



Salish Kootenai College Procedures Manual

UPDATED FEBRUARY 2025

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Procedure 165.00 Policy Review Procedure

The Salish Kootenai College Board of Directors has delegated the primary responsibility for policy review to the Policy Review Committee.

Purpose:

The charter of the Policy Review Committee is to conduct a cyclical review of existing policies, recommending changes or updates, as well as to recommend new policies to maintain the College's compliance with tribal, state, and federal laws and accreditation requirements. The Policy Review Committee also coordinates review of the Procedure Manual.

Membership:

The Policy Review Committee will consist of at least seven (7) individuals including one senior administrator, the Accreditation Liaison Officer, the Human Resources Director, two staff members, and two faculty members. One individual will be selected as Committee Chair for the year. Additional faculty/staff may be consulted about particular policies. All standing members have one vote.

Meetings:

The Policy Review Committee will meet monthly and as needed for routine review of policies and/or review of new policy suggestions or new policies suggested by SKC employees or the Board of Directors.. Members may be asked to review a set of policies or procedures prior to the meeting. Minutes of the meetings will be maintained by the Human Resources Director.

Review Procedures:

The Committee will review Salish Kootenai College Policies according to the following procedures.

1. The Human Resources Department is responsible for ensuring that policies are reviewed according to Policy 165.00 and this procedure.
2. Stewards of each section of the Policy Manual are responsible for ensuring regular review of the sections of the Manual under their stewardship. Review will occur according to Policy 165.00, at a minimum of every three years.

Policy Stewards:

Section I, Governance: Human Resources Department

Section II, Administration: Human Resources Department

Section III, Personnel: Human Resources Department

Section IV, Academic Policies: Vice President for Academic Affairs

Section V, Data and Technology: Chief Information Officer

Section VI, Business Policies: Vice President for Financial Affairs

Section VII, Student Services Policies: Dean of Student Services

Section VIII, Facilities and Security: Vice President for Financial Affairs

3. The Policy Steward will notify faculty and staff of the sections of the Policy Manual that are scheduled for routine review. Faculty and/or staff members will have two weeks for that comment period unless additional time is requested. Suggestions for changes will be sent to the Policy Steward.

4. Proposed changes will be forwarded to the Chair of the Policy Committee who will follow the procedures outlined below.

- a) Any proposed changes to the Policy Manual suggested by the Policy Committee will be forwarded to the Salish Kootenai College President for review. As needed changes or new policies may also be sent to the College's legal counsel or other consultants including but not limited to SKC departments and Faculty Council.
- b) The Chair of the Policy Committee will send all proposed changes to the Policy Manual to faculty and staff for comments.
- c) Comments will be forwarded to the Chair of the Policy Committee for discussion at the Committee's next meeting.
- d) The Chair of the Policy Committee will present proposed revisions or new policies to the Board of Directors at a regularly scheduled meeting. In the case of emergent need, the Chair of the Policy Committee may request an emergency Board Meeting for discussion of proposed policy changes.

5. After approval by the Board of Directors, the Human Resources Department will ensure the Policy website is updated, will maintain a electronic copy of the changes, and will notify employees of the approved changes.

History:
Approved 11/2020

Procedure 170.00. General Records Retention Schedule

I. Introduction.

The General Records Retention Schedule governs the management and disposition of college records. The Schedule creates a uniform set of guidelines for the retention and disposition of records created or maintained in the course of college business that document college functions, decisions, and other activities.

II. Definitions.

Record. A record is defined as information in any form or medium (including electronic records and electronic mail) that is within the campus' control and relates to its activity or business. Records include paper documents and electronic records. Email sent or received in connection with the transaction of official college business may also be considered a record. Personal recorded information not related to the business of the College is not considered a record for the purposes of this procedure.

III. Terminology

Archival Review. Records that have content of value to documenting the college's history should be considered for permanent retention. If retention is warranted, files may be maintained by the office of origin or the D'Arcy McNickle Library. This may include records that contain authentic evidence of campus organization, function, operations, or other activities.

CY. Current Fiscal Year. The fiscal year begins July 1st and ends the following June 30th.

T/S/D/. Toss/Shred/Delete at the end of retention period.

Office of Origin. The department, office, or college entity that creates or has responsibility for the record or record series. Examples include but are not limited to the Business Office (financial records), Human Resources (employee records), Student Services (student admissions information and grades), and individual faculty/staff members (grant documents produced by the individual).

Permanent. A record series determined to have historical, legal, or administrative value to a particular unit or the college as a whole and that is to be maintained permanently via paper or electronic form.

Until Superseded. Retain until superseded or obsolete. This retention period pertains to documents that are routinely updated and therefore superseded by the current version.

IV. General Application of this Procedure.

The office of origin or creation of the record is responsible for retention of the record series unless the College assigned responsibility to another office. The department head and staff should be familiar with any statutes or regulations that may apply to the unit's records. If a record does not appear to fit into any of the categories below, look for a similar category

and follow its guidance.

When in doubt, err toward a longer retention period.

The retention periods in the schedule are minimum and also recommended as appropriate maximum retention periods.

If a federal, state, or tribal statute or regulation specifies a longer retention period for any type of record received, created, or maintained by the College, the statute or litigation hold overrides this schedule.

Upon notice of a legal investigation, audit, or claim, or receipt of a litigation hold, or upon service of legal process through subpoena, summons, or other means, all scheduled destruction of records related to the matter shall be immediately suspended and destruction of the records will not occur until the matter is fully resolved.

If the record series or item contains restricted information, such as personal information of employees or students, the records must be destroyed in a secure manner such as shredding or secure electronic destruction. If the materials do not include restricted information, the records may be destroyed by placing in trash or recycling, via electronic destruction, or a secure method.

V. Records Not Subject to Retention.

Records that are not subject to this procedure include the following:

- Messages on voice mail
- Private emails or messages/records that do not relate to college business or activities
- Electronic text messages sent from one cell phone to another cell phone
- Desk, telephone, or meeting notes intended for temporary or personal use
- Daily calendar or scheduling information

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ACADEMIC RECORDS

Record Steward: Office of Vice President for Academic Affairs

Item Number	Record	Description	Retention	Disposition
1	Course Catalog	Annual Course Catalog and any Addendums that include course offerings, program requirements, and related procedures	Active	Permanent
2	Course Schedule	Record of courses actually provided by the College		
3	Course Syllabi	Paper or electronic copies of course syllabi outlining course grading procedures and requirements	Permanent	Permanent
4	Academic Program Review	Academic Department Program Reviews completed every 4 years and Review Team Feedback.	Most current 2 reviews	T/S/D
5	Course Evaluations	Course evaluations completed per campus policy	CY + 3 yrs	T/S/D
6	Grievances	Documentation of all student grievances including grade grievances, process of review, and outcomes	CY + 5 yrs.	T/S/D

ACADEMIC RECORDS MAINTAINED BY ACADEMIC DEPARTMENT

Record Stewards: Academic Department Heads.

Note: To be maintained by Academic Departments if such records exist; may be superseded by requirements of accrediting entities, if any.

Item Number	Record	Description	Retention	Disposition
7	Student applications for department admission	Student applications for admission to individual academic programs if acceptance is limited	CY + 3 yrs	T/S/D
8	List of students accepted to program	List of students accepted to individual academic program and any rating sheets or other qualifiers	CY + 3 yrs	T/S/D
9	Department student disciplinary	Records of any student disciplinary procedures conducted within the department including	CY + 5 yrs	T/S/D

	records	dismissal from the program		
10	Program Accreditation Records	Self evaluation studies or other documents submitted for programmatic accreditation and supporting documentation	Permanent	Permanent

ACCREDITATION RECORDS

Record Steward: Accreditation Liaison Officer (ALO)

Item Number	Record	Description	Retention	Disposition
11	College Accreditation routine correspondence	Requests and communication about substantive changes or other routine accreditation information	Permanent	Permanent
12	Accreditation Annual Reports	Annual report to NWCCU	CY + 5 yrs	T/S/D
13	Self-Evaluation Reports and Final Notifications from NWCCU	Files documenting accreditation self-evaluation and review by NWCCU	Permanent	Permanent
14	Accreditation documents for specialized department accreditation	Communication, self-evaluation reports, and findings/letters from specialized accreditors e.g. ACEN, CODA. To be maintained by academic department; letter of affirmation of accreditation by specialized accreditor to be maintained by ALO.	Permanent	Archival Review

ADMINISTRATIVE RECORDS

Record Steward: Senior Leadership 'Team

Item Number	Record	Description	Retention	Disposition
15	Emergency Plans and Procedures	Records related to emergency planning and response/recovery procedures including Continuity of Operations Plans	Until Superseded + 1 yr.	T/S/D
16	General Files, Senior Administration	Files and records of president, vice presidents, deans	CY + 3 years	Archival Review

17	Insurance Policy Records	Records of insurance maintained by the institution	Active + 3 yrs.	T/S/D
18	Legal Case Records	Records of legal disputes involving the institution	Final Decision + 10 years	Archival Review
19	Minutes	Minutes of Committees, Councils, Task Forces	CY + 3 yrs.	Archival Review
20	Organizational Chart	Organizational Charts	Active + 10 yrs.	Archival Review
21	Policies and Procedures	Records of institutional and unit policies and procedures including sources and the process of creation/review	Until Superseded; History maintained in document	Permanent
22	Publications	Newsletters, news releases, brochures, and other such publications	Active + 2 yrs.	T/S/D
23	Strategic and Institutional Plans	Long-term and short-term plans for the institution	Active and previous	Permanent

BOARD OF DIRECTORS RECORDS

Record Steward: Assistant to the President

Item Number	Record	Description	Retention	Disposition
24	Board of Directors Roster and list of Officers/Committees	Records of membership of Board of Directors including officers and committee membership	Permanent	Permanent
25	Meeting Minutes	Minutes of official meetings of the Board of Directors	Permanent	Permanent
26	Awards Records	Records of decision-making and lists of individuals receiving honorary degrees or other such awards	Permanent	Permanent

FACILITIES, EQUIPMENT, AND PROPERTY RECORDS

Record Steward: Vice President for Financial Affairs

Item Number	Record	Description	Retention	Disposition
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27	Building and Construction Documentation	Records of construction of the College's building and grounds	Active	Permanent
28	Equipment Inventory Records	Inventories of major equipment	Active + 3 yrs.	T/S/D
29	Motor Vehicle Records	Records of titles, maintenance, and usage	Active + 3 yrs.	T/S/D
30	Real Estate Records	Records of real property acquired and sold by the College	Active + 10 yrs.	Permanent
31	Surplus Property Records	Records of changes in institution-owned property; requests to declare items surplus, salvage, or scrap; removal and sale or disposal of excess equipment and other surplus items including proceeds from sales	CY + 6 yrs.	T/S/D
32	Government property records	Records of "agency-owned" properties or equipment loaned to the institution by a federal, state, or tribal entity.	Active + 3 yrs.	T/S/D

FEDERAL STUDENT FINANCIAL AID RECORDS

Record Steward: Financial Aid Director

Item Number	Record	Description	Retention	Disposition
33	Records supporting data on required reports (audit reports and institutional response, Pell Grant statements of accounts)	Records of SSCR enrollment report, student files contain award letter for Pell Grant, and AR statements from business office signed check vouchers	Active + 3 yrs.	T/S/D
34	Documentation of initial and exit loan counseling	Records of direct loan application, entrance/exit counseling, check vouchers, student change status/withdrawal letter, and return of title IV funds.	Active + 5 yrs	T/S/D

FINANCIAL RECORDS

Record Steward: Vice President for Financial Affairs

Item Number	Record	Description	Retention	Disposition
35	Audit Reports	Annual institutional audit	Permanent	Permanent
36	Accounts Payable and Receivable Documentation	Records related to payment and receipt of financial obligations	CY + 7yrs	T/S/D
37	Credit Card Records	Records of administration of credit cards issue to institutional employees	CY + 7 yrs	T/S/D
38	Cash, Check, and Credit Card Transactions	Records of payments, forms, receipts	CY + 7 yrs	T/S/D
39	Procurement Records	Documentation of procurement procedures according to policy	CY + 7 yrs	T/S/D
40	Payroll Records	Documentation of benefits, time and effort records, and other payroll records	CY + 7 yrs	T/S/D
41	Time and Effort Documentation	Documentation of time & effort required for grants or other funding sources	CY + 7 yrs	T/S/D
42	Travel Reimbursement Documentation	Verification of travel reimbursement according to travel policy	CY + 7 yrs	T/S/D

GRANTS AND RESEARCH RECORDS

Record Steward: Director of Grants and Contracts

Item Number	Record	Description	Retention	Disposition
43	Facilities and Administrative Costs	Records of the analysis of grant indirect costs in preparation of the federal F&A (indirect) rate	CY + 10 yrs.	T/S/D
44	Grants – Funded	Records of funded grant proposals	Account closed + 1-yrs.	T/S/D
45	Grants - Unfunded	Records of unfunded grant proposals	Submission + 18 months	T/S/D
46	Payment Records	Records of requests and justification for transfers of direct payment funds from federal or	CY + 10 yrs.	T/S/D

		other external grantors		
47	Sponsored Programs Records	Records of the establishment and administration of individual sponsored grant/contract restricted funds accounts and compliance with fiscal reporting requirements	Account closed + 10 yrs.	T/S/D

HUMAN RESOURCE RECORDS

Record Steward: Human Resource Officer

Item Number	Record	Description	Retention	Disposition
48	Recruitment and Hiring Records	Records of review of all stages of hiring for positions including advertisements, numbers and characteristics of applicants, and hiring documentation including drug tests	End of Employment + 10 yrs.	T/S/D
49	Employee Education and Training Records	Records of required continuing education and training	End of Employment + 10 yrs.	T/S/D
50	Personnel Records	History of employee's work history including formal evaluations, job descriptions, and disciplinary records	End of Employment + 10 yrs.	T/S/D
51	Grievance Records	Documents related to grievances filed by employees including process and decisions made	CY + 10 yrs.	T/S/D
52	Discrimination Complaints	Records of internal complaints of discrimination, investigative records, and records related to the incident(s).	Active + 5 yrs	Archival Review
53	Background check records related to employment and drug tests	Background check and substance test records required under campus policies	End of employment	T/S/D

LIBRARY RECORDS

Record Steward: Library Director

Item Number	Record	Description	Retention	Disposition
54	Appraisal Records	Records of monetary value appraisals for artifacts, objects, and collections	Active	Permanent
55	Collection Records	Collection records including acquisition documentation, deeds of gifts, and copyright information for items in institutional repositories	Active	Permanent

SAFETY AND SECURITY RECORDS

Record Steward: Vice President of Enrollment Management and Student Affairs

Item Number	Record	Description	Retention	Disposition
56	Clery Reports	Annual Clery Reports	Permanent	Permanent
57	Incident and Injury Records	Records maintained by the institution of incident, injury, or accident	Final disposition + 3 yrs.	

STUDENT RECORDS

Recommendations for student records are based upon guidelines provided by the American Association of Collegiate Registrars and Admission Officers (AACRAO).

Record Steward: Registrar

Documents for Applicants

Item Number	Record	Description	Retention	Disposition
58	Applications for Admission or Readmission	Admission applications	Last year of enrollment + 5 yrs.	T/S/D
59	Immunization Records	Documentation of immunizations for admission purposes	Last year of enrollment + 10 yrs	T/S/D
60	Military Documents	Documentation of military service	Last year of enrollment + 10 yrs	T/S/D

61	Residency Classification	Documentation of residency classification for tuition purposes	Last year of enrollment + 10 yrs	T/S/D
62	Transcripts	Transcripts from High School, other colleges, and/or documentation of HiSet/GED	Last year of enrollment + 10 yrs	T/S/D

Student Academic Records

Item Number	Record	Description	Retention	Disposition
63	Notice of Academic Warning, Academic Suspension	Notice of academic action related to academic non-performance/deficiency	Last year of enrollment + 5 yrs.	T/S/D
64	Academic integrity code violations	Records of violations of academic integrity such as plagiarism, cheating	Last year of enrollment + 5 yrs.	T/S/D
65	Academic Dismissal	Records including action and authorizations for dismissal	CY + 5 yrs	T/S/D
66	Transcripts	Permanent academic record	Active	Permanent
67	Thesis/Dissertation	Theses completed for graduate programs	Active	Permanent
68	Course substitution/waivers	Approvals of substitutions or waivers to meet program requirements	Last year of enrollment + 3 yrs	T/S/D
69	Transfer credits	Records of evaluation of courses transferred to the College	Last year of enrollment + 5 yrs	T/S/D

Student Academic Records – Grade and Scholarship Records

Item Number	Record	Description	Retention	Disposition
70	Grade Records	Faculty records of grades for students in courses and work completed	Date of course completion + 3 yrs.	T/S/D
71	Grade change forms	Record of authorization to change grade	Date of course completion +	T/S/D

			3 yrs.	
72	Graduate Student Thesis or Final Project and Graduate Committee Record of Acceptance	Maintained by Dean of Graduate Studies or designee; records of graduate student achievement and thesis/project records	Date of course completion + 1 yr.	T/S/D
73	Grade Appeal	Records of grade appeals including original appeal and documentation of resolution	Date of appeal + 5 yrs	T/S/D
74	Withdrawals, Incompletes	Record of request to withdraw from all classes or have an incomplete in one or more classes	CY + 3 yrs	T/S/D

Student Academic Records – Degree and Certificates

Item Number	Record	Description	Retention	Disposition
75	Application for Degree or Credential	Degree application	Last year of enrollment + 3 yrs	T/S/D
76	Degree Audit	Degree audit in support of graduation application	Last year of enrollment + 5 yrs	T/S/D
77	Graduation List	List of graduates and individuals earning certifications for each graduating class	Active	Permanent

Student Academic Records – Miscellaneous Records

Item Number	Record	Description	Retention	Disposition
78	Name Change Authorizations	Record of student documentation of name change and relevant documentation	5 yrs. After graduation or date of last attendance	T/S/D

Services to Students with Disabilities

Record Steward: Disability Services Coordinator

Item Number	Record	Description	Retention	Disposition
79	Services to Students with Disabilities	Records of student request for services, accommodations provided, other services provided or not provided with rationale	Last date of enrollment + 10 yrs	T/S/D

PUBLICATIONS, STATISTICAL DATA, INSTITUTIONAL REPORTS

Record Steward: Office of Institutional Effectiveness

Item Number	Record	Description	Retention	Disposition
80	Annual Reports	Annual College Report provided to the college and public stakeholders	Permanent	Permanent
81	Catalogs	Annual SKC Catalog	Permanent	Permanent
82	Annual Fact Book	Annual SKC Fact Book providing institutional data	Permanent	Permanent

FERPA RECORDS

Record Steward: Registrar

Item Number	Record	Description	Retention	Disposition
83	Requests for non-disclosure of directory information	Student-signed request to not disclose directory information	Same as education record at issue	Same as education record at issue

Procedure 175.00. Handbook and Manuals Review

Purpose: This procedure defines timelines and processes for development, editing, and approval of college handbooks and manuals, including department-specific handbooks. While handbooks are not legally binding documents, every effort should be made to ensure that handbooks are accurate, current, and in alignment with college policies and procedures.

A. College Handbooks

College handbooks should be updated annually by the document steward as stated below. All handbooks should be finalized and made available via the college website no later than September 1 of each year.

Document	Steward
Faculty Handbook	Vice President of Academic Affairs, consulting with Faculty Council
Student Success Guide	Vice President of Enrollment Management and Student Affairs
Housing Handbook	Director, Student Housing
Student Club Handbook	Student Senate Advisor

B. Department-Specific Handbooks

Department-specific handbooks should be updated annually by the Non-Academic Department Head or Academic Department Chair. These handbooks should be reviewed by the relevant Vice President and/or the Division Dean to ensure that they are aligned with college policies. Departments should provide the reviewer with an edited copy highlighting any changes from the previous year. Department-specific handbooks should be finalized and made available to students no later than two weeks prior to the academic year or the date of program-specific student orientation, whichever is earlier.

C. Specific Information to Include in Handbooks

All handbooks should provide the following:

Disclaimer:

This Handbook is not a legally binding contract between students and Salish Kootenai College. The Handbook is a source of information on the services, activities, and policies of the College [or describe contents for department-specific handbooks]. Every effort has been made to provide current and accurate information in this publication; however, SKC administration [and the xx Department] reserves the right to alter, amend, or abolish its policies, procedures, and guidelines at any time.

History:

Approved: December 2020

Procedure 180.00 Maintaining Integrity of Published Materials

Salish Kootenai College strives to maintain the accuracy of all published materials through regular review and revision by individuals who oversee each category of material. The following procedures describe the process, individual steward, and period of review for each category of published materials.

A. Website

Steward: SKC Web Developer

Period of Review: Annual

Process:

Website review begins each year at the onset of the fall term. Each academic and non-academic unit must complete a form indicating the accuracy of the information pertaining to their units on either the main site (skc.edu) or their self-managed site (xxxxxx.skc.edu).

If there are inaccuracies on the main site units are asked to indicate exactly which url they are found and what the correct information needs to be. The Web Developer will make the necessary changes in as timely manner as possible during the Fall term.

Units with self-managed sites are asked if there are any inaccuracies and if there are when they will rectify them. They are given two options: within the first month of the term or by the end of the fall term itself.

- www.skc.edu
- xxxxx.skc.edu (self managed academic and non-academic unit sites):

B. College Catalog

Steward: Office of Institutional Effectiveness

Period of Review: Annual

Process:

The College Catalog is developed annually for the following academic year. The Office of Institutional Effectiveness publishes the timeline for development each January. Because the catalog represents information used for student admissions, advising, and degree progression, it is vital that each section of the catalog be reviewed carefully for accuracy and completeness.

Each section of the catalog is reviewed and updated by the appropriate personnel as follows:

Academic Calendar through Degrees and Certificates: Office of Institutional Effectiveness

Student Services through Other Student Services and Supports: Dean of Students and designees

Campus Safety and Security: Dean of Students and designees

General Education: VP of Academic Affairs

Academic Departments and Degrees: Relevant Department Heads

Workforce Development:

Relevant Department Heads

Personnel:

Human Resources Department

Changes to the catalog are processed through the online catalog software, SmartCatalog. Changes are entered by the personnel indicated above or may be sent to the Office of Institutional Effectiveness for entry. All changes are then sent via the SmartCatalog routing to the catalog reviewer in the Office of Institutional Effectiveness, then the Academic Scheduler, then the Director of Institutional Effectiveness for review.

The catalog is “published” electronically on the date specialized in the timeline, generally no later than June 1 of each academic year for the following year. A hard copy of the catalog is made available to SKC faculty and staff.

Once the catalog is published, the only changes that may be made are either a) minor spelling changes or such issues, or, b) to be published in a catalog addendum that is published in fall of the academic year. Requests for changes after the catalog is published must be made through the Office of Institutional Effectiveness and approved by the Vice President of Academic Affairs.

C. Marketing Materials

Steward: Marketing Committee Chair (currently SKC Web Developer)

Period of Review: As developed

Process:

All marketing materials, including brochures, flyers, posters, mailers etc., are to be submitted for review through the Greenlight Kissflow Process prior to printing or sending through the Business Office for payment.

The Kissflow is routed to the Marketing Committee Chair (review of design and content), members of the Marketing Committee (verifies accurate use of SKC color palette, fonts, marks, and professional appearance), the Office of Institutional Effectiveness (verifies data and other facts). The individual submitting the Greenlight Kissflow is notified of approval or further questions through the Kissflow process.

D. Press Releases

Steward: SKC President or Designee

Period of Review: As developed

Process:

All press releases and/or requests for press coverage are to be reviewed and approved by the SKC President and/or his/her designee. Copy of the press release or request for press coverage should be sent to the President’s office at least 48 hours prior to release. The President or designee will provide email approval with an understanding that press releases are time-sensitive.

History:

Personnel Procedures

Procedure 231.00 New Employee Orientation

Salish Kootenai College provides a comprehensive orientation for new employees in order to increase employee retention and effectiveness. The orientation welcomes new employees, acquaints them with their work responsibilities and environment, and assists them to understand college values and culture.

Orientation of new full- or part-time employees is a joint responsibility of the Human Resources Department and the employee’s supervisor. Orientation of adjunct faculty members is the responsibility of the Vice President of Academic Affairs Department and the Academic Department Head. Other relevant departments and college personnel assist in ensuring that individuals receive foundational information preparing them for their positions.

Individuals who are changing positions within the College should receive components of New Employee Orientation that provide them with an understanding of their new position, including but not limited to their job description and responsibilities and reporting hierarchy.

New employees will meet with the Human Resources Department within 2 days of starting their position to include the tasks indicated in the table below. New employees will complete the components of the online orientation identified below within 7 days of starting the position. The Human Resources Department will maintain a record of completion of orientation.

New employees will receive a department orientation from their supervisor within 2 days of starting their new position, to include information identified below as well as position responsibilities not provided in the job description.

Major components of New Employee Orientation, the responsible department, and methods of delivery are outlined in the table below.

Topic	Faculty	Staff	Adjunct	Method of Training
Orientation by Human Resources				
Benefits	X	X		In person with HR

College Organizational Structure and Committees	X	X		In person, HR
Policy Manual location, components including policies related to Personnel Evaluation, Grievance	X	X		In person with HR
Required Online Orientation				
FERPA	X	X	X	Online modules
Safety and Security	X	X	X	Online modules
Drug and Alcohol Free Campus	X	X	X	Haven & alcohol.edu
IT Security Processes	X	X	X	Online modules
Orientation by Vice President of Academic Affairs				
Policy Manual location, components including policies related to Academics	X		X	In-Person or via Virtual Meeting
Orientation by Department Head				
Job Description	X	X	X	Department Head
Building Safety, including identity of the BEC, location of fire extinguishers, other information	X	X	X	Department Head
Department organizational structure	X	X	X	Department Head
Campus Tour	X	X	X	In person, Department head or

				designee
Business Processes, including purchase orders, payroll processes	X	X	X	Department Head
Learning Outcomes Assessment Processes for the Department	X			Department Head
Other				
Tribal Culture and History	X	X	X	New employee dinner
Faculty Association	X		X	Chair, Faculty assoc.
Bookstore	X	X	X	Video, Dawn Benson
Library	X	X	X	In-person, Library Director
Institutional Review Board	X			Video, Chair, IRB
Student Success and Early Alert	X		X	In person, Student Success Dept.
Campus Technology				
Getting your Digital Accounts	X	X	X	Online modules
Schoology	X	X	X	Online modules
IT Help Desk	X	X	X	Online modules
Email	X	X	X	Online modules

Google Docs, Google Meets	X	X	X	Online modules
JICS Payroll	X	X	X	Online modules
JICS Advising	X		X	Online modules
JICS Employee Tab	X	X	X	Online modules
JICS Faculty Tab	X		X	Online modules
JICS Early Alert System	X	X	X	Online modules
OneCard	X	X	X	Online modules
Papercut Printing	X	X	X	Online modules
KISSFLOW	X	X	X	Online modules
Departmental File Server Access	X	X	X	Online modules

History:
 Approved 11/2020

Procedure 234.30 Conducting a Research Misconduct Investigation

A. Introduction
 Under Salish Kootenai College Policy 234.30, Research Misconduct, and applicable federal regulations governing federally sponsored research, SKC will conduct an investigation if research misconduct is alleged to have occurred by an SKC employee or a student working with a faculty member. The following procedures direct the investigation, evidentiary standards, reporting, and review as well the right of the researcher(s) to present evidence.

B. Process of Investigation
 Reports or allegations of research misconduct are to be reported to the Research Integrity Office (RIO) as described in Policy 234.30. If the RIO concludes that the allegations and evidence have sufficient substance, the RIO will start an investigation. The researcher(s) who are alleged to have engaged in research misconduct are called the “Respondent” in this procedure.

1. Investigatory Panel

a. Membership of the Panel

The RIO will appoint and convene an investigatory panel of at least three members. The panel may consist of SKC faculty or staff, or the RIO may appoint one individual from outside the College who may bring particular expertise to the investigation. The panel will represent individuals who are able to respond to the type(s) of alleged misconduct, e.g. fiscal, plagiarism, falsification of data, failure to maintain human subjects protection.

b. Avoidance of Identifiable Bias and Conflict of Interest

The RIO will provide a list of panel members to the SKC President. Panel members will be asked to state in writing any potential identifiable bias or unresolved personal, professional, or financial conflict of interest with the researcher, research funding, or related research topic. If such a bias or conflict of interest is present, the panel member will be replaced with another individual who is also asked to claim any bias or conflict of interest.

c. Function of the Panel

The Panel shall develop a factual record relating to the allegations of research misconduct and shall examine that record in order to make findings and recommendations to the President regarding whether research misconduct occurred and, if so, by whom and the level of seriousness, including whether any publications may need correction or retraction. The Panel's findings and recommendations may include a recommendation to the President for other appropriate actions, including disciplinary or administrative actions.

2. Evidentiary Standards

a. The Panel's findings shall be based on the preponderance of the evidence, which means that the weight of the evidence on a particular matter leads to the conclusion that the matter in question is more likely true than not. In order for the Panel to find that research misconduct occurred, the Panel must conclude that the preponderance of the evidence establishes proof of misconduct. The Panel is not bound by formal rules of evidence, and may admit and consider evidence, including hearsay, for whatever probative value the Panel believes the evidence merits.

3. The destruction, absence of or failure of a Respondent to provide research records which adequately demonstrate the questioned research is evidence of research misconduct when the College establishes by a preponderance of the evidence that a Respondent intentionally, knowingly or recklessly (i) destroyed research records that he or she had possessed or controlled, (ii) had the opportunity to maintain the records but did not do so, or (iii) maintained the records and failed to produce them in a timely manner, and the Respondent's conduct constitutes a significant departure from accepted practices of the relevant research community.

4. A Respondent has the burden of producing and demonstrating, by a preponderance of the evidence, any and all affirmative defenses raised. A Respondent also has the

burden of producing and demonstrating, by a preponderance of the evidence, any mitigating factors that are relevant to a decision to impose administrative or disciplinary actions following a research misconduct proceeding.

C. Conducting the Investigation

1. After being appointed, the Panel will meet in executive session to review the charges of research misconduct and discuss how best to proceed. The Panel may confer with the college attorney for guidance and advice.
2. The Panel shall take reasonable steps to ensure an impartial and unbiased investigation to the maximum extent practicable, including participation of persons with appropriate scientific or other expertise who do not have unresolved personal, professional, or financial conflicts of interest with those materially involved with the Investigation.
3. The Panel shall use its best efforts to interview each complainant, Respondent, and any other available person the Panel deems to have material information relating to any relevant aspects of the Investigation, including witnesses identified by a Respondent. Final decision on which witnesses to interview shall rest with the Panel.
4. The Panel may request and examine such documents as appropriate to its investigation, including but not limited to financial records, reports, publications, and other communications necessary to conduct a thorough investigation.
5. The investigatory process is intended to be confidential, so the Panel should take reasonable and appropriate steps to protect the confidentiality of its proceedings, the participants and the evidence gathered, but such steps shall not impair the ability of the Panel to compile whatever information and evidence the Panel believes necessary to fully and fairly reach its findings and recommendations.

If the individual(s) alleging research misconduct wishes to remain in Whistleblower status and remain anonymous, the Whistleblower may be interviewed by the panel but the individual's name will not be listed on the written testimony.

C. Investigation Report

1. Report Preparation

- a. The Panel will prepare a draft report of its findings and recommendations after it concludes the Investigation, in the format described in VII (d) below. After the Panel completes the draft report, it shall provide a copy to the President and the Respondent(s) for review and comment. The Panel, at its discretion, shall also either provide the Respondent(s) with a copy of the evidence upon which the draft report is based or an opportunity to review the evidence under supervised access. The Panel shall allow the Respondent(s) no

more than 30 calendar days within which to submit comments to the Panel on the draft report.

b. The Panel should review and consider any comments it receives to the draft report when finalizing the report, and attach the comments received to the final Investigation report.

c. The Final Investigation Report must be in writing and include the following:

- i. Allegations: Description of the nature of the allegations of research misconduct and the specific allegations of research misconduct considered in the Investigation and the institutional charge shall be included in the report.
- ii. Research Support: Description of and documentation of any governmental or privately sponsored research support for the research in question, including, for example, the federal or state agency supporting the research, the grant numbers, grant applications, contracts and publications listing such support.
- iii. Policies and Procedures: Reference to and inclusion of the SKC policies and procedures under which the Investigation was conducted.
- iv. Research Records and Evidence: Identification and summary of the research records and evidence reviewed, as well as any evidence taken into custody by the Panel but not reviewed.
- v. Statement of Findings: For each separate allegation of research misconduct identified during the Investigation, a finding whether research misconduct did or did not occur, the nature of the misconduct,
- vi. Comments: Inclusion and consideration of any comments made on the draft report by the Respondent(s).
- vii. Recommendations: If there is a finding that research misconduct has occurred, the Panel may recommend appropriate actions based on its understanding of the case. Even if the Panel concludes that research misconduct did not occur, it is nonetheless free to make recommendations as a result of the Investigation or a finding that other violations of college policies or procedures may have occurred.

4. After the Panel has prepared its final report, it shall submit the report to the President, with a copy to each Respondent of the full report or those portions relevant to that Respondent.

D . Time Period for Investigation

The Panel should complete the entire investigation within 30 days from the date the final membership on the Panel is set, including the preparation of the draft and final report and submission of the final report to the President. If the Panel decides that it will need additional time to complete its work, it shall communicate its request for additional time, including the amount of additional time it believes necessary and the justification for the extension, to the President, who will consider and act on the request, including communicating with any federal agencies whose concurrence may be required for an extension.

E. Review by the President.

After the Panel provides its final report, the President will review the report and its recommendations and determine whether further administrative or disciplinary action on the part of the College is appropriate. The President will provide a copy of the Final Investigation Report to the Human Resources Office.

The President will provide to the federal Office of Research Integrity or appropriate research sponsor a copy of the Investigation Report and attachments, state whether the Investigation found research misconduct (and if so, who committed it), state whether the College agrees with the Investigation's findings, and describe any pending or completed administrative actions taken against Respondent(s).

F. Retention and Custody of the Record.

The Human Resources Office and the Institutional Review Board shall maintain in a secure manner the records of research misconduct cases, including the evidence compiled and considered by the Panel, the Inquiry Report, the Investigatory Report and the President's review, for at least 7 years after completion of the research misconduct investigation.

History:

Approved 11/2020

Procedure 262.00 Employee Termination

This procedure provides the process for termination of an employee.

A. Resignation: the employee will send a letter of resignation to the HR office and will copy their supervisor. The supervisor will process a KISSFLOW with the final date of employment for the employee.

The following steps will be taken before the last day of employment:

1. Employees who plan to terminate their employment should meet with the Office of Human Resources to provide future contact information, determine access to benefits such as TCC and retirement.
2. Prior to the employee's date of resignation or on the last day of employment, the employee will be asked to return all SKC property (e.g. keys, laptop, printer, etc.) to the SKC Security department.
3. Prior to the employee's date of resignation, the Office of Human Resources will ask the employee if they would like to have an exit interview.
4. Prior to the employee's date of resignation, the employee should contact the Business Office to determine whether there are any outstanding travel reports or receipts due, unpaid bills, or any other pending business processes. These processes must be complete prior to the final day of employment.

5. The employee/third party will have until their last day of employment to remove or copy personal data from SKC systems to their personal storage. Under no circumstances may employees remove or delete any data that is not their own, is necessary for the operation of the department or College, required by College retention policies, protected by federal or Tribal law, or placed under a litigation hold.
6. On the last day of employment, the employee's college email account will be suspended.
7. On the last day of employment, the employee's access to internal college records, including Jenzabar, JICS, file shares, and other such digital access, will be suspended.
8. If an employee quits with no notice, the steps followed in the termination process will be followed.

B. Termination: Once all proper policies are followed and the President has approved the termination of the employee, HR will schedule a meeting in the HR office with the employee and the employee's supervisor.

The following steps will be taken before the meeting:

1. HR will notify IT of the time of the meeting so that all access to all digital devices and services can be suspended while the meeting is happening.
2. HR will notify security of the time of the meeting so that a representative can be nearby.
3. HR will notify payroll 2 days before the meeting to ensure the employee's final paycheck is ready for the termination meeting and to determine whether there are any outstanding reports or financial obligations.
4. At the end of the meeting, the employee will be asked to return all SKC property (e.g. keys, laptop, printer, etc.) immediately. If the employee indicates that they have some SKC property at their home, security will follow them to their home immediately after the meeting to retrieve the property.
5. The employee will be given a termination letter with the details of next steps as they pertain to benefits and last paycheck.
6. Once the meeting is concluded, HR will notify IT, Custodial, Payroll and Grants (if the employee was a PI on a grant) that the employee has left the premises.

Upon receipt of official notice of resignation, Human Resources will forward information about the terminating employee to the Payroll/Budgets Department.

Within 1 week of leaving employment, the HR office, if applicable, will terminate employee benefits in the proper portals.

HR will send out information to the employee concerning Temporary Continuation of Coverage (TCC). Benefits are effective until the final payroll in which the employee was paid.

Payroll will inactivate account in Jenzabar once final payroll has been processed and nothing is owed by the employee (e.g. Student fees, non-returned property, etc.).

History:

Approved: 2/2020

Academic Procedures

400.00 Undergraduate Curriculum Committee

The Undergraduate Curriculum Committee (UCC) is a standing committee that has the authority and responsibility for the design, implementation, and revision of the undergraduate educational program at Salish Kootenai College. The UCC provides guidance and oversight to ensure that the curriculum is aligned with the institutional mission, responds to the educational needs of American Indian students and communities, and leads to a set of defined learning outcomes that provide students with the competencies to meet their educational goals.

A. Responsibilities of the Curriculum Committee include:

1. Review and approval of proposals for new courses and programs, and current course and program revisions. See 406.00
2. Recommendations for proposed program retirements.
3. Participation in the academic program review and accreditation processes.
4. Oversight of the SKC general education program and graduation requirements, including general education outcomes.
5. Review and recommendations for policies affecting curriculum and the educational program.
6. Determination of procedures based on UCC policy.
7. Oversight of the college catalog update process for academic programs and departments.

B. Membership & Governance

The voting members of the UCC consist of the Department Chairs of each academic department. Each Department Chair or their designated representative has one vote. A shared Chair seat only receives one vote. Non-voting members include the Vice President of Academic Affairs, Division Deans who are not Department Chairs (unless as designated representative), the Director of Institutional Effectiveness, and other non-academic department representatives.

The UCC is led by a Chair and Vice-chair who serve a one-year term. The chair positions are elected by voting members of the UCC. Chair positions must be held by faculty members of the UCC. The UCC Chair acts as the facilitator of meetings, helps to schedule, prepare, and organize materials for meetings, and is responsible for communications with UCC members and others at the College, including administration. The Vice-chair will act in these capacities in instances when the Chair is unable to attend or serve.

C. Meeting Structure

UCC meetings are conducted as open meetings. A quorum will consist of 2/3 of the voting members.

The UCC Chair and Vice-Chair will designate a member to record meeting minutes. Minutes will be housed in the shared drive for committee members to review and correct. Minutes will be approved by the Committee at each subsequent meeting.

D. Processes

UCC meetings are held once per month and additionally as needed during the academic year. The meeting agenda is compiled by the Committee members in a shared drive folder. The folder is established, organized, maintained by the UCC Chair and Vice-chair and related documents will be uploaded by committee members.

Subcommittees may be composed of members of the UCC or other faculty members recommended by the UCC. Standing subcommittees include the General Education Committee and the UCC Procedure Review Committee.

E. Nomination and Election of Chair and Vice-chair

The UCC Chair and Vice-chair will be elected by Committee members each spring, before the end of the academic year. Candidates for both positions will be nominated by voting members of the UCC using email or other electronic means prior to the Committee election. Nominated candidates must affirm their willingness to serve the Committee. Following the nomination process, an election will be held using online forms, email, or other methods as determined by the Committee. Once elected, the Chair and Vice-chair serve throughout the subsequent academic year. Nominees for each Chair and Vice-chair seat should be elected for one academic year and should not serve consecutive terms in the same seat.

The committee must have a Chair and Vice-chair.

History:

Has been in place since 2012

Reviewed: 2/2019

Revised: 5/23/2024

404.00 Course Syllabi

It is the responsibility of the instructor to submit syllabi to the Vice President of Academic Affairs for approval. The syllabi must follow the SKC template and must include the following components:

- Name and contact information for the course instructor(s)
- Course title, credits, and course description
- Course Learning Outcomes
- Class requirements, including expectations for class attendance, online work completion, any supplies or equipment required, information resources such as textbooks or other materials.
- Determination of course credit hour requirements
- Methods of course assessment, including grading methods
- Other course policies
- Information about reasonable accommodations for disabilities, the Academic Honor Code, and SKC Student Success.

Instructors should clearly inform the students of the class content, requirements, and assessment methods at the beginning of the quarter. A syllabus of each course should be provided to each student at the beginning of the quarter using either a paper copy or uploading the course syllabus to the online course.

Changes to the course syllabus after the beginning of the course may be required in some situations. Therefore, it is recommended that course syllabi include a disclaimer noting that it may be necessary to change course dates or assessment methods and that students will be given timely notice of any changes. A statement such as the following may provide flexibility during the academic term. "The above schedule, policies, procedures, and assignments in this course are subject to change in the event of extenuating circumstances, by mutual agreement, and/or to ensure better student learning."

History:

Has been in place since 2012

Revised: 2/19/2021

406.00 Curriculum Change Procedures

Changes are made for the next academic year and must be presented according to each year's catalog timeline.

The Curriculum Committee reviews changes during scheduled meetings. The Department Chair and/or other designated faculty member should present the changes showing the current curriculum and proposed changes. A summary of the rationale for the changes should be included.

Following approval, the Department Chair should work with the Office of Institutional Effectiveness to ensure that the changes are entered correctly in the SKC Catalog.

A. Changes to Academic Program Curricula

Changes to degree pathways and the introduction of new courses must be approved by the Curriculum Committee. This process ensures that all departments are notified of changes that might impact students and that general education requirements are met.

Examples:

1. Changes in the sequence of offered courses in a degree program
2. Changes in required courses and options in degree program
3. Introduction of new courses into a specific degree program

B. Changes in Existing Courses

The following changes to courses must be approved by the UCC:

1. More than minor change in course learning outcomes (eliminate or add outcome(s) and/or change the intent of the outcome/course)
2. More than minor changes in the course description (e.g. adjustments that change the direction and/or intent of the course)
3. Change in the number of credits: These changes may require a new course number. This will be determined by the Director of Institutional Effectiveness and the Academic Scheduler.
4. Retirement of existing course

The following minor changes should be communicated to the UCC:

- Change in quarter offered
- Pilot X80 course offerings
- Prerequisite and corequisite changes

History:

Has been in place since 2012

Revised: 5/23/2024

406.30 Procedures for New Curriculum and Course Approval

A. Program Approval Process

The UCC reviews all proposals for new academic programs, delivery of existing programs to satellite campus sites, or delivery of an existing program entirely at distance. In reviewing the proposal, the UCC should consider the alignment of the proposed program with the College's mission, vision, strategic plan, and the program's impact on existing resources including the institutional budget.

The process for development and approval of new programs of study leading to new degrees is as follows:

1. Discuss the proposed program with the Division Dean and then Vice President for Academic Affairs before proceeding to UCC. The VPAA may refer the proposal to the President.
2. Present the proposed program to the Undergraduate Curriculum Committee for initial feedback before proceeding with program planning. The initial review by the UCC should include the following:
 - a. Alignment of the proposed program with institutional mission, strategic plan, and mission objectives.
 - b. Need for the program, including potential student clientele and opportunities for graduates' employment or further education.
 - c. Potential faculty qualified to teach in the program and means to recruit faculty if not already a faculty member.
 - d. Overview of budgetary implications, including potential sources of revenue to support the program.
 - e. Library and information technology resources that will be needed to develop and sustain the program.
 - f. Physical facilities that will be needed to develop and sustain the program.
3. Either communicate with the existing advisory committee or establish an advisory committee consisting of professionals from the field, academics, and others who can provide recommendations concerning outcomes and curriculum.
4. Meet with the SKC Office of Institutional Effectiveness to determine implications for accreditation.
5. Design learning outcomes and course requirements. Make sure that the degree plan meets all general education requirements.
6. Present the information, including the degree plan, new course descriptions, and learning outcomes to the UCC for approval. The Committee should receive the information two weeks prior to review.

7. All new programs must be complete and approved by UCC by the end of the fall quarter.
8. VPAA presents the information to the Board of Directors for final approval. The Board needs the document two weeks before consideration.
9. Assist the SKC Office of Institutional Effectiveness with the written request for a substantive change to be submitted to the Northwest Commission on Colleges and Universities (NWCCU).
10. The proposal will be submitted to the Federal Department of Education for approval.

Note: The proposed program may not be officially advertised and students may not be recruited for the program until it is approved by NWCCU and the Federal Department of Education.

B. New Course Approval Process

The UCC reviews all proposals for new courses. Considerations for review include the availability of a qualified instructor, anticipated need for the course including anticipated student enrollment, availability of resources including information resources to support the course, and the impact on departmental budget.

Process for New Course Approval:

1. Obtain approval to develop the new course from the Department Chair.
2. Present the proposed new course to the UCC. The proposal should include the course level and title, terms offered, credit type, course capacity, number of credits, proposed Gen Ed. list status, prerequisites and corequisites, course description, and course learning outcomes.
3. Following UCC approval, submit the Kissflow for new courses. The academic scheduler will determine an available course number using the course rubric as follows: Freshman course, 1XX; Sophomore course, 2XX; Junior Course 3XX, Senior Course, 4XX.
4. If the course may fulfill a requirement as a General Education course, contact the General Education Subcommittee, and submit General Education Course Kissflow.

History:

Has been in place since 2012

Revised: 5/23/2024

Procedure 408.00 Challenges, Waivers, Substitutions

Definition: A Course Challenge is the process by which students earn credit for a course by completing an assessment criteria such as a test.

SKC students may challenge certain courses if a student already possesses the knowledge and

skills which are the objectives of a given course listed in the college catalog. The course must be designated in the college catalog as a course that may be challenged. Only the academic department that houses the course may designate a course as challengeable. The department head and the Vice President for Academic Affairs (VPAA) must approve adding a course to the challengeable course list. The VPAA maintains a list of all courses which may be challenged.

The instructor of record will determine the criteria for the challenge process, which may include an examination, writing a report or essay, an oral presentation, or other means of assessing that the student has equivalent knowledge and skills.

The student who completes a successful course challenge may earn a letter grade or a pass/fail grade, depending on what is customary for the course.

To challenge a course, the student must meet the following criteria:

- Be currently enrolled at SKC.
- Have not previously passed a course for which the challengeable course is a prerequisite.
- Have not already taken the course for a grade.

- A student may earn no more than 15 credits by challenge.
- The student may challenge a course once. Generally, the challenge assessment is completed in the first week of the academic term. If the challenge is not successful, the student must enroll in the course.
- Independent Study courses may not be challenged.

Process:

- 1) Obtain the course challenge form, obtain the signature of the instructor of record.
- 2) Arrange a time to meet with the instructor of record to take the challenge assessment. The assessment must be completed during the first week of the academic term.

Duties of the Instructor of Record:

- 1) Meet with the student to explain the necessary paperwork.
- 2) Determine the method of assessment and the criteria used to judge satisfactory performance. The instructor will develop the assessment(s).
- 3) Administer and grade the assessment(s).
- 4) Send the completed course challenge form to the Vice President for Academic Affairs for signature. The form is then forwarded to the registrar who will record the student's grade for the course.

- 5) Students completing a course by the challenge procedure will be charged regular tuition and fees for the course.

Course Substitution:

Definition: A course substitution is the process by which a course takes the place of a required course in a curriculum. The course to be substituted must meet the same overall objectives of the required course.

A course substitution allows a student to use an alternative course to meet a program requirement. Course substitutions are accepted on a course-for-course basis. If multiple course substitutions are needed, a separate request for each course requirement should be submitted for review.

If the student is requesting a course substitution for a course from another regionally accredited institution, an official transcript containing the course must be on file in the Enrollment Services Department.

Process:

- 1) The advisor and student OR the Transfer Specialist and the student should complete the course substitution form. Indicate the rationale for the course substitution, including the overall or general course objectives which are met by the course to be substituted.
- 2) If the course is on an approved course substitution list, the form may be sent directly to the registrar. If the course is not on an approved course substitution list, the form should be sent to the student's advisor for review and signature, and then forwarded to the registrar.
- 3) There is no fee for course substitutions.

Course Waiver:

Definition: A course waiver is the process by which a student is exempted from taking a required course in the student's curriculum because the student has equivalent knowledge and skills taught in the course.

Course waivers may be used in situations when the student has attained required learning outcomes in another discipline or in multiple courses or in other recognized and documented learning experiences. A course waiver does not reduce the number of total credits required for graduation. If a waiver is approved, the student will need to complete another course in order to meet the minimum degree requirements as stated in the SKC Catalog.

Process:

- 1) The advisor and student should complete the course waiver form. Indicate the rationale for the course waiver.
- 2) Submit the course waiver form signed by advisor and student to the registrar.
- 3) There is no fee for course substitutions.

History:

Adopted 5/2019

Student Services Procedures

Procedure 520.00 Transfer of Academic Credits to Salish Kootenai College

This procedure outlines the process by which SKC evaluates and transfers academic credits from other colleges or universities.

The SKC Transfer Specialist is responsible for coordinating the evaluation of transfer courses. The Transfer Specialist works with SKC faculty as needed to determine whether or not courses are equivalent to SKC courses, the appropriate grading and credit conversion, and the applicability of transfer credit toward SKC's general education requirements.

Note: As with all postsecondary institutions, SKC reserves the right to determine which courses transfer into SKC.

The following guidelines apply to students who transfer credits to Salish Kootenai College:

- Courses being transferred into SKC must be from a regionally accredited institution.
- Only courses with a grade of "C" or above can be transferred into SKC.
- Transfer courses are not included in the SKC Students grade point average (GPA).
- All students who have not previously completed 30 or more college credits with a grade of "C" or better are required to take the college placement assessment.
- Credits from remedial, technical, or continuing education courses or from non-accredited schools are not accepted for transfer.
- Courses which do not have an equivalent at SKC may be accepted as elective credit.

The number of credits that must be earned at SKC in addition to transfer courses is as follows: 15 credits for Certificates of Completion, 30 credits for Associate Degrees, and 60 credits for Bachelor Degrees.

Important: Individual academic departments may have specific time limits as to whether a course taken previously will apply to the degree. These requirements are specified on the department's website and in the online catalog pages for each department.

Student Responsibilities:

1. Students wishing to transfer academic credits must complete admissions, including declaration of major, to SKC prior to requesting academic credit transfer and use their SKC email address for communication.
2. Students wishing to transfer academic credits to SKC must provide official college transcripts from the institutions for which credit transfer is requested. Transcripts may be sent via email by requesting the institution send them via a link and access code that can be emailed directly to the Academic Transfer Specialist or the Admissions Director.

Transcripts may also be mailed to:

Salish Kootenai College
Admissions
PO Box 70
Pablo Montana 59860

An official transcript is a complete representation of a student's academic record that are sent directly from the institution to the Admissions Department at Salish Kootenai College. Official transcripts are printed on official transcript (green and white) paper. An official transcript must bear the embossed or raised college seal, date and the Registrar's signature. It is important to note that the transcripts must be sent directly from the institution and received directly from the Admissions Department at Salish Kootenai College.

Transcripts may provide enough information to complete the course-by-course analysis. However, students may need to provide additional information including a college catalog for the year that the classes were completed and if possible, a course syllabus for each class.

3. Transfer students must provide all of the information described above at least **one month** before the start of classes to receive a review of transcripts for transfer courses before the registration period.

If transcripts are not received one month before the start of classes, the Transfer Specialist will still analyze the coursework submitted by transfer students, but students will receive the transfer credit evaluation before the pre-registration period for the next academic quarter of classes.

Student Rights:

1. Students have the right to receive a timely evaluation of transfer credits.

2. Students have the right to appeal the determination of credit transferability using the process described below.

Procedure:

The Admissions Officer will download the transcripts, timestamp them, initial them, and place a paper copy in the student's permanent file. The Admissions Officer will also forward a digital copy to the Transfer Specialist the same day as received. If a paper copy is received, the Admissions Officer will timestamp, initial, and place the official transcript in the student's permanent file as well as forward a copy to the Transfer Specialist.

Following receipt of transcripts and a complete admissions file, including declaration of major, the Transfer Specialist will complete the following:

1. Review the transcripts and the curriculum for the student's academic major to determine which courses may transfer.
2. The Transfer Specialist will review transcripts of students who are transferring to SKC through approved articulation agreements for completion of courses per the approved agreement. Copies of all articulation agreements are maintained in the Office of the Vice President of Academic Affairs.
3. The Transfer Specialist reviews transcripts for courses that may meet SKC General Education requirements. If questions arise about the acceptability of those courses, the Transfer Specialist will consult with the Department Head for the related academic department.
4. The Transfer Specialist may consult with Department Heads or faculty concerning acceptability of department-specific courses. In that case, the Transfer Specialist will email the Department Head/Faculty Member. Faculty are asked to respond within 10 working days. During the summer, the Transfer Specialist may make tentative recommendations for acceptance of transfer credits in major-specific courses if no faculty members are available to review the transcript.
5. No transfer course is considered to be officially accepted for credit until approved by the Transfer Specialist. Faculty members may review student transcripts for advising purposes, but should explain to students that this is a preliminary review.
6. The Transfer Specialist will enter the courses accepted for transfer into the student's formal academic record in Jenzabar, including the following:
 - a. Transfer institution
 - b. Term/year
 - c. Course number
 - d. Course title

- e. Credits/grade
- f. Name of SKC course for which the course is accepted

7. Generally, the Transfer Specialist will notify the student by SKC email of transfer courses accepted and will record the rationale for accepting the courses in the student's permanent file within 10 working days of receipt of transcripts and the student's complete admissions file. However, in some cases - and particularly if students are requesting acceptance of transfer credits from institutions from outside Montana - transcript evaluation may take additional time while copies of college catalogs or syllabi are obtained.

8. Students have the right to appeal the determination of credit transferability by submitting a written letter to the Dean of Students. The letter should include the course(s) for which transfer credits was denied, a course description from the transfer institution, and a statement of the rationale for the acceptance of the course. The Dean of Students will confer with the Transfer Specialist and may confer with a faculty member from the academic area of the specified course(s). The Dean of Students will make a decision about the course transferability within seven (7) business days. The decision of the Dean of Students is final.

A record of the rationale for acceptance of any transfer course will be included in the student's file in the Enrollment Services Department.

Facilities and Security

Procedure 710.00 College-Sponsored Programs or Activities Involving Minors

In order to provide appropriate supervision and protection, all employees who conduct college-sponsored programs or activities for minors on the SKC campus will follow this procedure. Programs in violation of this procedure may be denied permission to continue operations at Salish Kootenai College.

Definition: Authorized Adult

A. Individuals, paid or unpaid, who interact with, supervise, chaperone, or otherwise oversee minors in program activities, or recreational, and/or residential facilities. This includes but is not limited to faculty, staff, volunteers, graduate and undergraduate students, interns, employees of temporary employment agencies, and independent contractors/consultants.

Definition: College-Sponsored Program

A program that is offered by a SKC program or employee as a component of their college employment, and/or involving contracted use of SKC facilities, and/or that utilizes college funds or uses services of the college business office to pay program costs. This procedure does NOT refer to academic departments, including but not limited to Nursing, Education, and Social Work, which are required by state licensure to maintain policies and procedures for protection of minors.

B. A department that offers or approves a program which involves minors under the age of 18 shall:

1. Require a signed release form signed by parent or guardian depending on the event.
2. Establish a procedure for the notification of the minor's parent/legal guardian in case of emergency, including medical or behavioral problems, natural disasters, or other significant program disruptions. Authorized Adults with the program, as well as participants and their parents/legal guardians, must be advised of this procedure in writing prior to the participation of minors in the program.
3. Provide a list of all participants to campus security. Contact information should include participant's name, gender, age, address and phone number(s) of legal guardian, and emergency contact information.
4. Ensure that camp counselors carry a cell phone and are registered for RAVE alerts.
5. Ensure that all Authorized Adults who have direct contact with minors are required to have a current background check on file with Campus Security at the time of hire and/or beginning to work with minors. The background check must be reviewed and approved by Human Resources prior to the individual working with minors. Costs associated with the background check are the responsibility of the program.
6. Provide a list of all staff members for the event or camp. Contact information will include the staff name, cell phone (if possible), and emergency contact information.
7. Acknowledge that prescribed medications may be distributed by program staff IF the participant's family provides the medicine in its original pharmacy container labeled with the participant's name, medicine name, dosage, and timing of administration. Over-the-counter medications must be provided in their manufacturer's container. Medications must be kept in a secured location. The participant may self-administer the dosage shown on the container. Personal "epi"

- pens and inhalers may be carried by a participant during activities if the parent/guardian has included written permission.
8. Ensure that all minors have adequate supervision while they are on college property and/or on college-sponsored field trips. All activities involving minors must be supervised by at least two Authorized Adults at all times. Factors to consider in determining “adequate supervision” include the number and age of participants, the activity(ies) involved, type of housing if applicable, and age and experience of the counselors. If it is necessary for one staff member to transport a minor, parental permission must explicitly be granted.
 9. Ensure any photographs taken of participants must have prior approval and media release signed by the minor’s parent/guardian.
 10. Ensure that Authorized Adults participating in programs and activities covered by this Policy must not:
 - a. Have one-on-one contact with minors. There must be two or more Authorized Adults present during activities where minors are present. Authorized Adults also shall not have any direct electronic contact with minors without another Authorized Adult being included in the communication.
 - b. Strike, hit, administer corporal punishment, or touch in an inappropriate way any minor.
 - c. Pick up minors or drop off minors at their homes, except as specifically authorized in writing by the minor’s parent or legal guardian.
 - d. Make sexual materials, alcohol, or nonprescription medications available to any minor.
 11. Acknowledge that if an allegation of inappropriate conduct has been made against an Authorized Adult participating in a program, s/he shall discontinue any further participation in programs and activities covered by this Policy until the allegation has been satisfactorily resolved. If the situation warrants, the alleged abuser may be immediately suspended pursuant to the applicable procedures, pending an investigation.
 12. Recognize that Montana state law (MT ST §§ 41-3-201, 41-3-207 (2009), MT ST § 41-3-102, updated by Ch. 179 (2009) requires **any person** who has reason to believe that a child is a victim of child abuse or neglect to make an oral report to Child Protective Services (CPS). SKC Policy also requires a report to Campus Security. Campus Security has an obligation to report any suspected abuse to the Vice President of Finance, Business and Related Affairs and CPS, which will conduct an

investigation.

History:

Reviewed 8/2020

Procedure 723.00 Management of Medical Biohazardous Waste

Purpose: The purpose of this procedure is to protect students, employees and the general public from exposure to biohazardous waste materials.

Definitions:

Sharps: Materials that may penetrate the skin including but not limited to glass, pipette tips, razor blades, lancets, needles, and other such objects.

Medical Biohazardous Waste: Materials saturated with liquid blood elements or other regulated body fluids, or articles contaminated with blood or body fluids.

The procedure applies to all programs that may deal with sharps or produce biohazardous waste as a component of their educational programs, including but not limited to the Allied Health, Dental, and Nursing Departments.

Per OSHA 40 CFR part 262 Hazardous Waste Management and Title 29 Code of Regulations, Part 1920.1030 Blood Borne Pathogen Exposure Control Plan, and specifically, Disposal of Infectious Waste, Salish Kootenai College adheres to the following procedure.

1. Employees in departments that generate biohazardous waste or utilize sharps in such a manner that may result in contamination with bodily fluids will receive orientation to this procedure.
2. Immediately after using sharps or generating biohazardous materials, those wastes must be placed into the designated bags or containers. Containers should be placed as close to the point of waste generation as is practical.
3. Sharp containers, when full, will be locked and transported to the approved and established area. This area will be designated as 'authorized personnel' only and will be locked at all times. The director of facilities will determine who needs the key (department heads of each of these departments and any other designee of facilities).
4. Hazardous waste will be secured in biohazard bags/containers and will be transported to the approved and established area as noted in #3. No sharps container and/or biohazard bags/containers shall be taken anywhere except this designated area.
5. Sharp containers and biohazard bags/containers will be purchased through the departmental budgets.
6. The authorized OSHA-certified biohazard-regulated medical waste disposal company will pick up the sharps containers and biohazard bags/ containers per contract.

History:
Approved 2/2020

Procedure 725 Drone Usage

A. On-Campus Rules

1. To operate a Drone on/above College property, an operator must first do all of the following:
 - a. Download and install the FAA's "B4UFLY" smartphone app or a similar app, and complete all required actions, and comply with all guidance and warnings from the App.
 - b. Submit a UAS (Drone) Registration Form to the URMT. As part of the registration, operators will need to provide documentation of authorization from the FAA when applicable.
 - c. Hold a current SUAS FAA Certificate.
2. Before each flight: (i) submit a UAS (Drone) Flight Notification Form to the URMT of the intent to operate a Drone at a specific time and place; and (ii) receive prior approval from URMT. The prior approval may be of a blanket nature or specific to a project.
3. Emergency Drone Operations are not required to submit a notification form and will be covered under a blanket approval submitted for each College User drone operator that may perform these operations.
4. First Responders performing Emergency Drone Operations on campus are not required to register their drones with SKC, seek prior approval, or provide notification to the URMT.
5. First Responders performing non-Emergency Drone Operations on campus are considered Visitors and must comply with all Visitor stipulations in this Policy.
6. Failure to comply with the requirements outlined above is a violation of this policy and may result in disciplinary action and/or loss of privilege to operate a Drone on behalf of the College, as further described in the Violations section of this policy.
7. b. All operators must abide by all rules implemented by URMT. Such rules include, but are not limited to, the following:
 - a. Do not operate in a reckless or careless manner or under the influence of alcohol/drugs.
 - b. Do not operate beyond line of sight. The use of a first-person view ("FPV") device is not considered line of sight.
 - c. Do not exceed four hundred (400) feet of altitude.
 - d. Do not use metal blade propellers.
 - e. Do not operate directly over people who are not under a covered structure or inside a vehicle.

- f. Do not operate beyond your established flight line or perimeter.
- g. Do not operate from a moving vehicle.
- h. Do not operate between sunset and sunrise.
- i. Drones may be affixed with cameras if operators comply with College Policy on Commercial Filming and Photography. Cameras may not photograph, record, or transmit images or footage of individuals in any instance or location where the individuals would otherwise have a reasonable expectation of privacy.
- j. Drones may be affixed with an external payload or be capable of dropping or releasing a payload with prior approval from URMT.
- k. The operation of Drones may be prohibited during other large sporting or special events.

B. Off-Campus Rules

1. Before each flight, College Users must receive prior approval from URMT. The prior approval may be of a blanket nature or specific to a project.
2. Failure to comply with the requirements outlined above is a violation of this policy and may result in disciplinary action and/or loss of privilege to operate a Drone on behalf of the College, as further described in the Violations section of this policy.
3. All operators must abide by all rules implemented by URMT. Such rules may include, but are not limited to, the following:
 - a. Do not operate in a reckless or careless manner or under the influence of alcohol/drugs.
 - b. Do not operate beyond line of sight. The use of a first-person view (“FPV”) device is not considered line of sight.
 - c. Do not exceed four hundred (400) feet of altitude.
 - d. Do not use metal blade propellers.
 - e. Do not operate directly over people who are not under a covered structure or inside a vehicle.
 - f. Do not operate beyond your established flight line or perimeter.
 - g. Do not operate from a moving vehicle.
 - h. Do not operate between sunset and sunrise.
 - i. Drones may be affixed with cameras if operators comply with College Policy on Commercial Filming and Photography. Cameras may not photograph, record, or transmit images or footage of individuals in any instance or location where the individuals would otherwise have a reasonable expectation of privacy.
 - j. Drones may be affixed with an external payload or be capable of dropping or releasing a payload with prior approval from URMT.

C. Drone Registration

1. All college users must register their drone with the SKC URMT prior to drone operations. Visitors are not required to register their drones but must provide proof of liability insurance, FAA UAS registration, and FAA SUAS certification as part of the approval process.
2. The Drone Registration can be completed by submitting a Drone Registration form via KiSSFLOW, SKC's electronic workflow system.
3. The registration form is used to keep track of College-owned drones as well as employee-owned drones operated by College Users for liability insurance purposes.

D. Approval Process

1. Prior to drone operations, College Users and Visitors must submit a Drone Operations Approval Request via KiSSFLOW.
2. Prior to conducting operations, College Users and Visitors must have received the final approved request form.
3. During Drone operations, College Users and Visitors must have a paper copy or a digital copy of the final approved request on an available device such as a smartphone
4. Depending on the nature of their drone operations, College Users may request blanket approval for their operations provided the following stipulation is true:
 - a. Operations are of a limited nature or a specific mission profile. Such profiles may include:
 - i. GIS Mapping
 - ii. Flight Testing
 - iii. Photography and videography
 - iv. Emergency Operations

E. Notification Process

1. All non-emergency drone operations on campus must complete the Notification form via KiSSFLOW at least 30 minutes and not more than 24 hours prior to their operations.
2. This notification alerts SKC's CERT and SKC Security to campus drone operations.
3. College Users and Visitors must simply submit the Notification, there is no approval needed for the notification. They should have prior approval before submitting a Notification.

History:

Approved 2/2020