[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 | ENDS: Create an empowered environment | Internal | | | |
| | 2.6.1 & 2.6.12 | Financial Conditions & Activities: Liquidity & House Audits | Internal | | | |
| | 4.2 | Accountability of the Executive Team | Direct Inspection | | | |
| | 4.4 | Monitoring Executive Team Performance | Direct Inspection | | | |
| **February** | 1.1.4 | ENDS: Live in safe and secure homes | Internal | | | |
| | 1.2 | ENDS: Under-served communities will flourish | Internal | | | |
| | 2.6 | Financial Conditions & Activities | Internal | | | |
| | 3.6 | Officer Roles | Direct Inspection | | | |
| | 3.9 | Cost of Governance | Direct Inspection led by Corporate Treasurer | | | |
| **March** | 1.0 | GLOBAL END | Internal | | | |
| | 1.1.6 | ENDS: Demonstrate social responsibility, ecological stewardship, and environmental sustainability | Internal | | | |
| | 2.7 | Asset Protection | Internal | | | |
| | 2.9 | Communication & Support to the Board | Direct Inspection by Corporate Sec, conduct Bod Survey | | | |
| | 3.1 | Governing Style | Direct Inspection - CGO led | | | |
| | 4.0 | Global Board-Cooperative Management Linkage | Direct Inspection | | | |
| | 4.1 | Unity of Control | Direct Inspection | | | |
| | 4.3 | Delegation to the Executive Team | Direct Inspection | | | |

| Month | # | Title | Type of Report | Frequency | Submit | Evaluate |
|---|---|---|---|---|---|---|
| **April** | 1.1.1 | ENDS: Actively Participate in the co-op movement | Internal | | | |
| | 1.1.5.1 | ENDS: Promote & practice consent culture | Internal | | | |
| | 2.5 | Financial Planning/Budgeting (by Mar 31) | Internal | | | |
| | 2.7 | Asset Protection | Internal | | | |
| | 3.3 | Board Job Description | Direct Inspection | | | |
| | 3.7 | Board Committee Principles | Direct Inspection | | | |
| | 3.8 | Board Committee Structure | Direct Inspection | | | |
| **May** | 1.1.3 | ENDS: Be exposed to diversity | Internal | | | |
| | 2.7 | Asset Protection | Internal | | | |
| | 3.0 | Board Job Description | Direct Inspection | | | |
| **July** | 1.1.4 | ENDS: Live in safe and secure homes | Internal | | | |
| | 1.4 | ENDS: The cooperative movement | Internal | | | |
| | 2.2 | Treatment of Households | Internal | | | |
| | 2.3 & 2.4 | Treatment of Workers / Compensation & Benefits | Internal | | | |
| | 3.4 | Board Members' Code of Conduct | Direct Inspection | | | |
| | 3.9 | Governance Investment | Direct Inspection | | | |
| **August** | 1.1.5 | ENDS: Create an empowered environment | Internal | | | |
| | 2.6.12 | House Deficits | Internal | | | |
| | 2.6.1 | Financial Liquidity | Internal | | | |
| | 4.2 | Accountability of the Executive Team | Direct Inspection | | | |
| **September** | 1.0 | ENDS: Global Statement | Internal | | | |
| | 1.1.5.1 | ENDS: Promote & practice consent culture | Internal | | | |
| | 2.0 | Global Executive Constraint | Internal | | | |
| | 3.3 | Board Job Description | Direct Inspection | | | |
| | 3.5 | Agenda Planning | Direct Inspection | | | |
| **October** | 1.1.6 | ENDS: Demonstrate social responsibility, ecological stewardship, and environmental sustainability | Internal | | | |
| | 1.3 | ENDS: Neighbors | Internal | | | |
| | 2.6.12 | House Deficits | Internal | | | |

| Month | # | Title | Type of Report | Frequency | Submit | Evaluate |
|---|---|---|---|---|---|---|
| | 2.6.1 | Financial Liquidity | Internal | | | |
| | 2.9 | Communication & Support to the Board | Internal | | | |
| | 3.2 | Shared Values | Direct Inspection | | | |
| | 3.7 | Board Committee Principles | Direct Inspection | | | |
| | 3.8 | Board Committee Structure | Direct Inspection | | | |
| **November** | 1.1.1 | ENDS: Actively participate in the coop movement | Internal | | | |
| | 1.1.2 | ENDS: Live in an intentional community | Internal | | | |
| | 2.1 | Treatment of Member-Residents | Internal | | | |
| | 3.1 | Governing Style | Direct Inspection | | | |
| | 3.4 | Board Members' Code of Conduct | Direct Inspection | | | |
| **December** | 1.1.3 | ENDS: Be exposed to diversity | Internal | | | |
| | 2.6 | Financial Condition and Activities | Internal | | | |
| | 3.0 | Global Governance Commitment | Direct 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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