# Draft Policy for Consultation Protected Disclosure Policy and Procedures Feedback can be sent to Policy@mun.ca

## **Purpose**

The purpose of this policy is

- to provide a disclosure mechanism by which Members of the University, acting in good faith, can report conduct they reasonably believe to be Wrongdoing; and
- to provide protection to Members of the University who, in good faith, report conduct they reasonably believe to be Wrongdoing.

# Scope

This policy

- applies to all Members of the University and covers allegations of Wrongdoing, as defined below, particularly in cases where no alternative process exists under other University policies and procedures.
- does not cover personal grievances or purely private contractual disputes. It applies specifically to disclosures made in the public interest, not for personal purposes and gains. complements existing University policies and procedures and does not substitute, limit, or amend them. It also does not constrain or replace the terms of any collective or employment agreements agreed upon by the University.

## **Definitions**

**Associate** — A person who is related to a University employee by blood or adoption, or is or has been related to the employee by marriage or common-law marriage, or with whom a University employee has or has had in the previous five years a financial, intimate, other close or substantial professional relationship.

**Day(s)** — A day other than a Saturday or Sunday, statutory holiday, or other day on which the University is not open for administrative business.

**Discloser** — A Member of the University who makes a Protected Disclosure under this policy and procedures.

**Member of the University** — any person who teaches, conducts research, studies, or works at or under the auspices of the University and includes, without limitation, all employees, all students, and any other person(s) while they are acting on behalf of or at the request of the University.

**PDC** — Protected Disclosure Coordinator. The position appointed under this policy and related procedures to receive, review, manage, and report on Protected Disclosures made in accordance with this policy.

**Protected Disclosure** — Any disclosure of Wrongdoing made under this policy and related procedures when one is acting in good faith, which means an action undertaken with honesty, sincerity, and genuine intention based on a reasonable belief that a Wrongdoing has been committed or is about to be committed at the University. It is an action that is not malicious, frivolous, vexatious in nature, or made in bad faith.

**Respondent(s)** — The subject or subjects of a report of alleged Wrongdoing under this policy.

**Retaliation** — Any direct or indirect intimidation, harassment, or adverse behavior or action or a threat of adverse action taken against a Member of the University for:

- seeking advice about making a Protected Disclosure;
- making a Protected Disclosure;
- supporting the filing of a Protected Disclosure;
- participating or cooperating in any investigation under this policy; or
- being associated with a Member of the University who has invoked this policy or participated in any of its processes.

#### Retaliatory measures may include:

- disciplinary measures imposed for no other reason than the fact that a disclosure was made;
- termination of contractual arrangements, payment withholding, or future opportunity denial for contractors or suppliers for no other reason than the fact that a disclosure was made:
- student discipline, academic penalties, or any action harming a student's educational experience for no other reason than the fact that a disclosure was made;
- threats of the actions above.

**Unit Head** — The term Unit Head refers to Deans, Heads of Departments, Schools and Divisions, Directors, Executive Directors, Dean of Libraries (University Librarian), University Registrar, and other senior administrators at a comparable level; Associate Vice-Presidents, Vice-Provosts, Vice-Presidents, and the President as applicable.

**University** — Memorial University of Newfoundland.

**University-related Activity** — Any activity directly related to or arising out of the operations of the University at any location.

**Vexatious** — To intentionally annoy, embarrass, harass or harm.

**Wrongdoing** — Any activity or conduct engaged in or about to be engaged in by a Member of the University in or relating to the University, as follows:

- a. an act or omission constituting an offense of municipal, provincial, or federal laws or regulations.
- b. an act or omission that creates a substantial and specific danger:
  - i. to the life, health, or safety of individuals other than a danger that is inherent in the performance of the duties or functions of a Member of the University; or
  - ii. to the environment.
- c. gross mismanagement, including of University funds or University assets.
- d. abuse of authority, including but not limited to actions such as bribery or other forms of corruption.
- e. knowingly directing or counseling an individual to commit Wrongdoing.

## **Policy**

### 1.0 Responsibilities and Duties

- 1.1 All Members of the University have an obligation to conduct University-related Activities in accordance with the University's statement of <u>Core Values</u>, which includes integrity and accountability, applicable codes of conduct, the University's policies and procedures, and applicable municipal, provincial, and federal laws and regulations. As part of this obligation, and to protect the University and individuals from Wrongdoing, Members of the University are encouraged to report conduct that they reasonably believe to be Wrongdoing and which they observe or encounter in the context of University-related activities.
- 1.2 Unit Heads are responsible for fostering an environment of transparency and accountability within their respective units. Nothing in this policy relieves Unit Heads from the responsibility of addressing situations of improper conduct in accordance with existing University policies, procedures, and guidelines. Unit Heads should ensure that all Members of their units are aware of their rights and protections under this policy and provide the necessary support to Disclosers if named.
- 1.3 The Protected Disclosure Coordinator (PDC) is responsible for managing Protected Disclosures, including receiving, reviewing, determining admissibility, investigating or overseeing investigations into Protected Disclosures, and providing recommendations about the Disclosure and the Wrongdoing. The PDC shall ensure compliance with procedures, safeguard confidentiality, and uphold the integrity of the process.
- 1.4 The PDC shall consult General Counsel for legal guidance and advice on any matters related to this policy and its procedures, as necessary. This may include determining appropriate processes to address reports of Wrongdoing, identifying who should conduct investigations, confidentiality limits, ensuring compliance with relevant laws and regulations, and providing advice on any potential legal actions resulting from investigation findings.

#### 2.0 Protected Disclosure

2.1 Reports of improper conduct at the University must be made in good faith and submitted to the appropriate authority. The Guide for Reporting Mechanisms of Unethical Behavior and Improper

Conduct provides direction on determining the appropriate authority for different issues. In cases where no established process exists, reporting to the appropriate authority is deemed inappropriate, or anonymity within the University is essential, any Member of the University who has reasonable grounds to believe that another Member of the University has committed or is about to commit Wrongdoing is encouraged to make a Protected Disclosure in accordance with the <u>Procedure for Filing a Protected Disclosure</u>. The Protected Disclosure shall be made within twelve (12) months of discovering or observing the Wrongdoing. 2.2 The University will consider all reports of alleged Wrongdoing that are deemed admissible in accordance with the <u>Procedure for Investigation of Alleged Wrongdoing</u>. Investigations will be conducted promptly, impartially, and with due diligence to ensure fair treatment of all parties involved.

- 2.3 Members of the University shall cooperate fully with investigations into reported Wrongdoing. This includes responding promptly to requests for information, participating in interviews or meetings as necessary, and refraining from any actions that could obstruct or impede the investigation process.
- 2.4 The University will not tolerate Retaliation. Reporting of Wrongdoing is a necessary and valuable service to the University and must not be cause for Retaliation.
- 2.5 The University shall ensure the rights to procedural fairness and natural justice of the investigation procedures for those against whom allegations of Wrongdoing have been made.
- 2.6 Conduct in the workplace involving disruptive, threatening, or violent behavior where a Member of the University's personal safety and security may be in danger must be reported immediately to appropriate party, campus enforcement or security officials on the respective campus or to legal authorities for the situation.

#### 3.0 Confidentiality

- 3.1 All persons involved in any process related to this policy are required to maintain confidentiality. Confidential matters are handled in accordance with the <u>Access to Information and Protection of Privacy Act</u>, 2015, SNL 2015, C A-1.2 (ATIPPA), other privacy legislation to which the University is subject, and University policies.
- 3.2 Only persons with a *bona fide* need to know the details of a Protected Disclosure will have access, and such access is limited to the scope of their responsibilities. Third parties attempting to gain access to personal information with respect to a Protected Disclosure, where such information is not needed to perform the scope of their responsibilities, do so in violation of this policy and may be in violation of the *ATIPPA*, 2015.
- 3.3 A breach of confidentiality by persons involved in any process related to this policy may be subject to discipline or other appropriate action.
- 3.4 Confidentiality may not apply to persons subject to extra-University judicial processes, where disclosure is permitted or required by law or where the well-being, safety, and security of a person

or persons is a concern. In such circumstances, information, as appropriate, would be shared only with those with a *bona fide* need to know.

3.5 The identity of a Discloser shall be kept confidential to the extent permitted by law and consistent with the need to conduct a proper investigation. If it becomes necessary to reveal the identity of a Discloser in the course of an investigation, the University shall provide reasonable notice to the Discloser.

#### 4.0 Frivolous or Vexatious Disclosures

4.1 A frivolous or vexatious Disclosure may result in disciplinary or other appropriate action, including possible legal action against the Discloser as outlined in applicable University policies and procedures, collective agreements, and legal provisions.

#### 5.0 Retaliation

- 5.1 No person shall retaliate against another for filing a Protected Disclosure or being involved in any process under this policy, including as a witness.
- 5.2 The University shall take reasonable measures to protect Members of the University who, acting in good faith, have reported Wrongdoing from any form of Retaliation as a result of their Disclosure.
- 5.3 The University considers Retaliation at any stage a serious matter that may result in discipline or other appropriate action. **6.0 Records and Retention**
- 6.1 All records will be handled in accordance with <u>ATIPPA</u>, 2015, the University's <u>Information</u> <u>Management</u> and <u>Privacy</u> policies and related procedures, and other privacy legislation applicable to the University.
- 6.2 The PDC shall be the official custodian of records created as a result of the filing of a Protected Disclosure and shall manage those records in accordance with the University's Information Management policy and procedures.

#### 7.0 Reports

- 7.1 The PDC shall provide an annual report to the Board of Regents of Protected Disclosures, respecting the anonymity of Disclosers and Respondents. The report shall include:
- (a) the number of reports filed by Disclosers;
- (b) the number of reports investigated;
- (c) the findings of investigations conducted pursuant to a report;
- (d) any action taken pursuant to an investigation.

#### **Related Documents**

Memorial University of Newfoundland's Vision, Mission and Values

Memorial University of Newfoundland Code

Purchasing Code of Ethics

Student Code of Conduct

Appropriate Use of Computing Resources Policy

**Conflict of Interest Policy** 

**Emergency Policy** 

Health and Safety Policy

Ethics of Research Involving Human Participants Policy

Information Management Policy

Integrity in Scholarly Research Policy

Internal Audit Policy

**Intellectual Property Policy** 

Postdoctoral Fellows Policy

**Privacy Policy** 

Respectful Workplace Policy

Sexual Harassment and Sexual Assault Policy

Workplace Accommodation Policy

Weapon Policy

Applicable Collective Agreements

#### **Procedures**

- Procedure for Filing a Protected Disclosure
- Procedure for Investigation of Alleged Wrongdoing
- Guide for Reporting Mechanisms of Unethical Behavior and Improper Conduct at Memorial University

#### For inquiries related to this policy:

Office of the Internal Audit

**Sponsor:** The President

**Category:** Operations

# **Procedure for Filing a Protected Disclosure**

Responsible Unit: Office of Internal Audit

- 1. Members of the University who have reasonable grounds to believe that Wrongdoing has been committed or about to be committed may make a Protected Disclosure and shall follow the procedures therein in the following cases:
  - When no alternative reporting process is available under existing University policies and procedures;
  - They are uncertain which University policy may apply in the circumstances;
  - Reporting to the appropriate authority is deemed inappropriate; or
  - Anonymity is essential within the University.
- 2. A Protected Disclosures may be made by any Member of the University as follows:

#### a. To the University's Protected Disclosure Coordinator (PDC):

The University's Internal Auditor serves as the PDC.

The University Internal Auditor is positioned at a level in the organization that enables internal audit services and responsibilities to be performed without interference from management, thereby establishing the independence This positioning provides the organizational authority and status to bring matters directly to senior management and escalate matters to the Board of Regents, when necessary, without interference and supports the internal auditors' ability to maintain objectivity.

Protected Disclosure Coordinator Memorial University of Newfoundland St. John's, NL A1C 5S7

Tel: (709) 864-2198 Email: <u>jmdove@mun.ca</u>

## b. To the Chair of the Board of Regents Audit and Finance Committee:

In the event the Protected Disclosure involves the University Internal Auditor, the report may be filed with the President, who will follow a process similar to that which is outlined here.

Office of the Board of Regents Memorial University of Newfoundland St. John's, NL A1C 5S7 Telephone: 709-864-8281

Email: regents@mun.ca

- 3. The report of Wrongdoing should be submitted in writing and include the following information:
  - (a) the party(ies) involved;
  - (b) the nature of the Wrongdoing;
  - (c) the date(s) of the Wrongdoing;
  - (d) possible laws and regulations allegedly have been violated;
  - (e) possible witnesses of the Wrongdoing;
  - (f) any other information or documents necessary to evaluate the matter.
- 4. The identity of the Discloser shall not be revealed without their permission and to the extent permitted by law.
- 5. Upon receipt of the Protected Disclosure, the PDC shall respond in writing to the Discloser or the external service provider acknowledging receipt of the Protected Disclosure, within five (5) Days and shall proceed to the <u>Procedure for Investigation of Alleged Wrongdoing</u>.
- 6. In cases where any of the parties involved in the report is an Associate of the University Internal Auditor, the Chair of the Board of Regents Audit and Finance Committee shall serve as the PDC.
- 7. Any Discloser who experiences any type of Retaliation as a result of making a Protected Disclosure or a third party is aware that a Discloser is experiencing Retaliation should immediately inform the PDC, who in turn shall contact either the Department of Human Resources, the Office of Faculty Relations, the President or the Board, depending on the situation, and shall ensure that the matter is investigated, and appropriate action taken.

# **Procedure for Investigation of Alleged Wrongdoing**

Responsible Unit: Office of Internal Audit

- 1. The Protected Disclosure Coordinator (PDC) shall review the allegation(s) and, within fifteen (15) Days or within the timeline for investigation found in a relevant collective agreement, shall decide whether further action is warranted. In making this determination, the PDC may consult with General Counsel and other officials within the University and shall consider such factors as whether:
  - (a) the subject matter of the Disclosure would more appropriately be dealt with, initially or completely, according to another University established policy or process;
  - (b) the Disclosure is malicious, frivolous, vexatious, made in bad faith, or does not deal with a sufficiently serious subject matter;
  - (c) so much time has elapsed between the date when the subject matter of the Disclosure arose and the date when the Disclosure was made that investigating it would not serve a useful purpose;
  - (d) the Disclosure is not made in the public interest but for personal grievances and complaints;
  - (e) the Disclosure does not provide adequate particulars about the Wrongdoing as required by the Procedure for Filing a Protected Disclosure; or
  - (f) there is another valid reason for not pursuing further action.
- 2. Where the PDC concludes that there exists an established University process for the investigation of the alleged Wrongdoing or the subject matter is out of the scope of this policy, the PDC shall direct the Discloser to the relevant University regulation, policy, or collective agreement.
- 3. Where the PDC concludes that no further action is warranted, they shall notify the Discloser or the external service provider.
- 4. Where the PDC concludes that an investigation is warranted for the Wrongdoing in question, the PDC shall oversee the investigation in accordance with sections 5 to 21 outlined below. The PDC will advise the Discloser or the external service provider of the commencement of an investigation within an appropriate timeframe as delineated in the relevant collective agreement These may be reviewed <a href="here">here</a>. 5. The PDC shall investigate or appoint an investigator, who may be internal or external to the University. When appointing an investigator, the PDC will consider the expertise required to conduct the particular investigation. No person should be selected where there is a real or perceived conflict of interest or reasonable apprehension of bias. Normally, investigators should be able to submit their report within 40 Days of being appointed, depending on the nature of the allegations.

- 6. In the case of Disclosure made against the President or a Vice-President, the Chair of the Board of Regents shall be advised, and any appointed investigator shall be external to the University.
- 7. The PDC or the investigator appointed under section 5., as the case may be, shall use such investigative processes they deem appropriate to the nature of the allegation(s). The PDC or the investigator shall have regard to any timelines and processes associated with any applicable collective agreements. 8. Where the PDC appoints an investigator, they shall ensure that the investigator is provided with relevant information, documentation, and the support necessary to conduct a thorough investigation.
- 9. The PDC or the investigator, as the case may be, shall conduct a thorough investigation with impartiality and objectivity and in a manner that shall ensure fair treatment for and, to the extent possible, the confidentiality of the Respondent and the Discloser.

#### 10. In any investigation:

- Any person involved will be provided with opportunities to explain and present evidence in support of any Disclosure;
- Respondent(s) will be informed of the nature of the allegations against them and will be afforded the opportunity to review any evidence and to respond;
- In all cases, the credibility and reliability of evidence will be appropriately considered;
- If the Discloser or Respondent are represented by a union or faculty association, they will be advised of their right to representation and may request a union or faculty association representative present during any investigation meetings or interviews.
- 11. Individuals involved in the investigation of a Protected Disclosure must uphold confidentiality concerning all aspects of the Disclosure. They are only permitted to share information with those with a *bona fide* need to know the details of a situation. As the case may be, the PDC or the investigator shall advise all persons interviewed to treat all information, evidence, and proceedings as confidential.
- 12. All Members of the University, including Disclosers, Respondents, and witnesses, shall cooperate with the PDC or the investigator and respond in a timely fashion to their request for information or meetings. The PDC or the investigator, as the case may be, will set a reasonable timeline for individuals to respond to requests for information in connection to the investigation.
- 13. Throughout the investigation process, the PDC may recommend interim measures to the appropriate authorities.
- 14. Where the PDC appoints an investigator, upon completing their investigation, the investigator shall prepare a report containing their findings and any recommendations about the Disclosure and the Wrongdoing and submit that report to the PDC. The report shall not include any information that reveals or could reveal the identity of the Discloser if anonymity has been requested.

- 15. Upon receipt of the report, the PDC shall disclose the report to the Respondent and shall provide the Respondent with five (5) working days to reply to the report. Any reply shall be in writing and submitted to the PDC.
- 16. After the deadline for the Respondent's reply has elapsed, the PDC shall disclose the report and any reply received from the Respondent only to:
- (i) the President;
- (ii) the General Counsel;
- (iii) the Chair of the Board of Regents, if the Disclosure is made against the President or a Vice-President;
- (iv) such other persons, if they have a *bona fide* need to know the results of the investigation to perform their duties.
- (v) such other persons to whom disclosure is required by applicable law, regulations, or policies.
- 17. The PDC shall maintain a record of the distribution of the report and any reply received from the Respondent18. The PDC shall report on the status of the investigation to the Discloser in the manner and at the time the PDC considers appropriate.
- 19. If, based on the investigator's report, the President or the Chair of the Board of Regents, as applicable, determines that further action is required, they shall ensure proceedings are initiated in accordance with the relevant regulations, policies, or collective agreements.
- 20. On completion of the investigation, the investigator shall deposit all records with the PDC, who shall be the official custodian of such records charged with preserving their confidentiality.
- 21. All records pertaining to a Discloser's report and the investigator's report shall be securely disposed by the PDC in accordance with the University's Retention and Disposal Schedule.

# Guide for Reporting Mechanisms of Unethical Behavior and Improper Conduct at Memorial University of Newfoundland - A Supporting Document to the University Protected Disclosure Policy

Allegations related to	Related Policies, Procedures, and Regulations	Reporting Authority/Designated Officer(s)
Emergency or imminent threat to personal safety or University property	Reports are made in accordance with the Emergency Policy and Plans.	<ul> <li>Campus Enforcement and Patrol</li> <li>St. John's and Signal Hill campuses: (709) 864-4100</li> <li>Marine Institute Campus: (709) 778-0644</li> <li>Grenfell Campus: (709) 637-2888</li> <li>Labrador Campus: 911</li> <li>Harlow Campus: 999</li> <li>Or 911 in Canada.</li> </ul>
Violations of appropriate use of computing resources and IT security incidents.	Reports are made in accordance with the Appropriate Use of Computing Resources Policy and Procedures.	<ul> <li>IT Service Desk</li> <li>St. John's Campus ITS: (709) 864-4595 Email: help@mun.ca</li> <li>Marine Institute ITS: (709) 778-0628 Email: servicedesk@mi.mun.ca</li> <li>Grenfell Campus ITS: (709) 639-2049 Email: gcits@mun.ca</li> <li>Faculty of Medicine ITS: (709) 864-6000</li> <li>Labrador Campus ITS: (709) 896-6211</li> <li>Harlow Campus ITS: (01279) 455901</li> </ul>
Conflict of interest	Reports are made in accordance with the Conflict of Interest Policy and Procedures, the Protected Disclosure Policy and Procedures, and the Policy on Ethics of Research Involving Human Participants.	<ul> <li>The appropriate Unit Head.</li> <li>The appropriate Dean, Director, Associate Vice-President, or Vice-President in case of Unit Heads.</li> <li>The Chair of the Board of Regents in the case of the Vice-Presidents and the President.  (The Office of the Board of Regents Bruneau Centre, IIC-1001  Memorial University of Newfoundland 230 Elizabeth Ave St. John's, NL A1C 5S7  Email: regents@mun.ca)</li> <li>The applicable Research Ethics Board when conflicts are related to research involving human subjects.  (The Office of the President  Memorial University of Newfoundland St. John's, NL A1C 5S7  Email: president@mun.ca)</li> </ul>

Health and safety incident or hazard	The Health and Safety Policy and the Health and Safety Management System (HSMS).	Or the Protected Disclosure Coordinator (Memorial University of Newfoundland St. John's, NL Tel: (709) 864-4397 Email: regents@mun.ca).  Environmental Health and Safety 14 Phelan Road Memorial University of Newfoundland St. John's, NL Tel: (709) 864 6216 Email: health.safety@mun.ca
Research misconduct	Reports are made in accordance with the Integrity in Scholarly Research Policy and Procedure.	Or Report an incident or hazard online.  The Office of the President Memorial University of Newfoundland St. John's, NL A1C 5S7 Email: president@mun.ca
Intellectual property	Reports are made in accordance with the Intellectual Property Policy.	The Office of the Vice-President (Research) Bruneau Centre, IIC-3003 Memorial University of Newfoundland St. John's, NL A1C 5S7 Email: vp.research@mun.ca avp.research@mun.ca
Fraudulent activities	Reports are made in accordance with the Internal Audit Policy and Procedures.	<ul> <li>The University Auditor.         (Bruneau Centre, IIC-1001         Memorial University of Newfoundland         230 Elizabeth Ave.         St. John's, NL A1C 5S7         Tel: (709) 864-2198         Email: jmdove@mun.ca)</li> <li>The President if the suspected fraudulent activity involves the conduct of a Vice-President.         (The Office of the President         Memorial University of Newfoundland         St. John's, NL A1C 5S7         Email: president@mun.ca)</li> <li>The Chair of the Board of Regents if the suspected fraudulent activity involves the conduct of the President.         (The Office of the Board of Regents         Bruneau Centre, IIC-1001         Memorial University of Newfoundland         230 Elizabeth Ave</li> </ul>

		St. John's, NL A1C 5S7 Email: regents@mun.ca)  The Chair of the Board Audit and Finance Committee if the suspected fraudulent activity involves the conduct of the Office of Internal Audit. (The Office of the Board of Regents Bruneau Centre, IIC-1001 Memorial University of Newfoundland 230 Elizabeth Ave St. John's, NL A1C 5S7 Email: regents@mun.ca)
Privacy of information	Reports are made in accordance with the Privacy Policy and Procedures.	The Information Access and Privacy (IAP) Office Spencer Hall, Room SP-4018 Memorial University of Newfoundland St. John's, NL Tel: (709) 864-7949 Email: iap@mun.ca
Respectful workplace	Reports are made in accordance with the Respectful Workplace Policy and Procedures.	Early resolution of respectful workplace concerns:  Concerns are communicated to the Responsible Person, who could be:  • The supervisor, manager, Unit Head, or the Human Resources Advisor in case of staff.  • The head of the academic unit, the Associate Director, the Office of Faculty Relations, or the campus Human Resources Administrator in case of faculty.  Formal respectful workplace complaint: Written complaints are submitted to the Reviewer, who could be:  • The Associate Director, Department of Human Resources.  (Department of Human Resources Memorial University of Newfoundland 230 Elizabeth Avenue, St. John's campus Fourth floor, Arts & Administration Building, A-4023B  St. John's, NL, Canada A1C 5S7  Associate Director Tel: (709) 864-4766  Email: mbarron@mun.ca)

		The Associate Director, Office of Faculty Relations. (Office of Faculty Relations Arts & Administration Building Room AA-3037 Memorial University of Newfoundland St. John's, NL A1C 5S7 Associate Director Tel: (709) 864-6896 Email: sarah.anthony@mun.ca)  Or File a complaint with the Newfoundland and Labrador Human Rights Commission using the Human Rights Complaint Form.
Unauthorized presence or use of weapons, prop weapons, or ammunition on University property	Reports are made in accordance with the Weapons Policy and Procedure.	Campus Enforcement and Patrol Non-emergency inquiries: St. John's Campus: (709) 864-8561 Grenfell Campus: (709) 637-6200/6210 Marine Institute: (709) 778-0644 Harlow Campus after hours: 07847 795896
Sexual harassment and sexual assault	Reports are made in accordance with the Sexual Harassment and Sexual Assault Policy and Procedure.	The Sexual Harassment Office St. John's campus: Room ER-6038, Sir Alexander Murray (Earth Sciences) Building Tel: (709) 864-8199 Email: shoffice@mun.ca svprevention@mun.ca  Grenfell Campus: Room AS-238, Arts & Sciences Building Tel: (709) 864-8199 Email: shoffice@mun.ca svprevention@mun.ca svprevention@mun.ca
Student non-academic misconduct	Reports are made in accordance with Memorial's Student Code of Rights and Responsibilities.	St. John's Campus Coordinator, Student Code of Conduct Tel: (709) 864-4427 Email: studentcode@mun.ca Office: UC-4018  Marine Institute Director, Student Affairs Tel: (709) 778-0565 Email: Angie.Clarke@mi.mun.ca Office: W-3017

		Grenfell Campus Student Services Grenfell Campus, Memorial University of Newfoundland Tel: (709) 637-6232 Email: studentservices@grenfell.mun.ca Office: AS-278
Student academic misconduct	Reports are made in accordance with University Regulations for Undergraduate Students – Academic Misconduct and University Regulations for Graduate Students – Academic Misconduct	<ul> <li>The appropriate Head of the Academic or Administrative Unit for graduate and undergraduate students.</li> <li>The Dean of Graduate Studies for graduate students         <ul> <li>(Bruneau Centre, IIC-2012</li> <li>Memorial University of Newfoundland 230 Elizabeth Ave</li> <li>St. John's, NL A1C 5S7</li> <li>Email: deansgs@mun.ca)</li> </ul> </li> </ul>
Grievances and issues of non- compliance of staff Collective Agreements	Reports are made in accordance with the terms of the applicable Collective Agreement.	
Any other wrongdoing other than those mentioned above or in case reporting to the appropriate authority is deemed inappropriate.	Reports are made in accordance with the Protected Disclosure Policy and Procedures.	The Protected Disclosure Coordinator Memorial University of Newfoundland St. John's, NL A1C 5S7 Tel: (709) 864-4397 Email: regents@mun.ca