PROJECT SUMMARY

Overview

Environmental health and safety processes at Texas A&M International University require improvement in certain areas to better ensure that a safe environment exists for students, faculty, staff and visitors. The processes for monitoring laboratories and providing safety training to students and employees require significant improvement. Increased formalization of safety and security processes through additional procedures and documentation is also needed to ensure that these processes are functioning effectively and demonstrate safety and security efforts undertaken by the University. The University is facing several infrastructure challenges related to its current growth which could have an adverse impact on its safety and security. The current water supply coming from the city is not always reliable and has affected the performance of the fire sprinkler systems in one campus building. In addition, there is currently only one exit from the campus which could cause traffic and congestion problems during an emergency evacuation. Management is working with the city and surrounding landowners to address these infrastructure issues.

Generally, the University’s financial and management controls over the selected physical plant operations reviewed ensure resources are used efficiently and effectively and in compliance with laws, policies, regulations, and University rules. Some improvements need to be made in the areas of supply inventory controls and establishing and documenting service rates.

Summary of Significant Results

Laboratory Safety Monitoring

The University’s laboratory safety processes require improvement to better ensure that all laboratories remain safe and that laboratory safety issues are identified and addressed in a timely manner. Laboratory inspections have not been consistently performed on an annual basis and are not scheduled based upon the relative safety risk of the respective laboratory or facility.
Safety inspection reports are not formally documented and submitted to management and departmental personnel. Most safety deficiencies are corrected at the time of inspection; however, for those deficiencies not immediately corrected, no tracking system is in place with a subsequent follow-up inspection to ensure that all deficiencies noted are addressed in a timely manner. No periodic spot checks are performed of teaching laboratories in session to ensure lab safety protocols are being enforced. The physical observation of several teaching and research laboratories during the audit did not identify any significant safety weaknesses at that time.

Safety Training

Student and employee safety training processes do not have adequate controls in place to ensure that all necessary safety training is completed and documented in a timely manner. Students appear to be receiving laboratory safety training; however, documentation of the training process requires improvement including standardization and retention of training forms and records. For more than half of the students tested, training records were not retained. Of those with training documentation approximately 30% did not receive the training in a timely manner. Employees potentially exposed to hazardous chemicals have not been required to complete detailed hazardous communication training. Employees potentially exposed to bloodborne pathogens are required to complete safety training; however, almost 40% of employees tested had not completed the training by their required due date. Safety training is an important preventative control to ensure the safety of all affected students and employees.

Summary of Management’s Response

The University contracted with The Laboratory Safety Institute to conduct initial laboratory inspections, and standard operating procedures are being developed to ensure consistency in safety inspections, as well as camp administration and student travel. Additionally, student lab safety training forms have already been standardized across campus, and the Environmental Health & Safety (EHS) office will work with faculty to ensure that training is being conducted in a timely manner. TrainTraq is now being utilized to ensure that employee training is completed within prescribed time frames.
University management is committed to ensuring the safety of students, faculty, staff and visitors, and we appreciate the internal audit team’s assistance in helping us with this endeavor.

Scope

The review of environmental health and safety operations included safety training, laboratory safety, fire and life safety, youth camps, student travel, Clery Act reporting, and safety procedures. Physical plant operations reviewed focused on the areas of warehouse inventory management, services rates, information technology controls over the work order system, and procurement of goods. These operations were reviewed for the period September 2008 through December 2009. Fieldwork was conducted in January and February 2010.
OBSERVATIONS, RECOMMENDATIONS, AND RESPONSES

1. Laboratory Safety Monitoring

Observation

Although no significant safety weaknesses were noted during the physical observation of teaching and research laboratory facilities, the University’s laboratory safety monitoring processes require improvement to better ensure that teaching and research laboratories remain safe and that all laboratory safety issues are identified and addressed in a timely manner. The following laboratory safety monitoring issues were noted:

- Formal inspections of laboratory facilities are not performed at least annually for compliance with safety protocols. In addition, the frequency and scheduling of inspections is not based upon the relative safety risk of the respective laboratory or related facility.

- Safety inspection reports are not being formally documented and submitted to management or the responsible laboratory personnel, faculty, or researcher.

- Most safety deficiencies identified are corrected at the time of the inspection. However, for those deficiencies not corrected during the inspection, no formal tracking system is in place to better ensure that all recommendations are implemented or resolved in a timely manner.

- No periodic spot checks are performed of teaching laboratories in session to ensure lab safety protocols are being enforced by the lab instructors such as proper use of personal protective equipment.

Physical observation of seven teaching and four research laboratories, as well as three other laboratory facilities observed during the audit, indicated no significant safety issues. Chemistry and Biology labs, considered the most significant from a safety standpoint, had little or no safety issues. However, varying degrees of noncompliance with safety requirements were noted in other laboratory facilities observed including instances of improper storage or labeling of chemicals, missing safety features such as emergency...
1. Laboratory Safety Monitoring (cont.)

Texas A&M System Supplemental Risk Management Standards involving health and safety require implementation of a laboratory safety program in accordance with prudent practices in the laboratory to reduce occupational exposure to health and safety hazards. This includes the use of personal protective equipment such as proper clothing, safety glasses, gloves, and laboratory coats wherever hazards are present that may result in injury or impairment. These standards also require that buildings and grounds occupied by faculty, students, employees or visitors be kept clean to the extent that the nature of the work or research allows, such as eliminating excess clutter.

Recommendation

Prepare and follow a risk-based safety inspection schedule including timelines for performing inspections of the various laboratories, shops, and related facilities.

Document and submit formal laboratory and related safety inspection reports to the responsible laboratory personnel, faculty, and/or researcher and provide copies to the respective University management.

Conduct periodic unannounced inspections of teaching and research laboratories (especially, while labs are in use) to ensure that students, faculty, and staff adhere to lab safety guidelines/protocols such as use of personal protective equipment and proper storage of chemicals.

Ensure that all teaching labs and related facilities contain the proper safety equipment and that this equipment is properly maintained and inspected. In addition, ensure these facilities are kept clean and free of excess clutter to the extent that the nature of the work or research allows.

Implement a follow-up inspection process that includes documentation and tracking of all laboratory safety deficiencies identified and a follow-up visit to ensure appropriate steps have been taken to correct the identified deficiencies.

Management’s Response

The University contracted with Dr. Jim Kaufman, president and CEO of the Laboratory Safety Institute, to conduct initial laboratory
inspections on Wednesday, May 19, 2010, with formal reports to follow. A risk analysis for all labs will be completed by August 31, 2010, and a schedule will then be created for future inspections.

Standard operating procedures detailing a formal inspection process that includes creation of an inspection checklist, documentation and report submission, unannounced inspections of teaching and research labs, deficiency tracking, and follow-up inspection processes will be created by November 30, 2010.

2. Safety Training

Observation

Safety training is an important preventative control to ensure the safety of all affected students and employees. Limited standardized guidelines and monitoring processes are in place to ensure that all necessary safety training is completed in a timely manner. The following conditions were noted in regards to safety training:

- While the students appear to be receiving laboratory safety training; no signed and dated documentation of the training was retained for twenty-six (52%) of 50 students tested. In addition, signed safety training documentation did not always provide sufficient information to determine the student and/or course for which the training was being performed. Adequate documentation is important to ensure safety training is being completed in a timely manner.

- For the remaining 24 students tested that had signed safety training documentation, seven (29%) did not receive the training in a timely manner (on or prior to the first lab session) and four (17%) did not document the training date in order to determine the timeliness of the training.

- No employees hired during the audit period who are at risk of being exposed to hazardous chemicals were required to complete detailed hazardous communication (HazCom) training. The University has recently began using the A&M System TrainTraq system to provide detailed HazCom training to employees and track the timely completion of this training.

- Two (10%) of 20 employees tested that were hired at risk of being exposed to bloodborne pathogens (BBP) did not have documentation available to support that they completed BBP safety training. Of the 18 employees tested that received BBP...
safety training, seven (39%) did not complete the training by their required due date and five (28%) within 30 days of their hire date.

Texas A&M System Supplemental Risk Management Standards involving health and safety require that standard operating procedures be developed and published and corresponding training be provided and documented on identified health and safety hazards to affected faculty, staff, students, and visitors. In addition, Texas Administrative Code, Title 25 Health Services, Rule 295.7 requires that employers develop a hazard communication program to provide training for new or newly assigned employees which must be completed prior to assigning any duties that may result in exposure to hazardous chemicals.

**Recommendation**

- Develop standardized guidelines for student laboratory safety training including documentation and records retention requirements.
- Monitor to ensure that lab safety training is performed for all relevant students in a timely manner and that these records are organized and complete.
- Enhance student safety training documentation to better facilitate monitoring by including the student's signature and printed name, course name, section number, and instructor's name. In addition, centralize student laboratory safety training records at each departmental office.
- Ensure that all employees with the potential exposure to hazardous chemicals and bloodborne pathogens receive detailed safety training prior to initial exposure to these materials/pathogens. Continue current efforts to utilize the automated features in TrainTraq to monitor and track employee safety training for timely completion.

**Management’s Response**

*Student lab safety forms have been standardized to document safety training for both the Fine Arts and Sciences area and have been modified as recommended to include more pertinent information to properly document the completion of the training. Departments will maintain each student signed form for a minimum of one academic year.*
2. Safety Training (cont.)

To ensure the forms are being completed, Lab Safety Training paperwork will be audited by the EHS office annually.

As of January 2010, Hazard Communication training is administered via TrainTraq and Bloodborne Pathogens training is being tracked through TrainTraq, although at this time, the training is still face-to-face. Stronger efforts are being made to provide Bloodborne Pathogens training to all new hires within 10 days of hire, and the training is in the process of being converted to an online course. The A&M System is currently testing the online course and expects to go live by November 2010.

3. Safety Guidelines and Procedures

Observation

Increased formalization of safety and security processes is needed through the development of additional procedures and documentation to ensure that these processes are functioning effectively and demonstrate safety and security efforts undertaken by the University. Although current University safety programs provide guidance over the most significant health and safety areas such as chemical and biological safety, improvement is needed to better cover other safety areas included in the A&M System health and safety standards. In addition, some of these safety programs have not been updated since 2002. Lack of resources within the Safety Office in the past limited the ability to develop and maintain the safety program procedures. However, two additional health and safety personnel were hired in 2009, and Safety Office personnel are currently working to update and expand current University safety programs. The University’s Safety Office also lacks a set of standard operating procedures to support safety operations and processes (e.g. lab inspections, safety training, incident reporting, tracking and follow-up of inspection deficiencies identified, etc.).

The Texas A&M System Supplemental Risk Management Standards involving health and safety require that standard operating procedures be developed and published on identified health and safety hazards to reduce risks to faculty, staff, students, and visitors.

Recommendation

Continue expanding and updating current guidance on University safety programs for the environmental health and safety program. Structure and align these programs to the health and safety
3. Safety Guidelines and Procedures (cont.)

Standards required by A&M System regulations to better ensure that adequate safety guidance is available for all required health and safety areas. Review and update guidance on an annual basis.

Develop and implement standard operating procedures for the University's Safety Office.

Management’s Response

Safety program guidance for the remaining System health and safety standards relevant to the University will be developed by November 30, 2011, and updated as necessary annually. Existing safety program guidance will be scheduled for review and updated as necessary annually beginning in fiscal year 2011. Program documentation will be updated to reflect the review date for the program guidance.

The creation of standard operating procedures (SOP) is underway and will be completed by August 31, 2011. A more detailed SOP for the summer camp insurance program was completed in March 2010.

4. Fire and Life Safety

Observation

The University’s Safety Office and the Physical Plant have worked together to address and correct all prior State Fire Marshall issues with the exception of one that is affected by the adequacy of the water supply provided by the city. However, due to a previous lack of resources within the Safety Office, some fire and life safety monitoring processes within the University are weak as noted below:

- Internal fire and life safety inspections are not consistently scheduled and performed.

- No fire and life safety checklists or other form of documentation were being used when performing inspections to better ensure that all facets of fire/building code standards are properly covered.

- Most fire and life safety deficiencies identified are corrected at the time of the inspection. However, it is important to establish a tracking system for the deficiencies, especially as the University continues to grow, to better ensure that all recommendations are implemented or resolved in a timely manner.
4. Fire and Life Safety (cont.)

Physical observation of five buildings determined that most fire extinguishers and sprinklers systems had been inspected timely. However, sporadic instances of noncompliance with other fire and life safety requirements were noted involving primarily emergency exits, electrical safety, and obstruction of fire safety systems. Fire and life safety monitoring processes are necessary to better ensure the safety of students and employees from fire and life safety hazards.

Recommendation

Prepare and follow a risk-based fire and life safety inspection schedule including timelines for performing inspections of the various facilities. Utilize a checklist during these inspections to better ensure that that all facets of fire/building code standards are properly covered.

Document and submit formal fire and life safety inspection reports to the responsible personnel and provide copies to the respective University management.

Implement a follow-up inspection process that includes documentation and tracking of all fire and life safety deficiencies identified and a follow-up visit to ensure appropriate steps have been taken to correct the identified deficiencies.

Management’s Response

A fire and life safety risk analysis for all buildings will be conducted, and a schedule will then be created for inspection purposes based on the risk analysis by August 31, 2010.

Standard operating procedures will be created by November 30, 2010, that detail a formal inspection process that includes creation of an inspection checklist, documentation and report submission, deficiency tracking, and follow-up inspection processes.

5. Federal Clery Act

Observation

The federal Clery Act requires that universities report statistics for the three most recent calendar years concerning certain crimes on campus, in or on non-campus buildings or property, and on public property that are reported to local police agencies or to a campus security authority. Noncompliance with Clery Act requirements
could result in significant fines and penalties to the University. During testing of the most recent University Clery Act report (2009), the following conditions were noted:

- One reported 2008 residential sexual assault was not included with the 2009 University Clery data submission as required by the Clery Act.

- No follow-up is performed with campus officials who do not respond to requests for crime data to better ensure the completeness of Clery crime data being reported.

- Casa Ortiz, a University-leased Laredo historical landmark building that hosts some University events involving student organizations, was not included in the 2009 University Crime Awareness and Campus Safety Report as a Non-Campus Building or Property.

- Eight web links within the 2009 University Crime Awareness and Campus Safety Report were not functioning or linked to current Clery reports.

- Three University departmental websites (Office of Student Affairs, Student Judicial Affairs, and Office of Human Resources) that were cited in the 2009 University Crime Awareness and Campus Safety Report as additional offices from which to access the 2009 Report, had web links to non-current Clery reports.

Other issues noted include the daily crime log currently published by the University consisting of a mixture of campus crimes and routine incidents rather than crimes only as stated in the Clery Act. In addition, insufficient documentation is maintained to demonstrate that the crime log is updated in a timely manner.

**Recommendation**

Revise the current Clery Act reporting process to better ensure the completeness and accuracy of the report and compliance with all Clery Act reporting requirements by:

- Proofing numerical Clery data in the annual report, report web links, and the associated departmental web links that are referenced in the Crime Awareness and Campus Safety Reports for accuracy and to ensure all links remain current and accessible throughout the entire University website.
5. Federal Clery Act (cont.)

- Requiring all campus officials who have "significant responsibility for student and campus activities" to report any crimes known to them to the University Police Department, in a timely manner, and return the University Police Department annual Clery data collection form that is emailed to those campus officials, whether they have gathered any Clery data or not. If no response is received, the University Police Department should follow-up to confirm that there was no Clery Act crime data to report.

- Documenting changes or updates to the daily crime log and including only crime data as defined by the Clery Act in this log.

Management’s Response

Clery data will be more closely reviewed, and all web links have been updated as of March 31, 2010. Additionally, “Dear Colleague” letters are now sent to all campus officials with significant responsibility for student and campus activities via e-mail and via our online portal, Uconnect. Police administration will follow up with all campus officials who do not respond either in the affirmative or negative.

The Daily Crime Log has been revised (as shown below) to include only Cleary Act defined crimes and now indicates the date of the last update.

![DAILY CRIME LOG Calendar Year 2010](image)

6. Camp Administration

Observation

<table>
<thead>
<tr>
<th>Nature of Crime (classification)</th>
<th>Case Number</th>
<th>Date/Time Reported</th>
<th>Date/Time occurred</th>
<th>General Location</th>
<th>Disposition</th>
<th>Date Last Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theft</td>
<td>2010-001</td>
<td>01/05/2010 14:59hrs</td>
<td>01/04/2010 14:00-00:00</td>
<td>Pellegrino Hall</td>
<td>Closed</td>
<td>01/05/2010</td>
</tr>
</tbody>
</table>

Administration of university-sponsored camps requires improvement to better ensure the safety of camp participants.

No University rule or comprehensive written operating procedures have been developed to provide standardization and guidance to the administration of university-sponsored camps. As a result, certain safety processes within these camps require improvement to better ensure the safety of camp participants (especially youths). For instance, although background checks or screenings recently
began on University employees, no similar checks are being performed on non-University personnel or volunteers prior to working at the camps. In addition, camp documentation is decentralized at the responsible department and standardized forms are not always used making it difficult to ensure all documents are completed, signed, and retained.

Of the seven camps tested for proper safety documentation one camp did not retain any participant safety documentation. Of the 102 camp participants tested in the remaining six camps, seven (7%) did not have a properly completed or signed medical release form and eight (8%) did not have a properly completed or signed liability waiver.

**Recommendation**

Develop a University rule and corresponding written operating procedures for the administration and operation of all university-sponsored camps. Include requirements for use of standardized forms and performance of background checks on all camp personnel (including volunteers, etc.) prior to working at the camp.

Develop checklists for departments to use when administering camps to better ensure that all required camp forms and other documentation are properly completed and signed. Include document retention requirements for these forms and other camp documentation and periodically review for compliance.

As the University hosts more camps consider centralizing the administration of camp documentation to the extent possible for more effective and efficient administration of these camps.

**Management’s Response**

*A University rule will be developed by November 30, 2010.*

The University intranet, InsideTAMIU, has been updated to reflect the newly adopted standard operating procedures for camp insurance processing. Among the changes, criminal history background checks are now required of all camp personnel (volunteers, employees, independent contractor, etc.), and a checklist has been created for all departments to utilize to help ensure that documentation is properly signed and received in the EHS office within two weeks of camp completion. Camp documentation will be centralized in the EHS office.
7. Student Travel

Observation

Student travel procedures are not being followed in some University areas.

Several types of student travel occur at the University including travel related to student organizations, study abroad, academic field trips, and participation in athletic contests. A University rule for student travel has been established by the University and is in compliance with System Policy 13.04. However, student travel documentation is decentralized at the responsible department and standardized forms are not always used making it difficult to ensure all documents are completed, signed, and retained. Instances of noncompliance with these procedures were noted during a review of student travel documentation at various University departments. This included instances in which all required student travel forms were not completed, not completed accurately, or not required in some cases such as for athletic team travel. In addition, there was no documentation available to ensure that current driver safety requirements related to student travel were being followed.

Recommendation

Revise the current University rule for student travel and/or develop a corresponding standard operating procedure to provide more specific guidance on required forms and driver safety documentation requirements for each type of student travel. Standardize the required student travel forms being used and include references to these forms in the University rule or operating procedures.

Develop checklists for departments to use when planning student travel to better ensure that all required forms and driver safety procedures are being performed and documented. Include retention requirements for these forms and other student travel documentation and periodically review this documentation for compliance. Determine whether release from liability and consent forms are needed for student-athletes during athletic team travel and implement as needed.

Management’s Response

*The University rule is currently being reviewed/revised with an anticipated completion date of November 30, 2010. Along with the new rule, there will be standard operating procedures created to assist with student travel that will include checklists, a retention schedule for documentation, and procedures for documentation review by the EHS office.*
8. Warehouse Inventory

Observation

Controls over warehouse inventory processes are weak in certain areas and require improvement.

Although the Physical Plant maintains a minimal supply inventory of approximately $10,000 to $15,000, additional inventory controls are needed to better protect and account for this inventory. For instance, the University has not established written procedures or guidelines for administering warehouse supply inventory such as periodic physical counts and inventory reconciliations. Lack of adequate controls over the Physical Plant's warehouse inventory operations increase the risk for inappropriate and inefficient use of inventory resources.

The Committee of Sponsoring Organizations Report, Internal Control – Integrated Framework, states that as a physical control – “Equipment, inventories, securities, cash and other assets are secured physically, and periodically counted and compared with amounts shown on control records.”

Recommendation

Prepare written procedures for administering Physical Plant warehouse inventory including periodically counting and reconciling this inventory at least annually. Promptly investigate and correct all differences noted. Ensure that the duties of purchasing, storing, receiving, counting, and reconciling this inventory are appropriately segregated.

Management’s Response

The Physical Plant has upgraded the TMA work order software solution to include a materials management module for warehouse inventory. UPC readers have been ordered to allow tracking of materials used for specific work order requests. We expect the warehouse inventory program will be implemented by February 28, 2011, and standard operating procedures will be written to outline the inventory process including reconciliation.
9. Service Rates

Observation

Processes for establishing and documenting service rates have not been sufficiently developed to ensure compliance with A&M System regulations.

Comprehensive written procedures have not been developed for establishing service rates at the Physical Plant. As a result, portions of the rate setting and cost allocation process may not be adequately documented with supporting schedules and other accounting records in compliance with A&M System regulations. The University’s use of a direct chargeback method in establishing service rates limits the need for extensive rate setting documentation. However, supporting documentation is needed for various estimates and overhead allocations included as part of the rate calculation process. In addition, separate accounting records related to costs, revenues, billings, collections, and surpluses or deficits are required to be developed and adjusted annually for each separate service provided.

A&M System Regulation 21.01.05 states that each System member is responsible for establishing user rates, maintaining proper documentation of rate calculations, verifying that rates are not discriminatory towards different groups of users, and periodically reviewing operations for compliance. Without adequate supporting documentation there is a greater risk that billing rates are not set to recover the costs of providing the respective services. In addition, educational and general funds could indirectly be used to subsidize auxiliary enterprises.

Recommendation

Develop and implement comprehensive written procedures for establishing service rates including adequate documentation of rate calculations in compliance with A&M System Regulation 21.01.05, Service Departments. This documentation includes supporting schedules and accounting records used to establish rates and allocate costs for each service provided, especially those that are not based upon the direct chargeback method such as overhead costs.

Coordinate with the Business Office for assistance in establishing rates and the supporting schedules and accounting records as needed.
Management’s Response

9. Service Rates (cont.)

The department will coordinate with the Business Office to develop and implement standard operating procedures for establishing service rates in order to comply with A&M System Regulation 21.01.05 by February 28, 2011.
BASIS OF REVIEW

Objective

The overall objective was to review and assess the University’s controls and processes over campus safety and security operations to ensure that they provide reasonable assurance that a safe environment exists for students, faculty, and staff. In addition, review and assess the financial and management controls over physical plant operations to determine if resources are used efficiently and effectively and in compliance with laws, policies, regulations, and University rules.

Criteria

Our audit was based upon standards as set forth in the System Policy and Regulation Manual of the Texas A&M University System; the Treadway Commission’s Committee of Sponsoring Organization’s Internal Control - Integrated Framework (COSO); Texas A&M International University Rules and Procedures; federal and state laws; and other sound administrative practices. This audit was performed in compliance with the Institute of Internal Auditors’ “International Standards for the Professional Practice of Internal Auditing.”

Additionally, we conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Background

The University is committed to a campus environment that protects the safety and the environment of the students, employees, and visitors. The environmental safety function within the Physical Plant, and the University Police Department (UPD), comprise the two most significant elements of the safety and security functions at the University. The Safety Office is staffed by three full-time employees with a fiscal year 2010 operating budget of almost $150,000. The mission of the UPD is to provide the University community with a safe and secure learning and working environment by providing the
highest quality police services, which include prompt response, availability of officers, and informational and instructional services. UPD is staffed by approximately twenty-four full-time employees with a fiscal year 2010 operating budget of over $800,000.

The University’s Physical Plant reports to the Division of Finance and Administration. The mission of the Physical Plant is “to maintain the buildings, grounds, utilities, and real property that are required to run the University in an efficient manner as well as to provide safety training and guidance to the University community in an effort to have a safe place to work and study.” To achieve this mission the Physical Plant is staffed with approximately 30 full-time positions who perform a wide range of services to the University including utility operations, building maintenance, grounds maintenance, and environmental health and safety. The Physical Plant has a fiscal year 2010 operating budget of over $3 million.
AUDIT TEAM INFORMATION

Dick Dinan, CPA, Director
Brian Billington, CPA, Project Manager
Mark Heslip
Darwin Rydl, CPA

DISTRIBUTION LIST

Dr. Ray M. Keck, III, President
Mr. Juan J. Castillo, Vice President for Finance and Administration
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