

**FAYETTEVILLE STATE UNIVERSITY
NONDISCRIMINATION PROCEDURES**

Authority:	Issued by the Office of Risk and Compliance		
Category:	University-Wide		
Applies to:	●Administrators	●Faculty	●Staff ●Students
History:	Implemented	April 2023	
	Updated	May 2026	
		August 2025	
Related Policies/ Regulations/Statutes	Unlawful Discrimination, Harassment and Retaliation Policy Unlawful Workplace Harassment Student Pregnancy and Related Conditions Reasonable Modifications Procedure UNC Policy Manual, <i>The Code</i> , Section 612		
Contact for Information:	Office of Risk and Compliance	(910) 672-1041	

I. PURPOSE

Fayetteville State University prohibits unlawful discrimination and harassment based on a person’s protected category in University programs and activities. Fayetteville State University also prohibits retaliation for any protected activity.

The Non-Discrimination Procedures serve as a companion to Fayetteville State University’s (University) Unlawful Discrimination, Harassment and Retaliation policy (Policy). This procedure outlines the specific process used to resolve concerns reported under the Policy.

II. EMPLOYEE COMPLAINTS

Employees that wish to report that they have experienced employment discrimination must file their report with Human Resources.

Employees subject to the State Human Resources Act (SHRA employees) who wish to file a formal grievance alleging employment discrimination should refer to the University SHRA Employee Grievance Policy for information pertaining to grievable issues and processes. To file, complete an SHRA Formal Internal Grievance Form and submit it to the Human Resources department.

Exempt Professional Staff (EPS employees) who wish to file a formal grievance alleging employment discrimination should complete an EPS Formal Grievance Form and submit it to the Human Resources department.

Grievance filings must include all applicable and relevant details at the time of submission. Employees with potential grievable issues should contact Employee Relations immediately following the action giving rise to the concern. Concerns that do not constitute a grievable issue should be made in writing to Employee Relations for other possible informal resolution strategies

III. DISABILITY ACCOMMODATION

The University is committed to providing reasonable accommodations to qualified students, employees, or others with disabilities to ensure equal access to the Nondiscrimination Procedures. Students must contact Student Accessibility Services to request academic accommodation. Employees must contact Human Resources to request employment accommodation.

If a student determines that an instructor is not properly implementing the accommodation that has been approved for them, the student must notify Student Disability Services. Upon receiving notification, Student Disability Services will collaborate with the instructor or instructors involved to ensure that the approved accommodation is being followed as required.

If an employee believes that their supervisor is failing to implement their approved accommodation appropriately, the employee must inform Human Resources. Human Resources will then engage with the supervisor to facilitate compliance with the approved accommodation.

Both Student Disability Services and Human Resources are responsible for communicating with the individuals who are tasked with carrying out the accommodation. These units will also document the responses provided by the employees responsible for the implementation.

When a student or employee wishes to challenge a denial of an accommodation request or the way an accommodation is implemented, they have the option to appeal to the Office of Risk and Compliance. The Assistant General Counsel of Risk and Compliance will review the appeal, and the decision rendered will be considered final.

IV. TITLE IX SUPPORTIVE MEASURES AND REASONABLE MODIFICATIONS

The University provides supportive measures to all parties involved in a Title IX complaint to ensure fairness and equal access throughout the process. Supportive measures are available whether or not an individual files a formal complaint. Upon receiving a complaint

by the Title IX Office, both the Complainant and Respondent will receive written notification outlining their rights and the procedures for requesting supportive measures. These measures are designed to address the needs of all parties and maintain the integrity of the University's programs and activities.

Students and employees who are experiencing pregnancy or related conditions may request reasonable modifications. These modifications are intended to ensure that affected individuals continue to have access to the University's programs and activities. Student requests for reasonable modifications are handled in accordance with the Student Pregnancy and Related Conditions Reasonable Modifications Procedure. Employee requests for reasonable modifications are handled by the Office of Human Resources.

When a student or employee wishes to challenge a denial of a modification request or the way a modification is implemented, they have the option to appeal to the Office of Risk and Compliance. The Assistant General Counsel of Risk and Compliance will review the appeal, and the decision rendered will be considered final.

V. FILING A REPORT

A report must be filed within a reasonable time, generally 45 calendar days from the day of the last incident of discrimination, harassment, or retaliation. Please see the policy for additional information.

The Report must contain specific information indicating how the alleged conduct constitutes discrimination, harassment, and/or retaliation. The Report should describe the evidence or facts supporting the specific allegations of discriminatory conduct.

VI. INITIAL ASSESSMENT

Upon receipt of a Report, the Office of Risk and Compliance will send the complainant(s) a Notice of Report advising them of the nondiscrimination procedures.

Compliance will conduct an initial assessment to determine whether the report alleges facts that, if true, may constitute a violation of the University's Unlawful Discrimination, Harassment and Retaliation policy or other University non-discrimination policy.

If the conduct would not reasonably constitute a violation of a non-discrimination policy, the report is typically referred to another resolution process, if applicable.

Compliance will determine the most appropriate means for addressing the report. Options include but are not limited to:

1. investigating the report;
2. attempting to resolve the report or concern through a form of alternative dispute resolution (e.g., University Ombuds);

3. determining that the facts of the report or concern, even if true, would not constitute a violation of the Unlawful Discrimination, Harassment and Retaliation policy.

VII. DISMISSAL

The Office of Risk and Compliance may dismiss a report, at any stage of the process, in any of the following circumstances:

- a. The alleged conduct would not constitute a violation of the Policy, even if proved.
- b. The Complainant notifies the Office in writing that the Complainant would like to withdraw the report or any of the allegations.
- c. The Respondent is no longer enrolled or employed by the University.
- d. Circumstances prevent the University from gathering evidence sufficient to reach a determination as to the report or its allegations.
- e. The complaint is speculative, conclusory, or incoherent, or lacks sufficient detail to infer discrimination.
- f. The Office has issued a determination of same or similar allegations based on the same facts have been filed by the Complainant against the same Respondent.

VIII. REFERRAL

The University remains committed to addressing any violation of its policies, even those not meeting the standards defined under the Policy. As such, Compliance may refer any report that does not fall within the Policy to the appropriate University officials for investigation of violations of other University policies.

1. The Office of Risk and Compliance will immediately notify the Police and Public Safety Department of any identified threats or potential safety concerns.
2. Allegations of fraud, waste or abuse of University resources will be referred to the Office of Internal Audit.
3. All complaints involving student conduct will be referred to the Office of Student Conduct.
4. Student complaints regarding academic matters will be referred to the Academic Affairs Student Complaint Process.

The referral does not preclude or otherwise impair other institutional action under another provision of University policies. The University's Office of Human Resources, Police & Public Safety, the Office of Student Conduct and/or other individuals' ability to proceed with appropriate investigatory and/or disciplinary actions under another University policy or procedure and/or to provide Supportive Measures to the parties remains available.

The responsible department and/or University officials will submit a resolution response to the Office of Risk and Compliance within 10 business days.

IX. INVESTIGATION

The University shall seek to have investigations complete within a reasonable amount of time from the issuance of the formal written notice to the Parties. All deadlines contained in the Nondiscrimination Procedures may be extended by the University for good cause. The University shall notify the Parties in writing of any such extensions and the reasons for the extensions. Please refer to the Policy for additional information.

A. Failure to Participate

If the Complainant is unable or unwilling to participate in the investigation, Compliance will determine whether the investigation shall proceed. If a Respondent chooses not to participate in the investigation, the investigation shall still proceed and a decision may be reached based on the information gathered during the investigation, even without the Respondent's participation.

B. Investigator Assignment

If a complaint of discrimination, harassment and/or retaliation is not dismissed, the Office of Risk and Compliance shall assign an investigator who will be unbiased and free from conflicts of interest. The investigator will objectively review the complaint, any evidence, and information from the Parties and witnesses. Compliance may designate another individual to conduct or assist with the investigation or to manage an alternative dispute resolution process. Outside investigators shall have relevant training, qualifications, and experience. Investigators operate under the supervision of the Assistant General Counsel of Risk and Compliance.

C. Equitable Process

The investigation is an impartial, neutral, fact-finding process. Reports are presumed in good faith. Respondents are presumed not responsible. This presumption is overcome only when a preponderance of the evidence establishes that the Respondent committed the alleged conduct.

During the process, both the Complainant and the Respondent can expect the following:

- i. To be informed of the allegations, investigation procedures, and avenue of appeal.
- ii. A fair, thorough, reliable, and impartial investigation by a trained investigator.
- iii. The opportunity to provide relevant information and names of relevant witnesses. Declining to present information or witnesses will not be considered an admission of responsibility.

The standard of proof to find a violation of this policy is a preponderance of evidence. Preponderance of the evidence means that based on the totality of evidence and reasonable inferences from the evidence, it is more likely than not that the prohibited conduct occurred in violation of the Policy.

D. Evidence

The Investigator has discretion to determine relevancy of evidence. The investigator will consider evidence that is relevant, material, and close in time to the conduct at issue. Relevant evidence is that which may aid in determining whether the allegation occurred, or whether the conduct constitutes a violation of the Policy. Evidence that is not relevant or is not considered reliable may be excluded during the investigation process. Character witnesses, statements, or letters are not relevant evidence, and may not be considered.

The investigator will give the parties and witnesses instructions for providing evidence, including a deadline for submission of evidence. The parties must provide information or evidence related to the allegations according to the instruction of the Investigator. The parties must bring any new or evolving evidence to the attention of the Investigator immediately.

E. Interview Summary

During interviews, investigator(s) will take written notes to document responses. Following the interview, the lead investigator may provide a summary for the party or witness to review and confirm its accuracy. Any revisions submitted by the party or witness will be documented in the investigation report. If a party or witness does not respond within the designated review period, any objections to the summary will be considered waived, and no further revisions will be accepted.

F. Due Diligence Report

Investigation reports are considered internal documents and are maintained as confidential.

At the conclusion of an investigation, the investigator will prepare a due diligence report that includes a determination regarding whether a violation of the University's Unlawful Discrimination, Harassment, and Retaliation Policy has occurred. The parties and appropriate University officials will be notified of the determination.

When the Respondent is an employee, a Due Diligence Report will be submitted to the Office of Human Resources and the appropriate University official(s) for review and any necessary action.

When the Respondent is a student, a Due Diligence Report will be submitted to the Office of Student Conduct. The Director of Student Conduct will provide written notice of any formal charge(s) to the Respondent. In such cases, the matter will be addressed in accordance with the Code of Student Conduct.

X. DETERMINATION

A. Unsubstantiated

The investigation determined that there is insufficient evidence to substantiate a violation of the Policy.

B. Unsubstantiated with Further Review (Referral Process)

The investigation determined that there is insufficient evidence to substantiate a violation of the Policy. The investigation determined that the conduct requires additional review by Human Resources and/or appropriate University officials.

C. Substantiated

The investigation determined that there is a preponderance of evidence to substantiate a violation of the Policy. The appropriate Vice Chancellor, supervisor, and the Office of Human Resources will determine the appropriate corrective actions.

XI. ABUSE OF PROCESS

Abuse of Process refers to situations in which the nondiscrimination procedures are used in a manner inconsistent with their intended purpose. This may include, for example, submitting multiple complaints that are substantially similar or lack sufficient detail, or raising concerns through these procedures that are more appropriately addressed through other established workplace processes and do not allege discriminatory conduct.

When the Office of Risk and Compliance determines that a report does not align with the intended scope or use of the nondiscrimination procedures, the Office may dismiss the complaint. The rationale for this determination will be documented internally to ensure consistency and transparency in the administration of the procedures.