time faculty member. This policy excludes surveys conducted for educational or informational purposes by [insert college name] students while in the course of completing class or degree requirements. Such research, however, must comply with all other rules and regulations governing privacy (e.g., FERPA).
 - a. Research investigators acknowledge and accept their responsibility for protecting the rights and welfare of human research subjects and for complying with all applicable provisions of this Assurance.
 - b. Research investigators who intend to involve human research subjects will not make the final determination of exemption from applicable Federal regulations or provisions of this Assurance.
 - c. Research investigators will promptly report to Academic Affairs and the College Leadership Team proposed changes in previously approved human subject research activities. The proposed changes will not be initiated without College Leadership Team review and approval, except where necessary to eliminate apparent immediate hazards to the subjects.
 - d. Research investigators are responsible for reporting progress of approved research to the College Leadership Team, as often as and in the manner prescribed by the approving College Leadership Team on the basis of risks to subjects, but not less than once per year.
 - e. Research investigators will promptly report to the College Leadership Team any injuries or other unanticipated problems involving risks to subjects or others.
 - f. No research investigator who is obligated by the provisions of this Assurance, any associated Inter-Institutional Amendment, or Non-institutional Investigator Agreement will seek to obtain research credit for, or use data from, patient interventions that constitute the provision of emergency medical care without prior College Leadership Team approval. A physician may provide emergency medical care to a patient without prior College Leadership Team review and

approval, to the extent permitted by law. However, such activities will not be counted as research nor the data used in support of research.

2. The following outline includes the elements that should be covered in your request for Academic Affairs and College Leadership Team review. Please observe a two-page limit. Return to the Office of Academic Affairs.
 - a. INTRODUCTION - Summarize the background, nature, rationale, objectives and significance of the proposed study.
 - b. RESEARCH PROTOCOL -
 - (1) Setting: Describe the setting in which the study will be conducted. Indicate the source of subjects, how they will be recruited, and whether they will be compensated.
 - (2) Protocols: Describe the activities in which subjects will engage. Include sample instruments.
 - c. INTERPRETATION OF DATA - Explain how data will be analyzed or studied (using quantitative or qualitative methodologies). Describe how your interpretation will address your research questions.
 - d. RISKS* - List possible risks to subjects including physical, psychological, and economic (loss of employability). Also address

issues of confidentiality and risks associated with a breach of confidence.
 - e. BENEFITS - Discuss benefits to participants. In studies that involve risk, discuss the relationship between risks and benefits.
 - f. INFORMED CONSENT/ASSENT - Attach a copy of the consent document. Describe procedures for obtaining consent. Explain how *assent* will be secured from children.

**Special note on risk: Any project involving the risk of physical injury, civil, financial or criminal liability, a risk to a subject's employability, or instances where the research involves sensitive aspects of the subject's own behavior such as illegal conduct, drug use, sexual behavior, or use of alcohol, has the potential of involving more than minimal risk.*

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Maximum Enrollment for On-Line Course	Date approved: February 25, 2009
Policy #: 690.11	Last Amendment: August 19, 2014
Approved: Ross Gittell Chancellor	Effective Date: August 19, 2014

690.11 MAXIMUM ENROLLMENT FOR ON-LINE COURSE

Policy repealed August 19, 2014

Section: 600 – Academic Affairs	Subject: 690 Faculty
Policy: Responding to Allegations of Research Misconduct	Date approved: September 17, 2014
Policy #: 690.12	Last Amendment: Sept. 17, 2014
Approved: Ross Gittell, Chancellor	Effective Date: September 17, 2014

690.12 RESPONDING TO ALLEGATIONS OF RESEARCH MISCONDUCT

1. Introduction

a. General Policy

The Community College System of New Hampshire is committed to assuring the integrity of research conducted under its auspices and has put in place policies and procedures that define misconduct, outline the process for investigating allegations, and explain the consequences of committing misconduct.

b. Scope

This statement of policy and procedures is intended to carry out this institution's responsibilities under the Public Health Service (PHS) Policies on Research Misconduct, as well as the corresponding policies on research misconduct of a variety of federal funding agencies.

This document applies to allegations of research misconduct (fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results – See Section II) involving:

- A person who, at the time of the alleged research misconduct, was employed by, was an agent of, or was affiliated by contract or agreement with this institution; and

- (1) PHS support biomedical or behavioral research, research training or activities related to that research or research training, such as the operation of tissue and data banks and the dissemination of research information, (2) applications or proposals for PHS support for biomedical or behavioral research, research training or activities related to that research or research training, or (3) plagiarism of research records produced in the course of PHS supported research, research training or activities related to that research or research training. This includes any research proposed, performed, reviewed, or reported, or any research record generated from that research, regardless of whether an application or proposal for PHS funds resulted in a grant, contract, cooperative agreement, or other form of PHS support.

This statement of policy and procedures does not apply to authorship or collaboration disputes and applies only to allegations of research misconduct that occurred within six years of the date the institution or the federal funding agency received the allegation.

2. Definitions

Advocacy means the presence of an individual providing support and consultation to the respondent throughout the misconduct proceedings. An advocate may include an individual such as a personal advisor whom the respondent selects to serve in this role, and who may accompany them to meetings throughout the proceedings. An advocate will not be legal counselors or active participants in the process but may request a recess/opportunity to caucus during the formal proceedings in order to provide advocacy as needed. Individuals may select a collective bargaining unit representative as an advocate on their behalf, if they so wish.

Agency means a public or private organization providing funds to support research.

Allegation means a disclosure of possible research misconduct through any means of communication. The disclosure may be by written or oral statement or other communication to an institutional official.

Assessment means the process of evaluating an allegation of research misconduct in order to determine whether the allegation falls within the definition of research misconduct, and is sufficiently credible and specific so that potential evidence of research misconduct may be identified. This initial step is conducted by the RIO in order to determine if an inquiry is required. An inquiry must be conducted if the above stated criteria are met. If this is the case, the RIO will launch the inquiry phase, including the convening of an inquiry committee.

College refers to one or more of the colleges within the Community College System of New Hampshire

Deciding Official (DO) means the institutional official who makes final determinations on allegations of research misconduct and any institutional administrative actions. The Deciding Official will not be the same individual as the Research Integrity Officer and should have no direct prior involvement in the institution's inquiry, investigation, or allegation assessment. A DO's appointment of an individual to assess allegations of research misconduct, or to serve on an inquiry or investigation committee, is not considered to be direct prior involvement. (***The DO in the Community College System of New Hampshire is the President of the college where the investigation is taking place, or his/her designee.***)

Fabrication is making up data or results and recording or reporting them.

Falsification Is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

Good faith as applied to a whistleblower or witness means having a belief in the truth of one's allegations or testimony that a reasonable person in the whistleblower or witness's position could have based on the information known to the whistleblower or witness at the time. An allegation or cooperation with a research misconduct proceeding is not in good faith if it is made with knowing or reckless disregard for information that would negate the allegation or testimony. Good faith as applied to a committee member means cooperating with the research misconduct proceeding by carrying out the duties assigned impartially for the purpose of helping the College meet its responsibilities. A committee member does not act in good faith if his/her acts or omissions on the committee are dishonest or influenced by personal, professional, or financial conflicts of interest with those involved in the research misconduct proceeding.

Inquiry means gathering information and initial fact-finding to determine whether an allegation or suspected research misconduct warrants an investigation.

Institution refers to the Community College System of New Hampshire.

Investigation means the formal development of a factual record and the examination of that record leading to: (1) a decision not to make a finding of research misconduct, or (2) a recommendation for a finding of research misconduct which may include a recommendation for other appropriate actions, including administrative actions.

ORI means the Office of Research Integrity of the Public Health Service (PHS), which is the Federal office promoting integrity in biomedical and behavioral research supported by the PHS by monitoring institutional investigations of scientific misconduct and facilitating the responsible conduct of research.

PHS means the Public Health Service. PHS is the umbrella organization in the U.S. Federal Government consisting of eight Health and Human Services health Agencies, the Office of Public Health and Science, and the Commissioned Corps (a uniformed service of more than 6,000 health professionals). The NIH is the largest Agency within the PHS.

Plagiarism means the appropriation of another person's ideas, processes, results, or words without giving appropriate credit.

Preponderance of the evidence means proof by information that, compared with that opposing it, leads to the conclusion that the fact at issue is more probably true than not.

Regulation means any regulation applicable to an externally funded grant or contract or to the handling of research misconduct allegations related to such grant, contract, or research performed under it.

Research Integrity Officer (RIO) means the college official responsible for: (1) assessing allegations of research misconduct to determine if they fall within the definition of research misconduct and warrant an inquiry on the basis that the allegation is sufficiently credible and specific so that potential evidence of research misconduct may be identified; (2) overseeing inquiries and investigations; and (3) the other responsibilities described in this policy. One RIO will be designated for each of the seven colleges within the Community College System of New Hampshire. (***The RIO is designated as the VPAA at each college.***)

Research misconduct means fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results. It does not include honest error or differences of opinion. A finding of research misconduct requires that there be a significant departure from accepted practices of the relevant research community; that the misconduct be committed intentionally, knowingly, or recklessly; and that the allegation be proven by a preponderance of the evidence.

Research record means the record of data or results that embody the facts resulting from research inquiry, including, but not limited to, research proposals, laboratory records, both physical and electronic, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and any documents and materials provided to a government agency or an institutional official by a respondent in the course of the research misconduct proceeding.

Respondent means the person against whom an allegation of research misconduct is directed or the person whose actions are the subject of the inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

Retaliation means an adverse action taken against a whistleblower, witness, or committee member by an institution or one of its members in response to a good faith allegation of research misconduct; or good faith cooperation with a research misconduct proceeding.

Whistleblower means a person who in good faith makes an allegation of research misconduct.

3. Rights and Responsibilities

a. Research Integrity Officer

At each college, the Vice President of Academic Affairs will serve as the RIO who will have primary responsibility for implementation of the institution's policies and procedures on research misconduct. A detailed listing of the responsibilities of the RIO is set forth in Appendix A. These responsibilities include the following duties related to research misconduct proceedings:

- Consult confidentially with persons uncertain about whether to submit an allegation of research misconduct
- Receive allegations of research misconduct
- Assess each allegation of research misconduct in accordance with Section V.A. of this policy to determine whether it falls within the definition of research misconduct and warrants an inquiry
- As necessary, take interim action and notify ORI or other pertinent external agency of special circumstances, in accordance with Section IV.F. of this policy
- Sequester research data and evidence pertinent to the allegation of research misconduct in accordance with Section V.C. of this policy and maintain it securely in accordance with this policy and applicable law and regulation
- Make all reasonable and practical efforts to provide confidentiality to those involved in the research misconduct proceeding as required by applicable law, and institutional policy
- Notify the respondent and provide opportunities for him/her to review/comment/respond to allegations, evidence, and committee reports in accordance with Section III.C. of this policy
- Inform respondents, whistleblowers, and witnesses of the procedural steps in the research misconduct proceeding
- Appoint the chair and members of the inquiry and investigation committees, ensure that those committees are properly staffed and that there is expertise appropriate to carry out a thorough and authoritative evaluation of the evidence
- Determine whether each person involved in handling an allegation of research misconduct has an unresolved personal, professional, or financial conflict of interest and take appropriate action, including recusal, to ensure that no person with such conflict is involved in the research misconduct proceeding
- In cooperation with other institutional officials, take all reasonable and practical steps to protect or restore the positions and reputations of good faith whistleblowers, witnesses, and committee members and counter potential or actual retaliation against them by respondents or other institutional members

- Keep the DO and others who need to know apprised of the progress of the review of the allegation of research misconduct
- Notify and make reports to external agencies as required by federal regulations or sponsor terms and conditions
- Ensure that administrative actions taken by the institution and ORI or other pertinent external agency are enforced and take appropriate action to notify other involved parties, such as sponsors, law enforcement agencies, professional societies, and licensing boards of those actions
- Maintain records of the research misconduct proceeding and make them available to external funding agencies in accordance with Section VIII.F. of this policy

b. Whistleblower

The whistleblower is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with the inquiry and investigation. As a matter of good practice, the whistleblower should be interviewed at the inquiry stage and given the transcript or recording of the interview for correction. The whistleblower must be interviewed during an investigation, and be given the transcript or recording of the interview for correction.

c. Respondent

The respondent is responsible for maintaining confidentiality and cooperating with the conduct of an inquiry and investigation. The respondent is entitled to:

- A good faith effort from the RIO to notify the respondent in writing at the time of or before beginning an inquiry
- An opportunity to comment on the inquiry report and have his/her comments attached to the report
- Be notified of the outcome of the inquiry, and receive a copy of the inquiry report that includes a copy of, as well as applicable external funding agency research misconduct policies (in the case of externally sponsored projects) and the institution's policies and procedures on research misconduct
- Be notified in writing of the allegations to be investigated within a reasonable time after the determination that an investigation is warranted, but before the investigation begins (within 30 days after the institution decides to begin an investigation), and be notified in writing of any new allegations, not addressed in the inquiry or in the initial notice of investigation, within a reasonable time after the determination to pursue those allegations
- Be interviewed during the investigation, have the opportunity to correct the recording or transcript, and have the corrected recording or transcript included in the record of the investigation

- Have interviewed during the investigation any witness who has been reasonably identified by the respondent as having information on relevant aspects of the investigation, have the recording or transcript provided to the witness for correction, and have the corrected recording or transcript included in the record of investigation
- Receive a copy of the draft investigation report and, concurrently, a copy of, or supervised access to the evidence on which the report is based, and be notified that any comments must be submitted within 30 days of the date on which the copy was received and that the comments will be considered by the institution and addressed in the final report
- File a written appeal of the decision of the DO, if he/she so chooses, within 30 days of the committee's completion of the investigation report. All appeals are reviewed and acted upon by the President of the University
- Have an advocate present at meetings related to the misconduct proceedings. The presence of such an advocate will be for consultation and support; the advocate will not be an active participant in the process; and, shall not provide formal legal "representation" for the respondent. Any participant in a formal proceeding may request a recess/opportunity to caucus during the proceedings in order to allow for advocacy as needed

The respondent should be given the opportunity to admit that research misconduct occurred and that he/she committed the research misconduct. With the advice of the RIO and/or other college or institutional officials, the DO may terminate the institution's review of an allegation that has been admitted, provided the institution has received from any relevant funding agency any required approval of institutional acceptance of the admission and any proposed settlement.

d. Deciding Official

The DO of the Community College System of New Hampshire is the President of the college where the investigation is taking place, or his/her designee. The DO will receive the inquiry report and after consulting with the RIO and/or other institutional officials, decide whether an investigation is warranted. Any finding that an investigation is warranted must be made in writing by the DO and provided to the pertinent external agency as required by regulation, within 30 days of the finding. If it is found that an investigation is not warranted, the DO and the RIO will ensure that detailed documentation of the inquiry is retained for at least 7 years after termination of the inquiry, so that any pertinent external agency, as required by regulation, may assess the reasons why the institution decided not to conduct an investigation.

The DO will receive the investigation report and, after consulting with the RIO and/or other college or institutional officials, decide the extent to which this institution accepts the findings of the investigation and, if research misconduct

is found, decide what, if any, institutional administrative actions are appropriate. The DO shall ensure that the final investigation report, the findings of the DO and a description of any pending or completed administrative actions are provided to any pertinent external agency, as required by regulation.

4. General Policies and Principles

a. Responsibility to Report Misconduct

All college and institutional members will report observed, suspected, or apparent research misconduct to the RIO at the college where the research is being conducted. If an individual is unsure whether a suspected incident falls within the definition of research misconduct, he or she may meet with or contact the RIO to discuss the suspected research misconduct informally, which may include discussing it anonymously and/or hypothetically. If the circumstances described by the individual do not meet the definition of research misconduct, the RIO will refer the individual or allegation to other offices or officials with responsibility for resolving the problem.

At any time, an institutional member may have confidential discussions and consultations about concerns of possible misconduct with the RIO and will be counseled about appropriate procedures for reporting allegations.

b. Cooperation with Research Misconduct Proceedings

College members will cooperate with the RIO and other college and/or institutional officials in the review of allegations and the conduct of inquiries and investigations. College and Institutional members, including respondents, have an obligation to provide evidence relevant to research misconduct allegations to the RIO or other college and/or institutional officials.

c. Confidentiality

The RIO shall make all reasonable and practical efforts to maintain confidentiality, consistent with federal regulations, state regulations, such as the Whistleblowers' Protection Act, and institutional policy, and to: (1) limit disclosure of the identity of respondents and whistleblowers to those who need to know in order to carry out a thorough, competent, objective and fair research misconduct proceeding; and (2) except as otherwise prescribed by law, limit the disclosure of any records or evidence from which research subjects might be identified to those who need to know in order to carry out a research misconduct proceeding. The RIO should use written confidentiality agreements or other mechanisms to ensure that the recipient does not make any further disclosure of identifying information.

d. Protecting Whistleblowers, Witnesses, and Committee Members

Institutional and/or college members may not retaliate in any way against whistleblowers, witnesses, or committee members. Institutional and/or college

members should immediately report any alleged or apparent retaliation against whistleblowers, witnesses or committee members to the RIO, who shall review the matter and, as necessary, make all reasonable and practical efforts to counter any potential or actual retaliation and protect and restore the position and reputation of the person against whom the retaliation is directed.

e. Protecting the Respondent

As requested and as appropriate, the RIO and other college and/or institutional officials shall make all reasonable and practical efforts to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct is made. During the research misconduct proceeding, the RIO is responsible for ensuring that respondents receive all the notices and opportunities provided by pertinent external agency regulations and the policies and procedures of the institution. Respondents may consult with an advocate (who is not a principal or witness in the case) to seek advice and may bring the advocate to interviews or meetings on the case.

f. Interim Administrative Actions and Notifying ORI or Other Pertinent External Agency of Special Circumstances

Throughout the research misconduct proceeding, the RIO will review the situation to determine any threat of harm to public health, sponsor funds and equipment, or the integrity of the externally supported research process. In the event of such a threat, the RIO will, in consultation with other institutional officials and pertinent external agency, take appropriate interim action to protect against any such threat. Interim action might include additional monitoring of the research process and the handling of federal funds and equipment, reassignment of personnel or of the responsibility for the handling of federal funds and equipment, additional review of research data and results or delaying publication. The RIO shall, at any time during a research misconduct proceeding, notify the pertinent external agency immediately if he/she has reason to believe that any of the following conditions exist:

- Health or safety of the public is at risk, including an immediate need to protect human or animal subjects
- Sponsor resources or interests are threatened
- Research activities should be suspended
- Reasonable indication of possible violations of civil or criminal law
- Federal action is required to protect the interests of those involved in the research misconduct proceeding
- The research misconduct proceeding may be made public prematurely and sponsor agency action may be necessary to safeguard evidence and protect the rights of those involved
- The research community or public should be informed

5. Conducting the Assessment and Inquiry

a. Assessment of Allegations

Upon receiving an allegation of research misconduct, the RIO will immediately assess the allegation to determine whether the allegation falls within the definition of research misconduct (see Section II) and, it is sufficiently credible and specific so that potential evidence of research misconduct may be identified in accordance with external agency regulations. An inquiry must be conducted if these criteria are met.

The assessment period should be brief, preferably concluded within a week. In conducting the assessment, the RIO need not interview the whistleblower, respondent, or other witnesses, or gather data beyond any that may have been submitted with the allegation, except as necessary to determine whether the allegation is sufficiently credible and specific so potential evidence of research misconduct may be identified. The RIO shall, on or before the date, on which the respondent is notified of the allegation, obtain custody of, inventory, and sequester all research records and evidence needed to conduct the research misconduct proceeding, as provided in paragraph C. of this section.

b. Initiation and Purpose of the Inquiry

If the RIO determines that the criteria for an inquiry are met, he or she will immediately initiate the inquiry process. The purpose of the inquiry is to conduct an initial review of the available evidence to determine whether to conduct an investigation. An inquiry does not require a full review of all the evidence related to the allegation.

c. Notice to Respondent; Sequestration of Research Records

At the time of or before beginning an inquiry, the RIO must make a good faith effort to notify the respondent in writing, if the respondent is known. If the inquiry subsequently identifies additional respondents, they must be notified in writing. On or before the date on which the respondent is notified, or the inquiry begins, whichever is earlier, the RIO must take all reasonable and practical steps to obtain custody of all the research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence and sequester them in a secure manner, except that where the research records or evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments. The RIO may consult with ORI or other pertinent external agencies for advice and assistance in this regard.

d. Appointment of the Inquiry Committee

The RIO, in consultation with other college and/or institutional officials as appropriate, will appoint an inquiry committee and committee chair as soon

after the initiation of the inquiry as is practical. The inquiry committee must consist of individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the inquiry and should include individuals with the appropriate scientific expertise to evaluate the evidence and issues related to the allegation, interview the principals and key witnesses, and conduct the inquiry. The committee may include individuals from other colleges within the institution, as appropriate.

The RIO shall be responsible for notifying the respondent of the proposed committee membership to give the respondent an opportunity to object to a proposed member based upon a personal, professional, or financial conflict of interest. Objections must be filed within 10 calendar days. The institution will make the final determination of whether a conflict exists.

e. Charge to the Committee and First Meeting

The RIO will prepare a charge for the inquiry committee that:

- Sets forth the time for completion of the inquiry.
- Describes the allegations and any related issues identified during the allegation assessment.
- States that the purpose of the inquiry is to conduct an initial review of the evidence, including the testimony of the respondent, whistleblower and key witnesses, to determine whether an investigation is warranted, not to determine whether research misconduct definitely occurred or who was responsible.
- States that an investigation is warranted if the committee determines: (1) there is a reasonable basis for concluding that the allegation falls within the definition of research misconduct; and, (2) the allegation may have substance, based on the committee's review during the inquiry.
- Informs the inquiry committee that they are responsible for preparing or directing the preparation of a written report of the inquiry that meets the requirements of this policy and any federal regulations.

At the committee's first meeting, the RIO will review the charge with the committee, discuss the allegations, any related issues, and the appropriate procedures for conducting the inquiry, assist the committee with organizing plans for the inquiry, and answer any questions raised by the committee. The RIO will be present or available throughout the inquiry to advise the committee as needed.

f. Inquiry Process

The inquiry committee will normally interview the whistleblower, the respondent and key witnesses as well as examining relevant research records and materials. Then the inquiry committee will evaluate the evidence, including the testimony obtained during the inquiry. After consultation with the RIO and

institutional counsel, the committee members will decide whether an investigation is warranted based on the criteria in this policy and any pertinent external agency regulations. The scope of the inquiry is not required to and does not normally include deciding whether misconduct definitely occurred, determining definitely who committed the research misconduct or conducting exhaustive interviews and analyses. However, if a legally sufficient admission of research misconduct is made by the respondent, misconduct may be determined at the inquiry stage if all relevant issues are resolved. In that case, the institution shall promptly consult with ORI or pertinent external agency to determine the next steps that should be taken (See Section IX).

g. Time for Completion

The inquiry, including preparation of the final inquiry report and the decision of the DO on whether an investigation is warranted, must be completed within 60 calendar days of initiation of the inquiry, unless the RIO determines that circumstances clearly warrant a longer period. If the RIO approves an extension, the inquiry record must include documentation of the reasons for exceeding the 60-day period. In such instances, the respondent will be notified of the extension.

6. The Inquiry Report

a. Elements of the Inquiry Report

- A written inquiry report must be prepared that includes the following information: (1) the name and position of the respondent; (2) a description of the allegations of research misconduct; (3) the external agency support, including, for example, grant numbers, grant applications, contracts and publications listing the external agency support; (4) the basis for recommending or not recommending that the allegations warrant an investigation; (5) any comments on the draft report by the respondent or whistleblower; (6) the names and titles of the committee members and experts who conducted the inquiry; (7) a summary of the inquiry process used; (8) a list of the research records reviewed; (9) summaries of any interviews; and (10) whether any other actions should be taken if an investigation is not recommended.
- Institutional counsel should review the report for legal sufficiency. Modifications should be made as appropriate in consultation with the RIO and the inquiry committee.

b. Notification to the Respondent and Opportunity to Comment

- The RIO shall notify the respondent whether the inquiry found an investigation to be warranted, include a copy of the draft inquiry report for comment within 10 days, and include a copy of or refer to any pertinent external agency regulations and the institution's policies and procedures on research misconduct.

- In distributing the draft report, or portions thereof, to the respondent, the RIO will inform the recipient of the confidentiality under which the draft report is made available and may establish reasonable conditions to ensure such confidentiality (for example, the RIO may require that the recipient sign a confidentiality agreement).
- Any comments that are submitted by the respondent or whistleblower will be attached to the final inquiry report. Based on the comments, the inquiry committee may revise the draft report as appropriate and prepare it in final form. The committee will deliver the final report to the RIO.

c. Institutional Decision and Notification

(1) Decision by Deciding Official

The RIO will transmit the final inquiry report and any comments to the DO, who will determine in writing whether an investigation is warranted. The inquiry is completed when the DO makes this determination.

(2) Notification to ORI or Other Pertinent External Agency and Notification to whistleblower

Within 30 calendar days of the DO's decision that an investigation is warranted, the RIO will provide ORI or other pertinent external agency with the DO's written decision and a copy of the inquiry report. The RIO will also notify those college and institutional officials who need to know of the DO's decision. Where PHS funding is involved, the RIO must provide the following information to ORI or pertinent external agency upon request: (1) the institutional policies and procedures under which the inquiry was conducted; (2) the research records and evidence reviewed, transcripts or recordings of any interviews, and copies of all relevant documents; and (3) the charges to be considered in the investigation.

The RIO and DO shall determine what, if any, information to provide to the whistleblower at various stages in the process, balancing the complaint's legitimate interest in the proceeding, its progress, and its outcome, with the need to safeguard the integrity and confidentiality of the process.

(3) Documentation of Decision Not to Investigate

If the DO decides that an investigation is not warranted, the RIO shall secure and maintain for 7 years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment by ORI or any other pertinent external agency as required by regulation of the reasons why an investigation was not conducted.

7. Conducting the Investigation

a. Initiation and Purpose

The investigation must begin within 30 calendar days after the determination by the DO that an investigation is warranted. The purpose of the investigation is to develop a factual record by exploring the allegations in detail and examining the evidence in depth, leading to recommended findings on whether research misconduct has been committed, by whom, and to what extent. The investigation will also determine whether there are additional instances of possible research misconduct that would justify broadening the scope beyond the initial allegations. The findings of the investigation must be set forth in an investigation report.

b. Notifying ORI or Pertinent External Agency and Respondent; Sequestration of Research Records

On or before the date on which the investigation begins, the RIO must:

(1) notify the ORI Director (in the case of PHS funded research) or other pertinent external agency, as required by regulation, of the decision to begin the investigation and provide the relevant external agency a copy of the inquiry report; and

(2) notify the respondent in writing of the allegations to be investigated. The RIO must also give the respondent written notice of any new allegations of research misconduct within a reasonable amount of time of deciding to pursue allegations not addressed during the inquiry or in the initial notice of the investigation.

The RIO will, prior to notifying respondent of the allegations, take all reasonable and practical steps to obtain custody of and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceedings that were not previously sequestered during the inquiry. The need for additional sequestration of records for the investigation may occur for any number of reasons, including the college or institution's decision to investigate additional allegations not considered during the inquiry stage or the identification of records during the inquiry process that had not been previously secured. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

c. Appointment of the Investigation Committee

The RIO, in consultation with other college and/or institutional officials as appropriate, will appoint an investigation committee and the committee chair as soon after the beginning of the investigation as is practical. The investigation committee must consist of individuals who do not have unresolved personal, professional, or financial conflicts of interest with those involved with the investigation and should include individuals with the appropriate scientific expertise to evaluate the evidence and issues related to the allegation, interview the respondent and whistleblower and conduct the investigation. Individuals appointed to the investigation committee may also

have served on the inquiry committee. Individuals appointed to the investigation may include individuals from the college and individuals from other colleges within the institution.

The RIO shall be responsible for notifying the respondent of the proposed committee membership to give the respondent an opportunity to object to a proposed member based upon a personal, professional, or financial conflict of interest. Objections must be filed within 10 calendar days. The institution will make the final determination of whether a conflict exists.

d. Charge to the Committee and the First Meeting

(1) Charge to the Committee

The RIO will define the subject matter of the investigation in a written charge to the committee that:

- Describes the allegations and related issues identified during the inquiry
- Identifies the respondent
- Informs the committee that it must conduct the investigation as prescribed in paragraph E. of this section
- Defines research misconduct
- Informs the committee that it must evaluate the evidence and testimony to determine whether, based on a preponderance of the evidence, research misconduct occurred and, if so, the type and extent of it and who was responsible
- Informs the committee that in order to determine that the respondent committed research misconduct it must find that a preponderance of the evidence establishes that: (1) research misconduct, as defined in this policy, occurred (respondent has the burden of proving by a preponderance of the evidence any affirmative defenses raised, including honest error or a difference of opinion); (2) the research misconduct is a significant departure from accepted practices of the relevant research community; and (3) the respondent committed the research misconduct intentionally, knowingly, or recklessly.
- Informs the committee that it must prepare or direct the preparation of a written investigation report that meets the requirements of this policy and the pertinent external agency regulations.

(2) First Meeting

The RIO will convene the first meeting of the investigation committee to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. The investigation committee will be provided with a copy of this statement of policy and procedures and the

pertinent external agency regulations. The RIO will be present or available throughout the investigation to advise the committee as needed.

e. Investigation Process

The investigation committee and the RIO must:

- Use diligent efforts to ensure that the investigation is thorough and sufficiently documented and includes examination of all research records and evidence relevant to reaching a decision on the merits of each allegation.
- Take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practical.
- Interview each respondent, whistleblower, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and record or transcribe each interview, provide the recording or transcript to the interviewee for correction, and include the recording or transcript in the record of the investigation.
- Pursue diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continue the investigation to completion.

f. Time for Completion

The investigation is to be completed within 120 days of beginning it, including conducting the investigation, preparing the report of findings, providing the draft report for comment and sending the final report to ORI (for PHS funded projects) or other pertinent external agencies as required by regulation. However, if the RIO determines that the investigation will not be completed within this 120-day period, he/she will submit to ORI (for PHS funded projects) or other pertinent external agencies as required by regulation, a written request for an extension, setting forth the reasons for the delay. If an extension is granted, the RIO will ensure that periodic progress reports are filed with ORI (for PHS funded projects) or other pertinent external agencies as required by regulations.

8. The Investigation Report

a. Elements of the Investigation Report

The investigation committee and the RIO are responsible for preparing a written draft report of the investigation that:

- Describes the nature of the allegation of research misconduct, including identification of the respondent;

- Describes and documents any pertinent external agency support, including, for example, the numbers of any grants that are involved, grant applications, contracts, and publications listing the external agency support;
- Describes the specific allegations of research misconduct considered in the investigation;
- Includes the institutional policies and procedures under which the investigation was conducted, unless those policies and procedures were provided to ORI or pertinent external agency previously;
- Identifies and summarizes the research records and evidence reviewed and identifies any evidence taken into custody but not reviewed; and
- Includes a statement of findings for each allegation of research misconduct identified during the investigation. Each statement of findings must: (1) identify whether the research misconduct was falsification, fabrication, or plagiarism, and whether it was committed intentionally, knowingly, or recklessly; (2) summarize the facts and the analysis that support the conclusion and consider the merits of any reasonable explanation by the respondent, including any effort by respondent to establish by a preponderance of the evidence that he or she did not engage in research misconduct because of honest error or a difference of opinion; (3) identify the specific external agency support; (4) identify whether any publications need correction or retraction; (5) identify the person(s) responsible for the misconduct; and (6) list any current support or known applications or proposals for support that the respondent has pending with non-federal agencies.

b. Comments on the Draft Report and Access to Evidence

(1) Respondent

The RIO must give the respondent a copy of the draft investigation report for comment and, concurrently, a copy of, or supervised access to the evidence on which the report is based. The respondent will be allowed 30 days from the date he/she received the draft report to submit comments to the RIO. The respondent's comments must be included and considered in the final report.

(2) Whistleblower

The RIO and DO shall determine what, if any, information to provide to the whistleblower at various stages in the process, balancing the whistleblower's legitimate interest in the proceeding, its progress, and its outcome, with the need to safeguard the integrity and confidentiality

of the process.

(3) Confidentiality

In distributing the draft report, or portions thereof, to the respondent, the RIO will inform the recipient of the confidentiality under which the draft report is made available and may establish reasonable conditions to ensure such confidentiality. The RIO may require that the recipient sign a confidentiality agreement.

c. Decision by Deciding Official

The RIO will assist the investigation committee in finalizing the draft investigation report, including ensuring that the respondent's comments are included and considered, and transmit the final investigation report to the DO, who will determine in writing: (1) whether the institution accepts the investigation report, its findings, and the recommended institutional actions; and (2) the appropriate institutional actions in response to the accepted findings of research misconduct. If this determination varies from the findings of the investigation committee, the DO will, as part of his/her written determination, explain in detail the basis for rendering a decision different from the findings of the investigation committee. Alternatively, the DO may return the report to the investigation committee with a request for further fact-finding or analysis.

When a final decision on the case has been reached, the RIO will normally notify both the respondent and the whistleblower in writing. After informing ORI or pertinent external agency, the DO will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the respondent in the work, or other relevant parties should be notified of the outcome of the case. The RIO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

d. Appeals

Within 30 days of receipt of the committee's final investigation report, the respondent may appeal to either reverse or modify the institution's findings of research misconduct by filing a written notice of appeal with the RIO specifying in detail one or more of the following grounds of appeal:

- a. Procedural error in the investigation process that materially affected the outcome.
- b. Evidence that was not reasonably available during the investigation and would likely have materially affected the outcome.
- c. Sanctions that are seriously disproportionate to the gravity of the research misconduct.

The Respondent must include with the notice of appeal filed with the RIO all documentation, information, and evidence to be considered in the appeal.

The RIO shall deliver the appeal to the Vice Chancellor of the Community College System of New Hampshire, along with the investigation report. The Vice Chancellor, upon reviewing the investigation report and any supporting evidence necessary, shall make the final decision to uphold, reverse, or modify the findings of research misconduct, in writing, within 120 days of the filing of the appeal. The Vice Chancellor, at his/her sole discretion, shall have the authority to charge the investigating committee with additional investigatory actions as deemed necessary to reaching a decision on the appeal, but all activities and the final decision of the Vice Chancellor shall be completed within 120 days of the filing of the appeal.

e. Notice to ORI or Other Pertinent External Agencies of Institutional Findings and Actions

Unless an extension has been granted, the RIO must, within the 120-day period for completing the investigation or the 120-day period for completion of any appeal, submit the following to ORI (in the case of PHS funding) or other pertinent external agency: (1) a copy of the final investigation report with all attachments and any appeal; (2) a statement of whether the institution accepts the findings of the investigation report or the outcome of the appeal; (3) a statement of whether the institution found misconduct and, if so, who committed the misconduct; and (4) a description of any pending or completed administrative actions against the respondent.

f. Maintaining Records for Review by ORI or Other Pertinent External Agencies

The RIO must maintain and provide to ORI (in the case of PHS funding) or other pertinent external agency as required by regulation upon request records of research misconduct proceedings. Unless custody has been transferred to HHS or ORI, or other pertinent external agency, has advised in writing that the records no longer need to be retained, records of research misconduct proceedings must be maintained in a secure manner for 7 years after completion of the proceeding or the completion of any PHS proceeding involving the research misconduct allegation. The RIO is also responsible for providing any information, documentation, research records, evidence or clarification requested by ORI or other pertinent external agency to carry out its review of an allegation of research misconduct or of the institution's handling of such an allegation.

9. Completion of Cases; Reporting Premature Closures to ORI or Other Pertinent External Agency

Generally, all inquiries and investigations will be carried through to completion and all significant issues will be pursued diligently. The RIO must notify ORI or other pertinent external agency in advance if there are plans to close a case at the inquiry, investigation, or appeal stage on the basis that respondent has admitted guilt, a

settlement with the respondent has been reached, or for any other reason, except: (1) closing of a case at the inquiry stage on the basis that an investigation is not warranted; or (2) a finding of no misconduct at the investigation stage, which must be reported to ORI or other pertinent external agency, as prescribed in this policy.

10. Institutional Administrative Actions

If the DO determines that research misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken, after consultation with the RIO and other institutional officials. The administrative actions may include, but are not limited to:

- Withdrawal or correction of all pending or published abstracts and papers emanating from the research where research misconduct was found;
- Removal of the responsible person from the particular project, letter of reprimand, special monitoring of future work, probation, suspension, or initiation of steps leading to possible rank reduction or termination of employment;
- Restitution of funds to the grantor agency as appropriate; and
- Other action appropriate to the research misconduct.

11. Other Considerations

a. Termination or Resignation Prior to Completing Inquiry or Investigation

The termination of the respondent's institutional employment, by resignation or otherwise, before or after an allegation of possible research misconduct has been reported, will not preclude or terminate the research misconduct proceeding or otherwise limit any of the institution's responsibilities any applicable federal agency regulations.

If the respondent, without admitting to the misconduct, elects to resign his or her position after the institution receives an allegation of research misconduct, the assessment of the allegation will proceed, as well as the inquiry and investigation, as appropriate based on the outcome of the preceding steps. If the respondent refuses to participate in the process after resignation, the RIO and any inquiry or investigation committee will use their best efforts to reach a conclusion concerning the allegations, noting in the report the respondent's failure to cooperate and its effect on the evidence.

b. Restoration of the Respondent's Reputation

Following a final finding of no research misconduct, including ORI or other pertinent external agency concurrence, the RIO must, at the request of the respondent, undertake all reasonable and practical efforts to restore the respondent's reputation. Depending on the particular circumstances and the views of the respondent, the RIO should consider notifying those individuals aware of or involved in the investigation of the final outcome, publicizing the final outcome in any forum in which the allegation of research misconduct was

previously publicized, and expunging all reference to the research misconduct allegation from the respondent's personnel file. Any institutional actions to restore the respondent's reputation should first be approved by the DO.

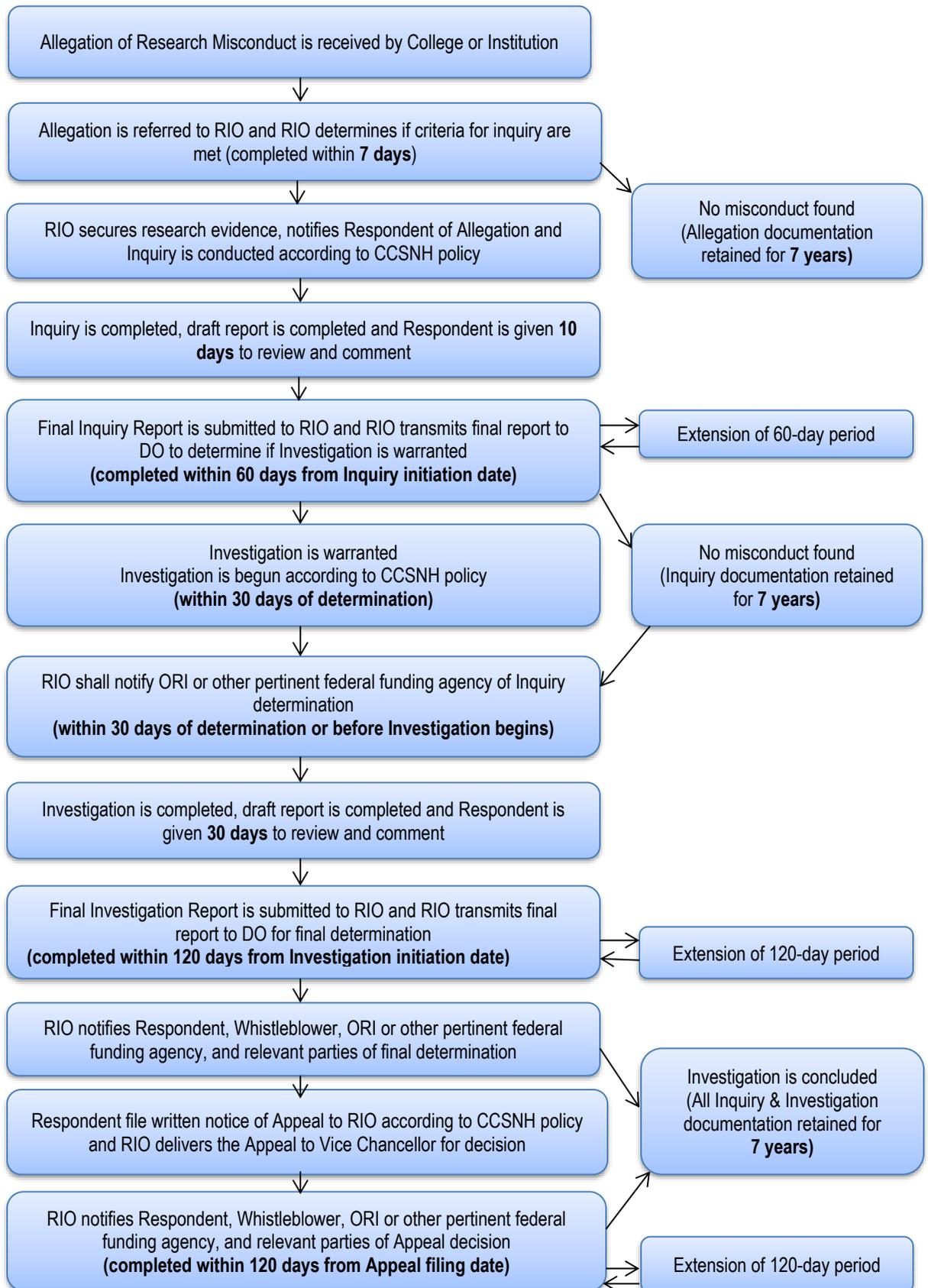
c. Protection of the Whistleblower, Witnesses and Committee Members

During the research misconduct proceeding and upon its completion, regardless of whether the institution or ORI or other pertinent external agency determines that research misconduct occurred, the RIO must undertake all reasonable and practical efforts to protect the position and reputation of, or to counter potential or actual retaliation against, any whistleblower who made allegations of research misconduct in good faith and of any witnesses and committee members who cooperate in good faith with the research misconduct proceeding. The DO will determine, after consulting with the RIO, and with the whistleblower, witnesses, or committee members, respectively, what steps, if any, are needed to restore their respective positions or reputations or to counter potential or actual retaliation against them. The RIO is responsible for implementing any steps the DO approves.

d. Allegations Not Made in Good Faith

If relevant, the DO will determine whether the whistleblower's allegations of research misconduct were made in good faith, or whether a witness or committee member acted in good faith. If the DO determines that there was an absence of good faith he/she will determine whether any administrative action should be taken against the person who failed to act in good faith.

CCSNH RESEARCH MISCONDUCT POLICY FLOWCHART



Research Integrity Officer Responsibilities

1. General

The Research Integrity Officer (RIO) has lead responsibility for ensuring that the institution:

- Takes all reasonable and practical steps to foster a research environment that promotes the responsible conduct of research, research training, and activities related to that research or research training, discourages research misconduct, and deals promptly with allegations or evidence of possible research misconduct.
- Has written policies and procedures for responding to allegations of research misconduct and reporting information about that response to ORI, as required by 42 CFR Part 93.
- Complies with its written policies and procedures and the requirements of 42 CFR Part 93.
- Informs its institutional members who are subject to 42 CFR Part 93 about its research misconduct policies and procedures and its commitment to compliance with those policies and procedures.
- Takes appropriate interim action during a research misconduct proceeding to protect public health, federal funds and equipment, and the integrity of the PHS supported research process.

2. Notice and Reporting to ORI and Cooperation with ORI

The RIO has lead responsibility for ensuring that the institution:

- Files an annual report with ORI containing the information prescribed by ORI.
- Sends to ORI with the annual report such other aggregated information as ORI may prescribe on the institution's research misconduct proceedings and the institution's compliance with 42 CFR Part 93.
- Notifies ORI immediately if, at any time during the research misconduct proceeding, it has reason to believe that health or safety of the public is at risk, HHS resources or interests are threatened, research activities should be suspended, there is reasonable indication of possible violations of civil or criminal law, federal action is required to protect the interests of those involved in the research misconduct proceeding, the institution believes that the research misconduct proceeding may be made public prematurely, or the research community or the public should be informed.
- Provides ORI with the written finding by the responsible institutional official that an investigation is warranted and a copy of the inquiry report, within 30 days of the date on which the finding is made.
- Notifies ORI of the decision to begin an investigation on or before the date the investigation begins.

- Within 120 days of beginning an investigation, or such additional days as may be granted by ORI, (or upon completion of any appeal made available by the institution) provides ORI with the investigation report, a statement of whether the institution accepts the investigation's findings, a statement of whether the institution found research misconduct and, if so, who committed it, and a description of any pending or completed administrative actions against the respondent.
- Seeks advance ORI approval if the institution plans to close a case at the inquiry, investigation, or appeal stage on the basis that the respondent has admitted guilt, a settlement with the respondent has been reached, or for any other reason, except the closing of a case at the inquiry stage on the basis that an investigation is not warranted or a finding of no misconduct at the investigation stage.
- Cooperates fully with ORI during its oversight review and any subsequent administrative hearings or appeals, including providing all research records and evidence under the institution's control, custody, or possession and access to all persons within its authority necessary to develop a complete record of relevant evidence.

3. Research Misconduct Proceeding

a. General

The RIO is responsible for:

- Promptly taking all reasonable and practical steps to obtain custody of all research records and evidence needed to conduct the research misconduct proceeding, inventory the records and evidence, and sequester them in a secure manner.
- Taking all reasonable and practical steps to ensure the cooperation of respondents and other institutional members with research misconduct proceedings, including, but not limited to their providing information, research records and evidence.
- Providing confidentiality to those involved in the research misconduct proceeding as required by 42 CFR § 93.108, other applicable law, and institutional policy.
- Determining whether each person involved in handling an allegation of research misconduct has an unresolved personal, professional or financial conflict of interest and taking appropriate action, including recusal, to ensure that no person with such a conflict is involved in the research misconduct proceeding.
- Keeping the Deciding Official (DO) and others who need to know apprised of the progress of the review of the allegation of research misconduct.
- In cooperation with other college and/or institutional officials, taking all reasonable and practical steps to protect or restore the positions and reputations of good faith complainants, witnesses, and committee

members and to counter potential or actual retaliation against them by respondents or other institutional members.

- Making all reasonable and practical efforts, if requested and as appropriate, to protect or restore the reputation of persons alleged to have engaged in research misconduct, but against whom no finding of research misconduct is made.
- Assisting the DO in implementing his/her decision to take administrative action against any complainant, witness, or committee member determined by the DO not to have acted in good faith.
- Maintaining records of the research misconduct proceeding, as defined in 42 CFR § 93.317, in a secure manner for 7 years after completion of the proceeding, or the completion of any ORI proceeding involving the allegation of research misconduct, whichever is later, unless custody of the records has been transferred to ORI or ORI has advised that the records no longer need to be retained.
- Ensuring that administrative actions taken by the institution and ORI are enforced and taking appropriate action to notify other involved parties, such as sponsors, law enforcement agencies, professional societies, and licensing boards, of those actions.

b. Allegation Receipt and Assessment

The RIO is responsible for:

- Consulting confidentially with persons uncertain about whether to submit an allegation of research misconduct.
- Receiving allegations of research misconduct.
- Assessing each allegation of research misconduct to determine if an inquiry is warranted because the allegation falls within the definition of research misconduct, is within the jurisdictional criteria of 42 CFR § 93.102(b), and is sufficiently credible and specific so that potential evidence of research misconduct may be identified.

c. Inquiry

The RIO is responsible for:

- Initiating the inquiry process if it is determined that an inquiry is warranted.
- At the time of, or before beginning the inquiry, making a good faith effort to notify the respondent in writing, if the respondent is known.
- On or before the date on which the respondent is notified, or the inquiry begins, whichever is earlier, taking all reasonable and practical steps to obtain custody of all research records and evidence needed to conduct the research misconduct proceeding, inventorying the records and evidence and

sequestering them in a secure manner, except that where the research records or evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on the instruments, so long as those copies are substantially equivalent to the evidentiary value of the instruments.

- Appointing an inquiry committee and committee chair as soon after the initiation of the inquiry as is practical.
- Preparing a charge for the inquiry committee in accordance with the institution's policies and procedures.
- Convening the first meeting of the inquiry committee and at that meeting briefing the committee on the allegations, the charge to the committee, and the appropriate procedures for conducting the inquiry, including the need for confidentiality and for developing a plan for the inquiry, and assisting the committee with organizational and other issues that may arise.
- Providing the inquiry committee with needed logistical support, e.g., expert advice, including forensic analysis of evidence, and clerical support, including arranging witness interviews and recording or transcribing those interviews.
- Being available or present throughout the inquiry to advise the committee as needed and consulting with the committee prior to its decision on whether to recommend that an investigation is warranted on the basis of the criteria in the institution's policies and procedures and 42 CFR § 93.307(d).
- Determining whether circumstances clearly warrant a period longer than 60 days to complete the inquiry (including preparation of the final inquiry report and the decision of the DO on whether an investigation is warranted), approving an extension if warranted, and documenting the reasons for exceeding the 60-day period in the record of the research misconduct proceeding.
- Assisting the inquiry committee in preparing a draft inquiry report, sending the respondent a copy of the draft report for comment (and the complainant if the institution's policies provide that option) within a time period that permits the inquiry to be completed within the allotted time, taking appropriate action to protect the confidentiality of the draft report, receiving any comments from the respondent (and the complainant if the institution's policies provide that option), and ensuring that the comments are attached to the final inquiry report.
- Receiving the final inquiry report from the inquiry committee and forwarding it, together with any comments the RIO may wish to make, to the DO who will determine in writing whether an investigation is warranted.
- Within 30 days of a DO decision that an investigation is warranted, providing ORI with the written finding and a copy of the inquiry report and notifying those institutional officials who need to know of the decision.
- Notifying the respondent (and the complainant if the institution's policies provide that option) whether the inquiry found an investigation to be warranted and including in the notice copies of or a reference to 42 CFR Part 93 and the institution's research misconduct policies and procedures.

- Providing to ORI, upon request, the institutional policies and procedures under which the inquiry was conducted, the research records and evidence reviewed, transcripts or recordings of any interviews, copies of all relevant documents, and the allegations to be considered in the investigation.
- If the DO decides that an investigation is not warranted, securing and maintaining for 7 years after the termination of the inquiry sufficiently detailed documentation of the inquiry to permit a later assessment by ORI of the reasons why an investigation was not conducted.

d. Investigation

The RIO is responsible for:

- Initiating the investigation within 30 calendar days after the determination by the DO that an investigation is warranted.
- On or before the date on which the investigation begins: (1) notifying ORI of the decision to begin the investigation and providing ORI a copy of the inquiry report; and (2) notifying the respondent in writing of the allegations to be investigated.
- Prior to notifying respondent of the allegations, taking all reasonable and practical steps to obtain custody of and sequester in a secure manner all research records and evidence needed to conduct the research misconduct proceeding that were not previously sequestered during the inquiry.
- In consultation with other college and/or institutional officials as appropriate, appointing an investigation committee and committee chair as soon after the initiation of the investigation as is practical.
- Preparing a charge for the investigation committee in accordance with the institution's policies and procedures.
- Convening the first meeting of the investigation committee and at that meeting: (1) briefing the committee on the charge, the inquiry report and the procedures and standards for the conduct of the investigation, including the need for confidentiality and developing a specific plan for the investigation; and (2) providing committee members a copy of the institution's policies and procedures and 42 CFR Part 93.
- Providing the investigation committee with needed logistical support, e.g., expert advice, including forensic analysis of evidence, and clerical support, including arranging interviews with witnesses and recording or transcribing those interviews.
- Being available or present throughout the investigation to advise the committee as needed.
- On behalf of the institution, the RIO is responsible for each of the following steps and for ensuring that the investigation committee: (1) uses diligent efforts to conduct an investigation that includes an examination of all

research records and evidence relevant to reaching a decision on the merits of the allegations and that is otherwise thorough and sufficiently documented; (2) takes reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practical; (3) interviews each respondent, complainant, and any other available person who has been reasonably identified as having information regarding any relevant aspects of the investigation, including witnesses identified by the respondent, and records or transcribes each interview, provides the recording or transcript to the interviewee for correction, and includes the recording or transcript in the record of the research misconduct proceeding; and (4) pursues diligently all significant issues and leads discovered that are determined relevant to the investigation, including any evidence of any additional instances of possible research misconduct, and continues the investigation to completion.

- Upon determining that the investigation cannot be completed within 120 days of its initiation (including providing the draft report for comment and sending the final report with any comments to ORI), submitting a request to ORI for an extension of the 120-day period that includes a statement of the reasons for the extension. If the extension is granted, the RIO will file periodic progress reports with ORI.
- Assisting the investigation committee in preparing a draft investigation report that meets the requirements of 42 CFR Part 93 and the institution's policies and procedures, sending the respondent (and complainant at the institution's option) a copy of the draft report for his/her comment within 30 days of receipt, taking appropriate action to protect the confidentiality of the draft report, receiving any comments from the respondent (and complainant at the institution's option) and ensuring that the comments are included and considered in the final investigation report.
- Transmitting the draft investigation report to institutional counsel for a review of its legal sufficiency.
- Assisting the investigation committee in finalizing the draft investigation report and receiving the final report from the committee.
- Transmitting the final investigation report to the DO and: (1) if the DO determines that further fact-finding or analysis is needed, receiving the report back from the DO for that purpose; (2) if the DO determines whether or not to accept the report, its findings and the recommended institutional actions, transmitting to ORI within the time period for completing the investigation, a copy of the final investigation report with all attachments, a statement of whether the institution accepts the findings of the report, a statement of whether the institution found research misconduct, and if so, who committed it, and a description of any pending or completed administrative actions against the respondent; or (3) if the institution provides for an appeal by the respondent that could result in a modification or reversal of the DO's finding of research misconduct, ensuring that the appeal is completed within 120 days of its filing, or seeking an extension from ORI in writing (with an explanation of the need for the extension) and,

upon completion of the appeal, transmitting to ORI a copy of the investigation report with all attachments, a copy of the appeal proceedings, a statement of whether the institution accepts the findings of the appeal proceeding, a statement of whether the institution found research misconduct, and if so, who committed it, and a description of any pending or completed administrative actions against the respondent.

- When a final decision on the case is reached, the RIO will normally notify both the respondent and the complainant in writing and will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of involved journals, collaborators of the respondent, or other relevant parties should be notified of the outcome of the case.
- Maintaining and providing to ORI upon request all relevant research records and records of the institution’s research misconduct proceeding, including the results of all interviews and the transcripts or recordings of those interviews.

Section: 600 – Academic Affairs	Subject: Student Education Records
Policy: Student Education Records	Date Approved: August 9, 2022
Policy #: 690.13	Last Amendment: August 9, 2022
Approved: Dr. Mark Rubinstein, Chancellor	Effective Date: August 10, 2022

690.13 STUDENT EDUCATION RECORDS

I. Purpose: The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the privacy of student education records. FERPA provides certain rights to eligible students with respect to their education records. Key components of the FERPA include (1) the right of college students to inspect their own records; (2) the right of the college students to determine who may have access to their records; and (3) the right to determine what personally identifiable information may be disclosed by college officials. More information about FERPA can be obtained on the U.S. Department of Education’s website here: <https://studentprivacy.ed.gov/>

II. Policy: The Community College System of New Hampshire (CCSNH) and its colleges comply with the provisions of the federal Family Educational Rights and Privacy Act (FERPA) and its accompanying regulations. This policy applies to all faculty, staff, and other CCSNH representatives who maintain, access, or otherwise use education records on behalf of CCSNH and its colleges.

III. Definitions

- a. Directory Information: Directory information is specific information kept about the student that is considered public, which may be released without the student’s written permission. Directory information does not include unique personal identifier

information such as a student's social security number, student identification (ID) number, biometric record, or other unique personal identifier used by a student.

- b. **Education Records:** Education records are directly related to a student and maintained by an educational agency or institution or party acting on behalf of the agency or institution. Education records include but are not limited to personal identifiers (SSN, date of birth, ethnicity, gender), academic records (grades, transcripts, GPA, course schedules), financial aid information, and discipline files.
- c. **Eligible Student:** Under FERPA, an "eligible student" is a student who is 18 years of age or a student who is attending or has attended a postsecondary institution at any age.
- d. **Parent:** A parent of a student includes a natural parent, a guardian, or an individual acting as a parent in the absence of a parent or guardian. FERPA does provide rights to the parents of postsecondary students who are dependents for tax purposes under IRS rules.
- e. **Personally Identifiable Information (PII):** Information that would reveal the identity of a student or make the student's identity easily traceable.
- f. **Student:** Any individual who is or has been in attendance at an educational agency or institution and regarding whom the agency or institution maintains education records. This includes students enrolled in credit and noncredit courses.

IV. Rights Under FERPA: The rights of eligible students (and, as noted above, their parents in particular circumstances) include:

- a. The right to inspect and review the student's education records within 45 days of the date when a CCSNH–College receives a request for access to such records. A student should submit a written request to the Registrar's Office of the college in which they are enrolled. Such request must identify the record(s) the student wants to inspect. The school official will arrange for access and notify the student of the time and place where the records can be inspected.
- b. The right to request amendment of the student's education records that the student believes to be inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.
- c. A student who wants to request that a CCSNH College amend their education records must make a written request to the Registrar's Office of the college in which they are enrolled. Such request must clearly identify the part of the record that the students wants changed and specify why the records should be changed.
- d. The right to provide written consent before a CCSNH College discloses personally identifiable information (known as PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent. Exceptions are addressed in Section VI of this policy.
- e. The designated college official shall notify the student of the decision to amend or not to amend the education records as requested. Such decisions shall be provided in writing and issued to the student within a reasonable time period. The student shall also be notified of their right to a hearing regarding their request, including details about the hearing procedure.

V. Directory Information

- a. FERPA permits the CCSNH and its colleges to disclose certain information about students without consent. The CCSNH and its colleges have designated the following information as Directory Information:
 1. Student name;
 2. Address;
 3. Telephone listing;
 4. CCSNH electronic mail address;
 5. Major field of study;
 6. Enrollment status (full-time/part-time);
 7. Dates of attendance;
 8. Participation in officially recognized activities and athletic team;
 9. Height of athletic team members only;
 10. Degrees, honors, and awards received; and
 11. Most recent educational agency or institution attended.
- b. Students may restrict the release of directory information to third parties. A student who does not want CCSNH or its college to disclose Directory Information must notify their College's Registrar Office to opt out of the release/disclosure of directory information.
- c. The request to opt out of the release/disclosure of directory information will result in the student's record being marked as confidential, which will bar CCSNH and its college from responding to any requests for information about the student except as otherwise permitted or required under FERPA.
- d. CCSNH and its colleges shall continue to honor any valid request to opt out (restrict) of the release/disclosure of directory information made while the student was in attendance unless the student rescinds the opt out request.

VI. Exceptions to Requirement to Obtain Prior Written Consent to Disclose Education Records

- a. FERPA permits the disclosure of PII from students' education records without consent if the disclosure meets certain conditions specified in the FERPA regulations. Except for disclosures to school officials, disclosures related to some judicial orders and lawfully issued subpoenas, disclosures of Directory Information, and disclosures to the student, the FERPA regulations require CCSNH and its college to maintain a record of disclosures of education records, and eligible students have the right to inspect the record of disclosures.
- b. FERPA permits CCSNH and its colleges to disclose education records without a student's prior consent as follows:
 1. To school officials with legitimate educational interests in reviewing a student's education record in order to fulfill their work responsibilities. Such school officials typically include: (a) a person employed by CCSNH and its colleges in an administrative, supervisory, academic, research, or support staff position (including campus security and health care staff); (b) a student serving on an official committee, such as a disciplinary or grievance committee; or (c) a volunteer or contractor outside of CCSNH/Member College who performs an

- institutional service or function for which CCSNH/Member College would otherwise use its own employees, and who is under the direct control of CCSNH or one of its colleges with respect to the use and maintenance of PII from education records (such as an attorney, auditor, collection agent, or technology vendor).
2. Upon request, CCSNH and its colleges shall disclose education records without consent to officials of another school in which the student seeks or intends to enroll.
 3. To authorized representatives of the U.S. Comptroller General, the U.S. Attorney General, the U.S. Secretary of Education, or state or local educational authorities. Disclosures may be made in connection with an audit or evaluation of federal or state supported education programs, or for the enforcement of or compliance with federal legal requirements related to those programs. These entities may make further disclosure of PII to outside entities that are designated by them as their authorized representatives to conduct any audit, evaluation, or enforcement or compliance activity on their behalf.
 4. In connection with financial aid the student has applied for or received, if the information is necessary to determine eligibility for the aid, the amount of the aid, the conditions of the aid, or enforce the terms and conditions of the aid.
 5. To organizations conducting studies for, or on behalf of CCSNH/Member Colleges, in order to (a) develop, validate, or administer predictive tests; (b) administer student aid programs; or (c) improve instruction.
 6. To accrediting organizations to carry out their accrediting functions.
 7. To comply with a judicial order or lawfully issued subpoena.
 8. To appropriate individuals in connection with a health or safety emergency, subject to requirements in the FERPA regulations.
 9. To a victim of an alleged perpetrator of a crime of violence or a non-forcible sex offense, subject to requirements in the FERPA regulations. The disclosure may only include the final results of the disciplinary proceeding with respect to that alleged crime or offense, regardless of the finding.
 10. To the general public, the final results of a disciplinary proceeding, subject to requirements in the FERPA regulations, if CCSNH/Member College determines the student is an alleged perpetrator of a crime of violence or non-forcible sex offense and the student has committed a violation of CCSNH/Member College policies/rules with respect to the allegation made against them.
 11. Upon request, CCSNH and its colleges may disclose education records to parent(s) or guardian(s) without consent of the eligible student, if the student is a dependent for tax purposes under the IRS rules. The Internal Revenue Service has determined that a qualifying student must be younger than the taxpayer (or spouse if married filing jointly) and be under the age of 19 or be under the age of 24 and a full-time student for at least five months of the year.
 12. To parent(s) or guardian(s) of a student under the age of 21 regarding the student's violation of any federal, state, or local law, or any policy/rule of CCSNH/Member College governing the use or possession of alcohol or a

controlled substance if CCSNH/Member College determines the student committed a disciplinary violation.

VII. Parent/Guardians

- a. Generally, when a student reaches the age of 18, is no longer a “dependent” of the parent(s) or guardian(s) for federal income tax purposes, and attends a postsecondary institution, regardless of age, FERPA rights belong to the student. Prior written consent from the student is required before a CCSNH college can disclose information from a student’s education record to a parent or guardian outside of the exceptions noted in Section VI above.

VIII. Complaints

- a. The U.S. Department of Education maintains an office that addresses complaints that educational institutions may have violated FERPA. More information about the complaint process can be obtained here:

U.S. Department of Education
Student Privacy Policy Office
400 Maryland Ave, SW
Washington, DC 20202-8520
FERPA.Complaints@ed.gov
<https://studentprivacy.ed.gov/file-a-complaint>