FOREWORD

The foreword is not part of the document that follows. It supplies, however, a necessary perspective for interpreting the document.

Medical student rights and responsibilities at Michigan State University are part of the social and historical background of the University. When, more than a century ago, the people of Michigan established this institution on the land-grant principle, they framed a new conception of the role of the university in American life. A land-grant university is a trusteeship of intellect in the service of society. It gathers society's creative and intellectual powers and uses them to advance the common good and to solve fundamental problems.

This document is significant not merely because it establishes that medical students have certain rights and responsibilities, but particularly because it affirms that they are parties to the social trust shared by all in the University community who are charged with preserving and advancing the genius of scholarship and the conditions of inquiry which society has entrusted to our care.

PREFACE

The Colleges of Human Medicine, Osteopathic Medicine, and Veterinary Medicine at Michigan State University share with the rest of the University the commitment to free inquiry and pursuit of knowledge that mark the academic institution. Students enrolled in the professional curricula of these three colleges are collectively referred to in this document as "medical students." This document and the related Academic Freedom for Students at Michigan State University and Graduate Student Rights and Responsibilities documents contain guidelines to the rights and responsibilities of medical students in matters of conduct, academic pursuits, keeping of records, and employment. This document describes structures and procedures for interpreting and amending the guidelines, for formulating regulations governing medical student conduct, for adjudicating medical student disciplinary cases, and for channeling medical student complaints, grievances, or concerns to faculty, staff, and administrators for appropriate action.

The Colleges of Human Medicine, Osteopathic Medicine, and Veterinary Medicine educate students for careers in the medical professions and evaluate students on their professional behavior as well as on other elements of their academic performance. This dual focus has been incorporated into this document. When disputes or complaints arise regarding medical student rights and
responsibilities, the academic tradition of the University and the professional traditions of the medical professions generally allow for the differences to be settled quickly and informally. This document is intended, in part, to address those instances when a formal mechanism for adjudicating differences must be instituted.

ARTICLE 1
MEDICAL STUDENT RIGHTS AND RESPONSIBILITIES

1.1 Michigan State University is a community of scholars. The basic purposes of the University are the advancement, dissemination, and application of knowledge. While engaged in these activities, the University seeks to provide an environment conducive to instruction, research, and service.

1.2 Each right of an individual places a reciprocal responsibility upon others: the responsibility to permit the individual to exercise the right. The medical student, as a member of the academic community, has both rights and responsibilities. Within that community, the medical student's most essential right is the right to learn. The University provides for the medical student those privileges, opportunities, and protections which best promote the learning process in all its aspects. The medical student has responsibilities to other members of the academic community and to patients, clients, and the general public.

1.3 Regulations governing the activities and conduct of student groups and individual medical students do not attempt to specify all prohibited and permitted conduct. Rather, they are intended to govern conduct that seriously interferes with the basic purposes and processes of the community or with the rights of members of the community.

1.4 The medical student is not only a member of the academic community, but also a citizen of the larger society who retains those rights, protections, and guarantees of fair treatment held by all citizens.

1.5 GUIDELINES REGARDING MEDICAL STUDENT REGULATIONS.

1.5.1 The medical colleges shall not enact student regulations unless there is a demonstrable need for them which is reasonably related to the basic purposes and necessities of the University.

1.5.2 The medical colleges shall provide opportunities for medical students to participate in formulating and revising regulations governing medical student conduct.

1.5.3 All regulations governing medical student rights and responsibilities shall be made available to medical students in print or in electronic form. (See medical college student handbooks.)

1.5.4 Every regulation shall be as brief, clear, and specific as possible.

1.5.5 Wherever rights conflict, regulations shall, to the maximum extent feasible, permit reasonable scope for each conflicting right by defining the circumstances of time, place, and means appropriate to its exercise.

1.5.6 Regulations shall respect the free expression of ideas and shall encourage the competition of ideas from diverse perspectives.
1.5.7 Penalties shall be commensurate with the seriousness of the offense. Repeated violations may justify increasingly severe penalties.

1.5.8 There shall be clearly defined channels and procedures for the appeal and/or review of:
   a. The finding of a violation of a regulation.
   b. The reasonableness, under the circumstances, of the penalty imposed for a violation.
   c. A regulation or administrative decision which is alleged to be inconsistent with guidelines in this document.
   d. Alleged violations of the complaint/grievance procedures set forth in Article V of this document.

1.5.9 Every regulation shall specify to whom it applies and whether responsibility for compliance lies with medical students.

1.6 A handbook of the University's current regulations relating to student rights and responsibilities shall be made available to every member of the academic community. (See Spartan Life.)

ARTICLE 2
ACADEMIC RIGHTS AND RESPONSIBILITIES FOR MEDICAL STUDENTS

2.1 PREAMBLE.

2.1.1 The establishment and maintenance of the proper relationship between instructor and student are fundamental to the University's function and require both instructor and student to recognize the rights and responsibilities that derive from that relationship. The relationship between instructor and student should be founded on mutual respect and understanding together with shared dedication to the educational process.

2.2. ROLE OF THE FACULTY IN THE INSTRUCTIONAL PROCESS.

2.2.1 No provision for the rights of medical students can be valid which suspends the rights of the faculty. The medical student's right to competent instruction must be reconciled with the rights of the faculty, consistent with the principle that the competency of a professional can be rightly judged only by professionals. It is, therefore, acknowledged and mandated that competence of instruction shall be judged by the faculty.

2.2.2 Colleges, departments, and units shall provide clearly defined channels for the receipt and consideration of medical student complaints concerning instruction. In no instance shall a dispute concerning the competence of instruction form the basis for a grievance under this document.

2.2.3 Faculty shall have authority and responsibility for academic policy and practices in areas such as degree eligibility and requirements, course content and grading, classroom procedure, and standards of professional behavior in accordance with the Bylaws for Academic Governance, The Code of Teaching Responsibility, and other documents on faculty rights and responsibilities.

2.2.3.1 It shall be the responsibility of the faculty of the Colleges of Human Medicine, Osteopathic Medicine, and Veterinary Medicine to establish and disseminate
academic and professional requirements and the methods for evaluating student performance in their college.

2.2.3.2 Determination of a medical student's overall progress, performance, and standing in a given medical program shall be the prerogative of a student performance committee, established in accordance with college bylaws and procedures.

2.2.4 No hearing board established under this document shall direct a change in the evaluation of a medical student which represents a course instructor's or instructional committee's good faith judgment about the medical student's academic performance. In the event that an evaluation is determined to be based on factors other than good faith judgment about the medical student’s academic performance (e.g., race, sex, personal animus), the dean of the appropriate college shall direct that the student's performance be reassessed and that a good faith evaluation be conducted.

2.3 MEDICAL STUDENT RIGHTS AND RESPONSIBILITIES.

2.3.1 In all areas of medical education, the medical colleges shall comply with the University’s Anti-Discrimination Policy and all other University policies.

2.3.2 The medical student has a right to accurate, timely, and clearly written information concerning general academic requirements for establishing and maintaining an acceptable academic standing, the medical student's academic relationship with the University, and any special academic conditions which may apply to the medical student. Requirements for the student's academic program and written academic regulations, including codes of professional behavior, shall be made known to the medical student by the administering college at the time of the medical student’s enrollment. Medical students are responsible for informing themselves of University, college, department, and unit requirements stated in college publications and in the University catalog. In planning to meet such requirements, students are responsible for consulting with their academic advisers and appropriate officers of their college.

2.3.3 The medical student, regardless of degree program, has a right to the best advice the college can provide concerning program planning, research, professional expectations, selection of courses and professors, and general degree requirements.

2.3.4 The colleges shall maintain records for their medical students, specifying and/or containing degree requirements, course waivers and substitutions, program changes, and other stipulations directly affecting their degree programs. Medical students shall be provided access to and a copy of these records upon request.

2.3.5 Subject to Article 2.2, the medical student shall be free to take reasoned exception to information and views offered in instructional contexts and to reserve judgment about matters of opinion, without penalty or reprisal.

2.3.6 Medical students and faculty share responsibility for maintaining classroom decorum and a collegial atmosphere which promotes teaching and learning.

2.3.7 Each medical student shares with the faculty responsibility for maintaining the integrity of scholarship, grades, patient care, and professional standards.
2.3.8 The medical student is responsible for learning the content of a course of study according to standards of performance established by the faculty and for adhering to standards of professional behavior established by his/her college.

2.3.9 The medical student has a right to academic evaluations which represent good faith judgments of academic performance by course instructors. Course grades shall represent the instructor's or instructors’ professional evaluation of the medical student's academic performance, including compliance with professional standards. The medical student shall have the right to know all course requirements and grading criteria at the beginning of the course. (See also *The Code of Teaching Responsibility*.)

2.3.10 Faculty, academic staff, and support staff must respect the privacy of information concerning the medical student’s academic performance and the medical student’s values, beliefs, organizational affiliations, and health. (See also Article 3.)

2.3.11 Medical students and faculty members share responsibility for maintaining professional relationships based on mutual trust and civility.

2.3.12 Faculty, academic staff, and support staff may not exploit medical students. Medical students shall receive recognition for scholarly assistance to faculty.

2.3.13 The medical student has the right to refuse to participate in any research being conducted by faculty without penalty or reprisal.

2.3.14 The medical student has a right to have his/her grievance/complaint adjudicated in accordance with the procedures established in this document.

2.3.15 The medical student subject to disciplinary action for alleged unprofessional behavior has a right to an explanation from the appropriate college faculty of the allegation, including how the judgment of unprofessional behavior was made, and the right to appeal.

2.4 ACADEMIC PROGRAMMING

2.4.1 COLLEGE LEVEL.

2.4.1.1 Code of Professional Standards. Each medical college shall provide to medical students, at the time of their first enrollment in the college or in a course, any specific codes of professional behavior and other academic standards covering the conduct expected of them while enrolled in the college or in that course.

2.4.1.2 Evaluation. Each medical college shall evaluate medical students’ academic progress, performance, and professional potential. Evaluation of medical students shall be made only by persons who are qualified to make those evaluations. Written descriptions of methods and bases of evaluations shall be provided to medical students and the faculty. Copies of written evaluations shall be provided to the medical student and placed in the medical student’s file.

2.4.1.2.1 When a medical student's progress or performance is unsatisfactory, the medical college shall so notify the student in writing in a timely manner and a copy of that notice shall be placed in the student’s file.
2.4.1.3 Each medical college shall make reasonable efforts to identify those students who have problems with academic performance, including compliance with professional standards, and when appropriate, to provide opportunities for remediation and/or improvement.

2.4.1.4 Removal. Each medical college shall protect patients, clients, and the general public from unprofessional conduct and from performance which falls below minimally acceptable professional standards of care on the part of its students. The medical colleges must remove from patient or client contact any student who has been found to have engaged in unprofessional conduct which presents a significant possibility of harm to patients, to clients, or to the general public.

2.4.1.5 Dismissals and Withdrawals. Each medical college shall establish criteria for the dismissal or withdrawal of medical students enrolled in its medical programs. Such criteria shall be published and made available to medical students at the time they begin their medical programs. Should a decision to dismiss a medical student be made by the dean or student performance committee in a medical college, the affected medical student shall be so notified in writing in a timely manner, and the medical student may request a review for reinstatement. All information regarding the decision to dismiss is confidential and shall only be shared in accordance with the University’s policies governing the release of student records.

2.4.1.5.1 Each medical college shall deal expeditiously with all academic dismissals, disciplinary dismissals, suspensions, appeals, and grievances.

2.4.2 JOINT MEDICAL/GRADUATE PROGRAM STUDENTS.

2.4.2.1 Joint medical/graduate program students are responsible at the time they are enrolled in each program to review applicable University, college, department, and unit requirements.

2.4.2.2 This document governs rights and responsibilities related to the medical program of a joint medical/graduate program student. The Graduate Student Rights and Responsibilities document (“GSRR”) governs rights and responsibilities related to the graduate program of a joint medical/graduate program student.

2.4.2.3 Complaints/grievances arising from the application of this document or of the GSRR to a student jointly enrolled in graduate/medical programs shall be referred to the appropriate hearing board. The Dean of the Graduate School will determine the hearing board to which the case will be referred.

ARTICLE 3
STUDENT RECORDS

3.1 Record practices within the medical colleges shall be based on respect for the privacy of individual medical students, as well as on current federal and state laws.

3.2 All policies and practices governing access, maintenance, and release of medical student records shall conform to the University's policies governing the release of student records. Changes to record policies shall be made known to medical students.
3.2.1 No record shall be made, duplicated, or retained unless it is needed for University operations.

3.2.2 The University shall not make, duplicate, or retain records of a medical student's religious or political beliefs without the medical student's knowledge and consent.

3.2.3 Each medical student shall have the right to inspect his or her own educational records, except confidential letters of recommendation, including the official transcript. Each medical student shall also have the right to inspect reports and evaluations of his or her academic performance and conduct.

3.2.4 All policies and practices dealing with the acquisition and dissemination of information in student records shall be formulated with due regard for the medical student's rights of privacy and access.

3.2.5 Units shall train persons handling confidential records regarding appropriate methods of keeping such records.

3.2.6 Except as permitted by law, the University shall not provide access to a medical student’s disciplinary record without the written permission of the student.

3.2.7 Medical college policies governing the maintenance and the release of records shall be subject to judicial review as provided in Article 5.

ARTICLE 4
MEDICAL STUDENT SUPPORT

4.1 CLASSES OF SUPPORT.

4.1.1 Medical students receiving support from the University fall primarily into three classes:
   a. graduate assistants;
   b. University employees; and
   c. fellowship, scholarship, and/or grant recipients.

4.2 GRADUATE ASSISTANTS.

4.2.1 This Article (Article 4) deals only with the employment of graduate assistants not represented by the Graduate Employees Union (“GEU”). Accordingly, for the purposes of this document, the term “graduate assistant” does not include members of the GEU. Information related to the employment of graduate teaching assistants included in the GEU bargaining unit is included in the collective bargaining agreement between the University and the GEU.

4.2.2 Medical students who are graduate assistants are appointed in accordance with University policies governing graduate assistantships. Graduate assistant duties may include, but are not limited to: student advising, writing supervision, reading of papers and examinations, and research. The responsibilities delegated to a graduate assistant must be performed under the supervision of a faculty member or administrator.
4.2.3 Each unit appointing medical students as graduate assistants shall develop and publish policies regarding:
   a. criteria for selecting new graduate assistants;
   b. criteria for renewing and/or continuing graduate assistantships;
   c. stipends;
   d. stipend advancement and promotion;
   e. tax status of stipends (according to IRS policy);
   f. procedures for evaluating performance;
   g. length of term of appointment, including continuance and renewal of graduate assistantships;
   h. work load, duties, and vacation schedules; and
   i. grievance procedures.

4.2.4 By April 15th of each calendar year, units shall notify each graduate assistant in writing of one (or more) of the following: (a) that the assistantship will be renewed for the following academic year or a portion thereof; (b) that the assistantship will be renewed provided the assistant is able to meet certain specified conditions; (c) that the assistantship will be renewed if the unit is able to meet certain specified conditions and by which date the student will be notified if the assistantship will be renewed; and (d) that the assistantship will not be renewed for the following academic year, along with the reasons for that decision.

4.2.5 The Office of the Provost shall establish a campus-wide policy for graduate assistant stipends, taking into account (a) the amount of stipend adequate in relation to the current cost of living, (b) the need to be competitive with other universities, and (c) the availability of resources for graduate assistant stipends. The Office of the Provost consults with the Dean of the Graduate School and the University Graduate Council on graduate assistant stipend levels.

4.2.6 Graduate assistants are entitled to all benefits normally accorded to full-time graduate students, except where otherwise specified by policy.

4.2.7 All graduate assistants are entitled to such clerical-secretarial help and supplies as are commensurate with their assigned responsibilities and the resources of the unit.

4.2.8 Medical students who are graduate assistants should receive the same professional respect accorded to faculty, within the constraints of their training, experience, and responsibilities.

4.3 UNIVERSITY-EMPLOYED MEDICAL STUDENTS.

4.3.1 The University's student employment office shall publish annually minimum and maximum salaries and hourly wages for University-employed medical students. This office approves unit requests for all payments above the established maximums.

4.3.2 The University shall not deny a regular employee's fringe benefits or unilaterally make adjustments to working hours solely because the employee is also registered as a medical student.

4.3.3 University employees who are pursuing medical study continue to be bound by collective bargaining agreements and other applicable University personnel policies and agreements.
4.3.4 Employment-related grievances of medical students employed in non-academic positions should be filed with the employing units under their respective procedures.

4.4. **FELLOWSHIP, SCHOLARSHIP AND GRANT RECIPIENTS.**

4.4.1 A medical student supported by a fellowship and/or grant shall be provided with information about (a) the responsibilities to be met and performance required for retention of support, (b) the privileges and status associated with support, and (c) any relevant grievance procedures.

4.5 **UNIVERSITY POLICIES RELATING TO MEDICAL STUDENT SUPPORT RECIPIENTS.**

4.5.1 Employment practices within the medical colleges shall conform to the University’s Anti-Discrimination Policy and all other relevant University policies.

4.5.2 The University may demote, suspend, terminate, or otherwise discipline medical students receiving support through the University for cause and for failure to meet their employment responsibilities. A medical student's dismissal from an academic program may also terminate the medical student’s assistantship or other support. Medical students who believe they have a grievance under this Article may utilize the procedures set forth in Article 5.

4.5.2.1 In cases where the medical student contends that action of the University may cause irreparable harm, the medical student may ask the appropriate judiciary for an expedited hearing.

**ARTICLE 5**

**ADJUDICATION OF CASES**

5.1 **ACADEMIC GRIEVANCES.**

5.1.1 A grievance is defined as an allegation filed by a medical student against a faculty, academic staff, or support staff member of the University community.

5.1.2 Any medical student may file a grievance within the time periods set forth in Article V, section 5.3.3.

5.1.3 A grievance may allege a violation of any of the rights of medical students under this document or challenge an academic evaluation on the ground that the evaluation was based entirely or in part upon factors (e.g., race, sex, personal animus) other than a good faith judgment about the medical student’s academic performance, including compliance with applicable professional standards.

5.1.3.1 A medical student who receives a penalty grade based on a charge of academic dishonesty and who is not referred for additional disciplinary action may contest the penalty grade by filing a grievance under this section. Instructors seeking sanctions for academic dishonesty other than or in addition to penalty grades must file a complaint under Article 5.2.2. of this document.
5.1.4. A student who has been dismissed for academic reasons by a medical college’s student performance committee and/or dean’s office may file a grievance under this section alleging procedural violations. Students may not file a grievance challenging such a decision to dismiss on substantive grounds.

5.1.5. Where an instructor or a committee has rendered a judgment regarding a medical student’s academic performance, that judgment is presumed to be made in good faith and the grievant bears the burden of proving the contrary, with the exception of allegations of academic dishonesty. In those cases, the faculty member bears the burden of proof.

5.2. COMPLAINTS.

5.2.1. A complaint is defined as an allegation filed by a member of the University community against a medical student.

5.2.2. Any member of the University community may file a complaint against a medical student within the time periods set forth in Article 5.3.3 alleging a violation of this document, academic dishonesty, violation of professional standards, or falsification of admission or academic records. (See also Integrity of Scholarships and Grades policy.

5.2.3. If a medical student or a student enrolled in a joint medical/graduate program engages in conduct that would violate a student group regulation, general student regulation, or University policy if the conduct occurred on campus, that conduct may form the basis for a complaint when the alleged violation impairs, interferes with, or obstructs the mission, processes, or functions of the student’s medical college.

5.3 FILING A GRIEVANCE OR COMPLAINT.

5.3.1. To file a grievance/complaint, the grievant/complainant must submit a written, signed statement to the designated administrator of the college in which the medical student is enrolled. The statement must contain the following information:

A. the specific provision of this document or other policy/regulation that has allegedly been violated;

B. the time, place, and nature of the alleged violation;

C. the person(s) against whom the grievance/complaint is filed;

D. a concise and plain statement of the sanction or remedy sought; and

E. whether a hearing is requested.

5.3.2. Anonymous complaints will not be accepted. Students may seek assistance from the Office of the Ombudsman¹ to understand the grievance process.

¹ The Ombudsman is a senior faculty member who assists members of the MSU community in resolving complaints or concerns informally, impartially, and independently.
5.3.3. Grievances/Complaints must be filed no later than mid-term of the semester following the one in which the alleged violation occurred (exclusive of the scheduled vacation periods during which students in the medical colleges are not enrolled for classes). If either party to a grievance/complaint is absent from the University during that semester, or if other appropriate reasons exist, an exception to this time limit may be granted by the designated college administrator. If either party to the grievance or complaint leaves the University prior to its resolution, the grievance/complaint may proceed at the discretion of the chair of the hearing body.

5.3.4. Grievances/complaints must be initiated at the lowest administrative level feasible. Grievances/complaints brought within a department that is solely administered by the medical colleges will normally be heard by the department hearing body. Grievances/complaints brought within a department that is not solely administered by the medical colleges will be referred to the medical student’s college hearing body. Upon the request of either party or on its own initiative, a department may waive jurisdiction and refer a grievance/complaint to the college hearing body with the approval of the college dean.

5.4. ADMINISTRATIVE RESOLUTION.

5.4.1. Where possible, a grievant or complainant is encouraged to seek resolution and redress informally.

5.4.2. If problems arise in the relationship between instructor and student, both should attempt to resolve them by informal, direct discussions. If the problems remain unsolved, the unit administrator and/or the Ombudsman should be consulted. If a problem is still unresolved, either individual may submit a grievance or complaint.

5.4.3. Within five (5) class days after receipt of a grievance/complaint, the designated college administrator shall meet with the respondent to discuss the nature of the grievance/complaint. At that time, the respondent may admit his/her violation of this document or other policy/regulation and have the grievance/complaint resolved through administrative action.

5.4.3.1. A respondent who admits his/her violation of this document or other policy/regulation waives his/her right to a hearing regarding the underlying facts of that violation. In such a situation, the designated college administrator shall propose an appropriate redress or sanction for the violation. At that time, the respondent may choose to proceed to a hearing on the sole issue of the appropriateness of the sanction/redress.

5.4.4. Alternatively, the respondent may choose to deny that the alleged violation has occurred and request a hearing. In such a case, within five (5) class days, the designated college administrator shall forward the grievance/complaint to the chairperson of the hearing body.

5.5. JUDICIAL PROCEDURES.

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2 A “class day” is defined as a day on which classes are held, including a day during final examination week.
5.5.1. Departments/units and colleges shall establish hearing board procedures consistent with this document. A copy of these procedures shall be filed with the medical college’s dean, the Ombudsman, and the Dean of the Graduate School. Hearing board procedures shall be reviewed every five (5) years.

5.5.2. The adjudication of grievances should proceed in a timely manner, as described below.

5.5.3. Upon receipt of a complaint/grievance, the chair of the hearing body shall transmit a copy of the complaint/grievance within five (5) class days to the hearing body members and to the respondent(s).

5.5.3.1 The hearing body shall review the complaint/grievance to determine whether it has jurisdiction and whether the complaint/grievance has alleged a violation of this document or other policy/regulation and may then forward a copy of the complaint/grievance to the appropriate individual(s) and invite a written response regarding these issues. After considering all submitted information, the hearing body may:

5.5.3.1.1 Accept the complaint/grievance, in full or in part, and proceed to schedule a hearing.

5.5.3.1.2 Reject the complaint/grievance and provide an explanation.

5.5.3.1.3 Invite all parties to meet with the hearing board for an informal discussion of the issues. Such discussion shall not preclude a later hearing.

5.5.4. At least ten (10) class days prior to the hearing, each party shall provide the chair of the hearing body with the names of his/her witnesses (if any) and advisor (if any).

5.5.5. At least five (5) class days prior to hearing, each party shall be entitled to a written notice of hearing from the hearing body. This notice of hearing shall state:

5.5.5.1. The name(s) of the parties;

5.5.5.2. The nature of the issues to be heard with sufficient detail to enable each party to prepare its respective case;

5.5.5.3. The date, time, and place of the hearing;

5.5.5.4. The names of witnesses (if any) and advisor (if any); and

5.5.5.5. The names of the members of the body adjudicating the case.

5.5.6. At least three (3) class days prior to a formal hearing, either party may submit a request to the chair of the hearing body that a member of the hearing body be disqualified because of

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3 A witness will normally be a member of the University community. However, since medical students spend significant blocks of instructional time in hospitals, clinics, and practitioners’ offices, staff or patients in those settings may, from time to time, be requested to serve as witnesses because they have evidence important to the resolution of the complaint/grievance. Wherever possible, a written statement shall be sought in lieu of personal appearances and testimony by those who are not members of the University community.
a conflict of interest. (See Article 5.9.4.2.) If the chair of the hearing body is the subject of the request, the request should be filed with the designated college administrator. The chair of the hearing body or designated college administrator shall rule on the issue of disqualification promptly and, if a member is disqualified, the name of the new hearing body member shall be forwarded to the parties immediately.

5.5.7. Any amendments to a complaint/grievance must be filed at least five (5) class days prior to the hearing on that complaint/grievance.

5.5.8. Either party may request, with cause, a postponement prior to the scheduled time of a hearing. The chair of the hearing body may grant or deny such a request.

5.5.9. Each party is expected to appear at the hearing and present his/her case to the hearing body.

5.5.10. Should the complainant/grievant fail to appear, the hearing body may either postpone the hearing or dismiss the complaint/grievance.

5.5.11. Should the respondent(s) fail to appear, the hearing body may either postpone the hearing or, if the hearing body determines that an acceptable excuse has not been offered, hear the grievance/complaint in the absence of the respondent(s).

5.5.12. The hearing body may accept written statements from a party to the hearing in lieu of a personal appearance, but only in unusual circumstances. A copy of the written statement shall also be sent to the opposing party. Such written statements must be submitted to the hearing body and to the opposing party at least one (1) day prior to the scheduled hearing.

5.5.13. The hearing body shall maintain a collegial atmosphere in hearings.

5.5.14. Either party may choose to be accompanied by a member of the faculty, staff, or student body of the University who may serve as an advisor. The advisor may be present throughout the hearing but has no voice in the hearing unless permission to participate is granted by the chair of the hearing body. Permission may be granted to the respondent to be accompanied by an attorney if criminal charges are pending against the respondent regarding the subject matter of the complaint/grievance. If the respondent is charged with a sex offense, the complainant may also have an attorney present.

5.5.15. During the hearing, each party shall have an opportunity to make an opening statement, present evidence, question witnesses, ask questions of the opposing party, and present a closing statement.

5.5.16. The hearing body shall issue a decision and prepare a written report of its findings and supporting rationale. As part of its decision, the hearing body shall determine what, if any, redress or sanction should be implemented. The hearing body shall forward copies of the report to the parties, the designated college administrator, the Ombudsman, and the dean of the medical college involved in the complaint/grievance. All recipients are expected to respect the confidentiality of this report. The dean of the medical college shall take appropriate action to implement any redress or sanction directed by the hearing body.

5.5.17. Either party to a hearing may request reconsideration of a decision within thirty (30) days if it is determined by the chair of the hearing body that new evidence has arisen. “New evidence” is defined as relevant information or documents previously unavailable to the
party, although the party acted with due diligence to obtain such evidence. An exception to the thirty (30) day time limit may be granted by the chair of the hearing body only upon a showing of good cause.

5.6. **URGENT CASES.**

5.6.1. The following process makes special provisions to adjudicate urgent complaints/grievances in which it is alleged that the conduct of a medical student threatens immediate and irreparable harm to a member of the University community or to patients or clients for whose care one or more of the medical colleges is responsible.

5.6.2. When student conduct that threatens immediate or irreparable harm is alleged, the student shall be suspended by the appropriate dean/designated college administrator. The appropriate dean/designated college administrator shall convene, within three (3) class days, a fact-finding hearing. Based on this fact-finding hearing, the dean/designated college administrator will determine whether there is sufficient evidence to justify continuation of the suspension. The student will be notified of the time and place of the fact-finding hearing and shall have the right to be present, to be informed of the particulars of the allegation, and to speak on his or her own behalf.

5.6.3. When the fact-finder finds sufficient evidence that the student has engaged in conduct of a sort that, if continued, threatens immediate or irreparable harm and no compelling evidence has been provided by the student that the conduct will be or has already been discontinued, the dean/designated college administrator shall suspend the student immediately (or continue the suspension if one is already in place) and notify the college hearing body of the suspension.

5.6.4. Upon receiving notification that a student has been suspended following a fact-finding hearing, the normal procedures for conducting a college hearing will be instituted immediately. The student will remain suspended pending a decision by the college hearing body.

5.6.5. If the fact-finder does not find sufficient evidence to justify a suspension, the suspension will be lifted. The dean/designated college administrator will forward its conclusions in writing to the college hearing body and normal procedures for conducting a college hearing will be instituted immediately.

5.7. **SANCTIONS.**

5.7.1. **Complaints:** If it finds a violation, the hearing body may impose one of the following sanctions:

5.7.1.1. **Warning:** An official written statement advising the medical student that additional violations will result in more severe sanctions.

5.7.1.2. **Probation:** A period of time specified for observing and evaluating a medical student's conduct, with or without special conditions, including a written reprimand, with an indication that further violations will result in more severe disciplinary action, including suspension or dismissal from the college. Probation will be imposed for a specific period of time and, provided no further violations have occurred, the medical student shall automatically be removed from probation when
that period expires. Probation may be accompanied by a requirement that restitution be made for University property damages or other losses resulting from the violation, or such other requirements or special conditions as may be appropriate under the circumstances.

5.7.1.3. **Suspension**: A suspension from the student’s medical college may be for a specified period of time, in which case the medical student is eligible to apply for readmission at the end of that period of time, or it may be a conditional suspension, in which case the medical student must demonstrate that he/she has fulfilled stated conditions prior to applying for readmission. Suspensions must be approved by the dean/designated college administrator of the relevant medical college. If the dean/designated college administrator does not approve the suspension, the dean/designated college administrator may direct that another sanction be imposed. The dean/designated college administrator will normally consult with the hearing body before imposing another sanction.

5.7.1.4. **Dismissal**: Dismissal from the student’s medical college. Dismissals must be approved by the dean of the relevant medical college and the Provost. If the dismissal is not approved, the dean and Provost may direct that another sanction be imposed. The dean and Provost will normally consult with the hearing body before imposing another sanction.

5.7.1.5. **Other**: Other disciplinary action deemed appropriate to a specific case.

5.8. **APPEALS**.

5.8.1. The decision of the hearing body may be appealed by either party to the next level hearing body. If the original hearing was by the department hearing body, the appeal shall be made to the college hearing body. If the original hearing was by the college hearing body, the appeal shall be made to the University Graduate-Professional Judiciary (“UGPJ”).

5.8.1.2. **Grievances**: The college hearing body or UGPJ shall hear appeals of decisions arising from academic grievances. Such appeals will be confined to allegations regarding procedural violations. When reviewing procedural matters, the appellate body will normally restrict its determination to issues which challenge the adequacy of the notice of the hearing provided the respondent by the hearing body and/or the adequacy of the hearing provided the parties by the hearing body. Evidence presented to the hearing body or otherwise pertaining to the substance of the grievance will not be reheard.

5.8.1.3. **Complaints**: The college hearing body or UGPJ shall hear appeals of decisions arising from complaints. Medical students may appeal decisions arising from complaints on either substantive or procedural grounds. When reviewing substantive matters, the appellate body will normally restrict itself to considering whether there were sufficient grounds for the decision made by the lower hearing body and/or whether the sanction imposed was appropriate to the nature and seriousness of the violation. Appeals from decisions arising from a complaint may allege that the decision of the hearing body was substantively unfair even if no

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4 The UGPJ is the final hearing body within the judicial structure related to medical student academic rights and responsibilities.
procedural violations are alleged to have occurred, but the appellate body will not rehear the complaint or the evidence presented to the hearing body.

5.8.2. Appeals must be written and signed by the party filing the appeal and must specify the basis for appeal in sufficient detail to justify further proceedings. Appeals to the college hearing body must be filed with the designated college administrator. Appeals to the UGPJ must be filed with the Dean of the Graduate School.

5.8.3. Appeals must specify the redress that is sought.

5.8.4. New evidence may only be submitted to the appellate body if it is relevant to the appeal and was previously unavailable to the party submitting it, although the party acted with due diligence to obtain such evidence.

5.8.5. Appeals must be filed within fourteen (14) class days following the date of the hearing body’s decision. Except in urgent cases, any redress or sanctions imposed by the hearing body will be held in abeyance while the appeal is pending.

5.8.6. The appellate body shall review the appeal and forward a copy of the appeal to the other party and invite a written response. After considering the appeal and response, the appellate body may:

5.8.6.1. Decide that sufficient reasons for an appeal do not exist and that the decision of the hearing body shall stand;

5.8.6.2. Direct the hearing body to rehear the case or to reconsider or clarify its decision;

5.8.6.3. Decide that sufficient reasons exist for an appeal and schedule an appeal hearing in a timely manner.

5.8.7. Following an appeal hearing, the appellate body may affirm, reverse, or modify the decision of the hearing body. The appellate body may also direct the hearing body to rehear the original complaint/grievance.

5.9. **JUDICIAL STRUCTURE.**

5.9.1. **Department Hearing Bodies.**

5.9.1.1. Each department that is solely administered by the medical colleges may, in accordance with its bylaws and procedures, establish procedures to deal with complaints/grievances that arise at the department level. Complaints/grievances may be resolved informally or, at the request of either party, formally through a department hearing body. No student or faculty member involved in the complaint/grievance may serve on the hearing board.

5.9.2. **College Hearing Bodies.**

5.9.2.1. Each medical college shall, in accordance with its bylaws and procedures, establish a hearing body for grievances/complaints involving medical students that arise at the college level or that cannot be resolved at the department level. Such hearing bodies shall have equal numbers of faculty and medical students selected by their
respective groups in accordance with college bylaws. If a faculty member or medical student is involved in the complaint/grievance, neither the faculty member nor the medical student may serve on the hearing body for that complaint/grievance.

5.9.3 University Graduate-Professional Judiciary (“UGPJ”)

5.9.3.1 A body shall be established composed of the Dean of the Graduate School or designee who shall serve as chairperson; five (5) faculty members of the University Graduate Council, three (3) of whom shall be the faculty representatives on the University Graduate Council; and five (5) students chosen by the all-University graduate student governing body, three (3) of whom shall be medical students, one from each medical college. If a faculty member or medical student who sits on the UGPJ is involved in the complaint/grievance, neither the faculty member nor the medical student shall serve on the UGPJ for that complaint/grievance. Each year the College Advisory Council of each of the medical colleges shall select an alternate faculty member who shall sit on the UGPJ in the event the faculty member representing that college on the UGPJ is unable to serve on a complaint/grievance. A medical student representative to the UGPJ who is unable to serve on a complaint/grievance shall be replaced for that complaint/grievance by another student from the same medical college who is chosen by the all-University graduate student governing body.

5.9.3.2 The UGPJ shall have available to it the full range of decisions provided to hearing bodies through this document. In addition, the UGPJ may make whatever recommendations it may consider appropriate to specific cases. When the UGPJ finds that a violation of rights has occurred and that redress is possible, the UGPJ shall direct the responsible administrator to provide redress. The administrator, in consultation with the UGPJ, shall implement an appropriate remedy.

5.9.4 General Considerations.

5.9.4.1 Department and college hearing body members and students serving on the UGPJ shall take office in the fall of the year and shall serve one year. The one-year term shall not preclude reappointment the following year. Faculty serving on the UGPJ shall have a term that coincides with their term on the University Graduate Council.

5.9.4.2 Any member of a hearing body who has a conflict of interest in a complaint/grievance shall be disqualified from sitting on the hearing body for that specific complaint/grievance. A “conflict of interest” is defined as any academic, financial, scholarly, or social relationship that would, in the judgment of the hearing body chair, impair the ability of a member to make a fair and impartial judgment. In the event that a member of a hearing body is disqualified, an alternate from the appropriate student or faculty group will be selected according to the established procedures for selecting members of that hearing body.

ARTICLE 6
ACADEMIC GOVERNANCE

6.1 Each medical college shall make provision for medical student participation on appropriate governance committees within the college and University as specified by the relevant bylaws.
6.1.1 This document shall be consistent with guidelines put forward by the national professional organizations of the respective colleges.

6.1.2 Medical student representatives shall participate as voting members on college committees relating to policy-making.

6.1.2.1 Each medical college shall inform its medical students in a timely manner of the committee positions that medical students may hold their duties and lengths of appointment, and the process by which medical students are selected for appointment.

6.1.3 At the University level, medical students (also referred to as graduate-professional students) shall be selected and shall have voting membership on the University Graduate Council, Academic Council, and other committees as may be specified by the Bylaws for Academic Governance.

ARTICLE 7
PROCEDURE FOR AMENDING AND REVISIONING THIS DOCUMENT

7.1 Any member of the University community may initiate a proposal to amend or revise this document.

7.2 A proposal to amend or revise this document must be concurrently submitted, in written form, to the chairperson of the College Advisory Council of each of the three medical colleges.

7.3 Upon receiving the proposed amendment or revision, each College Advisory Council shall take the following action:

7.3.1 A written copy of the proposal must be distributed to all medical students and voting faculty of the college.

7.3.2 All medical students and faculty must be advised in writing of meetings(s) where the proposal will be discussed. Such meeting(s) may be held separately for students and faculty or conjointly.

7.3.3 Ballots (either paper or electronic) must be provided to all enrolled students and voting faculty in each of the medical colleges to approve the proposed revision.

7.3.4 Approval of the proposed amendment/revision shall require a majority vote in each medical college by all currently enrolled students and voting faculty who submit a written ballot.

7.4 In the event that all three medical colleges do not approve the proposed amendment/revision, each College Advisory Committee shall select one faculty member and one student from its membership to meet to coordinate further action.

7.5 Proposals for amending or revising this document that have been approved by all the medical colleges shall be submitted to the Academic Council.

7.6 The Academic Council shall review the proposed amendment/revision and either approve or reject it in accordance with the Bylaws for Academic Governance. A proposed
amendment/revision that is rejected by the Academic Council shall be returned to the College Advisory Council of each medical college along with a written explanation for the rejection. This explanation may include suggestions for alteration of the proposal. A proposed amendment/revision that is approved by the Academic Council shall be forwarded to the President, who shall present it to the Board of Trustees.

7.7 The Board of Trustees shall review each proposed amendment and revision to this document and may approve it, at which time it shall become effective, or reject it and return it to the Academic Council.

7.8 The deans of the medical colleges shall be responsible for informing college faculty and medical students of the action taken on a proposed amendment/revision.

HISTORY OF APPROVAL

Original Document

(Replaces interim MSRR which was put in place administratively in 1979)

Medical Colleges – during 1985-86
Council of Graduate Students – November 6, 1985
University Graduate Council – March 3, 1986
Student Council – January 14, 1986
Academic Council – March 4, 1986
Board of Trustees – June 6, 1986
Effective Date – July 1, 1986

Revised Document

Medical Colleges – April 21, 2006
Academic Council – April 25, 2006
Board of Trustees – May 5, 2006
Effective Date – May 5, 2006
The ADP Hearing Board will normally adjudicate all student judicial cases involving allegations of harassment prohibited under the Anti-Discrimination Policy (“ADP”), including complaints filed against medical students. Article 5.2.3 of the MSRR also permits a complaint to be filed and adjudicated under the MSRR if the alleged violation impairs, interferes with, or obstructs the mission, processes, or functions of the student’s medical college.

**Interim MSRR Procedures**

The relevant hearing and appeal boards will follow the same administrative, hearing, and appeal procedures outlined in Article 5 of the MSRR for the adjudication of complaints, with the following clarifications:

A. The appropriate hearing board shall convene to review the findings of I3 and determine the appropriate sanction to be imposed. The hearing board shall not disregard the findings of I3 unless the board determines that the decision was arbitrary and capricious or resulted from procedural error. A finding is arbitrary and capricious when the application of the policy has no reasonable basis in fact. The party alleging that the finding was arbitrary and capricious or resulted from procedural error bears the burden of proof.

B. The complainant will be provided the same opportunity as the respondent to meet with an administrator after filing the complaint. The administrator will advise the complainant of his/her rights and responsibilities under the MSRR. (See MSRR 5.4.3) If the complainant is I3, the victim(s) may also attend this administrative meeting.

C. The parties (and their advisors) will not be permitted to personally question or cross-examine each other during the hearing. The hearing board will continue to be permitted to ask clarifying questions of either party during the hearing.

**Training**

Members of the relevant college hearing boards will be required to attend training regarding prohibited harassment (including sexual assault under Title IX) and the University’s Anti-Discrimination Policy prior to serving on a hearing panel that convenes to adjudicate a case under these procedures.

**Timeframes**

The normal timeframes contained within Article 5 of the MSRR apply, with the following clarifications:
A. The hearing board will normally convene to hear a case within three weeks after the complaint has been referred for a hearing. This timeframe may be extended during periods when classes are not held (i.e., Spring Break, final examination week, etc.).

B. The hearing board will normally render a decision in writing within two weeks after the hearing.

C. Interim measures imposed pending the outcome of the investigation process shall remain in place until a final determination is made under these procedures.

These procedures will apply to all complaints filed after January 27, 2012.