AGENDA

Call to Order and Opening Remarks

Roll Call

Approval of Minutes (Action) ................................................................. Tab 1

Policy Revisions (Action) ................................................................. Tab 2

1. Policy 10 Ethics and Code of Conduct

Results of External Reviews (Information) ........................................ Tab 3

1. Comptroller’s Investigative Report – MTSU Athletic Department,
   August 29, 2019

2. Tennessee Department of Finance and Administration, Office of
   Criminal Justice Programs

Quarterly Report – Results of Internal Audit Reports (Information) ........ Tab 4

Closing Remarks

Adjourn Public Session

Non-Public Executive Session – Audits/Investigations (Information)

Adjourn Non-Public Executive Session
November 12, 2019

Approval of Minutes

Christine Karbowiak
Committee Chair

The Audit and Compliance Committee met on August 20, 2019. Minutes from the meeting are provided for review and approval.
The Audit and Compliance Committee met on Tuesday, August 20, 2019, in the MEC Meeting Room in the Miller Education Center at Middle Tennessee State University.

**Call to Order and Opening Remarks**
Committee Chair Christine Karbowiak called the meeting to order at 1:00 p.m. and welcomed everyone in attendance.

**Roll Call**
The following Committee members were in attendance: Trustees Tom Boyd, Christine Karbowiak, and Mary Martin. Trustee Steve Smith was unable to attend the meeting. A quorum was declared present. Also present were Trustees Samantha Eisenberg and Darrell Freeman Sr. President Sidney A. McPhee; Alan Thomas, Vice President for Business and Finance; Mark Byrnes, Provost; Joe Bales, Vice President for University Advancement; Andrew Oppmann, Vice President for Marketing and Communications; Deb Sells, Vice President for Student Affairs and Vice Provost for Enrollment and Academic Success; Brenda Burkhart, Chief Audit Executive; Heidi Zimmerman, University Counsel and Board Secretary; and, Kim Edgar, Assistant to the President and Chief of Staff were also in attendance.

**Approval of Minutes - Action**
The first agenda item was approval of the minutes from the May 29, 2019 Audit and Compliance Committee meeting. Trustee Boyd moved to approve the minutes from the May 29, 2019 meeting and Trustee Martin seconded the motion. A voice vote was taken and the motion to approve the minutes from the May 29, 2019 meeting of the Audit and Compliance Committee carried.
Annual Report for Audit and Consulting Services - Approval

The 2019 Annual Report for Audit and Consulting Services was presented by Ms. Burkhart for approval. Trustee Martin moved to approve the 2019 Annual Report for Audit and Consulting Services and Trustee Boyd seconded the motion. A voice vote was taken and the motion to approve the 2019 Annual Report for Audit and Consulting Services carried.

Results of External Reviews - Information

Ms. Burkhart presented the results of two external reviews. The Tennessee Department of Finance and Administration, Office of Criminal Justice Programs issued two reports concerning the on-site review of the Victims of Crime Act funding. There were no findings of noncompliance in the financial monitoring review. The report on program monitoring included five findings that have been addressed by management with corrective action. The Department of Finance and Administration agreed the corrective action adequately addresses the findings and is in compliance with the grant requirements.

The Office of the Comptroller of the Treasury released an investigative report concerning the misappropriation of funds by the former international recruiter in the Office of International Affairs from August 2012 through June 2016. The report included an internal control deficiency of improper reimbursements of meal per diem when meals were included in registration fees. This is not in compliance with policy. Corrective action taken by management includes a stricter review of the international recruiter’s travel. Also, the Business Office requires direct payment of expenses when possible and justification of expenses that require cash advances. Dr. McPhee stated that he will be issuing a letter to campus addressing travel policies/reimbursements. Trustee Karbowiak asked for the committee to be updated on the trial status including any MTSU employees required to be present as witnesses.

Ms. Burkhart also informed the committee that auditors from the Office of the Comptroller of the Treasury were on campus to complete the financial audit for fiscal year 2019.
**Compliance and Enterprise Risk Management Update - Information**

Ms. Gené Stephens, Assistant Vice-President for the Office of Compliance and Enterprise Risk Management, gave updates on the following. 1) Compliance and Risk Management Program Effectiveness – DOJ Measurements and Evaluation: The DOJ has added three additional questions to determine an organization’s compliance program performance. Ms. Stephens discussed the responses regarding the University’s compliance and risk management program to these questions. 2) Healthcare and HIPAA Compliance – University Pharmacy and Other Offices: Ms. Stephens provided the following updates regarding the University’s healthcare compliance activities. An Operational Guide for University Health Services and Campus Pharmacy has been created; Policy 85, HIPAA has been updated pursuant to regulatory updates by the Office of Civil Rights and the United States Department of Health and Human Services; Enhanced data security of email transmissions of protected health information and/or healthcare billing has been provided by the Information Technology Division; The University’s Speech and Audiology Clinic underwent a HIPAA compliance review and site visit at the request of a Program Assessor, with the results of the compliance review generally positive; All Health Services and Campus Pharmacy staff participated in annual electronic HIPAA training. 3) European Union General Data Protection Compliance: The University continues to monitor activities related to the European Union’s (EU) General Data Protection Regulation (GDPR) including monitoring the number of EU employment applicants and incoming students.

**Non-Public Executive Session**

The Committee adjourned the public session at 1:31 p.m. and entered non-public executive session at 1:33 p.m. to discuss risk assessment reports and audits and investigations. The non-public executive session adjourned at 2:45 p.m. The public session reconvened at 2:48 p.m. for the final agenda item.
**Risk Assessment Reporting - Action**

For 2019, the Divisions of Student Affairs, University Advancement, and Marketing and Communications performed, and provided, risk assessment reporting. In addition, a risk assessment report detailing university-wide risk and control activities was prepared. Trustee Martin moved to approve the risk assessment reports and Trustee Boyd seconded the motion. A voice vote was taken and the motion to approve the risk assessment reports carried.

**Adjournment**

With no further business, Trustee Martin made a motion to adjourn the meeting and Trustee Boyd seconded the motion. A voice vote was taken and the motion to adjourn the meeting carried. The meeting adjourned at 2:49 p.m.

Respectfully submitted,

Audit and Compliance Committee
DATE: November 12, 2019

SUBJECT: Policy Revisions

PRESENTER: Gené Stephens
Assistant Vice-President, Office of Compliance and Enterprise Risk Management

BACKGROUND INFORMATION:

Policy 10 Ethics and Code of Conduct

The proposed revisions are drafted to add investigatory procedures and an appeals process for all ethics investigations.
10 Ethics and Code of Conduct

Approved by Board of Trustees
Effective Date: _____________, 2019
Responsible Division: Business and Finance
Responsible Office: Compliance and Enterprise Risk Management
Responsible Officer: Assistant Vice President for Compliance and Enterprise Risk Management

I. Purpose

Middle Tennessee State University (MTSU or University) has a fiduciary responsibility to fulfill its overall mission in compliance with applicable policies, laws, regulations, rules, contracts, grants, and donor restrictions. As the University pursues its mission, it is committed to conducting its business in an ethical and law-abiding fashion; it will maintain a business culture that builds and promotes compliance consciousness.

The University is also committed to the core values of honesty, integrity, respect for diversity, engagement in the community, and commitment to non-violence. As part of the University’s core values, employees are expected to promote the best interests of students; treat others with respect and civility; conduct University business with the highest level of ethical standards and integrity; utilize University resources in a manner that avoids waste, fraud, and abuse; and maintain a culturally rich and diverse environment in which to work and learn. This policy sets forth standards of conduct to support these core values and, in so doing, to protect the reputation, credibility, financial well-being, and legal obligations of the University.

II. Scope

This policy applies to all employees of the University whether employed full-time, part-time, or temporary, and includes student workers where appropriate.

III. Policy

All employees of the University are expected to maintain the highest standards of honesty and integrity in the performance of their employment duties. Accordingly, the following are general standards of conduct related to an employee’s duty to the University.
A. Employees must comply with **Policy 12 Conflict of Interest**. Employees must refrain from using their position at the University, or any privileges obtained through employment at the University, in a manner that would unduly influence or result in a personal advantage to the employee or to the employee’s immediate family members. Employees shall not have any personal interest, financial or otherwise, or directly or indirectly engage in a business transaction or professional activity that conflicts with the proper performance and responsibilities of their duties in the course of University employment, or that provides the appearance of such conflict. As provided for in **Policy 12 Conflict of Interest**, employees must disclose information on the nature and extent of any financial interests in entities that do business with the University.

B. Employees must comply with **Policy 71 Preventing and Reporting Fraud, Waste, and Abuse**, and should become familiar with the reporting process.

C. Employees must comply with **Policy 814 Outside Employment, Extra Compensation, and Dual Services Agreements** as concerns employment outside of, and in addition to, the employee’s responsibilities at the University.

D. Employees shall not accept any compensation for their service as University employees from any source other than the University, except as may be otherwise provided in other policies such as **Policy 814 Outside Employment, Extra Compensation, and Dual Services Agreements**.

E. An employee shall not disclose the confidential information of the University obtained during the course of his/her employment, except as required by law, statute, a valid subpoena, or request by a government entity for educational or investigatory purposes. An employee shall not use such information for his/her personal gain or benefit. Such confidential information includes, but is not limited to, student educational records under the Family Educational Rights and Privacy Act (20 U.S.C. § 1232g; 34 CFR Part 99); pharmacy records, treatment records, medical records, and other protected health information; University business and financial records; and University patents, licenses, inventions, research, or other University intellectual property.

F. An employee shall not engage in conduct or actions that could provide the appearance or impression that improper influence over him/her could favorably affect the outcome of any University contract, award, rank, position, grant, or University-owned asset.

G. Employees must comply with **Policy 816 Nepotism**. An employee may not be in a direct supervisory line with his/her relative, nor may the employee participate in the process of review, recommendation, and/or decision making in any manner concerning hiring, opportunity, promotion, salary, retention, or termination of a relative.

H. Professional Values. Employees should demonstrate the following behaviors in carrying out fiscal and other professional transactions:
1. According respect to self and others;

2. Exhibiting commitment to both the University and organizational unit;

3. Accepting responsibility; and

4. Striving to enhance one’s own capabilities, and provide the highest quality of performance and counsel.

I. Employees shall, in the performance of their duties, be accountable for:

1. Knowing, supporting, and implementing the University’s and functional area’s operational plans;

2. Exercising prudence and integrity in the management of resources in their custody and in all fiscal transactions in which they participate;

3. Acting in a competent manner and in compliance with applicable policies, laws, regulations, and rules, contracts, grants, and donor restrictions;

4. Not knowingly being a party to, or condoning, fiscal misconduct;

5. Reporting fiscal misconduct as required by University policy;

6. Not knowingly signing, subscribing to, or permitting the issuance of any financial statement or report that contains any material misstatement or that omits any material fact;

7. Knowing and fulfilling the fiscal responsibilities set forth in University policy;

8. Preparing or presenting financial information as required by University policies; and

9. Protecting privileged or confidential information to which they have access by virtue of their position.

J. Healthy Workplace

1. Employees shall not, in the performance of their duties:

   a. Commit abusive conduct against another employee, subordinate, administrator, Board Trustee, or any persons doing business with, or in relation to, the University.
b. Assist another employee in committing abusive conduct in the workplace.

c. Exhibit and/or commit workplace bullying against another employee.

d. Retaliate against any employee who reports incidences of abusive conduct in the workplace, and/or commit such acts of retaliation as defined in Section VII of MTSU Policy 710 Violence on Campus.

2. “Abusive conduct” shall have the same meaning as defined within the Healthy Workplace Act, T.C.A. § 50-1-502, as “any acts or omissions that would cause a reasonable person, based on the severity, nature, and frequency of the conduct, to believe that an employee was subject to an abusive work environment, such as:

a. Repeated verbal abuse in the workplace, including derogatory remarks, insults, and epithets;

b. Verbal, non-verbal, or physical conduct of a threatening, intimidating, or humiliating nature in the workplace; or

c. The sabotage or undermining of an employee’s work performance in the workplace.

3. “Abusive conduct” does not include:

a. A single act, unless such conduct is determined to be severe and egregious.

b. Disciplinary procedures in accordance with MTSU policies and procedures.

q. Routine coaching and counseling, including feedback about and/or correction of work performance.

d. Reasonable work assignments, including shift, post, and overtime assignments.

e. Individual differences in styles of personal expression.

f. Passionate, loud expression with no intent to harm others.

g. Differences of opinion on work-related concerns or matters.

h. The non-abusive exercise of managerial prerogative.

i. Other, similar non-abusive behavior.

j. Expressive activity protected by federal or state law.
4. Complaints regarding abusive conduct should be submitted to the Assistant Vice President for Human Resources, or his/her designee, and investigated pursuant to university policies and practices. Employees who violate this policy by engaging in abusive conduct will be subject to discipline, up to and including termination.

K. Ethics Training. Employees shall complete online Ethics training on an annual basis in furtherance of MTSU’s community values, mission, and compliance program.

L. Appropriate Use of University Resources

University resources are an important part of the successful delivery of both academic and support services to MTSU’s students and community constituents. All employees of the University are entrusted with the responsibility of preserving University resources, using those resources in a prudent manner for their designated purposes, and are entrusted with fiscal responsibility for their functional area of responsibility. Accordingly, University resources should only be used in furtherance of the University’s mission and operations. Inappropriate use of University resources includes, but is not limited to:

1. Faculty or staff utilizing students or other University employees to advance the faculty or staff member’s personal, monetary, or political interests.

2. Granting external entities access to University services, information, technology, or resources for personal gain.

3. Inappropriate use or misuse of computer or information technology resources in violation of MTSU Policy 910 Information Technology Resources.

M. Fiscal Code of Conduct

1. All Banner Finance users, HRBanner users, procurement card (P-Card) users, and other specified employees shall demonstrate their awareness of, and compliance with, the University’s Fiscal Code of Ethics through the acknowledgement process that follows.

2. Acknowledgment Process. The applicable Fiscal Code of Ethics statement must be signed, as monitored by the responsible party identified in parentheses:

   a. By employees upon signing their letter of offer for employment with the University (the respective department or college);
b. By individuals requesting access to the University’s Finance System/MT$ource as Finance System Users, prior to receiving such access (the appropriate University Finance System Access Security Coordinator);

c. By individuals requesting access to the University’s HRBanner and by HRBanner users prior to receiving such access (the appropriate University HRBanner Access Security Coordinator);

d. By individuals asking for authority as a P-Card user, prior to receiving such authority (Procurement Services);

e. By all the principal investigators, project directors, and everyone associated with a grant, as may be required by the terms of the grant or relevant laws, regulations, or policies; and

f. By other employees as required by his/her Vice President.

3. If an individual fails to sign the statement as required, the respective Finance System, HRBanner, or P-Card access will not be provided. If the individual already has access, then the access will be withdrawn. The failure to sign will be reported to the relevant supervisor for appropriate action. Employees who fail to sign as required will be deemed to have failed to meet a condition of their appointment/employment.

IV. Investigatory Process

A. The Office of Compliance and Enterprise Risk Management (CAERM) will meet with the employee who is accused of the alleged ethics violation under this policy.

B. The initial meeting will include:

1. Fact-finding.

2. A review of this policy.

C. Upon completion of the initial meeting, CAERM will perform a review of any relevant materials associated with the ethics allegations, including interviews of individuals who may have relevant information related to the allegations.

D. After a review of all associated materials and the information gathered from all interviews, the Assistant Vice President of CAERM will make a written determination and decision, and will provide the decision together with any recommendations to one (1) or more of the following individuals based on the nature or subject matter, scope, and severity of the case, for further actions, including any disciplinary action:
1. Assistant Vice President of Human Resources

2. Vice President of Business and Finance

3. Office of the University Counsel

4. Audit and Consulting Services

5. Office of Institutional Equity and Compliance

6. The employee’s direct supervisor, manager, and/or Division Vice President.

E. The employee-subject of the ethics investigation will receive a copy of the determination/decision and recommendations issued by CAERM for his/her review, as well as for any further discussion, procedures, and/or disciplinary action by any of the individuals and entities mentioned in Section IV.D.1-6 above. Any additional procedures concerning the outcome, discipline, and next steps determined from the investigation and decision by the Assistant Vice President of CAERM shall be consistent with University policy and Human Resources procedures.

V. Appeals

The employee shall have the right to appeal decision issued by CAERM by submitting a request to the Vice President of Business and Finance within fifteen (15) business days of the date of the issued recommendation and decision. The employee’s appeal must:

A. State the basis for the appeal (i.e. untimely length of the investigation/review; disagreement with the decision issued by the Assistant Vice President of CAERM; and/or disagreement regarding the handling of the investigation/review).

B. Provide a statement and/or documentation to support the employee’s position.

The determination of the Vice President of Business and Finance will be final. Such determination will be issued to the employee by email within ten (10) business days of the date of the final determination.

VI. Enforcement

The Ethics Advisor for MTSU is the Assistant Vice President for CAERM. All allegations of ethics violations should be forwarded to the Office of Compliance and Enterprise Risk Management at carem@mtsu.edu for initial review and investigation.

Forms: none.
Revisions: June 5, 2017 (original); April 3, 2019; ________, 2019.

Last Reviewed: _______ 2019.

References: Policies 12 Conflict of Interest; 71 Preventing and Reporting Fraud, Waste, and Abuse; 710 Violence on Campus; 814 Outside Employment, Extra Compensation, and Dual Services Agreements; 816 Nepotism; 910 Information Technology Resources; Family Educational Rights and Privacy Act; Healthy Workplace Act, T.C.A. § 50-1-502 et. seq.
10 Ethics and Code of Conduct

Approved by Board of Trustees
Effective Date: April 3, 2019, 2019
Responsible Division: Business and Finance
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c. By individuals requesting access to the University’s HRBanner and by HRBanner users prior to receiving such access (the appropriate University HRBanner Access Security Coordinator);

d. By individuals asking for authority as a P-Card user, prior to receiving such authority (Procurement Services);

e. By all the principal investigators, project directors, and everyone associated with a grant, as may be required by the terms of the grant or relevant laws, regulations, or policies; and

f. By other employees as required by his/her Vice President.

3. If an individual fails to sign the statement as required, the respective Finance System, HRBanner, or P-Card access will not be provided. If the individual already has access, then the access will be withdrawn. The failure to sign will be reported to the relevant supervisor for appropriate action. Employees who fail to sign as required will be deemed to have failed to meet a condition of their appointment/employment.

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A-B. The initial meeting will include:

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D. After a review of all associated materials and the information gathered from all interviews, the Assistant Vice President of CAERM will make a written determination and decision, and will provide the decision together with any recommendations to one (1) or more of the following individuals based on the nature or subject matter, scope, and severity of the case, for further actions, including any disciplinary action:
1. Assistant Vice President of Human Resources
2. Vice President of Business and Finance
3. Office of the University Counsel
4. Audit and Consulting Services
5. Office of Institutional Equity and Compliance
6. The employee’s direct supervisor, manager, and/or Division Vice President.

E. The employee-subject of the ethics investigation will receive a copy of the determination/decision and recommendations issued by CAERM for his/her review, as well as for any further discussion, procedures, and/or disciplinary action by any of the individuals and entities mentioned in Section IV.D.1-6 above. Any additional procedures concerning the outcome, discipline, and next steps determined from the investigation and decision by the Assistant Vice President of CAERM shall be consistent with University policy and Human Resources procedures.

V. Appeals

The employee shall have the right to appeal decision issued by CAERM by submitting a request to the Vice President of Business and Finance within fifteen (15) business days of the date of the issued recommendation and decision. The employee’s appeal must:

A. State the basis for the appeal (i.e. untimely length of the investigation/review; disagreement with the decision issued by the Assistant Vice President of CAERM; and/or disagreement regarding the handling of the investigation/review).

B. Provide a statement and/or documentation to support the employee’s position.

The determination of the Vice President of Business and Finance will be final. Such determination will be issued to the employee by email within ten (10) business days of the date of the final determination.

IV. Enforcement

The Ethics Advisor for MTSU is the Assistant Vice President for CAERM. All allegations of ethics violations should be forwarded to the Office of Compliance and Enterprise Risk Management at carem@mtsu.edu for initial review and investigation.
Recommendations from the Office of Compliance and Enterprise Risk Management made after any ethics investigation may be reported to the Assistant Vice President for Human Resource Services; the Office of Audit and Consulting Services; and/or the Office of the University Counsel for an additional determination concerning disciplinary action.

Forms: none.

Revisions: June 5, 2017 (original); April 3, 2019;_______, 2019.

Last Reviewed: April______ 2019.

References: Policies 12 Conflict of Interest; 71 Preventing and Reporting Fraud, Waste, and Abuse; 710 Violence on Campus; 814 Outside Employment, Extra Compensation, and Dual Services Agreements; 816 Nepotism; 910 Information Technology Resources; Family Educational Rights and Privacy Act; Healthy Workplace Act, T.C.A. § 50-1-502 et. seq.
BACKGROUND INFORMATION:

1. Comptroller’s Investigative Report – MTSU Athletic Department, August 29, 2019

The Office of the Comptroller of the Treasury released a report concerning an investigation of selected records of the Athletic Department on August 29, 2019. The selected records were reviewed for the period August 2015 through June 2018. The results of the investigation concluded an associate athletic director used his university purchasing card to make a questionable purchase totaling $3,500 and department staff used university purchase credit from a sports fitness company to provide shoes and sports apparel to family and friends totaling at least $34,084. The report also included an internal control deficiency of inadequate oversight of use of sponsorship trade. The report concluded that management of the Athletic Department indicated they were establishing new practices and procedures to correct the findings and the internal control deficiency disclosed in the report. The audit report is located on the Comptroller’s website:

2. Tennessee Department of Finance and Administration, Office of Criminal Justice Programs

The Tennessee Department of Finance & Administration, Office of Criminal Justice Programs Fiscal Unit conducted a financial desk review on October 17, 2019 of the STOP (Services, Training, Officers, Prosecutions) funding for the fiscal year ending June 30, 2020. The current year maximum funding is $60,000.

The financial monitoring review objectives were: 1) to assess the reliability of internal controls, 2) to test the reliability of the financial reporting, 3) to test if costs and services are allowable and eligible, and 4) to verify contractual compliance. There were no findings of noncompliance.
DATE:  November 12, 2019

SUBJECT:  Quarterly Report – Results of Internal Audit Reports

PRESENTER:  Brenda Burkhart
Chief Audit Executive

BACKGROUND INFORMATION:

MTSU Policy 70 Internal Audit section IX.F requires significant results of internal audit reports be presented to the Audit and Compliance Committee quarterly.

Since the last meeting of the Audit and Compliance Committee, the following two audit projects have been completed:

1. Cash Counts at June 30, 2019 with no reportable issues.
2. Audit of Inventories for Fiscal Year Ended June 30, 2019 concluded the year-end inventory counts were accurate and in compliance with the inventory procedures. Due to errors in the valuation of the Printing Services inventory, the report included a recommendation for Printing Services to include valuation instructions in the inventory procedures.

The current status of the Internal Audit Plan for Fiscal Year 2020 is included for the Committee’s review.
<table>
<thead>
<tr>
<th>Type</th>
<th>Area</th>
<th>Audit Project</th>
<th>Current Status</th>
<th>Audit Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>FM</td>
<td>Year-End Inventory FY2019</td>
<td>Report Issued 10/31/2019</td>
<td>1 Recommendation</td>
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<tr>
<td>R</td>
<td>FM</td>
<td>Cash Counts FY2019</td>
<td>Memo to Management 9/26/19</td>
<td>No Reportable Issues</td>
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<td>R</td>
<td>GV</td>
<td>Audit of President's Office</td>
<td>Draft Report</td>
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<td>INV1702</td>
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<td>INV1801</td>
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<td>INV1904</td>
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<td>Football Attendance Fall 2019</td>
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<tr>
<td>F</td>
<td>GV</td>
<td>State Audit Assistance/Follow-Up</td>
<td>Project Throughout Year</td>
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<td>C</td>
<td>GV</td>
<td>General Consultation</td>
<td>Project Throughout Year</td>
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<td>FM</td>
<td>Cash Counts FY2020</td>
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<tr>
<td>R</td>
<td>FM</td>
<td>Year-End Inventory FY2020</td>
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<tr>
<td>P</td>
<td>GV</td>
<td>IIA - Self Assessment &amp; QAR</td>
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<tr>
<td>S</td>
<td>AA</td>
<td>Use of Aircraft</td>
<td>Draft Report</td>
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<tr>
<td>S</td>
<td>AA</td>
<td>Use of Mobile Production Truck</td>
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<td>AA</td>
<td>Research Services Procedural Review</td>
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<tr>
<td>A</td>
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<td>Property Management Contract Review</td>
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**Audit Types:**

- **A** - Risk-Based (Assessed)
- **C** - Consulting
- **F** - Follow-up Review
- **I** - Investigation
- **M** - Management's Risk Assessment
- **P** - Project (Ongoing or Recurring)
- **R** - Required
- **S** - Special Request

**Area = University Division**

- **AA** - Academic Affairs
- **AD** - Advancement
- **AT** - Athletics
- **FM** - Financial Management
- **GV** - Governance/Executive Office
- **IT** - Information Technology
- **MC** - Marketing and Communications
- **SS** - Student Services