

EQUAL OPPORTUNITY AND COMPLIANCE OFFICE 214 W. Cameron Avenue Campus Box 9160 Chapel Hill, NC 27599-9160 919-966-3576 | eoc.unc.edu

## NOTICE OF ADVOCATE REPRESENTATION

As used in this document, the term "Advocate" means a person who may accompany a party to investigative, administrative, or adjudicative meetings or proceedings under EOC policies and may fully participate in the proceeding to the same extent afforded to the represented party. An Advocate may be an attorney but is not required to be. For an Advocate to participate in an EOC meeting or proceeding, the party must complete and submit this form and the applicable Consent for Release of Information form.

In accordance with Equal Opportunity and Compliance (EOC) Office policies and procedures, any individual who submits a report of a violation under either the University's *Policy on Prohibited Discrimination, Harassment and Related Misconduct Including Sexual and Gender-Based Harassment, Sexual Violence, Interpersonal Violence and Stalking* (PPDHRM Policy) or the University's *Policy on Prohibited Sexual Harassment Under Title IX* (Title IX Policy), or who is the subject of such a report, may be represented at their own expense by an Advocate of their choosing. This form should be submitted to the Equal Opportunity and Compliance Office (EOC Office) at least five (5) business days prior to the investigative, administrative, or adjudicative meeting or proceeding that the Advocate will attend. A record of this form will be maintained at the EOC Office.

Additionally, parties must complete and sign a release of information form providing consent for the disclosure of information and University records maintained by the EOC Office under applicable law. The release of information form also should be submitted at least five (5) business days prior to the investigative, administrative, or adjudicative meeting or proceeding that the Advocate will attend.

## I. Advocate Information:

Name of Individual Represente	d:		
Name of Advocate:			
Mailing Address:			
Phone Number:			
Email Address:			
Licensed Attorney: Yes			
Firm Name (if applicable):			

## II. <u>Certification</u>:

Prior to participating in any meeting or proceeding, the Advocate must initial each line applicable to this matter and sign below, indicating that they have read, understood, and agree to comply with each of the documents initialed below.

For matters involving the Policy on Prohibited Discrimination, Harassment and Related Misconduct Including Sexual and Gender-Based Harassment, Sexual Violence, Interpersonal Violence and Stalking (PPDHRM Policy)
Policy on Prohibited Discrimination, Harassment and Related Misconduct, Including Sexual and Gender- Based Harassment, Sexual Violence, Interpersonal Violence and Stalking (PPDHRM Policy)
and the PPDHRM Procedures* applicable to this matter, as set out in the Notice of Investigation
Procedures for Reporting and Responding to Complaints of Discrimination, Harassment, and Related Misconduct Involving a Student as the Responding Party;
Procedures for Reporting and Responding to Complaints of Discrimination, Harassment, and Related Misconduct Involving a University Employee as the Responding Party; <i>or</i>
Procedures for Reporting and Responding to Complaints of Discrimination, Harassment, and Related Misconduct Involving a Visitor, Program Participant, Contractor or other Third Party as the Responding Party
*If you are unsure which PPDHRM procedures apply, contact the Report and Response Manager or Investigator.
For matters involving the Policy on Prohibited Sexual Harassment Under Title IX (Title IX Policy)
Policy on Prohibited Sexual Harassment Under Title IX (Title IX Policy); and
Procedures for Addressing Prohibited Sexual Harassment Under Title IX

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	ers involving either Policy, having read the nd and agree to comply with the following	applicable Procedures as noted above, I spec g:	cifically			
	A party's Advocate may not delay, disrupt, or otherwise interfere with the Investigation or Adjudication process.					
—	The EOC Office will communicate and correspond directly with the party. It is the party's responsibility to communicate and share information with the Advocate.					
By signing below, I acknowledge that I have read and understood the above-listed documents applicable to thi matter. I further understand that this is an administrative process and that neither the formal rules of civ procedure nor the rules of evidence apply.						
other indi- authorized whether a	vidual engaged or otherwise used by the Ad by that party regardless of the party's acture party has, through their Support Person or	dvocate, an employee or contractor of an Advoc Advocate that may violate the Policy may be o ual knowledge. This applies, but is not limited to Advocate, engaged in Retaliation, Violation of a Disclosure, or any other Prohibited Conduct.	considered o, analyzing			
Advocate	's Signature	 Date				
above-na		on by an Advocate, I confirm that I have request gree to inform the EOC Office, in writing, when if I seek new representation.				
individual by me rega my Advoc	engaged or otherwise used by my Advocate ardless of my actual knowledge. This applie	te, an employee or contractor of my Advocate, o e that may violate the Policy may be considered es, but is not limited to, analyzing whether I hav of Supportive Measures, Interference with t nduct.	authorized ve through			
Participat	ting Individual's Signature	 Date				