## **Annual DEI Compliance Checklist**



## Office of Compliance

| FINANCE & BUDGETING  | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process) | Date<br>Verified |
|--|--------------------------------|--|--|------------------|
| Budgets & Accounting: Determine whether the violation of SB 17.  | department h                   | as complied with the elin                  | nination of account and budget codes that fund DEI initiative              | es in            |
| Identified accounts and/or budget codes that<br>fund DEI initiatives; took action to ensure<br>compliance.   |                                |  |  |                  |
| Eliminated accounts and/or budget codes that violate SB 17, including titles, locations, departments, sub-accounts, sub-departments, and funding sources.  |                                |  |  |                  |
| Implemented procedures for the systemic review and vetting of current and proposed accounts and budget codes to ensure compliance, including titles, locations, departments, sub-accounts, sub-departments, and funding sources. |                                |  |  |                  |
| Implemented a record-retention process for reporting purposes.   |                                |  |  |                  |

| HUMAN RESOURCES   | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process) | Date<br>Verified |
|---|--------------------------------|--|--|------------------|
| <b>DEI Related Offices and Third-Party Contracts</b> : that violate SB 17.  | Determine wh                   | nether the department ha                   | as complied with the elimination of departments, divisions, ar             | nd/or offices    |
| Identified offices, divisions, or other units that are responsible for DEI initiatives; took action to ensure compliance.   |                                |  |  |                  |
| Identified third-party vendors performing the duties of a DEI office; took action to ensure compliance.   |                                |  |  |                  |
| Personnel: Determine whether the departmen  | t has complied                 | l with the restriction on h                | niring or assigning employees to perform DEI duties.                       |                  |
| Identified active personnel with<br>responsibilities for performing DEI functions;<br>took action to ensure compliance.   |                                |  |  |                  |
| Identified unallowable personnel duties within active and inactive job descriptions and working templates for language that violates SB 17; took action to ensure compliance. |                                |  |  |                  |
| Identified employee funding sources that violate SB 17; took action to ensure compliance.   |                                |  |  |                  |

| Hiring and Employment Practices and Procedures: requirements for DEI statements and do not proorigin to an applicant for employment, an employment  | ovide special | benefits or promote pref | erential treatment on   | the basis of race, sex, c |                  |              |
|---|---------------|--------------------------|-------------------------|---------------------------|------------------|--------------|
| • Reviewed hiring and employment documents and materials, including rubrics andmatrices; identified prohibited language, requirements, practices and/or procedures, for violations of SB 17; took action to ensure compliance.                              |               |                          |                         |                           |                  |              |
| Reviewed performance evaluation tools and metrics, documents, and forms for promotions, merit increases, and equity adjustments, and all related procedures; identified language and/or requirements prohibited by SB 17; took action to ensure compliance. |               |                          |                         |                           |                  |              |
| • Implemented a system of systemic evaluation and review to vet proposed positions, processes, and materials to ensure they meet compliance with SB 17 prior to publication.  |               |                          |                         |                           |                  |              |
| <u>Training Sessions and Materials</u> : Determine whet SB 17.  | ther the depa | rtment has complied wit  | h the elimination of re | quired training session   | ns and materials | that violate |
| Reviewed required training sessions for any identified as prohibited by SB 17; took action to ensure compliance.  |               |                          |                         |                           |                  |              |
| Reviewed all training sessions and materials for language and elements prohibited by SB 17; took action to ensure compliance.   |               |                          |                         |                           |                  |              |

| • Implemented procedures to review proposed training sessions and materials for compliance with SB 17 prior to activation.  |                                |  |   |                  |
|---|--------------------------------|--|---|------------------|
| FACULTY AFFAIRS   | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title)         | Summary of Action Taken (identify documented evidence used in the process)        | Date<br>Verified |
| Procedures, Programs and Activities: Determine differential treatment of or provide special be  | e whether the care             | department has discontiniduals on the basis of rac | nued procedures, programs and activities which promote<br>e, color, or ethnicity. |                  |
| <ul> <li>Reviewed all faculty hiring and recruiting<br/>practices and identified those that violate SB<br/>17; took action to ensure compliance.</li> </ul>   |                                |  |   |                  |
| <ul> <li>Reviewed all procedures for tenure review,<br/>promotions, merit increases, and equity<br/>adjustments and identified those that violate<br/>SB 17; took action to ensure compliance.</li> </ul>                       |                                |  |   |                  |
| <ul> <li>Reviewed all faculty organizations supported<br/>by the university to evaluate their purpose,<br/>structure, and funding and identified those<br/>that violate SB 17; took action to ensure<br/>compliance.</li> </ul> |                                |  |   |                  |
| <ul> <li>Reviewed all grant proposals and<br/>accreditation certifications and identified<br/>those that violate SB 17; took action to ensure<br/>compliance.</li> </ul>  |                                |  |   |                  |
| <ul> <li>Reviewed all accreditation certifications and<br/>identified those that violate SB 17; took<br/>action to ensure compliance.</li> </ul>  |                                |  |   |                  |

| Reviewed the provisions for all academic or professional opportunities extended to students, faculty, and visiting scholars, including institutional conferences and seminars, and identified those that violate SB 17; took action to ensure compliance.           |                                |  |  |                  |  |  |
|---|--------------------------------|--|--|------------------|--|--|
| Reviewed all forms, documents, procedures, and practices related to the functions listed in this section and identified those that violate SB 17; took action to ensure compliance.   |                                |  |  |                  |  |  |
| Implemented procedures for the systemic evaluation and review of all functions listed in this section, including the vetting of proposed processes, practices, organizations, funding proposals, certifications, and corresponding materials, to ensure compliance. |                                |  |  |                  |  |  |
| STUDENT AFFAIRS   | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process) | Date<br>Verified |  |  |
| <u>Procedures, Programs and Activities</u> : Determine whether the department has discontinued procedures, programs and activities which promote differential treatment of or provide special benefits to individuals on the basis of race, color, or ethnicity.    |                                |  |  |                  |  |  |
| Reviewed all departmental events, including university conferences and seminars, and identified those that violate SB 17; took action to ensure compliance.   |                                |  |  |                  |  |  |

| Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process)       | Date<br>Verified   |
|--------------------------------|--|--|--|
|                                |  |  | rential  |
|                                |  |  |  |
|                                |  |  |  |
|                                | Compliance? Y/N/NA her the departi         | Compliance? Responsible (include title)  her the department has discontinued the | Compliance? Responsible Summary of Action Taken (identify documented evidence used in the process) |

| <ul> <li>Reviewed all materials, including but not<br/>limited to applications, informational<br/>documents, marketing materials, guidelines,<br/>and operating documents, for violations of SB<br/>17; took action to ensure compliance.</li> </ul>                                       |                                |  |   |                  |
|--|--------------------------------|--|---|------------------|
| • Implemented procedures for the systemic review of all functions listed above to ensure compliance.   |                                |  |   |                  |
| ATHLETICS  | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process)        | Date<br>Verified |
| <u>Procedures, Programs and Activities</u> : Determine differential treatment of or provide special be   |                                |  | nued procedures, programs and activities which promote<br>e, color, or ethnicity. |                  |
| • Reviewed procedures, programs, and activities for violations of SB 17; took action to ensure compliance.   |                                |  |   |                  |
| <ul> <li>Reviewed required non-athletic training<br/>sessions (internal and external) for students<br/>and staff for violations of SB 17; took action<br/>to ensure compliance.</li> </ul>   |                                |  |   |                  |
| • Reviewed all materials developed, produced, funded, and distributed through the department, including applications, marketing materials, guidelines, operating manuals, and any other publication provided by the department, for violations of SB 17; took action to ensure compliance. |                                |  |   |                  |

| <ul> <li>Reviewed all co-sponsored events with outside<br/>entities for violations of SB 17; took action to<br/>ensure compliance.</li> </ul>  |                                |  |  |                  |
|--|--------------------------------|--|--|------------------|
| • Implemented procedures for the systemic review of all functions listed above to ensure compliance.   |                                |  |  |                  |
| WEBSITES & SOCIAL MEDIA  | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process) | Date<br>Verified |
| Website and Social Media Information: Determine identified and removed.  | ne whether re                  | ferences to unallowable I                  | DEI activities on websites and social media platforms have be              | een              |
| <ul> <li>Reviewed university websites and social<br/>media platforms for content, links, static<br/>materials, and downloadable documents for<br/>violation of SB 17; took action to ensure<br/>compliance.</li> </ul>           |                                |  |  |                  |
| <ul> <li>Reviewed affiliate websites and social media<br/>platforms for content and affiliation language<br/>in violation of SB 17; took action to ensure<br/>compliance.</li> </ul>   |                                |  |  |                  |
| • Implemented a systemic process of review of member websites, domains, and social media platforms, including keyword searches to identify references to DEI related terms that violate SB 17; took action to ensure compliance. |                                |  |  |                  |

| Implemented a vetting process by which proposed information to be posted to websites, domains, social media platforms, or any internet or network outlet will be evaluated to ensure compliance with SB 17. |                                |  |  |                  |
|---|--------------------------------|--|--|------------------|
| INTERNAL CONTROLS & MONITORING  | Meets<br>Compliance?<br>Y/N/NA | Employee<br>Responsible<br>(include title) | Summary of Action Taken (identify documented evidence used in the process) | Date<br>Verified |
| Internal Controls & Monitoring: Determine who operating procedures, and implemented inter   |                                |  | hibited DEI related rules, developed and implemented                       |                  |
| Reviewed and identified member rules and operating procedures in place that are not compliant with SB 17; took action to ensure compliance.   |                                |  |  |                  |
| Developed and implemented operating<br>procedures to ensure continued compliance<br>with SB 17.   |                                |  |  |                  |
| Implemented internal controls, including assignment of monitoring responsibilities, procedures for training, and processes for disseminating information to stakeholders, to ensure compliance with SB 17.  |                                |  |  |                  |
| Developed a compliance response and<br>reporting process to address issues of<br>noncompliance with SB 17.  |                                |  |  |                  |

| Identified procedures for disciplinary action/<br>sanctioning for violations of SB 17. |  |                                  |   |  |
|--|--|----------------------------------|---|--|
|  |  |                                  |   |  |
| SUMMARY OF FINDINGS: (to be completed)   | ed by CCO)   |                                  |   |  |
| Meets compliance   |  |                                  |   |  |
| Meets compliance after implementing  | g recommendations                                  |                                  |   |  |
| Factors preventing compliance as ag implemented recommendations on s                   | ency/institute of highe<br>tatutory/regulatory req | er learning has no<br>juirements | t |  |
| SIGNATURES   |  |                                  |   |  |
|  |  |                                  |   |  |
| Chief Compliance Officer   | Ī  | Date                             |   |  |
| Approved by:   |  |                                  |   |  |
|  |  |                                  |   |  |
| President  |  | Date                             |   |  |