Support Person Designation and Acknowledgment

Complainants\(^1\) and Respondents\(^2\) are permitted to designate one individual to serve as a Support Person during the University's student conduct process. The Support Person may be any individual chosen by a Complainant or Respondent who has agreed to serve in that role, provided that the Support Person may not also be a witness, Person Reporting\(^3\) or another Respondent involved in the same allegations.

In order to designate a Support Person, Complainants and Respondents must submit this form, and the form must also be signed by the Support Person to demonstrate their agreement to serve in that role. A Complainant or Respondent may change their Support Person during the process by submitting a new Support Person Designation Form.

Once designated, a Support Person may:

- Accompany a Complainant or Respondent to any meeting or conversation related to an investigation including interviews with the investigator for the purpose of providing support, advice, and guidance;
- Ask reasonable questions related to procedure and scheduling;
- Be copied on case communications. Note that the investigator will make reasonable efforts to copy Support Persons on communications, but it remains the responsibility of Complainant and Respondent to keep the Support Person informed about communications and other aspects of the process.
- Confer with Complainant or Respondent during reasonable brief recesses requested by Complainant or Respondent. Complainant or Respondent may be asked to answer any question(s) previously posed to them at the meeting before taking a recess.

A Support Person may not:

- Speak on behalf of Complainant or Respondent, including answering questions for or on behalf of Complainant or Respondent;
- Impede the student conduct process or at in a manner that obstructs the investigator or disrupts the investigation process;
- Participate in the Administrative Conference (unless the Support Person is also designated as the Administrative Conference Advisor);
- Disseminate by any medium or form any information shared or learned throughout the student conduct process with anyone other than the Complainant or Respondent for whom they act as the Support Person, the investigator, and other relevant University administrators.

Support Persons who act outside of their role or who impede or obstruct the student conduct process by engaging in unreasonable, disruptive, harassing or retaliatory behavior may be excluded from a meeting or conversation and Complainant or Respondent may be required to proceed without a Support Person or identify an alternative Support Person.

Complainant/Respondent FERPA Waiver and Acknowledgment

By my signature below, I give my voluntary consent for the University of Oregon and Office of Investigations and Civil Rights Compliance to release and disclose all student conduct records and information related to me to the individual designated as my Support Person and to orally discuss the same with the individual designated as my

\(^1\) Individuals bringing forward allegations are referred to as Complainants.
\(^2\) Individuals responding to allegations are referred to as Respondents.
\(^3\) Person Reporting means any person who reports alleged misconduct to the University.
Support Person. I understand that under the Federal Education Rights and Privacy Act of 1974, no disclosure of my records can be made without my written consent unless otherwise provided for, in legal statutes and judicial decisions. I also understand that I may revoke this consent at any time except to the extent that action has already been taken upon this release.

I acknowledge that I have read this form and agree to abide by the University’s expectations for Support Persons.

I designate _______________________________ to serve as my Support Person in the student conduct process up to the Adjudication Phase of the process, at which time I will be required to separately designate an Administrative Conference Advisor.

Student Name ______________________________________________________

Student ID Number __________________________________________________

__________________________________________________________________

(Signature of Student)         (Date)

Support Person Acknowledgment

I agree to serve as the Support Person for the student listed above. I acknowledge that I have read this form and agree to abide by the University’s expectations for Support Persons. I will participate in an informational meeting or other training if required by the University.

Support Person Name _________________________________________________

__________________________________________________________________

(Signature of Support Person)         (Date)