[bpdsec]

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APPENDIX A: Monitoring Schedule by Policy

#	Title	Type of Report	Frequency	Report Due	Review
1.0	Global End	Internal	Annual	2nd mtg Sept	1st mtg Oct
2.0	Global Executive Constraint	Internal	Annual	Dec	1st mtg in Dec
2.1	Treatment of Member-Residents	Internal	Annual	1st mtg Apr & Nov	2nd mtg Nov & April
2.2	Treatment of Workers	Internal	Semi-Annual	1st mtg July	2nd mtg July
2.3	Compensation & Benefits	Internal	Annual	1st mtg July	2nd mtg July
2.4	Financial Planning/Budgeting (by Mar 31)	Internal	Annual	1st mtg Apr	2nd mtg Apr
2.5	Financial Conditions & Activities	Internal	Annual	1st mtg Feb	2nd mtg Feb
2.5.1 & 2.5.12	Liquidity & House Audits	Internal	3x annually	1st mtg Jan; 1st mtg Oct	1st mtg Jan; April; 2nd mtg Oct
2.6	Asset Protection	Internal	Annual	1st mtg Mar	2nd mtg Mar
2.7	Emergency Succession	Internal	Annual	1st mtg May	2nd mtg Mar
2.8	Communication & Support to the Board	Dir. Inspection	Annual	2nd mtg Feb	End of Mar; Aug mtg; 2nd mtg of Nov
3.0	Global Goveranance Process	Dir. Inspection	Semi-Annual	March & Nov	1st Mar mtg; 1st Nov mtg
3.1	Governance Process	Dir. Inspection	Semi-Annual	March & Nov	1st Mar mtg; 1st Nov mtg
3.2	Shared Values	Dir. Inspection			
3.3	Board Job Description	Dir. Inspection	Semi-Annual		
3.4	Board Member's Code of Conduct	Dir. Inspection			
3.5	Agenda Planning	Dir. Inspection			
3.6	Officer Roles	Dir. Inspection			
3.7	Board Committee Principles	Dir. Inspection			
3.8	Board Committee Structure	Dir. Inspection			
3.9	Cost of Governance	Dir. Inspection			
4.0	Global Board-Cooperative Management Linkage	Dir. Inspection			
4.1	Unity of Control	Dir. Inspection			
4.2	Accountability of the Executive Team	Dir. Inspection			
4.3	Delegation to the Executive Team	Dir. Inspection			

#	Title	Type of Report	Frequency	Report Due	Review
4.4	Monitoring Executive Team Performance	Dir. Inspection			

APPENDIX B: Monitoring Schedule by Month

Month	#	Title	Type of Report	Frequency	Submit	Evaluate
January	1.1.5	Internal	Annual	2nd mtg Sept	1st mtg Oct	
	2.6.1 & 2.6.12	Internal	Annual	Dec	1st mtg in Dec	
	4.2	Internal	Annual	1st mtg Apr & Nov	2nd mtg Nov & April	
	4.4	Internal	Semi-Annual	1st mtg July	2nd mtg July	
February	1.1.4	Internal	Annual	1st mtg July	2nd mtg July	
	1.2	Internal	Annual	1st mtg Apr	2nd mtg Apr	
	2.6	Internal	Annual	1st mtg Feb	2nd mtg Feb	
	3.6	Internal	3x annually	1st mtg Jan; 1st mtg Oct	1st mtg Jan; April; 2nd mtg Oct	
	3.9	Internal	Annual	1st mtg Mar	2nd mtg Mar	
March	1.0	Internal	Annual	1st mtg May	2nd mtg Mar	
	1.1.6	Dir. Inspection	Annual	2nd mtg Feb	End of Mar; Aug mtg; 2nd mtg of Nov	
	2.7	Dir. Inspection	Semi-Annual	March & Nov	1st Mar mtg; 1st Nov mtg	
	2.9	Dir. Inspection	Semi-Annual	March & Nov	1st Mar mtg; 1st Nov mtg	
	3.1	Dir. Inspection				
	4.0	Dir. Inspection	Semi-Annual			
	4.1	Dir. Inspection				
	4.3	Dir. Inspection				
April	1.1.1	Dir. Inspection				
	1.1.5.1	Dir. Inspection				
	2.5	Dir. Inspection				
	2.7	Dir. Inspection				

Month	#	Title	Type of Report	Frequency	Submit	Evaluate
	3.3	Dir. Inspection				
	3.7	Dir. Inspection				
	3.8	Accountability of the Executive Team	Dir. Inspection			
May	1.1.3	Dir. Inspection				
	2.7	Dir. Inspection				
	3.0	Dir. Inspection				
July	1.1.4	Dir. Inspection				
	1.4	Dir. Inspection				
	2.2	Dir. Inspection				
	2.3 & 2.4	Dir. Inspection				
	3.4	Dir. Inspection				
	3.9	Dir. Inspection				
August	1.1.5	Dir. Inspection				
	2.6.12	Dir. Inspection				
	2.6.1	Dir. Inspection				
	4.2	Dir. Inspection				
September	1.0	Dir. Inspection				
	1.1.5.1	Dir. Inspection				
	2.0	Dir. Inspection				
	3.3	Dir. Inspection				
	3.5	Dir. Inspection				
October	1.1.6	Dir. Inspection				
	1.3	Dir. Inspection				
	2.6.12	Dir. Inspection				
	2.6.1	Dir. Inspection				
	2.9	Dir. Inspection				
	3.2	Dir. Inspection				
	3.7	Dir. Inspection				
	3.8	Dir. Inspection				
November	1.1.1	Dir. Inspection				
	1.1.2	Dir. Inspection				
	2.1	Dir. Inspection				
	3.1	Dir. Inspection				
	3.4	Dir. Inspection				
December	1.1.3	Dir. Inspection				
	2.6	Dir. Inspection				
	3.0	Dir. Inspection				

APPENDIX C: History of Policy Changes

APPENDIX D: Sample Monitoring Form for Executive Limitations

Executive Limitations Evaluation Form

A tool to be used by individual board members as they evaluate the internal monitoring reports designated in Board-Management Delegation.

Evaluator: _ _ _ _ _ _ _ _ _ _ _ _ _ _
Send to President by: _ _ _ _ _ _ _

Policy being monitored: _ _ _ _ _ _ _

1. 1. Was this report submitted when due? ❑ Yes ❑ No
1. 2. Did the report lay out the Executive Team' interpretation or an operational definition of the policy? ❑ Yes ❑ No
1. 3. Is the interpretation justified or is proof provided to explain why the interpretation is reasonable? ❑ Yes ❑ No
1. 4. Was I convinced that the interpretation is justified and reasonable? ❑ Yes ❑ No
1. 5. Did the interpretation address all aspects of the policy? ❑ Yes ❑ No
1. 6. Does the data show compliance with the Executive Team' interpretation of our policy? ❑ Yes ❑ No

Comments regarding further policy development:

1. 1. Is there any area regarding this policy that you worry about that is not clearly addressed in existing policy? What is the value that drives your worry?
1. 2. What policy language would you like to see incorporated to address your worry?

APPENDIX E: Sample Monitoring Form for Board Self-Assessment

Board Compliance Monitoring Tool

Complete evaluation form and return to the Board President by: _ _ _ _ _ _ _
Board Means Policy being monitored: _ _ _ _ _ _ _

Review all sections of the policy listed and evaluate our compliance with policy.

1. **1.** Indicate item by item if you believe ❑Yes ❑No | Are we are in strict compliance with the policy as stated?
1. **2.** If you indicated that the Board is not in strict compliance with the policy as stated, please indicate what you notice that gives evidence that we are not in compliance?

1. **3.** How do you think we could improve our process to be in full compliance?

1. **4.** What do we need to learn or discuss in order to live by our policies more completely?

1. **5.** Is there anything about the content of this policy that needs consideration of the Board?

APPENDIX F: SHC Grievance Appeals Policy

SHC Grievance Appeals Policy

1. **1.** Both the claimant and respondent may appeal the SHC Grievance Committee decision

1. **2.** An appeal must allege one or more of the following:
    1. **2.1** The SHC Grievance Committee finding was arbitrary and capricious. A finding is arbitrary and capricious when the application of the policy has no reasonable basis in fact.
    2. **2.2** The SHC Grievance Committee finding resulted from procedural error. Procedural error includes bias or conflict of interest and consequently materially affected the outcome.
    3. **2.3** The sanction is clearly inappropriate or is not commensurate with the seriousness of the offense.

1. **3.** Appeals are filed online and must specify the basis for appeal in sufficient detail to justify further proceedings.
    1. **3.1** Sufficient detail being all evidence relevant to the cause for appeal

1. **4.** All appeals must be filed within 10 calendar days of the corresponding written notice of sanction or outcome
    1. **4.1** Extraneous circumstances may warrant an extension of time, but require majority approval of the SHC Board of Directors

1. **5.** The party filing the appeal bears the burden of proof to demonstrate the error of the SHC Grievance Committee

1. **6.** Each party will be provided one opportunity to respond in writing to an appeal filed by the other party.
    1. **6.1** The SHC Grievance Committee will also be provided one opportunity to respond in writing to any appeal of its decision.
    2. **6.2** Written responses to an appeal must be filed with the SHC Board within 3 calendar days of the written notice of appeal.
    3. **6.3** Copies of written responses will be shared with the other party/SHC Grievance Committee; additional rebuttal statements will not be accepted.

1. **7.** Appeals involving an eviction or dismissal will involve the Executive Director of the MSU Student Housing Cooperative, Inc. in an advisory role
    1. **7.1** All other appeals will be determined solely by the SHC Grievance Review Officer.
    2. **7.2** The SHC Grievance Review Officer is a neutral individual designated on an individual case basis by the Board of Directors to adjudicate appeals under this process.

1. **8.** The SHC Grievance Review Officer may confer with other parties as necessary and will be advised by general counsel.

1. **9.** New evidence will not be considered in an appeal unless the information was previously

unavailable to the party submitting it and the party acted with due diligence to obtain such evidence.

1. **10.** The SHC Grievance Review Officer will review the appeal, any written responses to the appeal, the SHC Grievance Committee investigation report, the sanction panel decision, and any victim impact/respondent mitigation statements filed regarding the sanction. The SHC Grievance Review Officer may request other relevant documents necessary to their review of the appeal

1. **11.** Both the Claimant and Respondent may request to meet with the SHC Grievance Review Officer during the Appeals process
    1. **11.1** The SHC Grievance Review Officer may choose to meet with a party if the SHC Grievance Review Officer deems it necessary for his/her/their review of the Appeal.
    2. **11.2** If the opportunity to meet is provided to one party, it will be provided automatically to the other party.
    3. **11.3** Providing such an opportunity shall not unreasonably delay the appeal process.

1. **12.** The SHC Grievance Review Officer will issue a written decision within 14 calendar days of receiving the appeal documents.

1. **13.** In appeals regarding the SHC Grievance Committee investigation finding, the SHC Grievance Review Officer may:
    1. **13.1** Uphold the SHC Grievance Committee investigation finding;
    2. **13.2** Determine that significant procedural errors occurred during the SHC Grievance Committee investigation and remand the matter to SHC Grievance Committee with instructions to re-open the investigation to clarify its findings or remedy procedural errors;
    3. **13.3** Determine that substantive and relevant new evidence has been presented that warrants additional investigation or review by SHC Grievance Committee; or
    4. **13.4** Reverse or modify the SHC Grievance Committee investigation finding based on a determination that the SHC Grievance Committee decision was arbitrary and capricious or resulted from procedural error.

1. **14.** In appeals of the sanction, the SHC Grievance Review Officer may uphold the sanction or alter the sanction if it is determined that the sanction is clearly inappropriate by breaking legal sanctions outside the co-ops or is not commensurate with the seriousness of the offense.

1. **15.** The decision of the SHC Grievance Review Officer is final and not subject to additional appeal.

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