AGENDA

FLORIDA GULF COAST UNIVERSITY BOARD OF TRUSTEES AND AUDIT AND COMPLIANCE COMMITTEE CONFERENCE CALL MEETING

Tuesday, February 19, 2019  10 a.m. to (estimated) 11 a.m.

CALL WILL ORIGINATE FROM EDWARDS HALL, ROOM #309 FLORIDA GULF COAST UNIVERSITY

Indicated times within the agenda are approximate and are subject to change. Agenda items may be taken out of order at the call of the Chair and with the concurrence of the Board.

10 a.m.  Call to Order, Roll Call, and Opening Remarks – Chair Blake Gable

10:05 a.m.  Update on Student Success and Enrollment Management Initiative – President Mike Martin

10:10 a.m.  Consent Agenda (Includes Public Comment) – Chair Blake Gable

- Minutes of January 8, 2019 Meeting of FGCU Board of Trustees (TAB #1)

10:15 a.m.  Audit and Compliance Committee (Includes Public Comment) – Committee Chair Joseph Fogg III and Members Darleen Cors, Leo Montgomery, and Stephen Smith

Committee Action:

- Minutes of December 3, 2018 Meeting of Audit and Compliance Committee (TAB #2) – Committee Chair Joseph Fogg III
- Florida Gulf Coast University Performance Based Funding Data Integrity Audit for Board of Governors – Director of Internal Audit William Foster (TAB #3)
10:30 a.m.  Recommendation by Audit and Compliance Committee – Chair Blake Gable

**Board Action:**
- Florida Gulf Coast University Performance Based Funding Data Integrity Audit for Board of Governors – Audit and Compliance Committee Chair Joseph Fogg III (TAB #3)

10:45 a.m. Old Business – Chair Blake Gable

10:50 a.m. New Business – Chair Blake Gable

10:55 a.m. Closing Remarks, and Adjournment – Chair Blake Gable

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Florida Gulf Coast University Board of Trustees  
February 19, 2019

SUBJECT: Minutes of January 8, 2019 Meeting

PROPOSED BOARD ACTION

Approve minutes

BACKGROUND INFORMATION

The Florida Gulf Coast University Board of Trustees met on January 8, 2019. Minutes of the meeting were kept as statutorily required.

Supporting Documentation Included: Minutes of January 8, 2018 Meeting

Prepared by: Transcription Experts and Assistant Director of Board Operations
Tiffany Jackson

Legal Review: N/A

Submitted by: Vice President and Chief of Staff Susan Evans
FLORIDA GULF COAST UNIVERSITY BOARD OF TRUSTEES

Tuesday, January 8, 2019

COHEN CENTER BALLROOM, ROOM #203
Florida Gulf Coast University

Meeting Minutes

Members:
Present: Trustee Blake Gable – Chair; Trustee Robbie Roepstorff – Vice Chair; Trustee Ashley Coone; Trustee Darleen Cors; Trustee Richard Eide, Jr.; Trustee Joseph Fogg III; Trustee Mike McDonald; Trustee Leo Montgomery; Trustee Kevin Price; Trustee Kenneth Smith (by phone); Trustee Stephen Smith; and Trustee Jalisa White.

Not Present: Trustee Christian Spilker (Excused Absence).

Others:
Staff Advisory Council (SAC) President Missy Berkley.

Staff: President Mike Martin; Provost and Vice President for Academic Affairs James Llorens; Vice President for Administrative Services and Finance, and Executive Director of FGCU Financing Corporation Steve Magiera; Vice President for University Advancement, and Executive Director of FGCU Foundation Chris Simoneau; Vice President and Chief of Staff Susan Evans; Vice President and General Counsel Vee Leonard; Vice President for Student Success & Enrollment Management Mitchell Cordova; Senior Vice President for Strategy and Program Innovation Mike Rollo; Director of Internal Audit Bill Foster; Director of Equity, Ethics and Compliance, and Title IX Coordinator Precious Gunter; Director of Operations Tiffany Reynolds; Assistant Director of Board Operations Tiffany Jackson Tramontozzi; Project Manager Melissa Pind; and Executive Assistant to the Vice President and Chief of Staff Bruna Ugolotti.

Item 1: Call to Order, Roll Call, and Welcome to New Trustee Ashley Coone
Chair Blake Gable called the meeting to order at 8:30 a.m. and stated that the noticed meeting was originating from the Cohen Center Ballroom on the campus of Florida Gulf Coast University. He requested Vice President and Chief of Staff Susan Evans call the roll. Roll call was taken with 12 of 13 members present, thus meeting quorum requirements. Trustee Christian Spilker was granted an excused absence.

Chair Gable welcomed new Trustee Ashley Coone, a graduate of FGCU, appointed to the FGCU Board of Trustees by Governor Rick Scott. Chair Gable asked Trustee Coone to say a few words. Trustee Coone thanked Chair Gable and stated not only was she an FGCU graduate, she was a former employee, and as such she brought
experience and passion for FGCU to the Board. She stated she was excited to serve on the FGCU Board of Trustees.

**Item 2: Consent Agenda (See Tabs #1-3)**

Chair Gable stated there were three items on the Consent Agenda: (1) Minutes of December 7, 2018 Meeting; (2) Resolution of Appreciation for Outgoing Trustee Russell Priddy; and (3) Eleventh Amendment and Restatement of FGCU Foundation Bylaws.

Chair Gable called for a motion to approve the Consent Agenda.

Trustee Darleen Cors made a motion to approve the Consent Agenda. Trustee Robbie Roepstorff seconded the motion. There was no public comment, or Board discussion.

The vote was 10-0 in favor of the motion.

**Item 3: Presentation of Resolution of Appreciation for Outgoing Trustee Russell Priddy**

President Mike Martin and Chair Gable presented outgoing Trustee Russell Priddy the Resolution of Appreciation, which was read into the record by Vice President and Chief of Staff Susan Evans:

“No...”

Mr. Priddy stated it was an honor and privilege to serve on the FGCU Board of Trustees and to serve the students at Florida Gulf Coast University (FGCU) with the wonderful faculty and staff. He stated he enjoyed his seven years of service. He specifically thanked Vice President and Chief of Staff Susan Evans, Trustee Robbie Roepstorff, and...
Chair Gable stated Mr. Priddy demonstrated exceptional dedication and devotion to FGCU. He said Mr. Priddy was a remarkable supporter of the University, and it was because of people like him that allowed FGCU to become what it is. President Martin concurred and thanked Mr. Priddy for his assistance and for his commitment to FGCU.

**Item 4: Student Success – Enrollment Management Initiative (TAB #4)**

Vice President Mitchell Cordova reported when the Student Success Initiative was launched in March 2018 the critical nature of getting the freshmen cohort off to a good start was a priority. He stated this was a program geared to launch the first year students into success. He reported the program was advertised on campus as Take Flight Eagles in 22 and housed in the Office of First Year Experience (FYE) and Retention Programs within the new Academic Engagement Unit. He explained prior to launching the program the freshmen were surveyed following orientation, but prior to enrollment in classes with the following findings: 68% of students surveyed indicated FGCU was their first choice school (in 2016 62% indicated FGCU was the first choice), and 7% indicated a plan to transfer (in 2016 12% planned to transfer). He reported of those surveyed: 96% planned to graduate from FGCU in 4 years or less, 42% indicated a status of first generation college student, 54% planned to work to finance their education, 33% indicated a combined family income below $50,000 per year, and 7% indicated a need to work to support a family. He explained the purpose of the survey was to better understand the University’s demographic and to provide a baseline for future annual surveys. He stated 83% of surveyed students were confident in the ability to be successful in college; however, many students expressed concern regarding their ability to manage time, to study with distractions, to write effectively, and to develop effective study skills. He reported 50% of students surveyed cited mental health as a significant concern. He stated FGCU had invested in the new Student and Community Counseling Center to help address student and community mental health needs. He reported 41% of students cited concern regarding physical health and said the construction of the University Recreation and Wellness Center would be critical in helping improve overall health and well-being. He stated 70% of students felt a sense of community was important, which was what the FYE was all about – trying to get students connected to campus. He indicated a successful student was a connected and engaged student.

Dr. Cordova explained the program’s purpose was to acquaint first year students with campus resources to help them to be successful while fostering an active engagement to campus; getting them involved with different organizations and departments which offered help to students; and increasing the level of engagement and connection to FGCU. He stated students learned about the Eagles in 22 program during orientation and registration began during the Weeks of Welcome and continued throughout the semester. He indicated registration in the program was not mandatory; however, 2,729 of 2,901 first year students registered (94% of the entering freshman class). He
explained EAGLES was an acronym and the pillars of the program: Engagement, Academic Success, Global Perspectives, Lifestyle, Exploration, and Sustainability. He indicated there were a number of expectations for each pillar: Engagement - attendance during at least one Weeks of Welcome event; Academic success - attendance during various workshops, coaching sessions, tutoring sessions, supplemental instruction sessions and meetings with instructors; Global perspective - mandated participation in a diversity inclusion certificate program; Lifestyle - mandated completion of “My Student Body” (an interactive online wellness tool which focused on drugs, alcohol and sexual violence); Exploration - two mandated academic advisor meetings (one at the beginning and one at the middle of the semester); and Sustainability - mandated visit to the FGCU Food Forest.

Dr. Cordova indicated there were students not registered in the Eagles in 22 program who also participated in various events. He stated 95% of the total first-time-in-college (FTIC) cohort attended at least one Weeks of Welcome event; 98% attended the required new student meeting with an advisor; and 97% completed a preregistration advisor meeting for the spring term. He reported 8% met with a student success coach (staff who meet with students one-on-one and help them to improve their study habits) and only 17% attended supplemental instruction sessions. He reported 20% attended tutoring sessions which he viewed as favorable, but felt could improve. He stated 20% attended an approved diversity inclusion event; he also wished this number were higher. He reported 95% completed “My Student Body,” 96% completed the “Hazing Prevention” module, and 97% completed the “Active Shooter Training;” however, those three modules were required. He said that if students did not complete these, there were mandatory advising holds placed on the student record, and they would be unable to register for classes until completed.

Dr. Cordova reported of the students who registered for Eagles in 22, 95% enrolled for the spring 2019 term, while 5% who participated in Eagles in 22 did not. Conversely, of those students who did not participate in Eagles in 22, only 48% enrolled for the spring term, and 52% did not. Dr. Cordova mentioned there was a pretty sharp contrast between students who were engaged and those who were not engaged. He indicated the students who participated in Eagles in 22 held an average GPA of 2.87; those who did not participate held an average GPA of 1.98. He said those referenced students who did not participate in Eagles in 22 and who had a GPA below 2.0 were placed on Academic Warning. He reported students who participated in Eagles in 22 earned an average of 12 credit hours, while those who did not earned an average of 9 credit hours. He stated this year’s overall GPA for the freshman cohort was 2.81; last year (fall semester 2017) the average GPA was 2.77. He stated this demonstrated a dramatic increase for the Eagles in 22 students in GPA, as well as in student retention. He stated there appeared to be a direct correlation between participation in student activities and GPA. He stated 13% of students who participated in Eagles in 22 fell below a 2.0 GPA; 45% of students who did not participate fell below a 2.0 GPA. He explained the results were clear: engagement mattered.
Dr. Cordova stated the FYE and Retention Program was looking to expand resources to increase more sections of the SLS 1101 (The University Transition), a course which was focused on students acquiring academic skill development for courses with high D, F, W rates, such as college algebra, English, biology, etc. He explained these were courses designed to help students be successful in difficult courses and were taken during the same semester as the problematic course. He reported task forces were examining Living Learning Communities (LLC) programs to understand the efficacy. He stated there also was consideration regarding bringing back the common read program, which was the reading of a common book by students, faculty and staff, who then engaged in activities centered about the book. He stated a pre-semester immersion pilot program was being considered next fall for freshman students. He explained this pre-semester immersion was essentially an extension of the orientation session which focused specifically on critical topics which would not be covered during orientation.

He concluded he believed the new comprehensive FYE program was working well and producing positive outcomes. He stated the South Village Residence Hall Complex would continue to be the FYE destination. He explained 80% of freshmen lived in South Village. He reported planning for Eagles in 23 was well underway.

Trustee Richard Eide thanked Dr. Cordova for the presentation and asked if there were comparison statistics between 2016 and 2018 for all of the reported numbers. Dr. Cordova responded that it was a different survey than what was conducted in 2016 and not all of the questions aligned. Trustee Eide asked if the SLS 1101 University Transition courses were a new endeavor. Dr. Cordova responded that the classes had been available since 2013, however, the focus evolved over time to better meet the needs of students.

Trustee Joseph Fogg asked why only 50% of the students participated in the survey. Dr. Cordova responded the survey was voluntary; he wished more would participate. Trustee Fogg asked if a 50% response rate made the survey statistically valid. Dr. Cordova responded in the affirmative. Trustee Fogg noted only 6% of the first-year students did not register for the program. Dr. Cordova concurred; approximately 232 students did not register. Trustee Fogg asked about the diversity and inclusion certificate. Dr. Cordova responded it was a certificate which met the diversity and inclusion expectations and competencies at the University. Trustee Fogg asked for an explanation of the FGCU Food Forest. Dr. Cordova responded it was an area on campus in which students grew vegetables and learned about sustainable food sources.

Trustee Fogg asked how an academic advisor differed from a success coach and was it mandatory to visit a success coach. Dr. Cordova responded a success coach was staff within the Center for Academic Achievement (CAA), not the University Advising Services staff. He explained success coaches helped students acquire non-cognitive factors such as study habits, time management, etc. He stated students were not mandated to visit success coaches. Trustee Fogg inquired about “My Student Body.” Dr. Cordova explained “My Student Body” was a required interactive online module which taught the negative effects of alcohol and drugs, sexual violence, etc. Trustee
Fogg stated 20% of students attended tutoring sessions. He indicated, contrary to Dr. Cordova’s opinion, he felt this number should be lower. Dr. Cordova stated research was going into what type of students attended tutoring sessions, “B” students could be going into tutoring session wanting an “A”, or it could be failing students wanting to pass. Trustee Fogg asked if tutors were students or staff. Dr. Cordova responded both, as staff and peer tutors were available.

Trustee Roepstorff said that this was the data that the Board had been looking for and stated it was excellent information which demonstrated the importance of student engagement. She asked if the study would be published and made available to students so that they could see the outcomes of the data. Dr. Cordova agreed that it was a great question and stated that it could be published on the First Year Experience and Retention Programs’ webpage.

Trustee Cors asked how long it took for a student to see an advisor. Associate Vice President of Academic Engagement Andrew Cinoman responded it depended on if the student was seen by first year advising, exploratory advising, or in-college advising, as well as the ratio of student to advisor. He stated he understood in high traffic areas the delay had improved from 5 weeks to 2 weeks, while in low traffic areas appointments were made within a couple of days.

Trustee Roepstorff asked if the goal was to have it be a week or less wait time for any student needing advising. Dr. Cinoman responded that it depended on the area and agreed that would be a good goal to have. He said that it depended on the advisor-to-student ratio at the time that the student decided to come in for an appointment. Trustee Roepstorff asked if advising and tutoring were one in the same. Dr. Cinoman stated that advising and tutoring were within the same unit of Academic Engagement but that the tutoring process was in the Center for Academic Achievement, which was a different department.

Trustee Roepstorff inquired about the timeframe in scheduling tutoring appointments. Director of the Center for Academic Achievement (CAA) P. Brandon Johnson explained tutoring appointments could be made online for next day sessions. He indicated a culture of proactivity was being promoted as opposed to “drop-by” tutoring. He explained this would prevent students from dropping by for a tutoring session an hour before a test, and allowed time for students to implement strategies learned from tutors. He stated over 30 subjects were supported through the CAA, mostly general education (1000 and 2000 level courses). He reported a tutoring pilot program was being implemented for several nursing program courses. He explained the supplemental instruction for the high D, F, W rate courses was conducted with a more drop-in feel. He stated tutoring was conducted by small group sessions, with no more than three students and which students could register days in advance and for ongoing tutoring sessions throughout the semester. He indicated students who scheduled ongoing tutoring sessions gained the best results.
President Martin said that geographically rearranging the campus also was being considered so there would be a one-stop-shop for all of these services around the center of campus. He said that was part of the reason why Counseling and Psychological Services (CAPS) was relocating to a new building as well as Adaptive Services.

Trustee Mike McDonald thanked Dr. Cordova for the presentation; he said he found the preliminary findings to be encouraging. He asked how completion of the required Eagles in 22 activities were tracked. Dr. Cinoman responded that there were two primary ways that students could track their activities. He stated that the student could track his own progress through the Eagles in 22 website, or a department could share the information with the FYE and Retention Programs office. Dr. Cinoman stated eventually EagleLink would be used as it was more efficient and would allow departments to enter data. Trustee McDonald asked how students were kept accountable. Dr. Cinoman responded it depended upon the area; for example a student could not register prior to seeing an advisor for a new student meeting, as a hold would be placed on the student’s account until this was completed.

Trustee Kevin Price asked what the Soar in 4 program was and how the user experience differed from the Eagles in 22 program. Dr. Cordova explained that Soar in 4 was the back-end rebate incentive program. He said students were told that if they met certain requirements, graduated in four years and were employed, then they would receive a rebate on first-year tuition. Trustee Price recommended combining the incentive programs into a one-stop registration/self-reporting area to simplify matters for incoming students, or otherwise it could be overwhelming. He asked if there was a budgeting/financial literacy program available for students. Dr. Cordova responded in the affirmative, and that it was offered through the Office of Financial Aid and Scholarships. Trustee Price cautioned against assuming engagement always increased GPA; an argument could be made that students who had the traits to strive for a high GPA also were the same students who would strive to be engaged. He stated focusing on the students who were not engaged, getting said students engaged, and determining if this improved GPA would be a better study.

Trustee Fogg asked how much financial aid had been increased to support incoming students. Dr. Cordova stated FGCU financial aid increased by $1 million to support student success this academic year through transfer student scholarships, institutional aid, merit based scholarships, summer scholarships, etc. Trustee Fogg asked how much financial aid was available prior to the increase. Dr. Cordova responded financial aid increased from $5 million per year to $6 million per year.

Trustee Coone asked if the students who received a GPA lower than 2.0 were required to utilize CAA services, and if so, did Dr. Cordova collect and evaluate data regarding the outcome of students who utilized the CAA program. Dr. Cordova responded in the affirmative to both questions.
Chair Gable asked if Dr. Cordova had plans regarding the students who did not register for the *Eagles in 22* program. Dr. Cordova responded in the affirmative. He explained plans were underway to better market the *Eagles in 22* program, to determine if the events were matched to the students who were admitted and to determine if the services provided aligned with what students were looking for and needed.

**Item 5: Standing Report from United Faculty of Florida (UFF)/FGCU Chapter**

Chair Gable introduced Dr. Win Everham, President of the United Faculty of Florida (UFF)/FGCU Chapter, whose report was being made in conjunction with the collective bargaining agreement provision that provides an opportunity to speak to FGCU Board of Trustees agenda items which affect the wages, hours, and other terms and conditions of employment of employees.

Dr. Everham thanked the FGCU Board of Trustees for ratifying the Collective Bargaining Agreement (CBA). He reported it was a very complicated process and he appreciated the way in which the complications were addressed in non-confrontational manners without lawyers and no grievances filed. He indicated changes to Regulation 5.020 (grievances) would be reviewed during the meeting. He indicated Regulation 5.020 did not relate to the individuals he represented and it did not impact the CBA. He stated the Union participated yesterday in a meeting brokered through the Office of the Provost and Vice President for Academic Affairs and the Office of the University Ombuds to review FGCU’s conflict resolution processes on campus. He stated FGCU was a good institution which recognized there would be interpersonal conflict and had leaders who engaged processes to improve conflict resolution.

Dr. Everham stated the FGCU Board of Trustees Information System (BOTIS) Quarterly Briefing report, page 16, table 2.6, summarized the cost per credit hour and said he found this interesting. He stated when FGCU opened it was the most expensive institution in the State University System (SUS), and was now the least expensive. He stated while this was not necessarily a negative, from his perspective as a faculty member in the classroom, it was important to remember bigger and cheaper was not always better; the real bottom line was student success. He stated he taught four classes this semester and every class was below average in terms of class size. He welcomed members of the Board to attend his classes at any time.

Dr. Everham stated bargaining would begin again next month, and salaries and benefits were being reviewed at present.

**Item 6: Standing Report from FGCU Foundation Board of Directors**

Chair Gable called on Vice President for University Advancement, and Executive Director of FGCU Foundation Chris Simoneau to give the report on behalf of Foundation Board of Directors Chair David Holmes, who was unable to attend today’s meeting.
Mr. Simoneau reported the last quarter of the Foundation was straightforward. He reported fundraising and events continued at pace and remained on track for the $25 million goal for the year. He stated the Eagles Club continued to grow in support of the Athletics program and this year’s “Night at the Nest” was the most successful ever. He reported WGCU revenues were slightly ahead of last year. He stated the audit of the Foundation had been completed with a new audit firm for the first time in 15 years and would be reviewed later in the agenda. He indicated the Foundation received a clean opinion. He stated the fragility and inconsistency in financial markets had the Foundation paying close attention to its nearly $100 million investment portfolio. He stated daily fluctuations reinforced the commitment to the Outsourced Chief Investment Office model adopted in 2015. He reported the Foundation remained a long-term investor with a strong investment policy statement which continued to guide them during periods of turmoil. He stated the Foundation Finance Committee was blessed to have strong senior financial experience which kept a close eye on the assets. He stated the Foundation continued to explore possibilities in real estate; however, there were no deals on the horizon. He indicated the Foundation continued to seek new Board members which represented the diversity of the region, and he welcomed any member recommendations from the FGCU Board of Trustees. He stated the Foundation continued to grow as an alumni association with over 30,000 members. He stated the Foundation recently received a major financial pledge to one of the University’s top priorities in the strategic plan. He explained the details were not finalized and he looked forward to sharing this good news in its entirety at the next FGCU Board of Trustees meeting. He thanked the members of the FGCU Board of Trustees who made financial commitments to the Foundation. He stated the Foundation remained strong and committed to the University’s strategic plan.

**Item 7: Standing Report from FGCU Financing Corporation Board of Directors**

Chair Gable called on Vice President for Administrative Services and Finance, and Executive Director of FGCU Financing Corporation Steve Magiera to present the report on behalf of FGCU Financing Corporation Board of Directors Chair Joe Catti, who was unable to attend today’s meeting.

Mr. Magiera stated the last meeting of the Financing Corporation was held on December 5, 2018. He stated the financial statements and budgets were reviewed. He indicated the financial statements were excellent, and the budgets had favorable variances. He reported larger than expected revenues over expenditures because of the increase in student housing occupancy in both the fall and spring semesters. He indicated FGCU had $24 million in variable bonds which was about 12% of the total debt. He stated this June the current letter of credit would expire with the bank; staff would work with the Financial Advisor to do an Invitation to Negotiate (ITN) to banks to determine available rates, and to investigate other options. He reported student housing occupancy currently was at 97.3% which was excellent as projections were built on 93% occupancy; however, the outside competition would continue to be monitored.
Trustee Eide asked if the Financing Corporation had been reviewed by the rating agencies. Mr. Magiera responded in the affirmative; a rating agency call was received from Standard & Poor’s, and the report would be received before the end of January. He stated no concerns were issued during the call. Trustee Eide stated he was hoping for an upgrade. Mr. Magiera stated Standard & Poor’s indicated there would be no upgrade; several years of increases were required for an upgrade. He explained FGCU’s recent renovations had prevented excess revenues over expenditures over the past several years, which prevented an upgrade.

Item 8: Chair’s Report
Chair Gable stated he and President Martin traveled the state attending the following Board of Governors (BOG) Meetings: New College of Florida (NCF) in September, University of South Florida (USF) in October, and Florida Atlantic University (FAU) in November (Trustee Summit). He stated he felt President Martin did an excellent job representing the University before the BOG. He reported in a few weeks he and President Martin would attend another BOG meeting in Miami. He stated the BOG asked several universities to give an update on the four year graduation rate, which would be discussed later in the agenda. He reported in September the FGCU Board of Trustees approved a bachelor’s degree program for construction management, and it would be presented to the BOG for final approval in January.

Item 9: President’s Report
President Martin welcomed Trustee Ashley Coone to the FGCU Board of Trustees. He reported the Construction Management program would be presented to the BOG at the end of the month. He reported Mr. Fred Pezeshkan would participate in the BOG meeting as an industry representative and advocate for the Construction Management program at FGCU. He explained the program was developed entirely with input from the industry and with a significant amount of commitment both in terms of designing the program and financial aid, to ensure the program was successful. He reported it was designed according to the Southern Association of Colleges and Schools (SACS) and the American Council for Construction Education (ACCE) accreditation requirements. He reported the degree exceeded 120 hours, but met the same standards and had the same basic requirements of the other Construction Management programs in the State. He explained FGCU’s was modeled after the program at the University of Florida (UF). He reported it would have a strong workforce component, and the employers in the region had committed to providing financial assistance to students, as well as internships and co-operative programs (co-ops). He indicated the program could be completed successfully in four years.

President Martin indicated FGCU was exploring the possibility of creating a seventh college which would bring together some disparate units and create a central conversation area around community engagement, online education, the FGCU Completes program, and summer school. He explained conversation in this regard.
President Martin reported three major searches were underway by a single firm for the Director of the Bower School of Music and the Arts, the Associate Vice President for Enrollment Management, and the Dean for the Marieb College of Health and Human Sciences. He noted that Dr. Elaine Nicpon Marieb, for whom the Marieb College is named, passed away recently. He stated Dr. Marieb was one of the most published academics in the history of academia in the United States; her textbooks were used worldwide. He stated her accomplishments were astounding, as was her willingness to partner with FGCU. He stated he hoped FGCU students would take a moment to look at Dr. Marieb’s career, her accomplishments, and what she did with the results of her accomplishments. He reported Marieb Day at FGCU would be celebrated on February 22.

President Martin indicated there were many construction projects in motion. He reported parts of the Emergent Technologies Institute (ETI) would be reassigned to enable support of the water research initiative as FGCU awaited the Legislature’s concluding investment in Academic Building 9 (AB9). He explained the lab space at the ETI, which currently was underutilized, would be used for water quality research. He stated there was an initiative proposal currently before the Legislature, going through the Board of Governors (BOG), for which he would be visiting with the local delegation in Tallahassee to discuss. He stated he would be working closely with new Governor Ron DeSantis on a major water initiative. President Martin recognized four FGCU student interns with the Office of Government Relations who would help represent FGCU during the 2019 Legislative Session: Megan Kelly, Eric Schau, Jordan Stynda and Hannah Vogel.

President Martin stated in addition to the Strategic Plan approved last year, he had four primary objectives which he considered daily: first, to continue to build a culture of “students first” on campus; second, to implement change in the administrative and leadership model to improve effectiveness and efficiency; third, to expand and improve the ways FGCU served the citizens and communities of Southwest Florida and beyond; and fourth, to make critical investments in facilities, technology and human resources that would carry FGCU through the next two decades of development.

Item 10: Academic/Student/Faculty Affairs Committee (See Tabs #5-7)
Chair Gable indicated Committee Chair Christian Spilker was unable to attend today’s meeting, and thus he would handle these items. He noted there were three action items and asked Dr. Cordova to present the first item.

FGCU 2018 Four-Year Graduation Rate Improvement Plan Update for the Florida Board of Governors (TAB #5)
Dr. Cordova reported the Four Year Graduation Rate Improvement Plan was approved at the May 1, 2018 meeting of the FGCU Board of Trustees. He stated the Plan was a
requirement of Senate Bill 4 (SB4) Legislation, which passed last session. He stated the Florida Board of Governors (BOG) approved the Plan at its June meeting as a part of the Accountability Plan submitted, and the Plan was put into a template format requested by the BOG. He explained the Plan included academic curricular policy and financial areas which would improve the four-year graduation rate. He stated during the BOG meeting in June, President Martin was asked to return in January to give an update on the Four-Year Graduation Rate Improvement Plan as it related to the financial strategies employed. He reported before the Board today was a document which summarized the Four-Year Graduation Rate Improvement Plan and the financial aid aspects of the document, and reflected what President Martin would present at the BOG’s January meeting.

Trustee Eide made a motion to approve the FGCU 2018 Four-Year Graduation Rate Improvement Plan Update for the Florida Board of Governors. Trustee Jalisa White seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

**New Degree Program: Bachelor of Science in Environmental Geology (TAB #6)**

Chair Gable called on Provost and Vice President for Academic Affairs James Llorens to present the next two items.

Provost Llorens reported that upon approval by the FGCU Board of Trustees, two new degree programs would be submitted to the Board of Governors (BOG); one was in Environmental Geology and the other was in Supply Chain Management. He stated both of these degrees address needs in Southwest Florida. He stated Associate Vice President for Academic and Curriculum Support Cathy Duff and staff had reviewed curriculum, budgeting, staffing, etc., and ensured FGCU adhered to the BOG guidelines. He explained the cost for the new degree programs would be covered with reallocation of basic expenditures and new Educational and General Expenses (E&G) funds. He stated there was a demand for both new degrees, which would strengthen FGCU’s academic offerings. He asked approval to submit the degree programs to the State. He explained this did not require approval by the BOG as the degrees met the guidelines. He stated the programs would be implemented in the fall of 2019.

Trustee Fogg made a motion to approve the New Degree Program: Bachelor of Science in Environmental Geology. Trustee McDonald seconded the motion.

Trustee Stephen Smith asked for an explanation of the startup cost. Provost Llorens explained there would be new courses which would be taught by existing faculty. Trustee S. Smith asked if the cost was an additional cost or a reallocation of cost. Provost Llorens explained the cost fit within the overall professor salaries and if there was an extra course it could be taught by an adjunct; however, no new faculty would be required.

Trustee Eide asked if demand for the two degrees existed amongst the students. Provost Llorens responded a tremendous interest had been expressed, especially with
environmental sustainability issues. He stated with the direction of FGCU in water research and environmental quality, environmental geology was an excellent fit and would utilize available expertise in environmental sciences. Trustee Eide asked if it was fair to say student demand drove the development of new degrees. Provost Llorens responded in the affirmative, saying that student demand was a driving factor, along with community need.

Trustee Coone asked how new degree programs that students desired most were determined. Provost Llorens responded attention was paid to interest expressed in FGCU's various minor degree programs, and the professors gleaned information from students regarding courses and programs of interest to students. He explained community trends and national trends also were considered. He stated it was important to understand student demands, but it was also important to understand and identify where workforce trends were going nationally and maneuvering FGCU to be in a position to enable students to meet regional and national workforce demands. Trustee Coone asked if a survey was conducted of the students. Provost Llorens responded in the negative; he relied upon faculty, chairs, deans, statewide trends, other institutions' degree offerings, etc. Trustee Coone asked if there was a risk involved in implementing new degree programs. Provost Llorens responded in the negative by saying that extensive research was conducted prior to implementation to determine the overall need, and degree program current delivery on a statewide basis. Trustee Coone asked what he meant when he said the BOG would not approve the degrees. Provost Llorens explained approval of the two degrees did not require an action item by the Board of Governors at a meeting; however, Academic Affairs staff at the State University System (SUS) reviewed the degrees and determined if all State requirements were met, as well as if there was a demand for the degrees.

Trustee Roepstorff asked if the SUS academic staff made certain there was not duplication within the State University System. Provost Llorens responded in the affirmative. He indicated when the University produced graduates in these degree programs, job placement results and success of the programs would be tracked and reported to the FGCU Board of Trustees.

Trustee Price asked about programs which may need to be retired. Trustee Roepstorff stated staff and departments routinely reviewed the degrees to determine what was becoming obsolete. Provost Llorens stated the Office of Academic Affairs regularly reviewed degree programs and enrollment to determine if interest in a degree program was waning. Trustee Price stated he believed the Supply Chain Management would be a successful degree program due to employer interest. He asked if there was a financial sponsor for it. Provost Llorens responded in the negative, but said he believed there would be financial support both in terms of scholarship support, as well as internships. Trustee Price recommended in the future obtaining a verbal commitment or a letter of intent indicating a financial sponsor's intention to assist in offsetting costs prior to development and implementation of new degree programs.
There was no public comment, or further Board discussion regarding the motion to approve the New Degree Program: Bachelor of Science in Environmental Geology. The vote was 12-0 in favor of the motion.

New Degree Program: Bachelor of Science in Supply Chain Management (TAB #7)

Based on the discussion just held for both new degree programs, Chair Gable called for a motion to approve the New Degree Program: Bachelor of Science in Supply Chain Management. Trustee S. Smith made a motion. Trustee Cors seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

Item 11: Finance, Facilities and Administration Committee (See Tabs #8 -10)

Chair Gable called on Committee Chair Ken Smith to present this information.

Trustee K. Smith stated there were two information items and two actions item on the agenda. He called on Vice President for Administrative Services and Finance, and Executive Director of FGCU Financing Corporation Steve Magiera to present the first three items, followed by Vice President and General Counsel Vee Leonard for the remaining items.

Update on Building Projects Underway

Mr. Magiera made a presentation regarding the various building projects which were under way. He provided an updated on the following projects:

- **South Village Boulevard** (the South Access Road, and third campus entrance): The road is comprised of a two-lane portion and a four-lane portion, bicycle lanes, sidewalk, and supporting utilities; was 0.5 mile long, and would be opened to traffic within the next week.
- **Cohen Center Multipurpose Room**: This is a multipurpose room which would be opened in August 2019 and cost approximately $1.6 million to complete.
- **Central Energy Plant (also known as the Chiller Plant) Phase 3 Expansion**: This project was 45% complete and would be completed in March 2019 with a total budget of $2 million for building renovations and $4 million in equipment. Staff had requested PECO money for this project for years which was never granted; available funding was identified.
- **Student and Community Counseling Center**: Located by the Family Resource Center, this is an $8 million project targeted for opening in August 2019.
- **University Recreation & Wellness Center**: This was a large project with a total budget of $18.5 million, for which several funding sources were utilized. Mr. Magiera thanked the Foundation and the donors who gave to the Foundation for the building. He said there was another piece that was a loan from the Financing Corporation to help with the costs. The bulk of the financing was from student money. He stated it was targeted for opening in January 2020.
Trustee Roepstorff asked for transparency purposes if the funding for the various projects came from the appropriate buckets. Mr. Magiera responded in the affirmative. He reviewed the projects’ funding sources, as detailed below. It was agreed all funding sources were appropriate.

- **South Village Boulevard**: No carryforward funds were being used. PECO funding was used for this project.
- **Cohen Center Multipurpose Room**: Carryforward funds were used but costs were under the required $2 million and 10,000 square feet threshold.
- **Central Energy Plant Phase 3 Expansion**: Construction was funded using auxiliaries ($2 million), and carryforward funds were used for the Equipment ($4 million.) There is no carryforward limit for equipment.
- **Student and Community Counseling Center**: No carryforward funds were being used. Auxiliaries were used.
- **University Recreation & Wellness Center**: No carryforward funds were being used. This project was funded using the students’ Capital Improvement Trust Fund (CITF), and Foundation donations.

Trustee Eide asked if the Student and Community Counseling Center and the University Recreation & Wellness Center had dedicated parking. Mr. Magiera responded in the affirmative. He said some of the parking already was there but additional parking was being added.

Trustee McDonald asked if the Cohen Center Multipurpose Room was considered an expansion/renovation. Mr. Magiera responded that it was considered a renovation because the floor/patio was already there and additional square feet was not being added.

**Finance/Budget Update (TAB #8)**

Mr. Magiera reported revenues had a positive variance of 1.11%, which equaled approximately $1.4 million, while expenses had a positive variance of 6.3%, which equaled approximately $7.8 million. He reminded the Board that President Martin’s plan was to not distribute the monies immediately, and thus generate carryforward funds at the end of the year. He said normally they would not want to have a lot of carryforward funds at the end of the year, but they had to generate them this year for significant renovations in support of student success, such as the “one-stop shopping center” in the plaza area. He stated he did not yet have the renovation plans or costs. He reported the budget reflected $2 million which had not been distributed, but would be distributed shortly.

President Martin indicated he called this “strategic procrastination.” He explained the budget staff would hold off until they could cover some of these projects, and then encumber the funds for the projects so monies would not appear as carryforward funds on the first of the fiscal year.
Regulation: FGCU-PR5.020, Appeal of Disciplinary Actions (TAB #9)

Mr. Magiera reported Regulation FGCU-PR5.020 addressed disciplinary action and appeals. He explained in the past, this Regulation included detailed procedures; however, the new Regulation would be much more succinct and simplified. He reported there was a Policy which would accompany the Regulation. He indicated the Policy had been distributed to the campus community of faculty and staff for feedback purposes, and only grammatical feedback was returned. He explained previously the Regulation indicated if an employee had a disciplinary action against him, the employee was notified, and put on leave; the disciplinary action went in the file; and the employee had a certain amount of time to file a grievance to meet with his Vice President and discuss the situation. He reported the new Regulation reversed the process; it gave employees the opportunity to speak with their Vice President prior to official action being taken. He stated the purpose was to create a more positive environment and possibly eliminate some disciplinary actions. He indicated the Regulation applied to out-of-unit faculty. He stated if the FGCU Board of Trustees approved the Regulation, the President would sign the accompanying Policy.

Trustee Eide made a motion to approve Regulation: FGCU PR5.020, Appeal of Disciplinary Actions. Trustee McDonald seconded the motion.

Trustee Price asked for clarification of out-of-unit faculty. Mr. Magiera explained out-of-unit faculty were not subject to the Collective Bargaining Agreement (CBA), and applied to such positions as deans, department chairs, etc.

There was no public comment, or further Board discussion regarding Regulation: FGCU PR5.020, Appeal of Disciplinary Actions. The vote was 12-0 in favor of the motion.

Regulation: FGCU-PR1.005, Direct Support Organizations (TAB #10)

Vice President and General Counsel Vee Leonard noted that Regulation FGCU-PR1.005, Direct Support Organizations, was recently revised to comply with Senate Bill 4, which was passed during the last Legislative Session. She explained the revisions primarily provided for the FGCU Board of Trustees to make at least one appointee to each Direct Support Organization (DSO) Board of Directors; provided for the FGCU Board of Trustees to approve all members of the respective Boards for the Direct Support Organizations; placed a cap on salaries for DSO employee (of which FGCU had none); and established thresholds for capital projects, the issuance of debt, and the procurement of goods and services, as well as real estate. She indicated there was reference in the Regulation to the Resolutions on Presidential Authorizations that the FGCU Board of Trustees initiated a couple of years ago; therefore, the powers, duties and requirements in this Regulation also were addressed in the President’s Authority provided in the Resolutions on Presidential Authorizations.

Trustee Montgomery made a motion to approve Regulation: FGCU-PR1.005, Direct Support Organizations. Trustee White seconded the motion.
Trustee Montgomery asked if the approval of the Regulation would impact operations of the Foundation. Mr. Simoneau responded in the negative. He said that the Foundation was already compliant with the majority of the changes, and the only thing that was not previously done was the FGCU Board of Trustees’ approval of appointments to the DSOs. Mr. Simoneau said that he thought it needed to be determined what “all appointments” actually meant.

Trustee Cors commented on page 4 of the Regulation it read no approval was required to accept gifts of real estate, and she asked if FGCU ever not accepted gifts of real estate. Mr. Simoneau responded that there were certain rules within the Foundation of proposed gifts that are not accepted, for instance, timeshares. He said that the Foundation does an assessment of a proposed gift of real estate, and if it failed an environmental inspection, for example, then it would not be accepted. He said if it does not fit the FGCU Strategic Plan, or if the carrying cost was more than the value of the real estate it is not accepted.

Trustee K. Smith stated it was unclear what the exact role of a DSO liaison was, and he felt it was important to properly define and clarify the role of a DSO appointee. Trustee Fogg thanked Trustee K. Smith for bringing attention to this matter. He stated the Audit and Compliance Committee in particular had raised this issue in the past. He stated the Audit Committee’s role was clarified in relation to the DSOs, and it was agreed Director of Internal Audit Bill Foster would cover the responsibilities; however, it was not clear what the BOG meant in terms of responsibility for the DSOs. He encouraged the administration to press the BOG to be clear, perhaps with a very specific BOG Regulation on what the FGCU Board of Trustees’ responsibilities were, or were not, in terms of the DSOs.

Trustee Montgomery stated he asked the same question yesterday, and as the liaison for the FGCU Foundation Board of Directors, he wondered if he had a greater responsibility to report to the FGCU Board of Trustees and to determine compliance of activities and regulations. Trustee K. Smith indicated it was important to better understand the various position responsibilities; not understanding responsibilities did not erase responsibilities.

There was no public comment, or further Board discussion regarding Regulation: FGCU-PR1.005, Direct Support Organizations. The vote was 12-0 in favor of the motion.

Chair Gable stated he and President Martin would raise this subject with the Board of Governors at the next BOG meeting and ask for more clarity.

**Item 12: Audit and Compliance Committee** (See Tabs #11 – 15)

Chair Gable called on Audit and Compliance Committee Chair Joseph Fogg to present these items.
Trustee Fogg reported the Audit and Compliance Committee met on December 3, 2018 and had five items to recommend for approval. He called on Director of Internal Audit Bill Foster to start with the first action item.

**International Travel: Outgoing Students and Faculty Audit (TAB #11)**

Mr. Foster indicated the report presented a limited scope audit of International Travel (outgoing students and faculty) managed by Academic Affairs, and Student Success & Enrollment Management for programs offered during the Spring, Summer and Fall 2017 semesters. He stated the evaluated programs from various offices were conducted in general compliance with applicable laws, rules and regulations, as well as University policies and procedures.

Mr. Foster explained international travel took place through different types of programs, such as Faculty Led Study Abroad (FLSA), internships, non-credit volunteer and work experiences abroad, exchange programs, and trips associated with registered student organizations (RSOs). He noted, depending on the type of program, different Florida Gulf Coast University (FGCU) departments, offices or colleges provided oversight while the International Services Office (ISO) served as a central hub for international travel information and assisted students and other departments with orientation training for programs that ISO did not directly manage. He reported export/import regulations were reviewed in the context of international travel, as well as Federal regulations which could restrict travel abroad and currency exchange rates. He explained the review did not include programs where international students attended FGCU, nor Athletics since student-athletes must travel in accordance with NCAA guidelines.

Mr. Foster listed the observations and recommendations under **Objective A**. He said under the first item **International Services Office: Record Keeping**, crisis management training attendance records for three faculty leaders with copies of signed waivers and release agreements for 15 students were requested from the International Services Office for three Faculty Led Study Abroad (FLSA) programs, as well as pre-departure orientation training records for all participants. He reported it was discovered that although pre-departure sessions were provided, attendance records were not maintained for either faculty or students; additionally, copies of the signed waiver and release agreements could not be located for three of the 15 students. He stated it was recommended the International Services Office (ISO) enhance its procedures to document attendance at required trainings and ensure that signed waiver and release agreements were properly retained for all participants. He reported management agreed with the recommendation and indicated the critical importance of documenting student and faculty leader participation in Pre-departure Orientations was noted and would be addressed by continuing to provide these sessions in person or on-line, and ensuring that participant attendance and completion of training was recorded via participant signature.

Mr. Foster stated the second item was **International Services Office, University-Wide Policy or General Guidelines for International Travel**. He reported travel abroad activities which involved students and faculty not managed by the International Services
Office, but sponsored by FGCU, such as performance tours, internships, etc., were reviewed. He reported the departments which managed these types of international activities informally knew to contact ISO for training and insurance, but failed to cover additional core areas that should have been addressed prior to travel. He indicated the responsibility for developing University-wide formal guidelines which covered best practices and attributes of international travel should be assigned to the International Services Office with guidance from the Office of the General Counsel. Additionally, he said these guidelines should be communicated to all persons and entities involved in international travel. He reported management recognized the need for University-wide formal guidelines for international travel and efforts were underway to pursue the implementation of best practices, including development of institutional policy with guidance from the Office of General Counsel.

Mr. Foster stated the third item was Lutgert College of Business (LCOB) Lack of Waiver of Liability. He explained the LCOB did not require outgoing exchange students to sign a waiver of liability. He stated it was recommended that the LCOB exchange program personnel work collaboratively with the Office of the General Counsel to identify the appropriate waiver of liability to be completed by all exchange program participants. He reported management agreed with the observation and recommendation.

Mr. Foster stated the fourth item was Registered Student Organization: No Agreement with Sponsoring Third Party. He explained the selected Registered Student Organization (RSO) which sent volunteer students abroad each year to participate in health and development programs did not have a signed written agreement with the sponsoring third party organization. He stated it was recommended the Office of Student Involvement ensured RSO agreements with third party organizations were approved and signed off by both parties, with copies maintained and available for review. He explained the University was not legally responsible for these agreements. Campus Life provided general oversight, but it was the responsibility of the RSO to maintain the necessary documentation for their activities. He stated an agreement was signed between the president of the RSO and the third party on May 14, 2018 which automatically renewed for one year periods unless terminated by either party before expiration. He stated management responded by indicating although the RSO was not a legal entity of the University, the Office of Student Involvement provided guidance to the RSO regarding travel pursuits. In order to ensure obtainment of appropriate documentation from the National Organization or affiliated entity that the RSO was traveling with, (if applicable), the Office of Student Involvement would add an item to the administrative travel checklist which would secure the document (as applicable) three months prior to the travel date. If the document was not secured by that date, travel would not be approved by the Office of Student Involvement.

Mr. Foster stated the fifth item was Internships & Co-Operative Programs Office: Policies and Procedures Enhancement. He stated the total number of international internships managed by the Internships & Co-Operative Programs Office (ICP) for fiscal year 2017 could not be supported; additionally, international internships procedures obtained from ICP were inadequate as the procedures did not address all critical
aspects of international travel. He stated to enhance the effectiveness of its operations and accountability for international internships, ICP should develop comprehensive, written procedures, and maintain accurate records for international internships. He reported management believed the report accurate and indicated development of comprehensive, written procedures for international internships and maintaining accurate records would be included in the Job Duties for the new Associate Director of Internships & Co-Operative Programs.

Mr. Foster stated the next item was Office of Research and Graduate Studies (ORGS): Monitoring for Compliance and Training under Objective B. He reported at the time of review, some items required by FGCU Policy 2.014, Export Control had not been fully implemented, such as conducting an Export Control Analysis and establishing appropriate training. He stated it was recommended the ORGS continued its efforts to monitor international travelers by conducting the export control analysis before travel was approved and it was recommended that the ORGS create awareness of these regulations through export control training. He stated the ORGS agreed with the recommendation and indicated introduction and training on export controls and international travel would begin in the Fall, along with additional training and written communications on export controls.

He indicated management agreed with the recommendations.

Trustee Fogg stated the Audit and Compliance Committee had reviewed the audit and was recommending its acceptance by the FGCU Board of Trustees.

Trustee S. Smith made a motion to accept the International Travel: Outgoing Students and Faculty Audit. Trustee Montgomery seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

Florida Gulf Coast University Financing Corporation Independent Auditor’s Report Fiscal Year Ended June 30, 2018 (TAB #12)

Mr. Foster indicated the Audit and Compliance Committee recommended acceptance of the Florida Gulf Coast University Financing Corporation Independent Auditor’s Report for the Fiscal Year Ended June 30, 2018. He reported the firm of Tuscan & Company, P.A. completed the audit report of the FGCU Financing Corporation for the fiscal year ended June 30, 2018 and the Financing Corporation Board of Directors approved the audit report at its October 22, 2018 meeting. He stated on the Summary Page, page 2, was the Opinion in which the auditors determined the financial statements fairly presented the financial position of the Financing Corporation. He explained this was known as a clean opinion and was what the Financing Corporation strove to obtain. He stated on pages 4 through 9 was the Management’s Discussion and Analysis. He explained this was the section where management described in reader friendly terms what occurred in the last fiscal year; it pointed out major transactions, and presented comparative figures from the prior year. He stated on page 20 was the Statement of Net Position. He explained years ago, this Statement was known as the Balance Sheet. He stated at year end, there was $222.7 million in total assets, and $197.3 million in
total liabilities and deferred inflows, and that net position (residual equity) was $25.4
million. He stated on page 11 was the Statement of Revenues, Expenses and Changes
in Net Position. He explained this Statement was formerly known as an Income
Statement and indicated for the year, there was $18.6 million in operating revenue,
$14.5 million in operating expenses, and $3.9 million in non-operating expenses,
arriving at a net increase in position of $0.2 million. He stated page 12 was the
Statement of Cash Flows which showed the effects to cash from the financial
transactions. He reported the net effect was a $20,000 increase in cash and cash
equivalents for the year. He stated pages 13 through 33 were the Notes to the
Financial Statements, which contained a significant amount of information explaining
the various line items in the financial statements; compared to Management’s
Discussion and Analysis, these notes were not necessarily as reader friendly. He
stated pages 24 and 25 were the Auditor’s Report on Internal Control and Compliance,
which related financial reporting and compliance with Government Auditing Standards;
there were no deficiencies in internal controls noted. He stated pages 26 and 27 were
the Auditor’s Report to Management, which contained no comments in the current or
prior years. He stated page 8 of the report discussed Factors Impacting Future Periods
and showed the student housing occupancy rate continued to be high which had no
effect on bond ratings, etc., and there were no currently known facts, decisions or
conditions which would have a significant effect on the financial position or operations
during the coming year.

Trustee Fogg stated the Audit and Compliance Committee had reviewed the audit and
was recommending its acceptance by the FGCU Board of Trustees.

Trustee S. Smith made a motion to accept the Florida Gulf Coast University Financing
Montgomery seconded the motion. There was no public comment, or Board discussion.
The vote was 12-0 in favor of the motion.

**Florida Gulf Coast University Foundation Independent Auditor’s Report Fiscal
Year Ended June 30, 2018 (TAB #13)**

Mr. Foster reported the firm of Cherry Bekaert, LLP completed the audit report of the
FGCU Foundation, Inc. for the fiscal year ended June 30, 2018, and the Foundation’s
Board of Directors accepted the audit at its December 5, 2018 meeting. Mr. Foster read
through the summaries page. He stated page 1 was the Opinion, in which the auditors
determined the financial statements fairly presented the financial position of the
Foundation; this was known as a clean opinion. He stated pages 3 through 10 were the
Management’s Discussion and Analysis, the section in which management described in
reader friendly terms what occurred in the last fiscal year; this section pointed out major
transactions, and presented comparative figures from the prior year. He stated page 11
was the Statement of Net Position, which, years ago, was known as the Balance Sheet.
He reported at year end, there was $131.5 million in total assets, $1.6 million in total
liabilities and deferred inflows, and net position (residual equity) was $129.9 million. He
stated page 12 was the Statement of Revenues, Expenses and Changes in Net
Position, formerly known as an Income Statement, which showed for the year there was
$11.6 million in operating revenue, $16.1 million in operating expenses, $7.2 million in net non-operating revenue (primarily $6.9 million in investment gains), and $3.7 million in net contributions to endowments, arriving at a $6.4 million increase in net position.

He stated pages 13 and 14 were the Statement of Cash Flows, which showed the effects to cash from the financial transactions; the net effect was a $1.4 million decrease in cash and cash equivalents for the year. He stated pages 16 through 29 were the Notes to the Financial Statements, which included a significant amount of information to explain the various line items in the financial statements; compared to Management’s Discussion and Analysis, these notes were not necessarily as reader friendly. He stated pages 30 through 41 contained Supplementary Information, which included additional required State schedules and provided a breakdown of the financial statements by account type. He stated pages 42 and 43 were the Auditor’s Report on Internal Control and Compliance, which related financial reporting and compliance with Government Auditing Standards. He stated pages 44 and 45 were the Schedule of Findings and Responses, which showed a deficiency in internal controls noted as a Material Weakness in Financial Reporting. He explained the Foundation had taken an overly conservative approach to valuing land held for investment, and in classifying unrestricted funds used to supplement restricted projects; as noted in the Effect paragraph, these actions did not involve any loss, impairment, or overstatement of Foundation assets.

Trustee Fogg stated the Audit and Compliance Committee had reviewed the audit and was recommending its acceptance by the FGCU Board of Trustees.

Trustee Montgomery made a motion to accept the Florida Gulf Coast University Foundation Independent Auditor’s Report Fiscal Year Ended June 30, 2018. Trustee McDonald seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

Compliance Office Charter (TAB #14)

Director of Equity, Ethics and Compliance, and Title IX Coordinator Precious Gunter noted that the updated Compliance Office Charter was a formal document which outlined the purpose, authority, mission, scope of work, and responsibilities of a compliance office; and provided for an appropriate governance structure, access to documents and personnel in order to carry out the duties and responsibilities of the office, and a periodic assessment of the Charter. She stated the document was prepared pursuant to Board of Governors Regulation 4.003 and required each State University System chief compliance office be governed by a charter approved by the boards of trustees and reviewed at least once every three years. She explained the Charter was recently revised primarily to reflect the changes with the merger of the Office of Institutional Equity and Compliance with the University’s Compliance Office. She stated the other revisions primarily dealt with grammatical and structural changes, as well as updates regarding training and responsibilities of the Office.

Trustee Fogg stated the Audit and Compliance Committee had reviewed the Charter and was recommending its approval by the FGCU Board of Trustees.
Trustee Montgomery made a motion to approve the Compliance Office Charter. Trustee S. Smith seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

**Audit and Compliance Committee Charter (TAB #15)**

Ms. Gunter noted that similar to the Compliance Office Charter, this Charter identified the authority under which the Audit and Compliance Committee of the Florida Gulf Coast University Board of Trustees operated, as well as the composition, meeting protocol, and responsibilities of the Committee. She stated the Charter was revised to update the merger between the Office of Equity and Compliance, and the Compliance Office, as well as some of the responsibilities for the chief audit executive in terms of attending DSO meetings and reporting back to the Audit and Compliance Committee on the meetings.

Trustee Fogg stated the Audit and Compliance Committee had reviewed the Charter and was recommending its approval by the FGCU Board of Trustees.

Trustee S. Smith made a motion to approve the Audit and Compliance Committee Charter. Trustee Cors seconded the motion. There was no public comment, or Board discussion. The vote was 12-0 in favor of the motion.

**Update on Board of Governors Construction Funding Certification and Audit**

Mr. Foster reported on September 19, 2018 the Board of Governors requested each of the State universities to review the funding sources for all university capital projects approved by their boards of trustees from July 1, 2008 until the present. He stated projects approved prior to July 1, 2008 which had a cost adjustment after this date also were included for review. He stated projects adding more than 10,000 gross square feet of space or exceeding $2 million in cost were reviewed. Mr. Foster said that remodeling, repairs, and renovations were excluded from this audit, and none of these projects were over the $2 million threshold. He stated FGCU had constructed 19 projects in total and a certification was signed and delivered in a timely manner to the Board of Governors. He stated the Board of Governors asked the Florida State University Procurement Office to prepare a Request for Qualifications (RFQ) solicitation which would involve a firm sending out a survey to the State Universities asking questions related to capital project controls. He stated the firm was not required to be a CPA firm, but could be a CPA firm, a consulting firm, or a CPA/consulting firm. He reported as of the latest information available, the RFQ had not yet been issued and at this point he did not know if the survey included an audit.

**Item 13: Old Business**

There was no old business for discussion.
**Item 14: New Business**
Trustee Fogg noted he recently learned that FGCU owned WGCU and wondered why the FGCU Board of Trustees did not see budgets for WGCU. President Martin indicated WGCU budgets could be provided to the Board. He stated WGCU now reports to University Advancement, and no longer to Academic Affairs. He stated he would be delighted to share the budget information. He said WGCU has a budget, continual fundraising plan, goals and objectives.

President Martin reminded the Board that a reception was held at WGCU to provide tours of the facility. He said that there was not a big turnout for the reception, but that another one could be hosted there again. He said that it was a state-of-the-art facility and that the building was named after a donor from Naples.

Trustee Fogg asked if WGCU made any money. Mr. Simoneau stated he would provide the Board with the audited financial statements.

President Martin said that we would ask WGCU General Manager Rick Johnson to make an informational presentation to the Board. He said that WGCU was a huge asset to Southwest Florida and that one of the things FGCU is proud of was the ability for WGCU to stay on the air during Hurricane Irma consistently and to update the region on what was happening.

Trustee Eide asked how WGCU was able to not be classified as a DSO. Ms. Leonard replied that it was a University department and was not a separate entity from the University.

**Item 15: Chair’s Closing Remarks and Meeting Adjournment**
Chair Gable stated the next Board meeting would be a limited agenda meeting held Tuesday, February 19, 2019 and would be a conference call meeting. He stated the Board’s next regularly scheduled meeting would be held Tuesday, April 9, 2019.

Chair Gable adjourned the meeting at 10:50 a.m.
B. Handouts

Attachment:
A. Record of Votes
## Record of Votes
### FGCU Board of Trustees

**DATE:** 1/8/2019

<table>
<thead>
<tr>
<th>TRUSTEES</th>
<th>Consent Agenda (Tabs #1-3)</th>
<th>FGCU 2018 Four-Year Graduation Rate Improvement Plan Update for the Florida Board of Governors (Tab #5) 1- Cors 2- Roepstorff</th>
<th>New Degree Program: Bachelor of Science in Environmental Geology (Tab #6) 1- Fogg 2- McDonald</th>
<th>New Degree Program: Bachelor of Science in Supply Chain Management (Tab #7) 1- Smith 2- Cors</th>
<th>Regulation: FGCU PR6.002, Appeal of Disciplinary Actions (Tab #9) 1- Eide 2- McDonald</th>
<th>Regulation: FGCU PR1.005, Direct Support Organizations (Tab #10) 1- Montgomery 2- White</th>
<th>International Travel: Outgoing Students and Faculty Audit (Tab #11) 1- Smith 2- Montgomery</th>
<th>Florida Gulf Coast University Financing Corporation Independent Auditor’s Report Fiscal Year Ended June 30, 2018 (Tab #12) 1- Montgomery 2- White</th>
<th>Florida Gulf Coast University Foundation Independent Auditor’s Report Fiscal Year Ended June 30, 2018 (Tab #13) 1- Montgomery 2- Smith</th>
<th>Compliance Office Charter (Tab #14) 1- Montgomery 2- Smith</th>
<th>Audit and Compliance Committee Charter (Tab #15) 1- Smith 2- Cors</th>
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<td>Trustee Ashley Coone</td>
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**Record of Votes**

**FGCU Board of Trustees**

**DATE:** 1/8/2019

1. Trustee Ashley Coone
   - Yes
2. Trustee Darleen Cors
   - Yes
3. Trustee Richard Eide
   - Yes
4. Trustee Joseph Fogg
   - Yes
5. Trustee Mike McDonald
   - Yes
6. Trustee Leo Montgomery
   - Yes
7. Trustee Kevin Price
   - Yes
8. Trustee Robbie Roepstorff
   - Yes
9. Trustee Kenneth Smith
   - Yes
10. Trustee Stephen Smith
    - Yes
11. Trustee Christian Spilker (excused absence)
12. Trustee Jalisa White
    - Yes
13. Trustee Blake Gable
    - Yes
ITEM: 2

Florida Gulf Coast University Board of Trustees
Audit and Compliance Committee
February 19, 2019

SUBJECT: Minutes of December 3, 2018

PROPOSED COMMITTEE ACTION

Approve minutes

BACKGROUND INFORMATION

The Audit and Compliance Committee met on December 3, 2018. Minutes of the meeting were kept as statutorily required.

Supporting Documentation Included: Minutes of December 3, 2018

Prepared by: Transcription Experts and Assistant Director of Board Operations
Tiffany Jackson

Legal Review by: N/A

Submitted by: Vice President and Chief of Staff Susan Evans
FLORIDA GULF COAST UNIVERSITY BOARD OF TRUSTEES

AUDIT AND COMPLIANCE COMMITTEE MEETING

Monday, December 3, 2018 10 a.m.

EDWARDS HALL, ROOM #309
Florida Gulf Coast University

Minutes

Members:
Present: Trustee Joseph Fogg III – Chair; Trustee Leo Montgomery; and Trustee Stephen Smith.

Not Present: Trustee Darleen Cors (Excused Absence).

Others:
Staff: President Michael Martin; Provost and Vice President for Academic Affairs James Llorens; Vice President for Administrative Services and Finance, and Executive Director of FGCU Financing Corporation Steve Magiera; Vice President for University Advancement, and Executive Director of FGCU Foundation Chris Simoneau; Vice President and General Counsel Vee Leonard; Vice President for Student Success & Enrollment Management Mitchell Cordova; Director of Internal Audit Bill Foster; Director of Equity, Ethics and Compliance, and Title IX Coordinator Precious Gunter, Director of Operations Tiffany Reynolds; Assistant Director of Board Operations Tiffany Jackson Tramontozzi; Project Manager Melissa Pind; and Executive Assistant to the Vice President and Chief of Staff Bruna Ugolotti.

Item 1: Call to Order, Roll Call, and Opening Remarks
Chair Joseph Fogg called the meeting to order at 10 a.m. He welcomed all members and said the meeting had been duly noticed. He requested Vice President and General Counsel Vee Leonard call the roll. Roll call was taken with three of four Committee members present, thus meeting quorum requirements. Trustee Darleen Cors was granted an excused absence.

Item 2: Consent Agenda (See Tab #1)
Chair Fogg stated there was one item on the Consent Agenda, the Minutes of the September 11, 2018 Meeting.

Trustee Stephen Smith made a motion to approve the Consent Agenda. Trustee Leo Montgomery seconded the motion. There was no public comment or Committee discussion. The vote was 3-0 in favor of the motion.
Item 3: Action Items (See Tabs #2-6)

Chair Fogg stated there were five action items and one information item. He asked Director of Internal Audit Bill Foster and Director of Equity, Ethics and Compliance, and Title IX Coordinator Precious Gunter to present these items.

International Travel: Outgoing Students and Faculty Audit (TAB #2)

Director of Internal Audit Bill Foster reported this was a limited scope audit of international travel (outgoing students and faculty) managed by Academic Affairs and Student Success & Enrollment Management for programs offered during the Spring, Summer and Fall 2017 semesters. He stated the evaluated programs, from various offices, were conducted in general compliance with applicable laws, rules and regulations, as well as University policies and procedures.

Mr. Foster explained international travel took place through different types of programs, such as: Faculty Led Study Abroad (FLSA), internships, non-credit volunteer and work experiences abroad, exchange programs, and trips associated with registered student organizations (RSOs). He noted, depending on the type of program, different Florida Gulf Coast University (FGCU) departments, offices or colleges provided oversight while the International Services Office (ISO) served as a central hub for international travel information and assisted students and other departments with orientation training for programs that ISO did not directly manage. He said export/import control regulations were reviewed in the context of international travel, as well as Federal regulations which could restrict travel abroad and currency exchange rates. He noted the review did not include programs where international students attended FGCU, nor Athletics, due to NCAA guidelines.

Mr. Foster reported the objectives were to determine whether there were documented policies and procedures to maintain the security of students and faculty abroad; to determine whether the impact of import/export controls had been addressed with policies and procedures, monitoring compliance, and the existence of a training and awareness program; to determine whether there were policies and procedures that required documentation of exchange rates which ensured travelers were trained regarding such requirements; and to determine whether study abroad programs were monitored for Federal regulations which restricted study abroad.

Mr. Foster listed the observations and recommendations under Objective A. He said under the first item International Services Office: Record Keeping, crisis management training attendance records for three faculty leaders with copies of signed waivers and release agreements for 15 students were requested from the International Services Office for three Faculty Lead Study Abroad (FLSA) programs, as well as pre-departure orientation training records for all participants. He reported it was discovered that although pre-departure sessions were provided, attendance records were not maintained for either faculty or students; additionally, copies of the signed waiver and release agreements could not be located for three of the 15 students. He stated it was recommended the International Services Office (ISO) enhance its procedures to document attendance at required trainings and ensure that signed waiver and release
agreements were properly retained for all participants. He reported management agreed with the recommendation and indicated the critical importance of documenting student and faculty leader participation in Pre-departure Orientations was noted and would be addressed by continuing to provide these sessions, in person or on-line, and ensuring that participant attendance and completion of training was recorded via participant signature.

Mr. Foster stated the second item was International Services Office, University-Wide Policy or General Guidelines for International Travel. He reported travel abroad activities which involved students and faculty not managed by the International Services Office, but sponsored by FGCU, such as performance tours, internships, etc., were identified. He reported the departments which managed these types of international activities informally knew to contact ISO for training and insurance, but failed to cover additional core areas that should have been addressed prior to travel. He indicated the responsibility for developing University-wide formal guidelines which covered best practices and attributes of international travel should be assigned to the International Services Office with guidance from the Office of the General Counsel. Additionally, he said these guidelines should be communicated to all persons and entities involved in international travel. He reported management recognized the need for University-wide formal guidelines for international travel and efforts were underway to pursue the implementation of best practices, including development of institutional policy with guidance from the Office of General Counsel.

Mr. Foster stated the third item was Lutgert College of Business (LCOB) Lack of Waiver of Liability. He explained the LCOB did not require outgoing exchange students to sign a waiver of liability. He stated it was recommended that the LCOB exchange program personnel work collaboratively with the Office of the General Counsel to identify the appropriate waiver of liability to be completed by all exchange program participants. He reported management agreed with the observation and recommendation.

Mr. Foster stated the fourth item was Registered Student Organization: No Agreement with Sponsoring Third Party. He explained the selected Registered Student Organization (RSO) which sent volunteer students abroad each year to participate in health and development programs did not have a signed written agreement with the sponsoring third party organization. He stated it was recommended the Office of Student Involvement ensured RSO agreements with third party organizations were approved and signed off by both parties, with copies maintained and available for review. He explained the University was not legally responsible for these agreements. Campus Life provided general oversight, but it was the responsibility of the RSO to maintain the necessary documentation for their activities. He stated an agreement was signed between the president of the RSO and the third party on May 14, 2018 which automatically renewed for one year periods unless terminated by either party before expiration. He stated management responded by indicating although the RSO was not a legal entity of the University, the Office of Student Involvement provided guidance to the RSO regarding travel pursuits. In order to ensure obtainment of appropriate documentation from the National Organization or affiliated entity that the RSO was
traveling with, (if applicable), the Office of Student Involvement would add an item to the administrative travel checklist which would secure the document (as applicable) three months prior to the travel date. If the document was not secured by that date, travel would not be approved by the Office of Student Involvement.

Mr. Foster stated the fifth item was *Internships & Co-Operative Programs Office: Policies and Procedures Enhancement*. He stated the total number of international internships managed by the Internships & Co-Operative Programs Office (ICP) for fiscal year 2017 could not be supported; additionally, international internships procedures obtained from ICP were inadequate as the procedures did not address all critical aspects of international travel. He stated to enhance the effectiveness of its operations and accountability for international internships, ICP should develop comprehensive, written procedures, and maintain accurate records for international internships. He reported management believed the report accurate and indicated development of comprehensive, written procedures for international internships and maintaining accurate records would be included in the Job Duties for the new Associate Director of Internships & Co-Operative Programs.

Mr. Foster stated the next item was *Office of Research and Graduate Studies (ORGS): Monitoring for Compliance and Training* under Objective B. He reported at the time of review, some items required by FGCU Policy 2.014, Export Control had not been fully implemented, such as conducting an Export Control Analysis and establishing appropriate training. He stated it was recommended the ORGS continued its efforts to monitor international travelers by conducting the export control analysis before travel was approved and it was recommended that the ORGS create awareness of these regulations through export control training. He stated the ORGS agreed with the recommendation and indicated introduction and training on export controls and international travel would begin in the Fall, along with additional training and written communications on export controls.

Chair Fogg stated he did not realize there was such a large volume of international travel being conducted, nor that there were important documentation requirements. He stated he appreciated Mr. Foster’s presentation as it made him more aware of international traveling requirements.

Trustee Montgomery agreed with Chair Fogg. He stated he had the impression the opportunities for improvement discussed were documentation or record keeping issues, rather than non-compliance issues. He asked if Mr. Foster would ascertain these issues were corrected.

Mr. Foster responded that the departments mentioned were in the process of correcting the issues.

Trustee S. Smith stated found Mr. Foster’s report to be very interesting. He said he felt many items were housekeeping issues, and while the purpose of the audit was to ensure compliance, he noted some things were not being done properly. He
recommended encouraging the various departments to properly comply, as well as emphasizing the importance of compliance.

President Martin reported that the Office of Internships & Co-Operative Programs had made several fundamental changes driven by personnel changes which he felt would bring greater centrality. He reported a campus-wide Globalization Initiative had been launched to bring these processes together into a single epicenter. He stated a partnership with the American Council on Education had been forged to enable FGCU to become more like other universities who were more experienced in this area. He stated over time many programs were “bolted on” rather than integrated in, and he felt this was in the bookkeeping issues. He said the University was moving away from this practice. He stated he felt Mr. Foster did an excellent job of highlighting the necessary changes which needed to be made.

Trustee S. Smith stated in his experience organizations were great at adding more to do, and not so good at taking away things which no longer needed to be done. He indicated he hoped removal of tasks which were no longer needed was considered in this matter moving forward.

President Martin agreed and said whatever was done, should be done a streamlined manner. He stated efforts were being made with this in mind.

Chair Fogg called for a motion.

Trustee S. Smith made a motion to accept the International Travel: Outgoing Students and Faculty Audit and to recommend it to the FGCU Board of Trustees. Trustee Montgomery seconded the motion. There was no public comment or Committee discussion. The vote was 3-0 in favor of the motion.

Florida Gulf Coast University Financing Corporation, Inc. Independent Auditor’s Report Fiscal Year Ended June 30, 2018 (TAB #3)

Mr. Foster stated each direct support organization of a state university was required to conduct an annual audit of its accounts and records by an independent certified public accountant in accordance with Section 1004.28(5) Florida Statutes. He stated FGCU Rule 6C-10-1.005(6), Florida Administrative Code (F.A.C.) required annual audit reports related to FGCU direct support organizations be submitted to the FGCU Board of Trustees. He reported the firm of Tuscan & Company, P.A. completed the audit report of the FGCU Financing Corporation for the fiscal year ended June 30, 2018 and the Corporation’s Board of Directors approved the audit report at its October 22, 2018 meeting. He stated on page 2 of the Auditor’s Report was the Opinion which indicated the financial statements fairly represented the financial position of the Financing Corporation. He explained this was known as a clean opinion and the Finance and Accounting Department had made great efforts to achieve this clean opinion. Mr. Foster reported pages 4 through 9 referred to Management’s Discussion and Analysis. He explained this was the section in which management described in reader
friendly terms what had occurred during the last Fiscal Year; it pointed out major
transactions and presented comparative figures from the prior year. He stated page 10
was the Statement of Net Position which used to be known as a Balance Sheet. He
reported at year end the University had $222.7 million dollars in total assets, $197.3
million in total liabilities and deferred inflows, and a net position, or residual equity, of
$25.4 million. He stated page 11 was the Statement of Revenues, Expenses and
Changes in Net Position, formally known as an Income Statement. He reported the
University had $18.6 million in operating revenue, $14.5 million in operating expenses,
and $3.9 million in non-operating expenses, arriving at a net increase in position of $0.2
million. He stated page 12 was the Statement of Cash Flows which showed the effects
to cash from the financial transactions. He stated the net effect was a $20,000 increase
in cash and cash equivalents for the year. He stated pages 13 to 23 were Notes to the
Financial Statements which contained a significant amount of information to explain the
various line items in the financial statements. He explained compared to Management
Discussion and Analysis, these notes were not necessarily as reader friendly. He
stated pages 24 and 25 were the Auditor’s Report on Control and Compliance which
related financial reporting and compliance with Government Auditing Standards. He
reported there were no deficiencies in internal controls noted. He stated pages 26 and
27 were the Auditor’s Report to Management, with again no comments for the current or
prior years.

Mr. Foster called attention to page 8, Factors Impacting Future Periods, which stated
the Financing Corporation was not aware of any known facts, decisions, or conditions
expected to have a significant effect on the financial position of operations during the
year ending June 30, 2019. He noted the Financing Corporation’s financial outlook for
the future continued to be positive. He explained the level of variable rate (13.0
percent) versus fixed rate (87.0 percent) debt was one of the key factors influencing the
Financing Corporation activities. He stated there was also a schedule presenting the
Occupancy Rate which, for the year under audit, was 97.58 percent; this was more than
10 percent in excess of what was needed to maintain the current debt rating.

Chair Fogg stated Mr. Foster was the Committee’s eyes and ears on this Audit as Mr.
Foster attended the meetings of the Financing Corporation Audit Committee. Chair
Fogg asked if there was anything else which Mr. Foster felt should be brought to the
attention of the Committee. Mr. Foster responded there was nothing further to report.

Chair Fogg asked if there were any questions or discussion. Hearing none, he called
for a motion.

Trustee Montgomery made a motion to accept the FGCU Financing Corporation
Independent Auditor’s Report and recommend it to the FGCU Board of Trustees.
Trustee S. Smith seconded the motion. There was no public comment or Committee
discussion. The vote was 3-0 in favor of the motion.
Florida Gulf Coast University Foundation, Inc. Independent Auditor's Report
Fiscal Year Ended June 30, 2018 (TAB #4)

Mr. Foster reported the Firm of Cherry Bekaert, LLP completed the audit report of the Foundation for the fiscal year ended June 30, 2018. He said the Foundation’s Audit Committee approved the audit report at its November 2, 2018 meeting, the Foundation’s Executive Committee approved the audit at its November 20, 2018 meeting, and it would be considered by the Foundation Board of Directors at its December 5, 2018 meeting.

Chair Fogg asked why the audit was being considered for approval by the Committee if the Foundation Board of Directors had not yet approved it. Vice President for University Advancement, and Executive Director of FGCU Foundation Chris Simoneau responded the Committee was considering the audit in anticipation of the Foundation Board’s approval on Wednesday. Chair Fogg commented this was unusual. Mr. Foster agreed. Trustee Montgomery asked if the Executive Committee had approved the Audit. Mr. Foster responded in the affirmative. Chair Fogg indicated the motion for this item would be subject to the approval of the Foundation Board of Directors.

Mr. Foster reviewed a summary of the key points in the Financial Audit of the Florida Gulf Coast University Foundation, Inc. He stated page 1 was the Opinion in which the auditors determined the financial statements fairly presented the financial position of the Foundation; this was known as a clean opinion. He stated pages 3 through 10, Management’s Discussion and Analysis, was the section in which Management described in reader friendly terms what occurred in the last fiscal year; this section pointed out major transactions and presented comparative figures from the prior year. He stated page 11 was the Statement of Net Position which indicated at year end, there was $131.5 million in total assets, $1.6 million total liabilities and deferred inflows, and a net position, or residual equity, of $129.9 million. He stated page 12 was the Statement of Revenues, Expenses and Changes in Net Position which was formerly known as an Income Statement. He reported for the year, there was $11.6 million in operating revenue, $16.1 million in operating expenses, and $7.2 million in net non-operating revenue (primarily $6.9 million in investment gains), and $3.7 million in net contributions to endowments, arriving at a $6.4 million increase in net position. He stated pages 13 and 14 reflected the Statement of Cash Flows which showed the effects to cash from the financial transactions. He reported the net effect was a $1.4 million decrease in cash and cash equivalents for the year. He stated pages 16 through 29 were Notes to the Financial Statements which contained a significant amount of information to explain the various line items in the financial statements. He noted compared to Management Discussion and Analysis, these notes were not necessarily as reader friendly. He stated pages 30 through 41 contained Supplementary Information which included additional required State schedules and provided a breakdown of the financial statements by account type. He stated on pages 42 and 43 the Auditor’s Report on Internal Control and Compliance related financial reporting and compliance with Government Auditing Standards. He stated on pages 44 and 45 the Schedule of Findings and Responses indicated there was a deficiency in internal controls noted as a Material Weakness in Financial Reporting. He said the Foundation had taken an overly
conservative approach to valuing land held for investment, and in classifying unrestricted funds used to supplement restricted projects. He stated as noted in the Effect paragraph, these actions did not involve any loss, impairment, or overstatement of Foundation assets.

Chair Fogg asked what the total size of the endowment was as of the end of the audit. Mr. Simoneau responded the total was $91.9 million as of June 30, 2018 and approximately $95 million or $96 million to date. Chair Fogg asked if it was correct the total contributions last year were approximately $10 million or $11 million. Mr. Simoneau responded in the affirmative.

Chair Fogg asked if there were any further questions or discussion. Hearing none, he called for a motion.

Trustee S. Smith made a motion to approve the FGCU Foundation Independent Auditor’s Report subject to the final approval of the Foundation Board of Directors and recommend it to the FGCU Board of Trustees. Trustee Montgomery seconded the motion. There was no public comment or further Committee discussion. The vote was 3-0 in favor of the motion.

Compliance Office Charter (TAB #5)
Director of Equity, Ethics and Compliance, and Title IX Coordinator Ms. Precious Gunter reported the Compliance Office Charter was a formal document which outlined the purpose, authority, mission, scope of work, and responsibilities of a compliance office; and provided for an appropriate governance structure, access to documents and personnel in order to carry out the duties and responsibilities of the office, and a periodic assessment of the Charter. She reported the Charter was approved at the June 13, 2017 meeting of the FGCU Board of Trustees, and this was the first revision.

She explained the Committee had a red-lined version, as well as a clean version, of the updated Charter which outlined the merger of the Compliance Office with the Office of...
Chair Fogg called for a motion.

Trustee Montgomery made a motion to approve the revised Compliance Office Charter and recommend it to the FGCU Board of Trustees. Trustee S. Smith seconded the motion. Chair Fogg asked if there was any discussion.

Trustee S. Smith stated he had a telephone conference call with Ms. Gunter and other staff members, during which he commented on several grammatical errors and areas where the language was confusing in the Charter document. Ms. Gunter stated the comments had been addressed and no material changes were necessary.

Trustee Montgomery asked if the FGCU Code of Conduct was State required. Ms. Gunter responded in the affirmative; as part of BOG Regulation each University had to institute a compliance office, as well as a compliance and ethics program plan which included creation of a Code of Conduct.

Chair Fogg stated he had recommended a checklist be developed regarding required deadlines and filing dates. He asked whether the checklist would be developed. Ms. Gunter responded in the affirmative; she was in the creation process. Chair Fogg requested the checklist, upon completion, be circulated to the Committee. Ms. Gunter indicated this would be done.

Chair Fogg stated there was motion and asked if there was any public comment. There was no public comment or further Committee discussion. The vote was 3-0 in favor of the motion.

Audit and Compliance Committee Charter (TAB #6)

Ms. Gunter stated the updated Audit and Compliance Committee Charter identified the authority under which the Audit and Compliance Committee of the Florida Gulf Coast University Board of Trustees operated, as well as the composition, meeting protocol, and responsibilities of the Committee. She stated the Charter was approved at the June 13, 2017 meeting of the FGCU Board of Trustees, and this was the first revision to the Charter.

She stated the Committee had a red-lined version and a clean version. She indicated Trustee S. Smith’s requested changes were included in the revision, as well as Chair Fogg’s recommendations.

Chair Fogg called for a motion.

Trustee Montgomery made a motion to approve the revised Audit and Compliance Committee Charter and recommend it to the FGCU Board of Trustees. Trustee S. Smith
seconded the motion. There was no public comment or Committee discussion. The vote was 3-0 in favor of the motion.

**Item 4: Information Item - Update on Board of Governors Construction Funding Certification and Audit**

Mr. Foster reported on September 19, 2018 the Board of Governors (BOG) requested each university to review the funding sources for all University Capital Projects approved by the Board of Trustees from July 1, 2008 to the present. He stated projects approved prior to July 1, 2008 which had a cost adjustment after this date were also to be included for review. He stated, per the Board of Governors' instructions, projects over $2 million, or projects which added 10,000 gross square feet, were listed and reviewed; remodeling, repair, and renovations were excluded. He stated there were 19 projects in total and a certification was signed and delivered in a timely manner. He stated the Board of Governors also asked the Florida State University Procurement Office to prepare a Request for Quotation (RFQ) which would involve a firm sending out a survey, to the twelve institutions within the State University System (SUS), related to capital project control. He stated the firm was not required to be a Certified Public Accounting (CPA) firm, but could be a CPA firm, a consulting firm or a combined firm. He reported as of November 28, 2018 the RFQ had not yet been issued. He stated at this time he did not know if the survey included an audit or not.

**Item 5: Old Business**

There was no old business for discussion.

**Item 6: New Business**

There was no new business for discussion.

**Item 7: Chair’s Closing Remarks & Meeting Adjournment**

Chair Fogg stated the items voted on today would be recommended for final approval to the full Board at its meeting on January 8, 2019.

Chair Fogg adjourned the meeting at 10:36 a.m.

Minutes prepared by Transcription Experts, and reviewed by Tiffany Jackson, FGCU Assistant Director of Board Operations.

Agenda Items:

A. See Tabs #1 – 6

a. [https://www2.fgcu.edu/Trustees/AgendaFile/2018/12-3-2018/FGCUACCMTG-AGENDAPACKET-12-3-18.pdf](https://www2.fgcu.edu/Trustees/AgendaFile/2018/12-3-2018/FGCUACCMTG-AGENDAPACKET-12-3-18.pdf)
Attachment:
A. Record of Votes
**Record of Votes**
**Audit and Compliance Committee**
**DATE: 12/3/2018**

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Consent Agenda (Tab #1)
1- Smith
2- Montgomery

International Travel Audit (Tab #2)
1- Smith
2- Montgomery

Florida Gulf Coast University Financing Corporation, Inc. Independent Auditor's Report Fiscal Year Ended June 30, 2018 (Tab #3)
1- Montgomery
2- Smith

Florida Gulf Coast University Foundation, Inc. Independent Auditor's Report Fiscal Year Ended June 30, 2018 (Tab #4)
1- Smith
2- Montgomery

Compliance Office Charter (Tab #5)
1- Montgomery
2- Smith

Audit and Compliance Committee Charter (Tab #6)
1- Montgomery
2- Smith
ITEM: __3__

Florida Gulf Coast University Board of Trustees and Audit and Compliance Committee
February 19, 2019

SUBJECT: Florida Gulf Coast University Performance Based Data Integrity Audit for Board of Governors

PROPOSED COMMITTEE AND BOARD ACTIONS

1. COMMITTEE:
   Accept the Florida Gulf Coast University Performance Based Data Integrity Audit for Board of Governors report dated January 17, 2019 and recommend its acceptance by the FGCU Board of Trustees.

2. BOARD:
   If recommended by the Audit and Compliance Committee, accept the Florida Gulf Coast University Performance Based Funding Data Integrity Audit report for Board of Governors dated January 17, 2019.

BACKGROUND INFORMATION

This report presents the results of the audit required by the Board of Governors (BOG) in its letter dated July 12, 2018 to FGCU President Michael Martin and FGCU Board of Trustees Chair Blake Gable. The purpose of the audit was to determine whether the University’s processes operate effectively to provide complete, accurate, and timely data submissions that support the Performance Funding Metrics to the Board of Governors.

If accepted by the FGCU Board of Trustees, a copy of the report and the Performance Based Funding Data Integrity Certification signed by President Martin and Chair Gable will be sent to the BOG as required.

Supporting Documentation Included: (1) Performance Based Funding Data Integrity Audit issued January 17, 2019; (2) Memorandum with Glossary; and (3) Board of Governors Letter dated July 12, 2018 to President Martin and Chair Gable with attached Data Integrity Certification Form

Prepared by: Director of Internal Audit William Foster
Legal Review by: N/A

Submitted by: Director of Internal Audit William Foster, and Audit and Compliance Committee Chair Joseph Fogg III
Performance Based Funding
Data Integrity Audit

Florida Gulf Coast University

January 17, 2019
William Foster, MBA, CPA, CIA, CGAP, CFE, CRMA, CCSA
Director, Internal Audit
Executive Summary

At the direction of the Florida Board of Governors (BOG), audit procedures were performed to determine whether Florida Gulf Coast University (University) has effective internal controls, processes and procedures in operation to ensure the completeness, accuracy, and timeliness of the data submissions to the BOG which support the University’s Performance Funding Metrics. Certain procedures were applied to the data submitted during the period October 1, 2017 through September 30, 2018. The procedures were originally established jointly by the State University Internal Audit leaders to ensure that the audit guidelines provided by the BOG were fully addressed.

Specifically, responsible management and other personnel were interviewed, detailed narratives related to data compilation and submission were reviewed, and various samples of data reported to the BOG were verified. These procedures were performed by Mauldin & Jenkins, an independent audit firm, as an Agreed Upon Procedures Engagement performed in accordance with the attestation standards established by the American Institute of Certified Public Accountants. The Mauldin & Jenkins report, which appears as Appendix A to this report, is intended solely for the information and use of Florida Gulf Coast University.

It is the University’s responsibility to conclude on the completeness, accuracy, and timeliness of the data submissions based upon the procedures applied. The University was involved in the development of the appropriate audit procedures to be applied, in accordance with the International Standards for the Professional Practice of Internal Auditing, issued by the Institute of Internal Auditors, and in the implementation of the agreed upon procedures. Internal Audit personnel acted as liaison between Mauldin & Jenkins auditors and University management and staff. Our responsibilities included ensuring that accurate information was provided by University personnel to Mauldin & Jenkins and that any initial anomalies during testing were appropriately resolved.

Our audit, which incorporates the Mauldin & Jenkins Agreed Upon Procedures Report, was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing, issued by the Institute of Internal Auditors. The audit procedures provided a reasonable basis for my opinion and the following reportable observation.

Background

The Florida Board of Governors (BOG) has broad governance responsibilities that affect administrative and budgetary matters for Florida’s public universities. Beginning in fiscal year 2013 – 2014, the BOG instituted a performance funding program which is based on 10 performance metrics used to evaluate the institutions on a range of issues.
The 2017-2018 metrics are listed below:

<table>
<thead>
<tr>
<th>No.</th>
<th>Performance Based Funding 2017-2018 Metrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Percent of Bachelor’s Graduates Enrolled or Employed ($25,000+) in U.S.</td>
</tr>
<tr>
<td>2</td>
<td>Median Average Wages of Bachelor’s Graduates Employed 1 Year After Graduation in U.S.</td>
</tr>
<tr>
<td>3</td>
<td>Cost of Bachelor’s to Student, net tuition and fees per 120 credit hours</td>
</tr>
<tr>
<td>4</td>
<td>Four Year FTIC Graduation Rate</td>
</tr>
<tr>
<td>5</td>
<td>Academic Progress Rate, FTIC 2nd year retention, GPA above 2.0</td>
</tr>
<tr>
<td>6</td>
<td>Bachelor’s Degrees within Programs of Strategic Emphasis</td>
</tr>
<tr>
<td>7</td>
<td>University Access Rate, percentage of undergraduates with Pell grants</td>
</tr>
<tr>
<td>8</td>
<td>Graduate Degrees within Programs of Strategic Emphasis</td>
</tr>
<tr>
<td>9</td>
<td>Percent of Bachelor’s Degrees Without Excess Hours (Board of Governors’ Choice)</td>
</tr>
<tr>
<td>10</td>
<td>Bachelor’s Degrees Awarded to Minorities (Board of Trustees’ Choice)</td>
</tr>
</tbody>
</table>

According to information published by the BOG in March 2016, the following are key components of the funding model:

- Institutions are evaluated on either Excellence or Improvement for each metric.
- Data is based on one-year data.
- The benchmarks for Excellence are based on the Board of Governors 2025 System Strategic Plan goals and analysis of relevant data trends, whereas the benchmarks for Improvement were determined after reviewing data trends for each metric.
- The Florida Legislature and Governor determine the amount of new state funding and an amount of institutional funding that will come from each university’s recurring state base appropriation.

The amount of the state investment appropriated by the Legislature and Governor for performance funding will be matched by an amount reallocated from the university system base budget. These “institutional base” funds are the cumulative recurring state appropriations the Legislature has appropriated to each institution.

The highest point value for each metric is 10 points. All 10 of the metrics have equal weight. From a total possible 100 points, a university is required to earn at least 51 points in order to be eligible for new funding.

The Agreed Upon Procedures report included as part of this report discloses one observation regarding one data late submission.
Observation

Hours to Degree Submission (HTD): Academic Administration directed Institutional Research and Analysis (IRA) to hold the Hours to Degree submission for additional reviews of the data to ensure that the University received every possible credit for its performance. The submission is critical to FGCU’s Performance Metrics score, and compiling the data is time intensive. Management wanted a final review at the highest level to ensure accurate data.

<table>
<thead>
<tr>
<th>Submission</th>
<th>Term or Year</th>
<th>Due Date</th>
<th>Date Submitted</th>
<th>Business Days Late</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours to Degree (HTD)</td>
<td>Annual 2016 – 20162017</td>
<td>11/08/2017</td>
<td>11/17/2017</td>
<td>6</td>
</tr>
</tbody>
</table>

In my opinion, this observation did not affect the overall integrity of the data submissions. This observation does not require Management to create a new corrective action plan to address the observation. Overall, FGCU staff provide accurate and timely information to the Board of Governors.

Conclusion

In my opinion, based upon the work performed, the internal controls, processes and procedures Florida Gulf Coast University has in place to ensure the completeness, accuracy, and overall timeliness of data submissions to the BOG that affect performance based funding metrics are operating effectively.

Audit Report Prepared by: William Foster, MBA, CPA, CIA, CGAP, CFE, CRMA, CCSA, Director, Internal Audit.

APPENDIX A
FLORIDA GULF COAST UNIVERSITY
INDEPENDENT ACCOUNTANT’S REPORT
ON APPLYING
AGREED-UPON PROCEDURES

January 14, 2019
FLORIDA GULF COAST UNIVERSITY
INDEPENDENT ACCOUNTANT’S REPORT
ON APPLYING
AGREED-UPON PROCEDURES

January 14, 2019

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INDEPENDENT ACCOUNTANT’S REPORT ON APPLYING AGREED-UPON PROCEDURES

Joseph G. Fogg III, Chair Audit and Compliance Committee
Florida Gulf Coast University
Fort Myers, Florida 33965-6565

We have performed the procedures enumerated below, which were agreed to by the Board of Trustees of Florida Gulf Coast University (the “University”), solely to assist the University in determining whether the University has processes established to ensure the completeness, accuracy and timeliness of data submissions to the Board of Governors (BOG) which support the Performance Funding Metrics of the University as of September 30, 2018. The University’s management is responsible for all processes and procedures for the complete, accurate, and timely submission of data to the BOG. This agreed-upon procedures engagement was performed in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of the parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

Our procedures and findings are as follows:

We reviewed all of the BOG submissions relating to the Performance Funding Metrics identified and published by the State University System of Florida specific to the certification. See Attachment I for a listing of the submissions tested as provided by the University to us.

a) Verify the appointment of the Data Administrator by the University President and that duties related to these responsibilities are incorporated into the Data Administrator’s official position description.

1. Review the Data Administrator’s position description; note details of the description, paying special attention to responsibilities related to coordinating the gathering of data from departmental sources, quality assurance procedures applied and other data integrity checks prior to submission to the BOG.
2. Determine if the Data Administrator was appointed by the President.
3. Conclude on whether the Institutional Data Administrator’s responsibilities include the requirements identified in BOG Regulation 3.007, SUS Management Information System. (For example, verify the Data Administrator’s data submission statements indicated, “I certify that this file/data represents the position of this University for the term being reported.”).
Florida Gulf Coast University  
January 14, 2019

Procedures Performed

- Reviewed the Position Description for the Director of Institutional Research and Analysis dated October 2, 2018. Verified the description included the requirements identified in the BOG Regulation 3.007.
- Reviewed the original appointment for the Director of Institutional Research and Analysis by the Provost dated April 23, 2004. Also, reviewed the re-affirmation appointment by the President dated September 8, 2014.
- Observed the SUDS submission screen and the “Submit for Approval” button that represents the University’s certification of complying with BOG regulation 3.007.

Findings

No exceptions were identified as a result of applying these procedures.

b) Review the processes used by the Data Administrator to ensure the completeness, accuracy and timely submission of data to the Board of Governors.

1. Interview the Data Administrator and other key data managers to understand the internal processes in place to gather, test, and ensure that only valid data, as defined by the BOG, is timely submitted to the BOG.
2. Identify and evaluate key processes over data input and submission. Consider evaluating the processes from the point of incoming information to the submission of the data file to the BOG.
3. Review internal records such as time management schedules and relevant correspondence which purport to demonstrate that complete and accurate data is timely submitted to the BOG. (See due dates addressed in the SUS data workshop). https://www.flbog.edu/board/office/oda/_doc/2018_Workshop_Proceedings_with_notes.pdf
4. According to BOG Regulation 3.007, prior to submitting the file, the universities shall ensure the file is consistent with the criteria established in the specifications document by performing tests on the file using applications/processes provided by the BOG Information Resource Management (IRM) office. Review process for timely and accurately addressing data file error reports.
5. Evaluate the results and document your conclusion on the Data Administrator’s processes.

Procedures Performed

- Interviewed the following people who are key in the data being reported and submitted to the BOG:
  - Director of Institutional Research and Analysis
  - Assistant Director, Management Information Resources
For those interviewed, we discussed key internal controls and processes in place over data input, Banner access, State University Database System (SUDS) access, validation tables, data submission procedures, error resolution, staff training, and other controls specific to the department and submission of accurate and timely data. Detailed review and evaluation of these processes is performed by the internal audit department during their normal internal audit reviews.

- Reviewed the metrics specific to each department to ensure controls are in place and a clear understanding exists to ensure only valid data is being submitted based on the data definitions.
- Reviewed weekly email communications (the “HitList”) from the Institutional Research and Analysis (IRA) department to department heads. These emails detail the upcoming submissions due in the next two (2) months to the BOG and who is responsible for the data being submitted. Department heads review the data requests and are responsible to ensure the data is accurate and ready for timely submission.
- Reviewed submission schedule maintained by the IRA department.
- Verified submission files tested were submitted by the due date as published by the State University System of Florida (SUS) and identified on the SUDS website.
- Tested the submission file criteria definitions used by the University to ensure they meet the data definitions published by the SUDS.
- Obtained the data definition tables from the SUDS website and verified tables documented in the University processes agreed to the SUDS tables.
- Reviewed processes over testing and validating data submissions and procedures for the resolution of errors prior to the final submission.

Findings

We identified the following file that was not submitted by the required due date:

<table>
<thead>
<tr>
<th>Submission</th>
<th>Term or Year</th>
<th>Reporting Time Frame</th>
<th>Due Date</th>
<th>Date Submitted</th>
<th>Submitted in a timely manner?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours to Degree</td>
<td>Annual 2016</td>
<td>20162017</td>
<td>11/8/2017</td>
<td>11/17/2017</td>
<td>No</td>
</tr>
</tbody>
</table>
Florida Gulf Coast University
January 14, 2019

c) Evaluate any available documentation including policies, procedures, and desk manuals of appropriate staff; and assess their adequacy for ensuring data integrity for University data submissions to the Board of Governors.

1. Request the Data Administrator provide its policies, procedures, minutes of meetings, and any other written documentation used as resources to ensure data integrity; note whether these documents are sufficiently detailed, up-to-date, and distributed to appropriate staff.
2. Evaluate the results and document your conclusion. If necessary, consider benchmarking with peer universities.

Procedures Performed

- Discussed key processes with those interviewed to ensure procedures are in place to ensure data accuracy for their department.
- Ensured each department, that is key to the submission process, had written policy and procedures regarding data they are responsible for.
- Reviewed the monthly project meeting agenda and minutes and verified data integrity was a significant objective.
- We do not perform benchmarking as this is a process the University would perform.

Findings

No exceptions were identified as a result of applying these procedures.

d) Review system access controls and user privileges to evaluate if they are properly assigned and periodically reviewed to ensure only those authorized to make data changes do so.

1. Obtain a list of individuals that have access to the State University Database System (SUDS).
2. Review the procedures to grant system access and/or initiate, monitor and cancel user privileges.
3. Perform a test of system access controls and/or user privileges to determine if only appropriate employees have access or need the privilege.
4. Consider other IT systems and related system access controls or user privileges that may impact the data elements used for each measure reviewed.
5. Evaluate the results and conclude on the reasonableness of procedures and practices in place for the setup and maintenance of system access, specifically addressing employees with SUDS access.
Procedures Performed

- Obtained a current listing of all those individuals who have access to the SUDS system from the BOG’s application portal manager.
- Obtained the role definitions in the SUDS system for each type of user.
- Discussed procedures with the Director of Institutional Research and Analysis for granting access to the SUDS system and monitoring to ensure user privileges are cancelled in a timely manner. Reviewed current listing of SUDS users and obtained reason for any new additions.
- Reviewed user listing and discussed with the Director of Institutional Research and Analysis to ensure only personnel that need access have access to the SUDS system, and only a limited amount have the ability to submit data.
- Reviewed Banner access/termination procedures with each department listed in section b of this report and ensured procedures are in place for authorization of adding a new user and timeliness of terminating personnel access.
- Reviewed email sent to department heads informing them the Banner Security Class Reports were created and stored on the common drive for them to review. Reports are created on a quarterly basis and we reviewed a sample of reports that were on the drive.
- Selected a sample of users who are significant to the submissions being tested and verified authorization was obtained for the new user, proper workorder was initiated by an authorized person, and determined the class approved agreed to their current Banner access privileges.
- Discussed procedures for terminating a Banner user with the Associate Vice President, ITS & CIO.

Findings

No exceptions were identified as a result of applying these procedures.

e) Testing of data accuracy.

1. Identify and evaluate data validity controls to ensure that data extracted from the primary systems of record are accurate and complete. This may include review of controls over code used to create the data submission. Review each measure’s definition and calculation for the consistency of data submissions with the data definitions and guidance provided by the BOG.
2. As appropriate, select samples from data the University has submitted to the BOG for its Performance Funding Model. Vouch selected data to original source documents.
3. Evaluate the results of the testing and conclude on the completeness and accuracy of the submissions examined.
Procedures Performed

For each submission file listed in Attachment I we performed the following procedures for the specific metrics identified in the Performance Funding Metrics published by the SUS:

- Obtained complete submission file for time period being tested.
- Selected a sample size of thirty (30) data items to test for each file submission and each metric specific to the performance funding testing.
- Verified data reported in the submission files specific to the metrics identified by the SUS agreed to the source system Banner.
- Verified the data reported for each metric agreed with the SUDS data dictionary.

To ensure completeness of the files being submitted we performed the following procedures:

- For each term and reported time frame we obtained, from the Information Technology Services department, a file which was extracted from Banner and compared to submission files extracted by the Institutional Research and Analysis department. For each comparison, we identified any person that was on the Banner report that was not in the file submission. We then selected a sample size based on the size of the file and errors returned and verified the student was properly omitted for the specific submission based on the current data definitions. Selected files and corresponding sample sizes are as follows:
  1. All students enrolled were compared to the Student Instruction (SIF) files submitted. Two (2) differences were identified and reconciled.
  2. All students who received Pell grants were compared to the Student Financial Aid (SFA) files submitted. Five (5) differences were identified and reconciled.
  3. All students who had a degree awarded were compared to the Degrees Awarded (SIFD) files submitted. We selected ten (10) variances and all were reconciled.
  4. All students admitted were compared to the Admissions (ADM) files submitted. We selected ten (10) variances and all were reconciled.

Findings

No exceptions were identified as a result of applying these procedures.

f) Evaluate the veracity of the University Data Administrator’s data submission statements that indicate, “I certify that this file/data represents the position of this University for the term being reported.”

1. Interview the University Data Administrator to consider the reasonableness of the various coordination efforts with the Data Administrator’s staff, the other data custodians' staff, BOG IRM, and other knowledgeable individuals which form the
basis for personal and professional satisfaction that data submitted to the BOG is complete, accurate and submitted timely.
2. Inquire how the Data Administrator knows the key controls are in place and operating effectively. If not already done, consider verifying these key controls are in place and adequate to support the Data Administrator’s assertions.

Procedures Performed

- Interviewed personnel listed in section b. of this report and verified communication with the Institutional Research and Analysis is on-going and clear to ensure accurate and timely data submission. Also verified controls are in place specific to the metrics being tested.
- Verified with the Director of Institutional Research and Analysis communication with the BOG and IRM to ensure data being submitted meets the data definitions.

Findings

No exceptions were identified as a result of applying these procedures.

g) **Review the consistency of data submissions with the data definitions and guidance provided by the Board of Governors through the Data Committee and communications from data workshops.**

1. Evaluate the University’s procedures for periodically obtaining and communicating definitions and due dates as provided by the BOG through the Data Committee and communications from data workshops.
2. Verify with the University Data Administrator that the most current data file definitions are used as a basis for preparation of data to be submitted to the BOG.
3. Review SUDS most recent cumulative release notes and workshop agendas. [https://www.flbog.edu/resources/ditr/suds/](https://www.flbog.edu/resources/ditr/suds/)
4. Request evidence of the most recent formal staff training/workshops, internal discussions or communications with other responsible employees and the BOG Data Committee necessary to ensure the overall integrity of data to be submitted to the BOG.
5. Conclude as to the consistency of the submissions.

Procedures Performed

- Reviewed email communications (the “HitList”) from the Institutional Research and Analysis (IRA) department to department heads. These emails detail the upcoming submissions due in the next two (2) months to the BOG and who is responsible for the data being submitted. Department heads review the data requests and are responsible to ensure the data is accurate and ready for timely submission.
- Obtained the most recent data definition tables on the SUDS website and verified data definitions outlined in the file processes agreed to the SUDS data tables.
Verified process with the Institutional Research and Analysis department of their communication to department heads of the data definitions and communication of any new or changed metric.

Obtained the SUDS release notes and workshop agendas during the testing period and verified any changes were properly incorporated into the data file submissions.

Reviewed staff training with each personnel interviewed as listed in section b. in relation to both Banner and SUDS security and knowledge training.

Our testing was performed on all file submissions from October 1, 2017 through September 30, 2018, for the specific metrics tested to review for consistency among data submissions.

Findings

No exceptions were identified as a result of applying these procedures.

h) Review the University Data Administrator’s data resubmissions to the Board of Governors with a view toward ensuring these resubmissions are both necessary and authorized. This review should also evaluate how to minimize the need for data resubmissions.

1. Interview the University Data Administrator about the types and quantity of recent data resubmissions and the level(s) of approvals necessary for corrective action.
2. Request and examine any correspondence between the University and the BOG IRM office related to data resubmissions that pertain to the performance metrics. Determine if these resubmission problems tend to be reoccurring and what, if any, actions management has taken or plans to take in order to reduce them.
3. Conclude as to the frequency, need and authorization of the resubmission process.

Procedures Performed

Interviewed the Director of Institutional Research and Analysis about the resubmission process followed by the department.

There were no resubmissions during our testing period.

Findings

No exceptions were identified as a result of applying these procedures.

i) Provide an objective basis of support for the president and board of trustees chair to sign the representations made in the Performance Based Funding–Data Integrity Certification.

1. Review the Performance Based Funding Data Integrity Certification statement to identify additional procedures that should be designed to support the representations.
Florida Gulf Coast University
January 14, 2019

Procedures Performed

- We reviewed the Data Integrity Certification and performed procedures agreed upon by Florida Gulf Coast University’s Board of Trustees to meet the objectives of the certification.

Findings

Mauldin & Jenkins was engaged to perform procedures that were provided by you and were outlined in our engagement letter. Management has identified these procedures to meet the objectives of the certification. The Board of Trustees must conclude as to the adequacy of these procedures and findings in meeting their certification objectives.

We were not engaged to and did not perform an audit, the objective of which would be the expression of an opinion on the processes and procedures for the complete, accurate and timely submission of data to the BOG. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of Florida Gulf Coast University’s Board of Trustees and management and is not intended to be and should not be used by anyone other than these specified parties.

Mauldin & Jenkins, LLC

Bradenton, Florida
January 14, 2019
<table>
<thead>
<tr>
<th>Due Date</th>
<th>Submission</th>
<th>Term or Year</th>
<th>Rept Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/11/2017</td>
<td>Degrees Awarded (SIFD)</td>
<td>Summer 2017</td>
<td>201705</td>
</tr>
<tr>
<td>10/6/2017</td>
<td>Admissions (ADM)</td>
<td>Fall 2017</td>
<td>201708</td>
</tr>
<tr>
<td>10/10/2017</td>
<td>Student Financial Aid (SFA)</td>
<td>Annual 2016</td>
<td>20162017</td>
</tr>
<tr>
<td>10/17/2017</td>
<td>Student Instruction File Preliminary (SIFP)</td>
<td>Fall 2017</td>
<td>201708</td>
</tr>
<tr>
<td>11/8/2017</td>
<td>Hours to Degree (HTD)</td>
<td>Annual 2016</td>
<td>20162017</td>
</tr>
<tr>
<td>1/19/2018</td>
<td>Student Instruction File (SIF)</td>
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<tr>
<td>1/23/2018</td>
<td>Retention (RET)</td>
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<td>20162017</td>
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<tr>
<td>2/2/2018</td>
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<td>3/2/2018</td>
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<td>9/7/2018</td>
<td>Admissions (ADM)</td>
<td>Summer 2018</td>
<td>201805</td>
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</tbody>
</table>
TO: Joe Fogg, Trustee and Chair of Audit and Compliance Committee  
FROM: Bill Foster, Director of Internal Audit  
SUBJECT: Glossary for Florida Gulf Coast University Performance Based Funding Data Integrity Audit for Board of Governors  
DATE: January 30, 2019

Glossary:

**Degrees Awarded (SIFD)** – To collect basic data about degrees awarded, e.g. degree program category, term awarded, major, and is used with Metrics 6, 8 and 10 (Bachelor’s degrees within programs of strategic emphasis, graduate degrees within programs of strategic emphasis, and bachelor’s degrees to minorities). This data is filed for the Fall, Spring and Summer semesters.

**Admissions (ADM)** – This file consists of demographic and academic history records of applicants for admission to the university, and to document the actions on those applicants. This data is filed for the Fall, Spring and Summer semesters. This relates to Metrics 1 and 2, (percent of bachelor’s graduates employed full-time in Florida or continuing their education, and median wages of Bachelor’s graduates employed 1 year after graduation).

**Student Financial Aid (SFA)** – This file includes all financial aid awards, by type of aid program, term, and amount. This data is filed annually and relates to Metric 3, cost to student, and Metric 7, university access rate (percent of undergraduates with Pell grants).

**Student Instruction File Preliminary (SIFP)** – A preliminary student data set, including the current term course load, last institution attended, type of student at date of entry, credit hours earned and GPA. This annual filing is to provide a preliminary record of student workloads for student enrollment reporting. This relates to Metrics 4, four year graduation rate and Metric 5, academic progress rate.

**Hours to Degree (HTD)** – This file has information about student who earn a first baccalaureate degree with a single major within the academic year and reported during the term awarded. This data is filed annually and relates to Metric 3, Cost to Student, and Metric 9, Excess Hours.

**Student Instruction File (SIF)** – This file includes student demographic data, academic history, current term course work, fee types, and waiver data. This data is filed for Fall, Spring and Summer semesters, and relates to Metric 3, cost to student, Metric 4 four year FTIC graduation rate, Metric 5, academic progress rate, and Metric 7, university access rate.

**Retention (RET)** – This file has student information to track progression of students in a cohort group across tracking years. This is reported annually and relates to Metric 4, four year graduation rate, and Metric 5, academic progress rate, FTIC, 2nd year retention, GPA above 2.0.
July 12, 2018

MEMORANDUM

To: Chairs, University Boards of Trustees
   University Presidents

From: Ned Lautenbach, Chair

Subject: Performance Based Funding
         Data Integrity Certification Process and Audit

Since it was approved by the Board of Governors in January 2014, the Performance Based Funding Model has incentivized universities and their boards of trustees to achieve excellence and performance improvements in key areas aligned to the SUS Strategic Plan goals. Over the past five years, the Performance Based Funding state investment has totaled approximately $985 million in additional state funding, demonstrating unprecedented support for the System. This is a great testament to the value of the state university system to educational and economic growth of this great state. These investments have allowed the system to keep tuition flat for our students.

For the 2018-2019 fiscal year, the investment into performance based funding has grown to an all-time high of $560 million including $265 million in state investment and $295 million in institutional investment. With this investment, universities have demonstrated the ability to achieve excellence and improvements in the 10 key metrics, including graduation and retention rates. The U.S. News & World Report released March 9, 2018, ranked Florida as the best state for higher education for the second year in a row. The Performance Based Funding Model works!

In November 2017, the Board of Governors evaluated the model’s metrics and approved changes to metrics 4 and 7. Changes to these metrics align with Senate Bill 4, signed into law during the 2018 Legislative Session. Metric 4 is now focused on four-year graduation rates rather than six-year graduation rates. Metric 7, regarding university access rates, now has differentiated benchmarks and scoring based on the varying access rate levels among our universities.
June 29, 2018
Page 2

A key component of the model’s success is the ability of the Board of Governors to rely on information you provide for Performance Based Funding decision-making. I would like to commend you, your data administrators, and the many university staff responsible for ensuring reliable, accurate, and complete information is timely submitted to the Board of Governors. I would also like to thank your chief audit executives for focusing a significant portion of their office’s resources to auditing your university’s Performance Based Funding-related controls, processes, and data submissions. Collectively, these efforts allow you to confidently certify data submissions to the Board of Governors and enhance public trust and confidence in this process.

As a result, I am asking that each university president again complete a Data Integrity Certification (attached). When completing this certification, you should evaluate each of the 12 prepared representations. If you are able to affirm a representation, do so. If you are not able to make a representation as prepared, provide an explanation or modification in the space provided. It is important that representations be modified to reflect audit findings. The certification document shall be signed by the president and board of trustees chair after being approved by the board of trustees. The completed Data Integrity Certification shall be submitted to the Office of Inspector General and Director of Compliance.

To make such certifications meaningful, university boards of trustees shall direct the university chief audit executive to perform, or cause to have performed by an independent audit firm, an audit of the university’s processes that ensure the completeness, accuracy, and timeliness of data submissions. It is our intent that such audits include testing of data that supports performance funding metrics. Such testing is essential to determining if processes are in place and working as intended.

The scope and objectives of the audit should be set jointly between the chair of the university board of trustees and the university chief audit executive. The audit shall be performed in accordance with the current International Standards for the Professional Practice of Internal Auditing as published by the Institute of Internal Auditors, Inc.

The results of this audit shall be provided to the Board of Governors after being accepted by the university’s board of trustees. The audit report shall include the university’s corrective action plan designed to correct any audit findings. The audit results shall support the president’s certification which shall include any noted audit findings. The completed Data Integrity Certification and audit report shall be
June 29, 2018
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submitted to the Office of Inspector General and Director of Compliance no later than \textbf{March 1, 2019}.

I ask that you consider this deadline when establishing dates for your 2019 board of trustees meetings as we will need these audits and certifications included in our March Board of Governors meeting materials.

We appreciate your cooperation and assistance in ensuring the integrity of the performance funding process.

If you have questions regarding these requirements, please do not hesitate to contact the Board of Governors Inspector General at BOGInspectorGeneral@flbog.edu or 850-245-0466.

NCL/jkm

Attachment
**Performance Based Funding Data Integrity Certification Representations**

<table>
<thead>
<tr>
<th>Representations</th>
<th>Yes</th>
<th>No</th>
<th>Comment / Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am responsible for establishing and maintaining, and have established and maintained, effective internal controls and monitoring over my university’s collection and reporting of data submitted to the Board of Governors Office which will be used by the Board of Governors in Performance Based Funding decision-making.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2. These internal controls and monitoring activities include, but are not limited to, reliable processes, controls, and procedures designed to ensure that data required in reports filed with my Board of Trustees and the Board of Governors are recorded, processed, summarized, and reported in a manner which ensures its accuracy and completeness.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>3. In accordance with Board of Governors Regulation 1.001(3)(f), my Board of Trustees has required that I maintain an effective information system to provide accurate, timely, and cost-effective information about the university, and shall require that all data and reporting requirements of the Board of Governors are met.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>4. In accordance with Board of Governors Regulation 3.007, my university shall provide accurate data to the Board of Governors Office.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>5. In accordance with Board of Governors Regulation 3.007, I have appointed a Data Administrator to certify and manage the submission of data to the Board of Governors Office.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
# Performance Based Funding Data Integrity Certification

## Performance Based Funding Data Integrity Certification Representations

<table>
<thead>
<tr>
<th>Representations</th>
<th>Yes</th>
<th>No</th>
<th>Comment / Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. In accordance with Board of Governors Regulation 3.007, I have tasked my Data Administrator to ensure the data file (prior to submission) is consistent with the criteria established by the Board of Governors Data Committee. The due diligence includes performing tests on the file using applications/processes provided by the Board Office.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>7. When critical errors have been identified, through the processes identified in item #6, a written explanation of the critical errors was included with the file submission.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>8. In accordance with Board of Governors Regulation 3.007, my Data Administrator has submitted data files to the Board of Governors Office in accordance with the specified schedule.</td>
<td>☒</td>
<td>☐</td>
<td>There was 1 late submission</td>
</tr>
<tr>
<td>9. In accordance with Board of Governors Regulation 3.007, my Data Administrator electronically certifies data submissions in the State University Data System by acknowledging the following statement, “Ready to submit: Pressing Submit for Approval represents electronic certification of this data per Board of Governors Regulation 3.007.”</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10. I am responsible for taking timely and appropriate preventive/corrective actions for deficiencies noted through reviews, audits, and investigations.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>11. I recognize that the Board’s Performance Based Funding initiative will drive university policy on a wide range of university operations – from admissions through graduation. I certify that university policy changes and decisions impacting this initiative have been made to bring the university’s operations and practices in line with State University System Strategic Plan goals and have not been made for the purposes of artificially inflating performance metrics.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>12. I certify that I agreed to the scope of work for the Performance Based Funding Data Integrity Audit conducted by my chief audit executive.</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
Performance Based Funding
Data Integrity Certification

<table>
<thead>
<tr>
<th>Performance Based Funding Data Integrity Certification Representations, Signatures</th>
</tr>
</thead>
<tbody>
<tr>
<td>I certify that all information provided as part of the Board of Governors Performance Based Funding Data Integrity Certification is true and correct to the best of my knowledge; and I understand that any unsubstantiated, false, misleading, or withheld information relating to these statements render this certification void. My signature below acknowledges that I have read and understand these statements. I certify that this information will be reported to the board of trustees and the Board of Governors.</td>
</tr>
<tr>
<td>Certification: __________________________________________ Date______________________ President</td>
</tr>
<tr>
<td>I certify that this Board of Governors Performance Based Funding Data Integrity Certification has been approved by the university board of trustees and is true and correct to the best of my knowledge.</td>
</tr>
<tr>
<td>Certification: __________________________________________ Date______________________ Board of Trustees Chair</td>
</tr>
</tbody>
</table>