

ANNUAL SECURITY REPORT AND CAMPUS POLICIES MANUAL 2021

ETI TECHNICAL COLLEGE OF NILES
2076 YOUNGSTOWN WARREN ROAD
NILES, OHIO 44446
330-652-9919

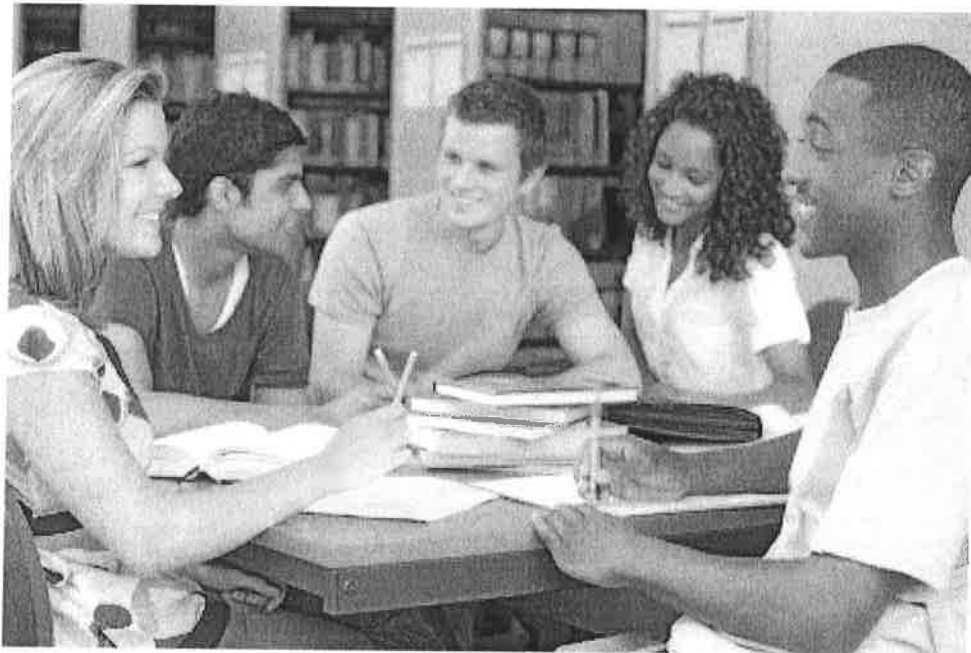


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CAMPUS SECURITY POLICIES AND PROCEDURES

The school buildings are open from 8:00 a.m. - 10:30 p.m., Monday-Thursday, and 8:00 a.m. - 4:00 p.m., Fridays. Adult education programs may attend classes on the weekends as well, between 9:00 a.m. - 4:00 p.m., Saturday and Sunday. Monitored security cameras are installed throughout the campus. Any security questions or concerns should be addressed to Al Roden, Security Director. Mr. Roden's office is in the main school building next to the library. Please call 330-397-4927 to reach him. School sponsored pastoral or professional counseling services are not offered. ETI maintains a strong working relationship with the City of Niles Police Department as well as the Ohio State Highway Patrol and the Weathersfield Police Department. The school does not offer specific crime prevention programs nor does it monitor through the local police criminal activities in which students engage at off-campus locations.

ETI Technical College strives to provide a safe and secure campus for students and staff members. Maintaining a safe, secure location is everyone's responsibility. **SEE SOMETHING-SAY SOMETHING!** All students are encouraged to voluntarily report from a safe location, any and all suspicious campus activities immediately upon witnessing the occurrence. These incidents should be reported to any one of the following: Al Roden, Security Director, Ralph Zuzolo, Director of Education and Title IX Coordinator, Lisa Kubinski, the College Registrar (Administration building), Annette Jones, Practical Nursing Program Director (Main School building), Robert Magnoski, Facilities Maintenance Technician, Program Director (FMT building), Lee Smith (evening classes) or James Bingham (day classes), Welding Program Directors (Welding building), Renee Zuzolo, the College Director (Administration building), or any senior administrative personnel in the Administration building. Staff members should report to the College Director. The College will then take the appropriate action based on the information provided by the student or staff member. When necessary, local law enforcement authorities will be notified. In the case of immediate danger, 911 is the appropriate call (fire, weather emergency, natural disaster, active shooter violence, gas leak).

Emergency protocol is that in the event of a dangerous or threatening situation such as a tornado, fire, gas leak, terror alert, active shooter or violent situation, HAZMAT or contagion issues, Al Roden, IT Coordinator, Ralph Zuzolo, Director of Education, Diane Marsteller, Admissions Director, or Kay Madigan, Financial Aid Director, will be responsible for identifying and confirming the threat. When necessary, the ETI College Alerts Messaging System will be activated without delay, taking into account the safety of the campus community. The school PA system, the local Tornado/National Security Threat Warning System, Facebook, Twitter, local radio and television stations will also be utilized when necessary. Emergency evacuation procedures are posted in each classroom and building and will be reviewed at every orientation and tested at least once annually for effectiveness.

Instructions to subscribe to the ETI College Alerts Messaging System are on the next page. ALL students and staff are encouraged to subscribe to the alert system prior to the school year start.

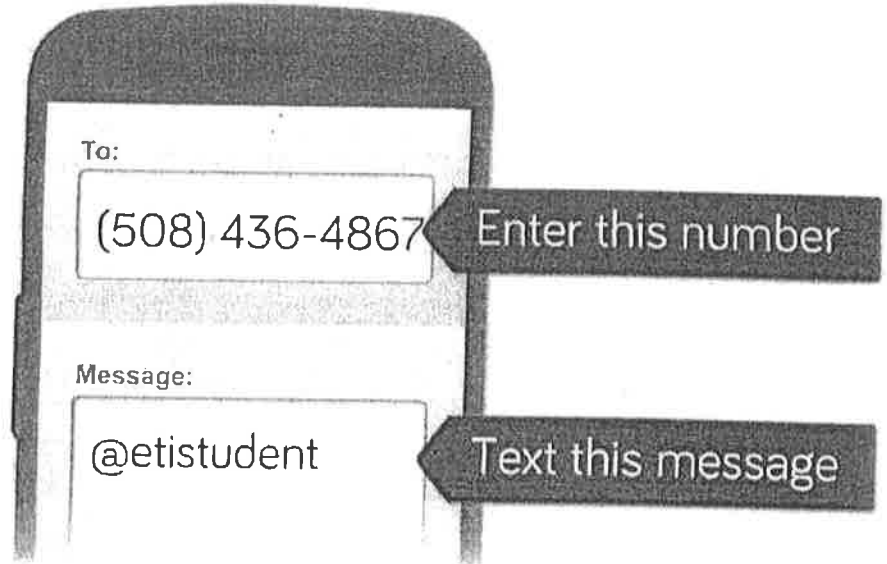
Annually, by October 1st, a Campus Safety and Security report will be delivered to all students and staff under the guidance of the Financial Aid Director.

How to sign up for ETI College Alerts

ETI Students messages:

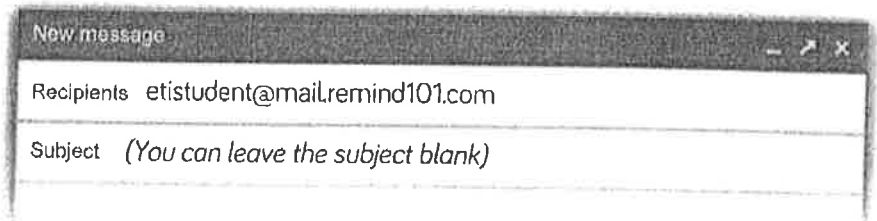
remind101

To receive messages via text, text **@etistudent** to **(508) 436-4867**. You can opt-out of messages at anytime by replying, 'unsubscribe @etistudent'.



*Standard text message rates apply.

Or to receive messages via email, send an email to **etistudent@mail.remind101.com**. To unsubscribe, reply with 'unsubscribe' in the subject line.



WHAT IS REMIND101 AND WHY IS IT SAFE?

Remind101 is a one-way text messaging and email system. With Remind101, all personal information remains completely confidential. Teachers will never see your phone number, nor will you ever see theirs.

Visit www.remind101.com to learn more.

STUDENT RESPONSIBILITY / CONDUCT / DISMISSAL POLICY

Our students are expected to exercise an adequate amount of self-discipline. Therefore, it has been the policy of ETI Technical College of Niles to have as few rules as possible. All students are expected to conduct themselves in a professional manner. This expectation includes the honest performance of work, observance of the law, and respect for property. Regular attendance, reasonable effort, proper conduct, good attitude and willingness to cooperate at all times with officials of the college are also expected of ETI Technical College students. A student who fails to meet the requirements may be requested to withdraw.

ATTENDANCE / ABSENCE POLICY

A student is expected to attend every session of every class. A student assumes the responsibility of contacting the school to report the absence and the responsibility of completing assigned work for the time missed. A student is considered absent if not present in the classroom even if s/he is in the building. Doctor's appointments and other non-emergency appointments should be scheduled outside of class time; they are NOT excused absences. If a student, spouse, or student's child is admitted to the hospital, documentation will be required to excuse up to a maximum of four (4) additional hours to the listed maximum per program. If more time is needed, it may be necessary to withdraw from the current semester. This should be decided at a financial aid meeting to minimize the effect on available funds.

REMEMBER—each program has a specific limit to the number of absences permitted before termination. These hours should be kept for unexpected occurrences such as sickness, funerals, JFS/court appearances, car breakdowns, or other transportation issues. They are UNEXCUSED absences.

ASSOCIATE DEGREES AND THEIR DIPLOMA COUNTERPARTS:

A student has eight (8) hours PER COURSE for emergencies.

EXCEPTION: Basic Legal Research will have a limit of four (4) due to limited classroom hours. ICA-110 and ACA-130 will have a maximum of sixteen hours (16) due to two hour daily classes.

CLOCK-TO-CREDIT DIPLOMA PROGRAMS

COMBINATION WELDING AND FITTING	27 HOURS PER SEMESTER IN SEMESTERS ONE AND TWO 17 HOURS IN SEMESTER THREE
FACILITIES MAINTENANCE	30 HOURS PER SEMESTER
PRACTICAL NURSING	92% ATTENDANCE REQUIRED PER CLASS BASED ON CLOCK HOURS 100% ATTENDANCE SKILLS LAB/CLINICALS MAKE-UP HOURS MUST BE APPROVED BY PROGRAM DIRECTOR
REGISTERED NURSING	90% ATTENDANCE REQUIRED 100% REQUIRED IN LABS AND CLINICALS

Attendance is part of Satisfactory Academic Progress. It is used as one means of monitoring a student's progress. A student with chronic absenteeism may be placed on attendance probation and his/her funds drawn in monthly disbursements after attendance has been verified. Attendance is recorded per semester.

ASSEMBLIES

Attendance is mandatory at school-sponsored assemblies. Attendance will be taken at each such event. Students missing assemblies may be subject to suspension or dismissal.

TARDINESS POLICY

Late arrivals and early departures from classes are a disruption to your fellow students and faculty. The College considers both tardiness and early departure to be forms of absenteeism.

CLASS BREAKS

Classes are presented on a fifty minute basis with a ten minute break between and begin at the top of the hour. Class breaks will last no longer than ten minutes per hour.

CONDUCT / DISMISSAL POLICY

NOTE: At the end of this manual is a Student Code of Conduct that details guidance on conduct, grievances, sanctions and remedies for violations of conduct policies.

Each student must conduct themselves in accordance with the college rules and policies. The college reserves the right to determine whether conduct is socially acceptable in normal academic and business settings. Examples of **disruptive unprofessional conduct** include but are not limited to:

- Profane language-you are in training for job placement
- **Receiving phone calls or texts during class/labs**
- Talking during lectures or instructor's presentations
- Verbal or physical threatening, bullying, insulting, or intimidating of a student, teacher, or staff member
- Sexual harassment or intimidation of a student, teacher, or staff member
- Sleeping during class
- Failure to maintain proper personal hygiene or dress code policies
- Poor attitude and/or unwillingness to cooperate at all times with college officials

A student violating these policies or the published attendance, tardiness, plagiarism, drug/alcohol policies is subject to suspension or termination. Failing to make timely tuition payments is also grounds for expulsion. A record of expulsion will be maintained. Appeals to suspension or termination may be made following the complaint/grievance procedures listed on the last page of the college catalog.

In addition, **any student found to be in possession of or under the influence of drugs or alcohol on college property may be expelled.** ETI maintains a zero tolerance policy concerning drugs and alcohol and reserves the right to contact local authorities in connection with the expulsion. Staff members violating the drug and alcohol policy will be disciplined through the office of the College Director. Criminal drug/alcohol violations by staff will be reported to the Department of Education.

SEXUAL HARASSMENT

The definition of sexual harassment is complex, but at a minimum, for Title IX purposes, it is conduct on the basis of sex that satisfies one or more of the following:

- A school employee conditioning education benefits on participation in unwelcome sexual conduct (i.e. *quid pro quo*); or
- Unwelcome conduct that a reasonable person would determine is so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the school's education program or activity; or
- Sexual assault as defined in the Clery Act shown below.

Sexual ass

- (i) "Rape" The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.
 - (ii) "Fondling" The touching of the private body parts of another person for the purpose of sexual gratification, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental incapacity.
 - (iii) "Incest" Sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.
 - (iv) "Statutory rape" Sexual intercourse with a person who is under the statutory age of consent.
- Sexual assault in the form of dating violence, domestic violence, or stalking as defined in the Violence Against Women Act (VAWA) discussed below.
 -

Conduct of this kind, regardless of who commits it, is strictly prohibited. Anyone found to have engaged in sexual harassment will be subject to disciplinary action up to and including immediate termination from the college or from college employment.

OTHER HARASSMENT

Other discriminatory harassment includes intimidation, ridicule, or insults that:

- Unreasonably interfere with a student's, staff's, or faculty's ability to perform his/her duties
- Create an abusive or hostile school or work environment
- Adversely affect an individual's peaceful pursuit of his/her educational opportunities

This type of harassment applies to conduct that is most often based on an individual's race, religion, age, gender, disability, national origin, or sexual orientation. It includes physical and verbal abuse, the circulation of written material that demeans or exhibits hostility or dislike toward an individual or groups of persons, or inappropriate jokes or slurs. Such conduct is also strictly prohibited and will subject the person engaging in it to disciplinary action up to and including termination from the college.

VIOLENCE AGAINST WOMEN ACT

On March 7, 2013 President Obama signed the Violence Against Women Reauthorization Act of 2013 which, among other provisions, requires institutions to compile statistics for incidents of domestic violence, dating violence, and stalking, in addition to the Clery Act crimes already reported. These crime categories are defined as:

Domestic Violence means a "felony or misdemeanor crime of violence committed by-

- a current or former spouse or intimate partner of the victim
- a person with whom the victim shares a child in common
- a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner
- a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or
- any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction."

Dating Violence means "violence committed by a person-

- who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - the length of the relationship
 - the type of relationship; and
 - the frequency of interaction between the persons involved in the relationship"

Stalking means "engaging in a course of conduct directed at a specific person that would cause a reasonable person to-

- fear for his or her safety or the safety of others; or
- suffer substantial emotional distress"

Consent means intelligent, knowing, and voluntary consent and does not include coerced or forced submission. "Consent" shall not be deemed or construed to mean the failure by the alleged victim to offer physical resistance to the offender. Incapacitation of an individual does not imply consent. **Giving in is NOT the same as giving consent.**

Title IX of the Education Amendments of 1972 is a federal civil rights law that prohibits discrimination on the basis of sex in federally funded education programs and activities. On April 4, 2011, the Office of Civil Rights in the U.S. Department of Education issued a Dear Colleague Letter (revised August 2020) providing guidance to schools concerning their responsibility to respond promptly and effectively to sexual violence and the responsibility to conduct investigations independent from any criminal investigations by local police. The evidentiary standard to be used is **preponderance of evidence (i.e. more likely than not sexual violence occurred)**. The victim has the right to request confidentiality and it is to be considered if it can occur without substantially impeding the investigation. Confidentiality would keep the victim's identity from the perpetrator. Victim support could include the changing of class schedules, escorts to and from classes, and assistance in filing a criminal complaint, if the victim so chooses. The Title IX coordinator, Director Ralph Zuzolo, will conduct the investigation with the help of a disciplinary committee made up of, at a minimum, the College Director, the Assistant Director, the Financial Aid Director and/or a senior administrative staff member. The committee will investigate the complaint and apply sanctions, as necessary, up to termination from the college or college employment. Decisions of the disciplinary committee will be given to the victim and the perpetrator in writing.

SEEKING RELIEF

Any person who feels he or she has been a victim of harassment or violence should report the matter to the Title IX Coordinator or any senior staff/faculty member with whom they feel comfortable discussing the incident within three days of the incident, BUT, an incident may be reported at any time-there is no statute of limitation at the school. Our policy is to treat any allegations of harassment or violence seriously and in a timely and confidential manner. All persons shall be protected from retaliation for making a complaint or assisting in the investigation of such a complaint. Retaliation includes disciplining, threatening or intimidating an employee, student, or faculty member because of the complaint. Retaliation is strictly prohibited under Title IX.

Any conduct that is offensive or makes an individual uncomfortable should be reported. The college cannot correct issues of which it is unaware, so please report them immediately to the Director of Education, the College Director, or, if preferred, an instructor or administrative staff member whom you feel comfortable sharing your confidence.

Title IX's sex discrimination prohibition extends to claims of discrimination based on gender identity or failure to conform to stereotypical notions of masculinity or femininity. The school will investigate and resolve allegations of sexual violence regarding LGBTQ students using the same procedures and standards that it uses in all complaints involving sexual violence.

The Student Code of Conduct at the end of this handbook details the process to report and adjudicate any reported incident of violence, harassment, stalking, intimidation, or bias.

Ohio Alliance to End Sexual Violence

Sexual violence is a public health crisis in the United States and in Ohio, impacting our family members, neighbors, and friends. The term "sexual violence" encompasses all abusive and coercive acts of violence in which sex/sexuality is used as a weapon to harm, humiliate, control, exploit, and/or intimidate. It impacts women, children and men of all ages, and its pervasiveness knows no demographic boundaries. Sexual violence is a traumatic crime that affects survivors physically, mentally, emotionally, behaviorally and spiritually. It also impacts families, communities, and systems. Ending sexual violence is not just our vision as a society, it can be our reality.

ETI wants to inform our students of ideas and practices to prevent a sex offense from occurring. A question/answer format is also given with information about sex offenses. You will find a listing of rape crisis centers and hotline numbers, as well as counseling centers for sexual offenses, domestic violence help, and referral services for HIV/AIDS information, debt solutions, and emergency assistance with food, shelter, and utilities.

TRUMBULL COUNTY

Rape Crisis Hotline
Dial 211 or 330-393-1565

Community Legal Aid
160 E Market Street Suite 225
Warren, OH 44481-1144
1-800-998-9454

Someplace Safe
1540 Tod Ave NW
Warren, OH 44485
330-393-1565 24-hour line

St Joseph's Health Center SANE Program
PO Box 1743
Warren, OH 44482
330-841-4000

MAHONING COUNTY

Rape Crisis Hotline
330-782-3936 or 330-782-5664

Mahoning County Legal Aid
First National Tower
11 Central Plaza 7th Floor
1-800-998-9454

Both hotline numbers can offer referrals for domestic violence, child abuse, HIV/AIDS, financial emergency services such as food, shelter, housing, utility assistance.

RAINN Affiliates operate 24/7 crisis telephone lines to serve victims of sexual violence. Call the local affiliate at 1-800-656-HOPE (4673) FREE and CONFIDENTIAL

REGISTRY OF OHIO SEX OFFENDERS

Available at http://www.communitynotification.com/cap_main.php?office=53991
or <http://www.drc.ohio.gov/OffenderSearch>

RECOGNIZING DOMESTIC VIOLENCE

Critical to ending violence in the home and maintaining a safe campus is recognizing and avoiding abusive behavior. Abuse can surface in many ways (emotional, verbal, psychological, sexual, and physical). Some warning signs of abuse are:

- Frequent yelling especially directed at partner, boyfriend/girlfriend, spouse
- Blaming partner/spouse/friend for own faults
- Name-calling
- Consistently accusing partner/spouse/friend of infidelity
- Kicking, holding, slapping, scratching
- Signs of physical trauma “explained away” with odd excuses i.e. “I ran into the cupboard-I’m such a klutz” kind of excuses
- Withdrawing from social contacts for a period of time (letting injuries heal) or altogether
- Forcible sex (e.g. wanting sex after hitting)

BYSTANDER INTERVENTION

Offer support if you suspect that the person is being abused or has been sexually assaulted or is the victim of stalking.

Speak out against all forms of sexual violence, including domestic violence, date rape, stalking.

Be an advocate for preventing sexual violence.

Model the behavior that values respect for others and promotes positive pro-social behavior.

REMEMBER

Friends do not force or coerce each other into unwanted sex.

Friends do not find humor or vulnerability in one’s inability to give consent.

Friends do not stand by and say that it is not their responsibility to intervene.

Friends do not protect or shield the abuser.

Friends will “get involved” and be an advocate for the victim.

PREVENTING A SEX OFFENSE

There are many steps men and women can take to prevent a sex offense from occurring.

What can women do?

Think ahead. Know your desires, limits and intentions ahead of time, before you meet an acquaintance or go out on a date.

Communicate your intentions clearly. Inform your date or acquaintance what your intentions and limits are. "No" means no, and "yes" means yes. Be clear, firm and specific. Polite approaches may be misunderstood or ignored.

Be assertive. Men sometimes interpret passivity as permission. Be direct and firm with someone who is sexually pressuring you.

Avoid excessive use of alcohol. Alcohol interferes with judgment and communication. Most incidences of date rape involve the use of alcohol.

Do not place yourself in vulnerable situations. Walk in well-lighted areas and with friends. Keep your room/home doors and windows locked. When dating a person for the first time, double date, and do not allow yourself to be alone for any period of time.

Trust your intuition. If you sense you are in danger, leave the area or situation immediately and find a friend or get to a safe, public location.

What can men do?

Respect the wishes of the person. If he/she says "no" they mean no. Do not read other meanings into an answer. Even if the person initially gives permission but then changes his/her mind, respect their wishes.

Do not assume previous sex gives permission for future sex. Again, listen to what the person has to say.

Do not assume women/men enjoy force or pressure to have sex. People wish to be treated with care and respect. Forced sex is nothing more than a violent criminal act.

Do not assume a woman who dresses in revealing clothes and acts provocatively wants to have sex.

Realize that alcohol and drugs are not an excuse to have sex. You do not have the right to take advantage of a person who is intoxicated or incapable of saying no.

Questions and Answers

1. What should I do if I'm sexually assaulted?

- Go to a safe place and call the Rape Crisis Hotline at **211** or 330-393-1565 for Trumbull County, or call 911 for immediate medical assistance in Trumbull or Mahoning County
- Try not to eat, drink, or bathe while you decide whether or not to report. You have up to 96 hours to collect forensic evidence which can be used for future prosecution if you choose to talk to law enforcement
- If the assault just happened, try not to use the bathroom, especially if you suspect you have been drugged
- If you must change your clothes, put the clothes you were wearing during the assault (including underwear) in a paper bag. If bedding was involved in the assault, do not wash it. If a condom was used, do not throw it away

2. If I go to a hospital, do I have to report the assault to the police?

No, sexual assault survivors do not have to speak to law enforcement. According to Ohio Department of Health protocol, medical personnel must notify law enforcement that a sexual assault has been reported to the hospital/facility. However, the Ohio Revised Code (ORC) #2921.22 states that hospital personnel do not have to provide the name or address of the survivor, just the date and general location of the assault. (codes.ohio.gov)

3. What is the legal definition of rape?

Rape is a sexual assault that includes but is not limited to forced vaginal, anal, and oral penetration. Rape is a violent act. It is not sex or passion. Its purpose is to control, humiliate, and intimidate a victim through the use of force. The rapist's force can be physical or verbal and can occur without use of weapons. Different kinds of rape include acquaintance rape, date rape, marital rape, gang rape, child molestation, and stranger rape. The Ohio Revised Code (ORC) #2907.02 defines rape in the following manner; "No person shall engage in sexual conduct with another when the offender purposely compels the other person to submit by force or threat of force, the offender substantially impairs the other person's judgment or control by administering any drug or intoxicant to the other person, surreptitiously or by force, threat of force or deception, or when the other person is less than 13 years of age." (codes.oh.gov)

4. I didn't fight back. I don't know if what happened is legally considered rape.

Rape survivors often don't fight back because they are either too afraid, feel threatened or overpowered by their perpetrator(s), or are incapable of giving informed consent because of age or impairment due to drugs or alcohol. In fact,

most rape survivors show no sign of physical injury. This does not mean they gave their consent.

5. Why would anyone commit rape?

No one knows for sure why anyone would commit such a heinous crime. However, research by psychologists suggests that rape is most often about power and control, with a smaller number of perpetrators motivated by anger and sadism. Regardless, rape is not about sex. Victims can be babies or the elderly.

6. I feel dirty and disgusting. How long will it take me to heal?

It is understandable to wonder how long healing will take. Because everyone is unique, healing is an individual process for every survivor and has its own timeframe. We believe in each individual's strength, creativity, and ability to achieve a resolution. Rape crisis services such as the hotline, face-to-face sessions, and support groups can help survivors feel less alone. Healing takes time, but it is possible.

7. I spent time with the perpetrator before the assault. Is it still rape?

Yes. In fact, most sexual assault survivors know their perpetrators. It is a myth that rapists hide in the bushes and jump out in the dark. While stranger rapes do happen, most assaults take place between acquaintances or dates. (rainn.org)

8. Is it true that some people are "asking for it" by their behavior, dress, etc...?

No. Rape is a felony. It is always the fault of the perpetrator. Everyone has the right to dress as they choose without being raped. We have the right to go out and drink, dance and have fun and flirt if we want to without being raped. We can also engage in kissing and other sexual behavior and choose to say "NO, I don't want to go further." No means no! Rape is never acceptable.

9. Can men be raped?

Yes. Men may be less likely to come forward than women and experience intense feelings of shame. We are still learning about male survivors. However, we do know their perpetrators are often other men or adult women who abused them as boys. (rainn.org) Like female survivors, it is never their fault.

RESOURCES

GENERAL BYSTANDER RESOURCES AND SEXUAL VIOLENCE PREVENTION INFORMATION

National Sexual Violence Resource Center (NSVRC)

<http://www.nsvrc.org>

NSVRC Tools and Resources for Bystanders

<http://www.nsvrc.org/saam/bystander-resources>

Engaging Bystanders in Sexual Violence Prevention by Joan Tabachnick is free downloadable booklet

<http://www.nsvrc.org/publications/nsvrc-publications/engaging-bystanders-sexual-violence-prevention>

Shifting the Paradigm: Primary Prevention of Sexual Violence is a toolkit created by the American College Health Association with resources on how to prevent sexual violence on college campuses

http://www.acha.org/sexualviolence/docs/ACHA_PSV_toolkit.pdf

National Online Resource Center on Violence Against Women has resources on bystander intervention

<http://www.vawnet.org/sexual-violence/prevention.php>

ORGANIZATIONS

The Rape, Abuse, and Incest National Network (RAINN) is a website containing links to sexual violence resources and ways people can get involved to help end sexual violence

<http://www.rainn.org/>

A Call to Men is a national organization seeking to change social norms and eliminate violence against women

<http://www.acalltomen.org>

Men Stopping Violence is an organization that works at the local, national and international level to work toward social justice to help end violence against women

<http://www.menstoppingviolence.org/>

Men Can Stop Rape is a national organization with a mission to "mobilize men to use their strength" by engaging men as allies in the prevention of gender-based violence

<http://www.mencanstoprape.org/>

One In Four is a national non-profit organization dedicated to the prevention of rape and sexual assault

<http://www.oneinfourusa.org/overview.php>

ETI Technical College is a

School Safety Zone

NO DEADLY WEAPONS

DANGEROUS ORDNANCE

**OBJECTS UNDISTINGUISHABLE FROM A
FIREARM BY A LAY PERSON**

MAY BE CONVENED ON TO ETI PROPERTY

**This policy also pertains to licensed gun owners.
Concealed-carry permit holders are not permitted
to convene a weapon on to ETI private property**

See attached ORC 2923.11 and ORC 2923.161 and
Discussion of Concealed Carry and Open Carry including 3/22/2017
Senate Bill 199 expansion of rights to gun owners

This regulation will be strictly enforced. Violators will be subject to all
local, state and federal penalties.

2923.161 Improperly discharging firearm at or into a habitation, in a school safety zone or with intent to cause harm or panic to persons in a school building or at a school function.

(A) No person, without privilege to do so, shall knowingly do any of the following:

(1) Discharge a firearm at or into an occupied structure that is a permanent or temporary habitation of any individual;

(2) Discharge a firearm at, in, or into a school safety zone;

(3) Discharge a firearm within one thousand feet of any school building or of the boundaries of any school premises, with the intent to do any of the following:

(a) Cause physical harm to another who is in the school, in the school building, or at a function or activity associated with the school;

(b) Cause panic or fear of physical harm to another who is in the school, in the school building, or at a function or activity associated with the school;

(c) Cause the evacuation of the school, the school building, or a function or activity associated with the school.

(B) This section does not apply to any officer, agent, or employee of this or any other state or the United States, or to any law enforcement officer, who discharges the firearm while acting within the scope of the officer's, agent's, or employee's duties.

(C) Whoever violates this section is guilty of improperly discharging a firearm at or into a habitation, in a school safety zone, or with the intent to cause harm or panic to persons in a school, in a school building, or at a school function or the evacuation of a school function, a felony of the second degree.

(D) As used in this section, "occupied structure" has the same meaning as in section 2909.01 of the Revised Code.

Effective Date: 10-11-2002.

2923.122 Illegal conveyance or possession of deadly weapon or dangerous ordnance or of object indistinguishable from firearm in school safety zone.

(A) No person shall knowingly convey, or attempt to convey, a deadly weapon or dangerous ordnance into a school safety zone.

(B) No person shall knowingly possess a deadly weapon or dangerous ordnance in a school safety zone.

(C) No person shall knowingly possess an object in a school safety zone if both of the following apply:

(1) The object is indistinguishable from a firearm, whether or not the object is capable of being fired.

(2) The person indicates that the person possesses the object and that it is a firearm, or the person knowingly displays or brandishes the object and indicates that it is a firearm.

(D)

(1) This section does not apply to any of the following:

(a) An officer, agent, or employee of this or any other state or the United States, or a law enforcement officer, who is authorized to carry deadly weapons or dangerous ordnance and is acting within the scope of the officer's, agent's, or employee's duties, a security officer employed by a board of education or governing body of a school during the time that the security officer is on duty pursuant to that contract of employment, or any other person who has written authorization from the board of education or governing body of a school to convey deadly weapons or dangerous ordnance into a school safety zone or to possess a deadly weapon or dangerous ordnance in a school safety zone and who conveys or possesses the deadly weapon or dangerous ordnance in accordance with that authorization;

(b) Any person who is employed in this state, who is authorized to carry deadly weapons or dangerous ordnance, and who is subject to and in compliance with the requirements of section 109.801 of the Revised Code, unless the appointing authority of the person has expressly specified that the exemption provided in division (D)(1)(b) of this section does not apply to the person.

(2) Division (C) of this section does not apply to premises upon which home schooling is conducted. Division (C) of this section also does not apply to a school administrator, teacher, or employee who possesses an object that is indistinguishable from a firearm for legitimate school purposes during the course of employment, a student who uses an object that is indistinguishable from a firearm under the direction of a school administrator, teacher, or employee, or any other person who with the express prior approval of a school administrator possesses an object that is indistinguishable from a firearm for a legitimate purpose, including the use of the object in a ceremonial activity, a play, reenactment, or other dramatic presentation, or a ROTC activity or another similar use of the object.

(3) This section does not apply to a person who conveys or attempts to convey a handgun into, or possesses a handgun in, a school safety zone if, at the time of that conveyance, attempted conveyance, or possession of the handgun, all of the following apply:

(a) The person does not enter into a school building or onto school premises and is not at a school activity.

(b) The person is carrying a valid concealed handgun license.

(c) The person is in the school safety zone in accordance with 18 U.S.C. 922(q)(2)(B).

(d) The person is not knowingly in a place described in division (B)(1) or (B)(3) to (10) of section 2923.126 of the Revised Code.

(4) This section does not apply to a person who conveys or attempts to convey a handgun into, or possesses a handgun in, a school safety zone if at the time of that conveyance, attempted conveyance, or possession of the handgun all of the following apply:

(a) The person is carrying a valid concealed handgun license.

(b) The person is the driver or passenger in a motor vehicle and is in the school safety zone while immediately in the process of picking up or dropping off a child.

(c) The person is not in violation of section 2923.16 of the Revised Code.

(E)

(1) Whoever violates division (A) or (B) of this section is guilty of illegal conveyance or possession of a deadly weapon or dangerous ordnance in a school safety zone. Except as otherwise provided in this division, illegal conveyance or possession of a deadly weapon or dangerous ordnance in a school safety zone is a felony of the fifth degree. If the offender previously has been convicted of a violation of this section, illegal conveyance or possession of a deadly weapon or dangerous ordnance in a school safety zone is a felony of the fourth degree.

(2) Whoever violates division (C) of this section is guilty of illegal possession of an object indistinguishable from a firearm in a school safety zone. Except as otherwise provided in this division, illegal possession of an object indistinguishable from a firearm in a school safety zone is a misdemeanor of the first degree. If the offender previously has been convicted of a violation of this section, illegal possession of an object indistinguishable from a firearm in a school safety zone is a felony of the fifth degree.

(F)

(1) In addition to any other penalty imposed upon a person who is convicted of or pleads guilty to a violation of this section and subject to division (F)(2) of this section, if the offender has not attained nineteen years of age, regardless of whether the offender is attending or is enrolled in a school operated by a board of education or for which the state board of education prescribes minimum standards under section 3301.07 of the Revised Code, the court shall impose upon the offender a class four suspension of the offender's probationary driver's license, restricted license, driver's license, commercial driver's license, temporary instruction permit, or probationary commercial driver's license that then is in effect from the range specified in division (A)(4) of section 4510.02 of the Revised Code and shall deny the offender the issuance of any permit or license of that type during the period of the suspension.

If the offender is not a resident of this state, the court shall impose a class four suspension of the nonresident operating privilege of the offender from the range specified in division (A)(4) of section 4510.02 of the Revised Code.

(2) If the offender shows good cause why the court should not suspend one of the types of licenses, permits, or privileges specified in division (F)(1) of this section or deny the issuance of one of the temporary instruction permits specified in that division, the court in its discretion may choose not to impose the suspension, revocation, or denial required in that division.

(G) As used in this section, "object that is indistinguishable from a firearm" means an object made, constructed, or altered so that, to a reasonable person without specialized training in firearms, the object appears to be a firearm.

Amended by 129th General Assembly File No. 190, HB 495, §1, eff. 3/27/2013.

Amended by 129th General Assembly File No. 131, SB 337, §1, eff. 9/28/2012.

Effective Date: 04-08-2004; 03-14-2007; 2008 SB184 09-09-2008

Concealed Carry^[edit]

In April 2004, Ohio became the 46th state to legalize concealed carry and its statute went into effect. The law (Ohio Revised Code [O.R.C.] 2923.12, et seq.) allows persons 21 and older to receive a concealed handgun license provided that they receive a minimum of 8 hours of handgun training (6 hours of classroom instruction and 2 hours of range time) from a certified instructor, demonstrate competency with a handgun through written and shooting tests, pass a criminal background check, and meet certain residency requirements [non-residents who work in Ohio will be allowed to obtain licenses as of March 23, 2015].^{[5][6]}

The statute prohibits any person with any drug conviction from receiving a license, as well as any person convicted of a felony and those who have been convicted of certain misdemeanor crimes of violence within three years (ORC 2923.125).

Ohio's concealed handgun law allows for reciprocity with other states with "substantially comparable" statutes, and to date Ohio has reciprocity with 22 other states. Such written agreements allow licensees from each state to carry in the other. Other states, such as Iowa, recognize Ohio licenses in their state without reciprocity, meaning Ohio does not in turn recognize permits issued by that state. Indiana and Ohio now have reciprocity. All told an Ohio license is accepted in 30 other states, although some of these states such as Vermont do not require anybody to have a license to carry. As of March 23, 2015, non-residents will be able to carry on any valid out-of-state license regardless of whether or not a formal reciprocity agreement has been signed.^[6]

An Ohio concealed carry license does not allow totally unfettered carry. Any owner of private property can ban handguns by posting a sign in clear view or providing verbal notice. Additional "no-carry" zones are mandated by O.R.C., including most government buildings, churches, and school property with the latter two zones having exceptions for licensees in certain circumstances. Various other "no-carry" zones are also enumerated.^[7]

Non-licensees and all users of long guns have much stricter rules for carrying firearms in their vehicles. Ohio statute O.R.C. 2923.16 allows for three ways for those not licensed to carry a concealed handgun to transport firearms in a motor vehicle. The firearm(s) must be unloaded and carried in one of the following ways:

- (1) In a closed package, box, or case;
- (2) In a compartment that can be reached only by leaving the vehicle;
- (3) In plain sight and secured in a rack or holder made for the purpose;
- (4) If the firearm is at least twenty-four inches in overall length as measured from the muzzle to the part of the stock furthest from the muzzle and if the barrel is at least eighteen inches in length, either in plain sight with the action open or the weapon stripped, or, if the firearm is of a type on which the action will not stay open or which cannot easily be stripped, in plain sight.

Licensees may carry a loaded handgun in a vehicle in most circumstances. Licensees must follow the above rules for any firearm other than a handgun (e.g. shotgun), although they have greater flexibility in terms of where loaded magazines for these firearms may be located.

Employers may not forbid employees from storing guns in their vehicles while the vehicle is on the employer's parking lot.^[4]

Open Carry^[edit]

Ohio is a traditional open-carry state. The open-carry of firearms by those who legally possess the firearm is a legal activity in Ohio with or without a license. One need not have a concealed handgun license (CHL, CCW) to transport an unloaded handgun in a motor vehicle but it must be secured/contained and located in the vehicle requiring an exit of said vehicle to access it. Ammunition and magazines must be in a separate compartment or holding device. Note: If you have any alcohol in your system it is illegal to possess a firearm in your vehicle or on your person.

It is illegal to carry a handgun in a Class D Liquor permit premises unless you possess a concealed carry permit and are not consuming alcohol. The law doesn't specify if the handgun must be concealed or not.^[9]

On March 22nd of 2017, Senate Bill 199^[9] went into effect in the state of Ohio that allowed even larger freedoms for gun holders in the state. The new state legislature denies employers or law enforcement from limiting the open carry freedoms in parking lots. Gun owners are only permitted to have their firearm on private company property if it stays locked inside the vehicle. Employers can still deny their employees the ability to bring a firearm into the workplace.

The law also allows concealed carry permit holders to:

- Store their guns in the car while in a school zone
- Carry in non-secure areas of airports, such as baggage claim.
- Carry inside daycare centers and home day cares, unless the facilities post a sign prohibiting guns

The laws still prohibit having firearms on college campuses in Ohio. Colleges are now able to hire and designate authorized people or groups to carry firearms to manage the campus. Private daycare centers are still able to limit the carrying of firearms on the premises of the school by posting "no gun" signs. Lastly, this bill allows active duty members of the armed forces to buy a handgun without a concealed handgun license if they can provide a valid military ID and documentation of their firearms training.^[10]

PLAGIARISM AND COPYRIGHT INFRINGEMENT POLICY

In accordance with 34 CFR 668.43(a)(10), this institution maintains a strict policy against the unauthorized distribution of copyrighted material, in addition to plagiarism, cheating, and academic dishonesty. These offenses are serious. A student is plagiarizing when he/she uses anyone else's thoughts, ideas, or words without giving the original person credit. Academic dishonesty includes, but is not limited to, submitting work completed by another person; submitting work completed in a prior term; or copying another student's work. If an instructor determines that a student has violated any of the above, that student is subject to a failing grade for the assignment, suspension, or termination. The unauthorized distribution of copyrighted material, including peer-to-peer file sharing, may subject the student to civil and criminal liabilities as outlined below:

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading substantial parts of a copyrighted work without authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed and, at its discretion, also assess costs and attorneys' fees. For details see Title 17, United States Code, Sections 504, 505. Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense.

For more information, please visit the web site of the U.S. Copyright Office at www.copyright.gov, especially their FAQ's at www.copyright.gov/help/faq.

Students in violation of the plagiarism, peer-to-peer file sharing, and copyright infringement policies are subject to termination from the course involved or the college, per the recommendation of the instructor, the department head, the Director of Education, and the College Director. A terminated student has the right to an appeal as outlined in the college catalog.

DRUG-FREE POLICY

Unlawful possession, use, production, distribution, or sale of drugs or alcohol by any student, faculty, or staff is prohibited on campus property. Federal, state, and local drug and alcohol laws will be enforced on ETI campus property, including under-age drinking.

This policy is created to comply with the Drug-Free School and Communities Act Amendments of 1989 (Public Law 101-226), which requires that the college show it has adopted and implemented a program to prevent the illicit use of drugs and the abuse of alcohol by faculty, staff, and students, and to set forth the standards to provide a community setting that is safe, healthy, and productive. The college distributes this policy annually throughout the campus and to each student, staff, and faculty member, individually, and includes information about referral and treatment, applicable laws, and current assessments of possible health risks.

Internal Sanctions

Any student, staff, or faculty member who violates the college's drug-free policy shall be subject to termination from the college. Violation of this policy may also lead to referral for prosecution to the appropriate local, state, and/or federal authorities. Faculty members or college staff who are convicted of any criminal drug statute violation must notify the College Director within five (5) days of the conviction.

External Sanctions

Federal law prohibits the trafficking and illegal possession of controlled substances (see 21 United States Code, Sections 811 and 844). Depending on the amount, first offense maximum penalties for trafficking marijuana or class I and II controlled substances range from five years imprisonment and a fine of \$250,000 to life imprisonment and a fine of up to \$4 million. First offense penalties for illegal possession of a controlled substance range from up to one year in prison and a fine of at least \$1000 but not more than \$250,000 or both.

The State of Ohio and the City of Niles also may impose penalties for trafficking and illegal possession or use of controlled substances. State and local penalties for trafficking illicit drugs include fines that range from \$1000 to \$50,000 and mandatory jail sentences that range from six months to ten years. Illegal use or possession of a controlled substance or drug paraphernalia may warrant fines ranging from \$100 to \$5000 and jail sentences ranging from 30 days to 10 years depending on the amount possessed.

The State of Ohio and the City of Niles may also impose a wide variety of penalties for alcohol-related offenses. For example, a first driving-while-intoxicated offense may be punished by mandatory imprisonment of at least three consecutive days and a fine ranging from \$375 to \$1000. Subsequent offenses lead to increased sanctions. Illegal purchase, possession, use, or sale of intoxicating liquor by a minor may be punished by fines ranging from \$25 to \$1000 and up to six months in jail, depending on the circumstances.

To ensure the most effective implementation of this program, the college supports the following concept:

Alcohol or other drug dependence is a disease that can be successfully treated.

Specific steps may be taken for referral of persons at risk for alcohol or other drug problems to local community drug/alcohol treatment centers for out-patient or in-patient care. Faculty, staff, and students are warned that treatment is not a refuge from disciplinary action, but such action may be held in abeyance pending the conclusion of a treatment program.

Parental Notification Guidelines

The Higher Education Amendments of 1998 created an exception to the Family Educational Rights and Privacy Act (FERPA) enabling colleges to notify parents or legal guardians of student's (under the age of 21) possession or use of alcohol or a controlled substance. Notification is done when the college believes it will help to provide support for the student's physical health and safety, academic success, and personal development. Factors used to help determine whether to contact parents include, but are not limited to:

- A situation in which medical attention was received
- The occurrence of an arrest and subsequent criminal charges
- A major disruption to the college's educational mission
- Substantial harm caused to other students, or
- Significant property damage

Contacts will be made, when possible, by a phone call to the parents or guardians.

Students are reminded that a drug prescribed for one person may be harmful to another and are warned not to offer or provide their own medication to others. Possession of controlled substances not prescribed for you is a violation of drug laws.

Refer to the following pages for assessments of possible health risks associated with the use of drugs or alcohol and a list of local treatment centers.

ALCOHOL: ZERO-ONE-THREE

Reduce your risk for experiencing alcohol-related impairment problems. Set guidelines for the use and non-use of alcohol and stick to them. Zero-One-Three can be a helpful tool in developing a clearer idea of what is "responsible drinking". The Zero-One-Three concept was developed by the Michigan Office of Highway Safety Planning. They are easy numbers to remember. The numbers represent alcohol consumption norms that should be promoted.

ZERO=ZERO ALCOHOL

IT'S OK NOT TO DRINK!! Alcohol is a drug and tens of millions of adults choose to live a drug-free lifestyle. It is a choice made by approximately 30% of the adult population. Situations where zero is a wise choice include:

- People who are not of legal age
- Women who are pregnant or think they might be pregnant
- People who suffer from alcoholism or other chemical dependencies
- People from homes where alcoholism or abusive consumption of alcohol is present
- People who do not like the physiological or psychological effects of alcohol
- People who are trying to cut down on empty calories
- People who prefer the taste of non-alcoholic beverages
- Diabetics
- People on certain medications

ONE=ONE DRINK PER HOUR

One drink is defined as one 12-ounce beer OR one glass of wine OR one shot of liquor or mixed drink. If a person is having more than one drink per hour, he/she is out of bounds and exceeding the recommended consumption pace. Because of the rate that alcohol is metabolized in the body, more than one drink per hour will cause a person to test as legally under the influence of alcohol. By keeping the pace to one drink per hour, the body's alcohol metabolism capacity will likely not be suppressed by alcohol intake. This will help keep blood alcohol concentration levels within safer limits. **Remember, the legal limit is .08 for driving in Ohio.** If under 21, it is a violation if the concentration is .02 or greater.

THREE=NO MORE THAN THREE DRINKS PER DAY AND NEVER DAILY

Three represents the maximum number of drinks a person should ever have in a single day. It does not mean three at each of six pubs. Also, remember the three drinks are not to be consumed faster than one per hour. Some people will quickly point out the existence of differences (body weight, etc...) as they relate to these guidelines. It is important to note, however, individual differences also exist for blood cholesterol levels, prescriptions, and many other health norms. The standard of Zero-One-Three is one that is acceptable for most of the population.



National Institute
on Drug Abuse

Commonly Used Drugs

Many drugs can alter a person's thinking and judgment, and can lead to health risks, including addiction, drugged driving, infectious disease, and adverse effects on pregnancy. Information on commonly used drugs with the potential for misuse or addiction can be found here.

For information about treatment options for substance use disorders, see NIDA's [Treatment pages](#). For drug use trends, see our [Trends and Statistics page](#). For the most up-to-date slang terms, please see [Slang Terms and Code Words: A Reference for Law Enforcement Personnel \(DEA, PDF, 1MB\)](#).

The following drugs are included in this resource:

- Alcohol
- Ayahuasca
- Central Nervous System Depressants
- Cocaine
- DMT
- GHB
- Hallucinogens
- Heroin
- Inhalants
- Ketamine
- Khat
- Kratom
- LSD
- Marijuana (Cannabis)
- MDMA (Ecstasy/Molly)
- Mescaline (Peyote)
- Methamphetamine
- Over-the-Counter Medicines--Dextromethorphan (DXM)
- Over-the-Counter Medicines--Loperamide
- PCP
- Prescription Opioids
- Prescription Stimulants
- Psilocybin
- Rohypnol® (Flunitrazepam)
- Salvia
- Steroids (Anabolic)
- Synthetic Cannabinoids
- Synthetic Cathinones ("Bath Salts")
- Tobacco/Nicotine

****Drugs are classified into five distinct categories or schedules "depending upon the drug's acceptable medical use and the drug's abuse or dependency potential." More information and the most up-to-date scheduling information can be found on the Drug Enforcement Administration's [website](#).**



COMMONLY ABUSED DRUGS AND WITHDRAWAL SYMPTOMS

DRUG NAME	WITHDRAWAL SYMPTOMS
Marijuana	<i>Irritability</i> <i>Trouble sleeping</i> <i>Decreased appetite</i> <i>Anxiety</i>
Prescription Opioids	<i>Restlessness</i> <i>Muscle and bone pain</i> <i>Insomnia</i> <i>Diarrhea</i> <i>Vomiting</i> <i>Cold flashes with goose bumps</i> <i>Leg movements</i>
Prescription Sedatives & Tranquilizers	<i>Seizures</i> <i>Shakiness</i> <i>Anxiety</i> <i>Agitation</i> <i>Insomnia</i> <i>Overactive reflexes</i> <i>Increased heart rate, blood pressure, and temperature with sweating</i> <i>Hallucinations</i> <i>Severe cravings</i>
Prescription Stimulants	<i>Depression</i> <i>Tiredness</i> <i>Sleep Problems</i>
Steroids	<i>Mood swings</i> <i>Tiredness</i> <i>Restlessness</i> <i>Loss of appetite</i> <i>Insomnia</i> <i>Lowered sex drive</i> <i>Depression</i>
Tobacco	<i>Irritability</i> <i>Attention problems</i> <i>Sleep problems</i> <i>Increased appetite</i>

Withdrawal symptoms can be severe. Patients experiencing withdrawal from these substances, especially prescription and illicit opioids, should seek immediate medical attention.

Alcohol

People drink to socialize, celebrate, and relax. Alcohol often has a strong effect on people—and throughout history, people have struggled to understand and manage alcohol's power. Why does alcohol cause people to act and feel differently? How much is too much? Why do some people become addicted while others do not? The National Institute on Alcohol Abuse and Alcoholism is researching the answers to these and many other questions about alcohol. Here's what is known:

Alcohol's effects vary from person to person, depending on a variety of factors, including:

- How much you drink
- How often you drink
- Your age
- Your health status
- Your family history

While drinking alcohol is itself not necessarily a problem—drinking too much can cause a range of consequences, and increase your risk for a variety of problems. For more information on alcohol's effects on the body, please see the National Institute on Alcohol Abuse and Alcoholism's related web page describing alcohol's effects on the body.

Ayahuasca

A tea made in the Amazon from a plant (*Psychotria viridis*) containing the hallucinogen DMT, along with another vine (*Banisteriopsis caapi*) that contains an MAO inhibitor preventing the natural breakdown of DMT in the digestive system, which enhances serotonergic activity. It was used historically in Amazonian religious and healing rituals. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Aya, Hoasca, Vine, Yagé	No commercial uses	Brewed as tea	Swallowed as tea	DMT is Schedule I, but plants containing it are not controlled

Possible Health Effects

Short-term	Strong hallucinations including altered visual and auditory perceptions; increased heart rate and blood pressure; nausea; burning sensation in the stomach; tingling sensations and increased skin sensitivity.
Long-term	Possible changes to the serotonergic and immune systems, although more research is needed.
Other Health-related Issues	Unknown.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Unknown.

Treatment Options

Medications	It is not known whether ayahuasca is addictive. There are no FDA-approved medications to treat addiction to ayahuasca or other hallucinogens.
Behavioral Therapies	More research is needed to find out if ayahuasca is addictive and, if so, whether behavioral therapies are effective.

Central Nervous System Depressants

Medications that slow brain activity, which makes them useful for treating anxiety and sleep problems. For more information, see the [Misuse of Prescription Drugs Research Report](#).

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule
Barbs, Dolls, Phennies, Red/BlueBirds, Tooties, Yellow Jackets, Yellows	Barbiturates: pentobarbital (<i>Nembutal</i> ®)	Pill, capsule, liquid	Swallowed, injected	II, III, IV
Benzos, Downers, Poles, Tranks, Totem Z-Bars, Vs, Yellow/Blue Zs, Zannies	Benzodiazepines: alprazolam (<i>Xanax</i> ®), chlorodiazepoxide (<i>Librium</i> ®), diazepam (<i>Valium</i> ®), lorazepam (<i>Ativan</i> ®), triazolam (<i>Halcion</i> ®)	Pill, capsule, liquid	Swallowed, snorted	IV
Forget-me pill, Looney Bar, Mexican Valium, R2, Roche, Tic-Tacs, Sleepeasy, Symphony, Zombie flip	Sleep Medications: eszopiclone (<i>Lunesta</i> ®), zaleplon (<i>Sonata</i> ®), zolpidem (<i>Ambien</i> ®)	Pill, capsule, liquid	Swallowed, snorted	IV

Possible Health Effects

Short-term	Drowsiness, slurred speech, poor concentration, confusion, dizziness, problems with movement and memory, lowered blood pressure, slowed breathing.
Long-term	Unknown.
Other Health-related Issues	Sleep medications are sometimes used as date rape drugs. Risk of HIV, hepatitis, and other infectious diseases from shared needles.
In Combination with Alcohol	Further slows heart rate and breathing, which can lead to death.
Withdrawal Symptoms	Must be discussed with a health care provider; barbiturate withdrawal can cause a serious abstinence syndrome that may even include seizures.

Treatment Options

Medications	There are no FDA-approved medications to treat addiction to prescription sedatives; lowering the dose over time must be done with the help of a health care provider.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to prescription sedatives.

Cocaine

A powerfully addictive stimulant drug made from the leaves of the coca plant native to South America. For more information, see the [Cocaine Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Blow, Bump, C, Coke, Crack, Dust, Flake, Nose Candy, Rock, Snow, Sneeze, Sniff, Toot, White Rock <i>With heroin: Speedball</i>	<i>Cocaine hydrochloride</i> topical solution (low dose anesthetic used in certain medical procedures)	White powder, whitish rock crystal	Snorted, smoked, injected	II
Possible Health Effects				
Short-term	Narrowed blood vessels; enlarged pupils; increased body temperature, heart rate, and blood pressure; headache; abdominal pain and nausea; euphoria; increased energy, alertness; insomnia, restlessness; anxiety; erratic and violent behavior, panic attacks, paranoia, psychosis; heart rhythm problems, heart attack; stroke, seizure, coma.			
Long-term	Loss of sense of smell, nosebleeds, nasal damage and trouble swallowing from snorting; infection and death of bowel tissue from decreased blood flow; poor nutrition and weight loss; lung damage from smoking.			
Other Health-related Issues	Pregnancy: premature delivery, low birth weight, deficits in self-regulation and attention in school-aged children prenatally exposed. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Greater risk of cardiac toxicity than from either drug alone.			
Withdrawal Symptoms	Depression, tiredness, increased appetite, insomnia, vivid unpleasant dreams, slowed movement, restlessness.			
Treatment Options				
Medications	There are no FDA-approved medications to treat cocaine addiction.			
Behavioral Therapies	<ul style="list-style-type: none">• Cognitive-behavioral therapy (CBT)• Contingency management, or motivational incentives, including vouchers• The Matrix Model• Community-based recovery groups, such as 12-Step programs• Mobile medical application: reSET®			

DMT

Dimethyltryptamine (DMT) is a synthetic drug that produces intense but relatively short-lived hallucinogenic experiences; it is also found naturally in some South American plants (see Ayahuasca). For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Businessman's Special, DMT, Dimitri	No commercial uses	White or yellow crystalline powder	Smoked, injected	I
Possible Health Effects				
Short-term	Intense visual hallucinations, depersonalization, auditory distortions, and an altered perception of time and body image, usually peaking in about 30 minutes when drunk as tea. Physical effects include hypertension, increased heart rate, agitation, seizures, dilated pupils.			
Long-term	Unknown			
Other Health-related Issues	At high doses, cardiac and respiratory arrest have occurred.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	It is not known whether DMT is addictive. There are no FDA-approved medications to treat addiction to DMT or other hallucinogens.			
Behavioral Therapies	More research is needed to find out if DMT is addictive and, if so, whether behavioral therapies are effective.			

GHB

Gamma-hydroxybutyrate (GHB) is a depressant approved for use in the treatment of narcolepsy, a disorder that causes daytime "sleep attacks".

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
G, Gamma-oh, GEEB, Georgia Home Boy, Gina, Goop, Grievous Bodily Harm, Liquid Ecstasy, Liquid X, Scoop, Soap	Gamma-hydroxybutyrate or sodium oxybate (Xyrem®)	Colorless liquid, white powder	Swallowed (often combined with alcohol or other beverages)	I

Possible Health Effects

Short-term	Euphoria, drowsiness, nausea, vomiting, confusion, memory loss, unconsciousness, slowed heart rate and breathing, lower body temperature, seizures, coma, death.
Long-term	Unknown.
Other Health-related Issues	Sometimes used as a date rape drug.
In Combination with Alcohol	Nausea, problems with breathing, greatly increased depressant effects.
Withdrawal Symptoms	Insomnia, anxiety, tremors, sweating, increased heart rate and blood pressure, psychotic thoughts.

Treatment Options

Medications	Benzodiazepines
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat GHB addiction.

Hallucinogens

Drugs that cause profound distortions in a person's perceptions of reality, such as ketamine, LSD, mescaline (peyote), PCP, psilocybin, salvia, DMT, and ayahuasca. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Heroin

An opioid drug made from morphine, a natural substance extracted from the seed pod of various opium poppy plants. For more information, see the [Heroin Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Brown sugar, China White, Chiva Dope, H, Horse, Junk, Skag, Skunk, Smack, White Horse <i>With OTC nighttime cold medicine:</i> Cheese <i>With Marijuana:</i> A-Bomb	No commercial uses	White or brownish powder, or black sticky substance known as "black tar heroin"	Injected, smoked, snorted	I
Possible Health Effects				
Short-term	Euphoria; dry mouth; itching; nausea; vomiting; analgesia; slowed breathing and heart rate.			
Long-term	Collapsed veins; abscesses (swollen tissue with pus); infection of the lining and valves in the heart; constipation and stomach cramps; liver or kidney disease.			
Other Health-related Issues	Pregnancy: miscarriage, low birth weight, neonatal abstinence syndrome. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Dangerous slowdown of heart rate and breathing, coma, death.			
Withdrawal Symptoms	Restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps ("cold turkey").			
Treatment Options				
Medications	<ul style="list-style-type: none">• Methadone• Buprenorphine• Naltrexone (short- and long-acting forms)			
Behavioral Therapies	<ul style="list-style-type: none">• Contingency management, or motivational incentives• 12-Step facilitation therapy			

Inhalants

Solvents, aerosols, and gases found in household products such as spray paints, markers, glues, and cleaning fluids; also prescription nitrites. For more information, see the [Inhalants Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Air blast, Aimies, Bullets, Laughing gas, Moon gas, Oz, Poppers, Snappers, Snotballs, Toilet Water, Whippets, Whiteout	Various household products <i>Amyl nitrite</i> (a prescription solution) is used to relieve pain of angina attacks (chest pain).	Paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, lighter fluids, correction fluids, permanent markers, electronics cleaners and freeze sprays, glue, spray paint, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, vegetable oil sprays, butane lighters, propane tanks, whipped cream aerosol containers, refrigerant gases, ether, chloroform, halothane, nitrous oxide, prescription nitrites	Inhaled through the nose or mouth	Not scheduled

Possible Health Effects

Short-term	Confusion; nausea; slurred speech; lack of coordination; euphoria; dizziness; drowsiness; disinhibition, lightheadedness, hallucinations/delusions; headaches; sudden sniffing death due to heart failure (from butane, propane, and other chemicals in aerosols); death from asphyxiation, suffocation, convulsions or seizures, coma, or choking. Nitrites: enlarged blood vessels, enhanced sexual pleasure, increased heart rate, brief sensation of heat and excitement, dizziness, headache.
Long-term	Liver and kidney damage; bone marrow damage; limb spasms due to nerve damage; brain damage from lack of oxygen that can cause problems with thinking, movement, vision, and hearing. Nitrites: increased risk of pneumonia.
Other Health-related Issues	Pregnancy: low birth weight, bone problems, delayed behavioral development due to brain problems, altered metabolism and body composition.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Nausea, tremors, irritability, problems sleeping, and mood changes.

Treatment Options

Medications	There are no FDA-approved medications to treat inhalant addiction.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat inhalant addiction.

Ketamine

A dissociative drug used as an anesthetic in veterinary practice. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Cat Valium, K, Lady K, Special K, Vitamin K	<i>Ketalar</i> ®, a surgical anesthetic <i>Spravato</i> ™ (esketamine), prescribed for treatment resistant depression used under strict medical supervision <i>Ketaset</i> , a surgical anesthesia used by veterinarians	Liquid, white powder	When misused: Injected, snorted, smoked (powder added to tobacco or marijuana cigarettes), swallowed Prescription formulas are injections or nasal sprays.	III
Possible Health Effects				
Short-term	Problems with attention, learning, and memory; dreamlike states, hallucinations; sedation; confusion; loss of memory; raised blood pressure; unconsciousness; dangerously slowed breathing.			
Long-term	Ulcers and pain in the bladder; kidney problems; stomach pain; depression; poor memory.			
Other Health-related Issues	Sometimes used as a date rape drug. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Increased risk of adverse effects.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to ketamine or other dissociative drugs.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to dissociative drugs.			

Khat

Pronounced "cot," a shrub (*Catha edulis*) found in East Africa and southern Arabia; contains the psychoactive chemicals cathinone and cathine. People from African and Arabian regions (up to an estimated 20 million worldwide) have used khat for centuries as part of cultural tradition and for its stimulant-like effects.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Abyssinian Tea, African Salad, Catha, Chat, Kat, Oat	No commercial uses	Fresh or dried leaves	Chewed, brewed as tea	Cathinone is a Schedule I drug, making khat use illegal, but the khat plant is not controlled
Possible Health Effects				
Short-term	Euphoria, increased alertness and arousal, increased blood pressure and heart rate, depression, paranoia, headaches, loss of appetite, insomnia, fine tremors, loss of short-term memory.			
Long-term	Gastrointestinal disorders such as constipation, ulcers, and stomach inflammation; and increased risk of heart attack.			
Other Health-related Issues	In rare cases associated with heavy use: psychotic reactions such as fear, anxiety, grandiose delusions (fantastical beliefs that one has superior qualities such as fame, power, and wealth), hallucinations, and paranoia.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Depression, nightmares, low blood pressure, and lack of energy.			
Treatment Options				
Medications	It is not known whether khat is addictive. There are no FDA-approved medications to treat addiction to khat.			
Behavioral Therapies	More research is needed to find out if khat is addictive and, if so, whether behavioral therapies are effective.			

Kratom

A tropical deciduous tree (*Mitragyna speciosa*) native to Southeast Asia, with leaves that contain many compounds, including mitragynine, a psychoactive (mind-altering) opioid. Kratom is consumed for mood-lifting effects and pain relief and as an aphrodisiac. For more information, see the [Kratom DrugFacts](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Herbal Speedball, Biak-biak, Ketum, Kahum, Thang, Thom	None	Fresh or dried leaves, powder, liquid, gum	Chewed (whole leaves); eaten (mixed in food or brewed as tea); occasionally smoked	Not scheduled

Possible Health Effects

Short-term	Nausea, dizziness, itching, sweating, dry mouth, constipation, loss of appetite. Low doses: increased energy, sociability, alertness. High doses: sedation, euphoria, decreased pain.
Long-term	Anorexia, weight loss, insomnia, skin darkening, constipation. Hallucination and paranoia with long-term use at high doses.
Other Health-related Issues	Unknown.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Muscle aches, insomnia, hostility, aggression, emotional changes, runny nose, jerky movements.

Treatment Options

Medications	No clinical trials have been conducted on medications for kratom addiction.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to kratom.

LSD

A hallucinogen manufactured from lysergic acid, which is found in ergot, a fungus that grows on rye and other grains. LSD is an abbreviation of the scientific name *lysergic acid diethylamide*. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Acid, Blotter, Boomers, Cid, Golden Dragon, Looney Tunes, Lucy Mae, Microdots, Tabs, Yellow Sunshine	No commercial uses	Tablet; capsule; clear liquid; small, decorated squares of absorbent paper that liquid has been added to	Swallowed, absorbed through mouth tissues (paper squares)	I
Possible Health Effects				
Short-term	Rapid emotional swings; distortion of a person’s ability to recognize reality, think rationally, or communicate with others; raised blood pressure, heart rate, body temperature; dizziness; loss of appetite; tremors; enlarged pupils.			
Long-term	Frightening flashbacks (called Hallucinogen Persisting Perception Disorder [HPPD]); ongoing visual disturbances, disorganized thinking, paranoia, and mood swings.			
Other Health-related Issues	Unknown.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to LSD or other hallucinogens.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to hallucinogens.			

Marijuana (Cannabis)

Marijuana is made from the hemp plant, *Cannabis sativa*. The main psychoactive (mind-altering) chemical in marijuana is delta-9-tetrahydrocannabinol, or THC. For more information, see the [Marijuana Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
420, Blunt, Bud, Doobie, Dope, Ganja, Grass, Green, Herb, Joint, Mary Jane, Pot, Reefer, Sinsemilla, Skunk, Smoke, Stinkweed, Trees, Weed, Hashish: Boom, Gangster, Hash, Hemp Concentrates: Budder, Crumble, Shatter, Wax In food: Edibles Added to hollowed out cigar: Blunt	Various brand names in states where the sale of marijuana is legal	Greenish-gray mixture of dried, shredded leaves, stems, seeds, and/or flowers; resin (hashish) or sticky, black liquid (hash oil)	Smoked, Vaped, Eaten (mixed in food or brewed as tea)	I
Possible Health Effects				
Short-term	Enhanced sensory perception and euphoria followed by drowsiness/relaxation; slowed reaction time; problems with balance and coordination; increased heart rate and appetite; problems with learning and memory; anxiety.			
Long-term	Mental health problems, chronic cough, frequent respiratory infections.			
Other Health-related Issues	THC vaping products mixed with the filler Vitamin E acetate (and possibly other chemicals) has led to <u>serious lung illnesses and deaths</u> . Pregnancy: babies born with problems with attention, memory, and problem solving.			
In Combination with Alcohol	Increased heart rate, blood pressure; further slowing of mental processing and reaction time.			
Withdrawal Symptoms	Irritability, trouble sleeping, decreased appetite, anxiety.			
Treatment Options				
Medications	There are no FDA-approved medications to treat marijuana addiction.			
Behavioral Therapies	<ul style="list-style-type: none">• Cognitive-behavioral therapy (CBT)• Contingency management, or motivational incentives• Motivational Enhancement Therapy (MET)• Behavioral treatments geared to adolescents• Mobile medical application: reSET®			

MDMA (Ecstasy/Molly)

A synthetic, psychoactive drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is an abbreviation of the scientific name *3,4-methylenedioxy-methamphetamine*. For more information, see the [MDMA \(Ecstasy\) Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Adam, E, X, XTC, Beans, Candy, E-bomb, Thizz, Love Drug, Molly, Rolls, Skittles, Sweets, Vitamin E or X.	No commercial uses; is being researched as therapy for Post Traumatic Stress Disorder (PTSD) under strict medical supervision.	Colorful tablets with imprinted logos, capsules, powder, liquid	Swallowed, snorted	I
Possible Health Effects				
Short-term	Lowered inhibition; enhanced sensory perception; increased heart rate and blood pressure; muscle tension; nausea; faintness; chills or sweating; sharp rise in body temperature leading to kidney failure or death.			
Long-term	Long-lasting confusion, depression, problems with attention, memory, and sleep; increased anxiety, impulsiveness; less interest in sex.			
Other Health-related Issues	Unknown.			
In Combination with Alcohol	MDMA decreases some of alcohol's effects. Alcohol can increase plasma concentrations of MDMA, which may increase the risk of neurotoxic effects.			
Withdrawal Symptoms	Fatigue, loss of appetite, depression, trouble concentrating.			
Treatment Options				
Medications	There is conflicting evidence about whether MDMA is addictive. There are no FDA-approved medications to treat MDMA addiction.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat MDMA addiction.			

Mescaline (Peyote)

A hallucinogen found in disk-shaped "buttons" in the crown of several cacti, including peyote. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Big Chief, Buttons, Cactus, Mescalito	No commercial uses	Fresh or dried buttons, capsule	Swallowed (chewed or soaked in water and drunk)	I
Possible Health Effects				
Short-term	Enhanced perception and feeling; hallucinations; euphoria; anxiety; increased body temperature, heart rate, blood pressure; sweating; problems with movement.			
Long-term	Unknown.			
Other Health-related Issues	Unknown.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to mescaline or other hallucinogens.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to hallucinogens.			

Methamphetamine

An extremely addictive stimulant amphetamine drug. For more information, see the [Methamphetamine Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Crank, Chalk, Crystal, Dunk, Gak, Ice, Meth, Pookie, Quartz, Rocket Fuel, Scooby Snax, Speed, Trash <i>With cocaine:</i> Croak, Shabu <i>With MDMA:</i> Hugs and Kisses, Party and Play (P&P)	<i>Desoxyn®</i> used to treat Attention Deficit Hyperactivity Disorder.	White powder or pill; crystal meth looks like pieces of glass or shiny blue-white "rocks" of different sizes	Swallowed, snorted, smoked, injected	II

Possible Health Effects

Short-term	Increased wakefulness and physical activity; decreased appetite; increased breathing, heart rate, blood pressure, temperature; irregular heartbeat.
Long-term	Anxiety, confusion, insomnia, mood problems, violent behavior, paranoia, hallucinations, delusions, weight loss, severe dental problems ("meth mouth"), intense itching leading to skin sores from scratching.
Other Health-related Issues	Pregnancy: premature delivery; separation of the placenta from the uterus; low birth weight; lethargy; heart and brain problems. Risk of HIV, hepatitis, and other infectious diseases from shared needles.
In Combination with Alcohol	Masks the depressant effect of alcohol, increasing risk of alcohol overdose; may increase blood pressure.
Withdrawal Symptoms	Depression, anxiety, tiredness.

Treatment Options

Medications	There are no FDA-approved medications to treat methamphetamine addiction.
Behavioral Therapies	<ul style="list-style-type: none"> • Cognitive-behavioral therapy (CBT) • Contingency management, or motivational incentives • The Matrix Model • 12-Step facilitation therapy • Mobile medical application: reSET®

Over-the-Counter Medicines--Dextromethorphan (DXM)

Psychoactive when taken in higher-than-recommended amounts. For more information, see the [Over-the-Counter Medicines DrugFacts](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Poor Man's PCP, Robo, Robotripping, Skittles, Triple C	Various (many brand names include "DM")	Syrup, capsule	Swallowed	Not scheduled
Possible Health Effects				
Short-term	Cough relief; euphoria; slurred speech; increased heart rate and blood pressure; dizziness; nausea; vomiting;			
Long-term	Unknown.			
Other Health-related Issues	Breathing problems, seizures, and increased heart rate may occur from other ingredients in cough/cold medicines.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to dextromethorphan.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to dextromethorphan.			

Over-the-Counter Medicines--Loperamide

An anti-diarrheal that can cause euphoria when taken in higher-than-recommended doses. For more information, see the [Over-the-Counter Medicines DrugFacts](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Lope dope, Poor man's methadone	<i>Imodium</i> ®, an OTC medication for diarrhea	Tablet, capsule, or liquid	Swallowed	Not scheduled
Possible Health Effects				
Short-term	Controls diarrhea symptoms. In high doses, can produce euphoria. May lessen cravings and withdrawal symptoms of other drugs.			
Long-term	Unknown.			
Other Health-related Issues	Fainting, stomach pain, constipation, loss of consciousness, cardiovascular toxicity, pupil dilation, drowsiness, dizziness, and kidney failure from urinary retention.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Severe anxiety, vomiting, and diarrhea.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to over-the-counter cough/cold medicines.			
Behavioral Therapies	<ul style="list-style-type: none">• The same behavioral therapies that have helped treat addiction to heroin may be used to treat addiction to loperamide.• Contingency management, or motivational incentives			

PCP

A dissociative drug developed as an intravenous anesthetic that has been discontinued due to serious adverse effects. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. PCP is an abbreviation of the scientific name, *phencyclidine*. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Angel Dust, Embalming fluid, Hog, Rocket Fuel, Sherms, <i>Mixed with marijuana:</i> Zoom	No commercial uses	White or colored powder, tablet, or capsule; clear liquid	Injected, snorted, swallowed, smoked (powder added to mint, parsley, oregano, or marijuana)	I, II

Possible Health Effects

Short-term	Delusions, hallucinations, paranoia, problems thinking, a sense of distance from one's environment, anxiety. Low doses: slight increase in breathing rate; increased blood pressure and heart rate; shallow breathing; face redness and sweating; numbness of the hands or feet; problems with movement. High doses: nausea; vomiting; flicking up and down of the eyes; drooling; loss of balance; dizziness; violence; seizures, coma, and death.
Long-term	Memory loss, problems with speech and thinking, loss of appetite, anxiety.
Other Health-related Issues	PCP has been linked to self-injury. Risk of HIV, hepatitis, and other infectious diseases from shared needles.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Headaches, increased appetite, sleepiness, depression

Treatment Options

Medications	There are no FDA-approved medications to treat addiction to PCP or other dissociative drugs.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to dissociative drugs.

Prescription Opioids

Pain relievers with an origin similar to that of heroin. Opioids can cause euphoria and are often used nonmedically, leading to overdose deaths. For more information, see the [Misuse of Prescription Drugs Research Report](#).

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule
Captain Cody, Coties, Schoolboy, <i>With soft drinks/candy:</i> Lean, Sizzurp, Purple Drank <i>With hypnotic sedatives:</i> Doors & Fours, Loads, Pancakes and Syrup	Codeine (various brand names)	Tablet, capsule, liquid	Injected, swallowed (often mixed with soda and flavorings)	II, III, V
Apache, Blonde, Blue Diamond, Blue Diamond, China Buffet, China White, Snowflake, Humid, Jackpot, Murder 8, Tango and Cash, TNT, White Ladies, <i>With heroin:</i> Birria <i>With heroin pills:</i> Facebook	Fentanyl (<i>Actiq</i> ®, <i>Duragesic</i> ®, <i>Sublimaze</i> ®)	Lozenge, sublingual tablet, film, buccal tablet	Injected, smoked, snorted	II
Vikes, Weeks, Idiot Pills, Scratch, 357s, Lemonade, Bananas, Dones, Droco, Lorries, <i>With valium and vodka:</i> Triple V	Hydrocodone or dihydrocodeinone (<i>Vicodin</i> ®, <i>Norco</i> ®, <i>Zohydro</i> ®, and others)	Capsule, liquid, tablet	Swallowed, snorted, injected	II
D, Dillies, K4, Needle Candy,	Hydromorphone (<i>Dilaudid</i> ®)	Liquid, suppository	Injected, rectal	II
Demmies, Pain Killer	Meperidine (<i>Demerol</i> ®)	Tablet, liquid	Swallowed, snorted, injected	II
Amidone, Biscuits, Fizzies, Jungle Juice, Maria, Wafer <i>With MDMA:</i> Chocolate Chip Cookies	Methadone (<i>Dolophine</i> ®, <i>Methadose</i> ®)	Tablet, dispersible tablet, liquid	Swallowed, injected	II
Dreamer, First Line, Joy Juice, Morpho, Miss Emma, Monkey, White Stuff, Mister Blue, Unkie	Morphine (<i>Duramorph</i> ®, <i>MS Contin</i> ®)	Tablet, liquid, capsule, suppository	Injected, swallowed, smoked	II, III

30s, 40s, 512s, Oxy, Beans, Blues, Buttons, Cotton, Hillbilly Heroin Kickers, Killers, Percs, Roxy	Oxycodone (<i>OxyContin</i> ®, <i>Percodan</i> ®, <i>Percocet</i> ®, and others)	Capsule, liquid, tablet	Swallowed, snorted, injected	II
Biscuits, Blue Heaven, Blues, Mrs. O, O Bomb, Octagons, Stop Signs	Oxymorphone (<i>Opana</i> ®)	Tablet	Swallowed, snorted, injected	II
Possible Health Effects				
Short-term	Pain relief, drowsiness, nausea, constipation, euphoria, slowed breathing, death.			
Long-term	Increased risk of overdose or addiction if misused.			
Other Health-related Issues	Pregnancy: Miscarriage, low birth weight, neonatal abstinence syndrome. Older adults: higher risk of accidental misuse because many older adults have multiple prescriptions, increasing the risk of drug-drug interactions, and breakdown of drugs slows with age; also, many older adults are treated with prescription medications for pain. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Dangerous slowing of heart rate and breathing leading to coma or death.			
Withdrawal Symptoms	Restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps ("cold turkey"), leg movements.			
Treatment Options				
Medications	<ul style="list-style-type: none">• Methadone• Buprenorphine• Naltrexone (short- and long-acting)			
Behavioral Therapies	The same behavioral therapies that have helped treat addiction to heroin are used to treat prescription opioid addiction.			

Prescription Stimulants

Medications that increase alertness, attention, energy, blood pressure, heart rate, and breathing rate. For more information, see the [Misuse of Prescription Drugs Research Report](#).

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule
Addys, Bennies, Beans, Black Beauties, Crosses, Hearts, Ivy League Drug, Pep Pills, Speed, Truck Drivers, Uppers	Amphetamine (<i>Adderall</i> ®)	Tablet, capsule	Swallowed, snorted, smoked, injected	II
Diet Coke, JIF, Kiddie Coke, MPH, R-Ball, R-Pop, Skippy, Study Buddies, The Smart Drug, Vitamin R	Methylphenidate (<i>Concerta</i> ®, <i>Ritalin</i> ®)	Liquid, tablet, chewable tablet, capsule	Swallowed, snorted, smoked, injected, chewed	II

Possible Health Effects

Short-term	Increased alertness, attention, energy; increased blood pressure and heart rate; narrowed blood vessels; increased blood sugar; opened-up breathing passages. High doses: dangerously high body temperature and irregular heartbeat; heart disease; seizures.
Long-term	Heart problems, psychosis, anger, paranoia.
Other Health-related Issues	Risk of HIV, hepatitis, and other infectious diseases from shared needles.
In Combination with Alcohol	Masks the depressant action of alcohol, increasing risk of alcohol overdose; may increase blood pressure.
Withdrawal Symptoms	Depression, tiredness, sleep problems.

Treatment Options

Medications	There are no FDA-approved medications to treat stimulant addiction.
Behavioral Therapies	<ul style="list-style-type: none"> Behavioral therapies that have helped treat addiction to cocaine or methamphetamine may be useful in treating prescription stimulant addiction. Mobile medical application: reSET®

Psilocybin

A hallucinogen in certain types of mushrooms that grow in parts of South America, Mexico, and the United States. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Little Smoke, Magic Mushrooms, Purple Passion, Sacred Mush, Sewage Fruit, Shrooms, Zoomers	No commercial uses; being researched as therapy for treatment-resistant depression under strict medical supervision.	Fresh or dried mushrooms with long, slender stems topped by caps with dark gills	Swallowed (eaten, brewed as tea, or added to other foods)	I

Possible Health Effects

Short-term	Hallucinations, altered perception of time, inability to tell fantasy from reality, panic, muscle relaxation or weakness, problems with movement, enlarged pupils, nausea, vomiting, drowsiness.
Long-term	Risk of flashbacks and memory problems.
Other Health-related Issues	Risk of poisoning if a poisonous mushroom is accidentally used.
In Combination with Alcohol	May decrease the perceived effects of alcohol.
Withdrawal symptoms	Unknown.

Treatment Options

Medications	It is not known whether psilocybin is addictive. There are no FDA-approved medications to treat addiction to psilocybin or other hallucinogens.
Behavioral Therapies	More research is needed to find out if psilocybin is addictive and whether behavioral therapies can be used to treat addiction to this or other hallucinogens.

Rohypnol® (Flunitrazepam)

A benzodiazepine chemically similar to prescription sedatives such as Valium® and Xanax®. Teens and young adults tend to misuse this drug at bars, nightclubs, concerts, and parties. It has been used to commit sexual assaults due to its ability to sedate and incapacitate unsuspecting victims.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Circles, Date Rape Drug, Forget-Me Pill, La Rocha, Mexican Valium, Mind Eraser, Pingus, R2, Rib, <i>Variations of:</i> Roaches, Roopies, Rochas Dos, Roofies, Rope, Rophies, Rowie, Ruffies	Flunitrazepam, <i>Rohypnol®</i>	Tablet	Swallowed (as a pill or as dissolved in a drink), snorted	IV Rohypnol® is not approved for medical use in the United States; it is available as a prescription sleep aid in other countries.

Possible Health Effects

Short-term	Drowsiness, sedation, sleep; amnesia, blackout; decreased anxiety; muscle relaxation, impaired reaction time and motor coordination; impaired mental functioning and judgment; confusion; aggression; excitability; slurred speech; headache; slowed breathing and heart rate.
Long-term	Unknown.
Other Health-related Issues	Unknown.
In Combination with Alcohol	Severe sedation, unconsciousness, and slowed heart rate and breathing, which can lead to death.
Withdrawal Symptoms	Headache; muscle pain; extreme anxiety, tension, restlessness, confusion, irritability; numbness and tingling of hands or feet; hallucinations, delirium, convulsions, seizures, or shock.

Treatment Options

Medications	There are no FDA-approved medications to treat addiction to Rohypnol® or other prescription sedatives.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to Rohypnol® or other prescription sedatives.

Salvia

A dissociative drug (*Salvia divinorum*) that is an herb in the mint family native to southern Mexico. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. For more information, see the [Hallucinogens and Dissociative Drugs Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Chia seeds, Diviner’s Sage, Magic Mint, Sally-D, Ska Pastora,	Sold legally in most states as <i>Salvia divinorum</i>	Fresh or dried leaves	Smoked, chewed, or brewed as tea	Not Scheduled (but labeled drug of concern by DEA and illegal in some states)
Possible Health Effects				
Short-term	Short-lived but intense hallucinations; altered visual perception, mood, body sensations; mood swings, feelings of detachment from one’s body; sweating.			
Long-term	Unknown.			
Other Health-related Issues	Unknown.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
Treatment Options				
Medications	It is not known whether salvia is addictive. There are no FDA-approved medications to treat addiction to salvia or other dissociative drugs.			
Behavioral Therapies	More research is needed to find out if salvia is addictive, but behavioral therapies can be used to treat addiction to dissociative drugs.			

Steroids (Anabolic)

Man-made substances used to treat conditions caused by low levels of steroid hormones in the body and misused to enhance athletic and sexual performance and physical appearance. For more information, see the [Steroids and Other Appearance and Performance Enhancing Drugs \(APEDs\) Research Report](#).

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule
Gear, Gym Candy, Juice, Pumpers, Roids, Stacking	Nandrolone (Oxandrin®), oxandrolone (Anadrol®), oxymetholone (Anadrol-50®), testosterone cypionate (Depo-testosterone®)	Tablet, capsule, liquid drops, gel, cream, patch, injectable solution	Injected, swallowed, applied to skin	III
Possible Health Effects				
Short-term	Builds muscles, improved athletic performance. Acne, fluid retention (especially in the hands and feet), oily skin, yellowing of the skin, infection.			
Long-term	Kidney damage or failure; liver damage; high blood pressure, enlarged heart, or changes in cholesterol leading to increased risk of stroke or heart attack, even in young people; aggression; extreme mood swings; anger ("roid rage"); extreme irritability; delusions; impaired judgment.			
Other Health-related Issues	Males: shrunken testicles, lowered sperm count, infertility, baldness, development of breasts. Females: facial hair, male-pattern baldness, enlargement of the clitoris, deepened voice. Adolescents: stunted growth. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Increased risk of violent behavior.			
Withdrawal Symptoms	Mood swings; tiredness; restlessness; loss of appetite; insomnia; lowered sex drive; depression, sometimes leading to suicide attempts.			
Treatment Options				
Medications	Hormone therapy.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat steroid addiction.			

Synthetic Cannabinoids

A wide variety of herbal mixtures containing man-made cannabinoid chemicals related to THC in marijuana but often much stronger and more dangerous. Sometimes misleadingly called "synthetic marijuana" and marketed as a "natural," "safe," legal alternative to marijuana. For more information, see the [Synthetic Cannabinoids DrugFacts](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Black Mamba, Bliss, Bombay Blue, Fake Weed, Fire, Genie, K-2, Moon Rocks, Solar Flare, Skunk, Smacked, Spice, Yucatan, Zohai	No commercial uses, but new formulations are sold under various names to attract young adults. Many formulations have been outlawed.	Dried, shredded plant material that looks like potpourri and is sometimes sold as "incense"	Smoked, swallowed (brewed as tea)	I

Possible Health Effects

Short-term	Increased heart rate; vomiting; agitation; confusion; hallucinations, anxiety, paranoia; increased blood pressure.
Long-term	Unknown.
Other Health-related Issues	Use of synthetic cannabinoids has led to an increase in emergency room visits in certain areas.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Headaches, anxiety, depression, irritability.

Treatment Options

Medications	There are no FDA-approved medications to treat synthetic cannabinoid addiction.
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat synthetic cannabinoid addiction.

Synthetic Cathinones ("Bath Salts")

An emerging family of drugs containing one or more synthetic chemicals related to cathinone, a stimulant found naturally in the khat plant. Examples of such chemicals include mephedrone, methylone, and 3,4-methylenedioxypyrovalerone (MDPV). For more information, see the [Synthetic Cathinones \("Bath Salts"\) DrugFacts](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Bath Blow, Bloom, Blue Silk, Bubbles, Cloud Nine, Cosmic Blast, Flakka, Ivory Wave, Lunar Wave, Salting, Scarface, Vanilla Sky, White Lightning, Wicked X	No commercial uses for ingested "bath salts." No relation to "Epsom salt," sold as a bath product.	White or brown crystalline powder sold in small plastic or foil packages labeled "not for human consumption" and sometimes sold as jewelry cleaner; tablet, capsule, liquid	Swallowed, snorted, injected	I Some formulations have been banned by the DEA
Possible Health Effects				
Short-term	Increased heart rate and blood pressure; euphoria; increased sociability and sex drive; paranoia, agitation, and hallucinations; violent behavior; sweating; nausea, vomiting; insomnia; irritability; dizziness; depression; panic attacks; reduced motor control; cloudy thinking.			
Long-term	Death.			
Other Health-related Issues	Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Depression, anxiety.			
Treatment Options				
Medications	There are no FDA-approved medications to treat addiction to synthetic cathinones.			
Behavioral Therapies	<ul style="list-style-type: none">• Cognitive-behavioral therapy (CBT)• Contingency management, or motivational incentives• Motivational Enhancement Therapy (MET)• Behavioral treatments geared to teens			

Tobacco (and Nicotine)

Tobacco is a plant grown for its leaves, which are dried and fermented before use. Tobacco contains nicotine, an addictive chemical. Nicotine is sometimes extracted from the plant and is used in vaping devices. For more information, see the [Tobacco, Nicotine and E-Cigarettes Research Report](#).

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
<i>Cigarettes/Cigars:</i> Butts, Cancer sticks, Ciggys, Cigs, Coffin nails, Smokes, Stogies, Stokes <i>Cigar hollowed out with marijuana added:</i> Blunt <i>Vaping:</i> Cig-A-Like, E-Hookah, E-Juice, JUULing, vape pens, mods	Multiple brand names	cigarettes, vaping devices, e-cigarettes, cigars, bidis, hookahs, kreteks Smokeless tobacco: snuff, spit tobacco, chew	Smoked, snorted, chewed, vaporized	Not Scheduled

Possible Health Effects

Short-term	Increased blood pressure, breathing, and heart rate. Exposes lungs to a variety of chemicals. Vaping also exposes lungs to metallic vapors created by heating the coils in the device.
Long-term	Greatly increased risk of cancer, especially lung cancer when smoked, and oral cancers when chewed; chronic bronchitis; emphysema; heart disease; leukemia; cataracts; pneumonia.
Other Health-related Issues	<i>Nicotine:</i> in teens it can affect the development of brain circuits that control attention and learning. <i>Tobacco products:</i> Use while pregnant can lead to miscarriage, low birth weight, stillbirth, learning and behavior problems. <i>Vaping products:</i> Some are mixed with the filler Vitamin E acetate and other chemicals, leading to <u>serious lung illnesses</u> and deaths.
In Combination with Alcohol	Unknown.
Withdrawal Symptoms	Irritability, attention and sleep problems, depression, increased appetite.

Treatment Options

Medications	<ul style="list-style-type: none"> Bupropion (Zyban®) Varenicline (Chantix®) Nicotine replacement (gum, patch, lozenge)
Behavioral Therapies	<ul style="list-style-type: none"> Cognitive-behavioral therapy (CBT) Self-help materials Mail, phone, and internet quitting resources



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Mandatory Minimum Sentencing of Federal Drug Offenses in Short

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Summary

As a general rule, federal judges must impose a minimum term of imprisonment upon defendants convicted of various controlled substance (drug) offenses and drug-related offenses. The severity of those sentences depends primarily upon the nature and amount of the drugs involved, the defendant's prior criminal record, any resulting injuries or death, and in the case of the related firearms offenses, the manner in which the firearm was used.

The drug offenses reside principally in the Controlled Substances Act or the Controlled Substances Import and Export Act. The drug-related firearms offenses involve the possession and use of firearms in connection with serious drug offenses and instances in which prior drug convictions trigger mandatory sentences for unlawful firearms possession.

The minimum sentences range from imprisonment for a year to imprisonment for life. Although the sentences are usually referred to as mandatory minimum sentences, a defendant may avoid them under several circumstances. Prosecutors may elect not to prosecute. The President may choose to pardon the defendant or commute his sentence. The defendant may qualify for sentencing for providing authorities with substantial assistance or under the so-called "safety valve" provision available to low-level, nonviolent, first-time offenders.

Over time, defendants, sentenced to mandatory terms of imprisonment for drug-related offenses, have challenged Congress's legislative authority to authorize them and the government's constitutional authority to enforcement. The challenges have met with scant success. Generally, courts have concluded that the provisions fall within congressional authority under the Commerce, Necessary and Proper, Treaty, and Territorial Clauses of the Constitution. By and large, courts have also found no impediment to mandatory minimum sentences under the Due Process, Equal Protection, or Cruel and Unusual Punishment Clauses, or the separation-of-powers doctrine.

Proposals to amend drug-related mandatory minimum sentence provisions surfaced during the 114th Congress. In the 115th Congress, Senator Grassley introduced the successor to those proposals for himself and a bi-partisan list of co-sponsors as S. 1917, the Sentencing Reform and Corrections Act of 2017. Many of the same issues are addressed in H.R. 4261 introduced by Representative Scott of Virginia. This is an overview of the law from which those proposals spring.

This report is an abridged version of a longer report, CRS Report R45074, *Mandatory Minimum Sentencing of Federal Drug Offenses*, without the citations to authority and origin of quotations found in the parent report.

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Introduction

This is a brief discussion of the law associated with the mandatory minimum sentencing provisions of federal controlled substance (drug) laws and drug-related federal firearms and recidivist statutes. These mandatory minimums, however, are not as mandatory as they might appear. The government may elect not to prosecute the underlying offenses. Federal courts may disregard otherwise applicable mandatory sentencing requirements at the behest of the government. The federal courts may also bypass some of them for the benefit of certain low-level, nonviolent, offenders with virtually spotless criminal records under the so-called “safety valve” provision. Finally, in cases where the mandatory minimums would usually apply, the President may pardon the offenders or commute their sentences before the minimum term of imprisonment has been served.

Be that as it may, sentencing in drug cases, particular mandatory minimum drug sentencing, has contributed to an explosion in the federal prison population and attendant costs. The federal inmate population at the end of 1976 was 23,566. On January 4, 2018, the federal inmate population was 183,493. As of September 30, 2016, 49.1% of federal inmates were drug offenders and 72.3% of those were convicted of an offense carrying a mandatory minimum. In 1976, federal prisons cost \$183.914 million; in 2016, federal prisons cost over \$6.750 billion.

Mandatory Minimums for Drug Crimes

Table 1 below describes the mandatory minimum sentencing provisions for various drug and drug-related offenses.

Table 1. Federal Drug Offenses: Mandatory Minimum Terms of Imprisonment

Substance	Minimum	Maximum
Trafficking 21 U.S.C. § 841(b)(1)(A)/960(b)(1) substances (e.g., 1 kilo or more of heroin)	10 years	life
if death or serious injury results	20 years	life
with prior drug felony conviction	20 years	life
with prior drug felony conviction if death or serious injury results, or with two or more drug felony convictions	life	life
Trafficking 841(b)(1)(B)/960(b)(2) substances (e.g., 100 grams or more of heroin)	5 years	40 years
if death or serious injury results	20 years	life
repeat offender	10 years	life
repeat offender if death or serious injury results	life	life
Trafficking lesser amounts of 841(b)(1)/960(b) substances; other Schedule I or II substances; analogues; or date rape drugs: if death or serious injury results	20 years	life
repeat offender if death or serious injury results	life	life
Simple possession of a controlled substance with 1 prior conviction	15 days	2 years
Simple possession of a controlled substance with 2 or more priors	90 days	3 years
Drug kingpin	20 years	life
repeat offender	30 years	life
large operation (e.g., gross \$10 million + per year)	life	life
killing in furtherance	20 years	life/death
Unless a higher minimum applies, distribution of a controlled substance to a pregnant woman, or using a child	1 year	2x usual penalty
repeat offender	3 years	3x for repeat offenders
Unless a higher minimum applies, distribution of a controlled substance proximate to a school or other prohibited location	1 year	2x usual penalty
repeat offender	3 years	3x usual penalty
Narco-terrorism involving 841(b)(1) substances	2x usual minimum	life
Firearm possession in furtherance of drug trafficking (varying by use, firearm, recidivism)	7 years–life	life

Substance	Minimum	Maximum
Unlawful firearm possession with 3 or more prior serious drug or violent felony convictions	15 years	life
Serious violent felony with 2 or more prior serious drug and/or violent felony convictions	life	life

Source: CRS analysis of statutes cited below.

Note: The same minimum and maximum penalties generally apply to attempt, conspiracy, or aiding and abetting the offenses described above.

Domestic Manufacture or Distribution (21 U.S.C. § 841(a))

Section 841(a) outlaws knowingly or intentionally manufacturing, distributing, dispensing, or possessing with the intent to distribute or dispense controlled substances except as otherwise authorized by the Controlled Substances Act.

Knowingly or Intentionally

The government may establish the knowledge element of Section 841(a) in either of two ways. First, the “knowledge requirement may be met by showing that the defendant knew he possessed a substance listed on the [controlled substance] schedules.” Second, “[t]he knowledge requirement may also be met by showing that the defendant knew the identity of the substance he possessed. Take, for example, a defendant who knows that he is distributing heroin but does not know that heroin is listed on the schedules.” As long as the government proves the defendant knows he was dealing in heroin, it need not prove that the defendant knew the particular type or quantity of the controlled substance he intended to distribute.

When a defendant claims no guilty knowledge, the circumstances may warrant a willful blindness instruction to the jury. The willful blindness instruction, sometimes called the deliberate ignorance or “ostrich head in the sand” instruction, is warranted if “(1) the defendant claims lack of knowledge; (2) the evidence would support an inference that the defendant consciously engaged in a course of deliberate ignorance; and (3) the proposed instruction, as a whole, could not lead the jury to conclude that an inference of knowledge is mandatory.”

Manufacture, Distribute, Dispense, or Possess

Manufacture: For purposes of Section 841(a), “‘manufacture’ means the production ... or processing of a drug, and the term ‘production’ includes the manufacture, planting, cultivation, growing, or harvesting of a controlled substance.”

Distribute or Dispense: The Controlled Substances Act defines the term “distribute” broadly. The term encompasses any transfer of a controlled substance other than dispensing it. It reaches both sales and transfers without compensation. To “dispense” is “to deliver a controlled substance to an ultimate user ... by, or pursuant to the lawful order of, a practitioner...” The Controlled Substances Act outlaws practitioners’ proscribing controlled substances for other than legitimate medical purposes.

Possession with Intent to Distribute or Dispense: The government may satisfy the possession element with evidence of either actual or constructive possession. “Actual possession is the knowing, direct, and physical control over a thing.” “Constructive possession exists when a person knowingly has the power and intention at a given time to exercise dominion and control over an object either directly or through others.”

The escalating mandatory minimums that apply to offenders with “a prior conviction for a felony drug offense” extend to offenses classified as misdemeanors under state law, but punishable by imprisonment for more than a year. They also apply even though the underlying state felony conviction has been expunged. On the other hand, there is apparently a division among the circuits over whether the government’s failure to comply with the procedure for establishing a prior conviction, and therefore to alert the defendant to the prospect of an enhanced mandatory minimum, precludes imposition of the enhanced sentence.

Sentencing: Sentencing for violations of Section 841(a) is governed by the nature and volume of the substance involved, the defendant’s criminal record, and injuries attributable to the offense. The most severe penalties are reserved for high-volume trafficking of the eight substances thought most susceptible to abuse and least appropriate for medicinal use without tight controls and that are assigned to Controlled Substance Schedules I and II.

The eight substances are heroin, powder cocaine, cocaine base (crack), PCP, LSD, fentanyl, methamphetamine, and marijuana. Each comes with one set of mandatory minimums for trafficking in a very substantial amount listed in Section 841(b)(1)(A) and a second, lower set of mandatory minimums for trafficking in a lower but still substantial amount listed in Section 841(a)(1)(B). The first set (841(b)(1)(A) level) features the following thresholds:

- heroin - 1 kilogram;
- powder cocaine - 5 kilograms;
- crack - 280 grams;
- PCP - 100 grams;
- LSD - 10 grams;
- fentanyl - 400 grams;
- methamphetamine - 50 grams;
- marijuana - 1,000 kilograms.

The second set (841(b)(1)(B) level) has thresholds that are one-tenth of those of the higher set:

- heroin - 100 grams;
- powder cocaine - 500 grams;
- crack - 28 grams;
- PCP - 100 grams;
- LSD - 1 gram;
- fentanyl - 40 grams;
- methamphetamine - 5 grams;
- marijuana - 100 kilograms.

A Section 841(a) violation involving one of the eight drugs at the higher 841(b)(1)(A) level is punishable by imprisonment for:

- not less than 10 years;
- not less than 20 years if the offense results in death or serious bodily injury or if the offender has a prior felony drug conviction; and
- a mandatory term of life imprisonment if the offender has a prior felony drug conviction and the offense resulted in death or serious bodily injury or if the offender has two or more prior felony drug convictions.

A Section 841(a) violation involving one of the eight drugs at the lower 841(b)(1)(B) level is punishable by imprisonment for:

- not less than 5 years;
- not less than 10 years, if the offender has a prior felony drug conviction;
- not less than 20 years if the offense results in death or serious bodily injury; and
- a mandatory term of life imprisonment if the offender has a prior felony drug conviction and the offense resulted in death or serious bodily injury.

A Section 841(a) violation involving one of the eight drugs in lesser amounts, or some other Schedule I or II drug, or a date rape drug is punishable by imprisonment for:

- not less than 20 years if death or serious bodily injury results; and
- life if the offender has a prior felony drug conviction and death or serious bodily injury results.

The felony drug convictions that trigger the sentencing enhancement include federal, state, and foreign convictions. The “serious bodily injury” enhancement is confined to bodily injuries which involve “(A) a substantial risk of death; (B) protracted and obvious disfigurement; or (C) protracted loss or impairment of the function of a bodily member, organ, or mental faculty.” And, the “if death results” enhancement is available only if the drugs provided by the defendant were the “but-for” cause of death; it is not available if the drugs supplied were merely a contributing cause. The same “but for” standard presumably applies with equal force to the “serious bodily injury” enhancement.

Attempt, Conspiracy, and Aiding and Abetting: The mandatory minimums of Section 841 apply with equal force to those who attempt to possess with intent to distribute; who conspire to do so; or who aid and abet a violation of Section 841 by others.

To prove an attempt to violate Section 841(a), “the government must establish beyond a reasonable doubt that the defendant (a) had the intent to commit the object crime and (b) engaged in conduct amounting to a substantial step towards its commission. For a defendant to have taken a substantial step, he must have engaged in more than mere preparation, but may have stopped short of the last act necessary for the actual commission of the substantive crime.”

Conspiracy is an agreement to commit a crime. “To establish that a defendant conspired to distribute drugs under 21 U.S.C. § 846, the government must prove: (1) that there was a conspiracy, i.e., an agreement to distribute the drugs; (2) that the defendant knew of the conspiracy; and (3) that the defendant intentionally joined the conspiracy.” The existence of the conspiracy need not be shown by written agreement or any other form of direct evidence, but may be inferred from the circumstances. Moreover, each of the conspirators need not be fully aware of the roles or activities of all of their cohorts. Each conspirator, however, is punishable for the foreseeable offenses committed in furtherance of the common scheme.

Although it technically demonstrates an agreement to distribute a controlled substance, proof of a small, one-time sale of a controlled substance is ordinarily not considered sufficient for a conspiracy conviction. “[T]he factors that demonstrate a defendant was part of a conspiracy rather than in a mere buyer/seller relationship with that conspiracy include: (1) the length of affiliation between the defendant and the conspiracy; (2) whether there is an established method of payment; (3) the extent to which transactions are standardized; (4) whether there is a demonstrated level of mutual trust; (5) whether transactions involved large amounts of drugs; and (6) whether the defendant purchased his drugs on credit.”

Accomplices who aid and abet the crime of another receive the same punishment as the offender they assist. To prove, aiding and abetting, the government must show that the defendant knowingly embraced and assisted in the commission of the crime.

Special Circumstances

Trafficking offenses that ordinarily do not trigger mandatory minimum sentences may do so if they involve special circumstances. Thus, trafficking to pregnant women, children, or in proximity of a school, playground or other prohibited location, or using a child to manufacture or traffic, are punishable with a one-year mandatory minimum term of imprisonment and in most instances a three-year mandatory minimum for repeat offenders.

Import/Export Offenses

Sections 960 and 963 of the Controlled Substances Import and Export Act, and by cross-reference Section 70506 of the Maritime Drug Law Enforcement Act (MDLEA), largely track the penalties found in the Section 841(b) of the Controlled Substances Act, including the mandatory minimum sentences of imprisonment.

Section 960: Section 960 sets the penalties for three categories of offenses: (1) importing or exporting a controlled substance in violation of 21 U.S.C. § 825 (labeling and packaging), § 952 (importing controlled substances), § 953 (exporting controlled substances), or § 967 (smuggling controlled substances); (2) possession of a controlled substance aboard a vessel or aircraft in violation of 21 U.S.C. § 955; and (3) possession with intent to distribute in violation of 21 U.S.C. § 959.

Of these, violations of Sections 952 and 959 appear to be the most commonly prosecuted. “To sustain a conviction for the importation of a controlled substance[under Section 952], the government must prove: (1) the defendant played a role in bringing a quantity of a controlled substance into the United States; (2) the defendant knew the substance was controlled; and (3) the defendant knew the substance would enter the United States.” The government, however, need not prove that the defendant knew which controlled substance was being imported or its quantity.

Section 959 proscribes two offenses: manufacturing or distributing a controlled substance for import purposes and possession aboard an aircraft by a U.S. citizen or aboard a U.S. aircraft. The section specifically states that it governs offenses committed outside the territory of the United States.

Attempt, Conspiracy, and Aiding and Abetting: Section 963 outlaws attempts and conspiracies to violate the prohibitions covered by Section 960, and calls for the same penalties, including mandatory minimums, as apply to the underlying substantive offenses.

Maritime Drug Law Enforcement Act (MDLEA) (46 U.S.C. §§ 70503, 70506): MDLEA outlaws possession of a controlled substance aboard a vessel subject to U.S. jurisdiction or attempting or conspiring to do so. Here, too, violations carry the same penalties, including mandatory minimums, as the underlying substantive offenses.

The term “vessel subject to the jurisdiction of the United States” includes vessels within U.S. territorial or customs waters, and vessels of foreign registration or vessels located in foreign territorial waters when the foreign nation has consent to application of U.S. law, as well as vessels for which no claim of registration or false claim of registration is presented. Most of the lower federal appellate courts to consider the issue have held that the government need not establish any other nexus to the United States. The type and volume of controlled substances

ordinarily involved in MDLEA cases usually trigger the more severe mandatory minimum sentences.

Narco-Terrorism (21 U.S.C. § 960a)

Section 960a doubles the otherwise applicable mandatory minimum sentence for drug trafficking (including an attempt or conspiracy to traffic) when the offense is committed in order to fund a terrorist activity or terrorist organization. The merging of drug trafficking and terrorism offenses in Section 960a does not preclude conviction of the defendant for drug trafficking and terrorism offenses as well. Here too, the controlled substances involved ordinarily require imposition of a mandatory minimum term of imprisonment.

Drug Kingpin (21 U.S.C. § 848)

Conviction of a Continuing Criminal Enterprise (CCE or Drug Kingpin) offense results in imposition of a 20-year mandatory minimum; the mandatory minimum for repeat offenders is 30 years. Drug kingpins of enormous enterprises, however, face a mandatory sentence of life imprisonment.

To secure a conviction, the government must establish, “(1) a felony violation of the federal narcotics laws; 2) as part of a continuing series of three or more related felony violations of federal narcotics laws; 3) in concert with five or more other persons; 4) for whom [the defendant] is an organizer, manager or supervisor; [and] 5) from which [the defendant] derives substantial income or resources.”

The homicide mandatory minimum found in the drug kingpin statute sets a 20-year minimum term of imprisonment for killings associated with a kingpin offense or for killings of law enforcement officers associated with certain other controlled substance offenses. Neither prohibition requires the defendant to have been manufacturing or distributing controlled substances at the time of the killing.

Drug-Related Mandatory Minimums

Firearm Possession in Furtherance (18 U.S.C. § 924(c))

Mandatory minimums are found in two federal firearms statutes. One, the Armed Career Criminal Act, deals exclusively with recidivists. The other, Section 924(c), attaches one of several mandatory minimum terms of imprisonment whenever a firearm is used or possessed during and in relation to a federal crime of violence or drug trafficking.

Section 924(c), in its current form, establishes one of several different minimum sentences when a firearm is used or possessed in furtherance of another federal crime of violence or drug trafficking. The mandatory minimums must be imposed in addition to any sentence imposed for the underlying crime of violence or drug trafficking and vary depending upon the circumstances, *i.e.*, (1) imprisonment for not less than five years, unless one of the higher mandatory minimums below applies; (2) imprisonment for not less than seven years if a firearm is brandished; (3) imprisonment for not less than 10 years if a firearm is discharged; (4) imprisonment for not less than 10 years if a firearm is a short-barreled rifle or shotgun or is a semi-automatic weapon; (5) imprisonment for not less than 15 years if the offense involves the armor piercing ammunition; (6) imprisonment for not less than 25 years if the offender has a prior conviction for violation of Section 924(c); (7) imprisonment for not less than 30 years if the firearm is a machine gun or destructive device or is equipped with a silencer; and (8) imprisonment for life if the offender has

a prior conviction for violation of Section 924(c) and if the firearm is a machine gun or destructive device or is equipped with a silencer.

Firearm: Section 924(c) outlaws possession of a firearm in furtherance of, or use of a firearm during and in relation to, a predicate offense. A “firearm” for purposes of Section 924(c) includes not only guns (“weapons ... which will or [are] designed to or may readily be converted to expel a projectile by the action of an explosive”), but silencers and explosives as well. It includes firearms that are not loaded or that are broken. It does not include toys or imitations.

Nevertheless, the government need not produce the gun itself at trial. The courts have said that it need do no more than “present sufficient testimony, including the testimony of lay witnesses, in order to prove beyond a reasonable doubt that a defendant used, possessed or carried a ‘firearm’ as that term is defined for purposes of §924(c).” Yet conviction must rest on some evidence of the presence of a firearm.

Predicate Offenses: Section 924(c) is triggered when a firearm is used or possessed in furtherance of a predicate offense. The predicate offenses are crimes of violence and certain drug trafficking crimes. The drug trafficking predicates include any felony violation of the Controlled Substances Act, the Controlled Substances Import and Export Act, or the Maritime Drug Law Enforcement Act. A defendant may be convicted under Section 924(c), however, even though not convicted or even prosecuted for the predicate offense.

Possession in Furtherance: Section 924(c) has two alternative firearm-nexus elements: (a) possession in furtherance and (b) carrying or use. The possession-in-furtherance version of the offense requires that the defendant “(1) committed a drug trafficking crime; (2) knowingly possessed a firearm; and (3) possessed the firearm in furtherance of the drug trafficking crime [or other predicate offense].” The “possession” component may take the form of either actual or constructive possession. “Constructive possession exists when a person does not have possession but instead knowingly has the power and the intention at a given time to exercise dominion and control over an object, either directly or through others.”

The in-furtherance component compels the government to show some nexus between possession of a firearm and a predicate offense – that is, to show that the firearm furthered, advanced, moved forward, promoted, or in some way facilitated the predicate offense. This requires more than proof of the presence of a firearm in the same location as the predicate offense. Most circuits have identified specific factors that commonly allow a court to distinguish guilty possession from innocent “possession at the scene,” particularly in a drug case, they include “(1) type of criminal activity that is being conducted; (2) accessibility of the firearm; (3) the type of firearm; (4) whether the firearm is stolen; (5) the status of the possession (legitimate or illegal); (6) whether the firearm is loaded; (7) the time and circumstances under which the firearm is found; and (8) the proximity to the drugs or drug profits.”

Although the Supreme Court has determined that acquiring a firearm in an illegal drug transaction does not constitute “use” in violation of Section 924(c), several of the circuits have found that such acquisition may constitute “possession in furtherance.”

Use or Carry: The “use” outlawed in the use-or-carriage branch of Section 924(c) requires that a firearm be actively employed “during and in relation to” a predicate offense – that is, either a crime of violence or a drug trafficking offense. A defendant “uses” a firearm during or in relation to a drug trafficking offense when he uses it to acquire drugs in a drug deal; when he uses it as collateral in a drug deal; or when he sells both drugs and firearms; but not when he accepts a firearm in exchange for drugs in a drug deal. The “carry[ing]” that the section outlaws encompasses instances when a firearm is carried on the defendant’s person as well as when it is simply readily accessible in a vehicle during and in relation to a predicate offense.

A firearm is used or carried “during and in relation” to a predicate offense when it has “some purpose or effect with respect” to the predicate offense; “its presence or involvement cannot be the result of accident or coincidence.” The government must show that the availability of the firearm played an integral role in the predicate offense. It need not show that the firearm was used “in furtherance” of the predicate offense.

Discharge and Brandish: The basic 5-year mandatory minimum penalty for using, carrying, or possessing a firearm in the course of a predicate offense becomes a 7-year mandatory minimum if a firearm was brandished during the course of the offense and becomes a 10-year mandatory minimum if a firearm is discharged during the course of the offense. The discharge provision applies even if the firearm is discharged inadvertently. Whether a firearm is discharged or brandished is a question that after *Alleyne v. United States* must be presented to the jury and proven beyond a reasonable doubt. A firearm is brandished for these purposes when (1) it is displayed or its presence made known (2) in order to intimidate another. Intimidation is a necessary feature of brandishing, but it is no less present when the fear is induced by using a gun as a club rather than merely displaying it.

Short Barrels, Semiautomatics, Machine Guns, and Bombs: For some time, Section 924(c) consisted of a single long paragraph. When Congress added the “possession in furtherance” language, it parsed the section. Now, the general, brandish, and discharge mandatory penalties provisions appear in one part. The provisions for offenses involving a short-barreled rifle or shotgun, a semiautomatic assault weapon, a silencer, a machine gun, or explosives appear in a second part. The provisions for second and consequent convictions appear in a third part.

The circuits are apparently divided over the question of whether the government must show that the defendant knew that the firearm at issue was of a particular type (*i.e.*, short-barreled rifle or shotgun, machine gun, or bomb).

Prior to the division, the Supreme Court had identified as an element of a separate offense (rather than a sentencing factor) the question of whether a machinegun was the firearm used during and in relation to a predicate offense. The use of a short-barreled rifle, semiautomatic assault weapon, silencer, machine gun, or bomb is not a sentencing factor, but an element of a separate offense to be charged and proved to the jury beyond a reasonable doubt. The question of whether a second or subsequent conviction has occurred, however, remains a sentencing factor.

Aiding, Abetting, and Conspiracy: As a general rule, anyone who commands, counsels, aids, or abets the commission of a federal crime by another is punishable as though he had committed the crime himself. The Supreme Court has said that “in order to aid and abet another to commit a crime it is necessary that a defendant in some sort associate himself with the venture, that he participate in it as in something that he wishes to bring about, that he seeks by his action to make it succeed.”

The Supreme Court has said in *Rosemond v. United States* that to aid or abet a violation of Section 924(c), the assistance may be shown to have advanced either the predicate offense or the firearm use. However, the defendant must be shown to have intended his efforts to contribute to the success of the Section 924(c) violation – that is, commission of a predicate offense while armed. Thus, the defendant must be shown to have known before the commission of the predicate offense that his confederate was armed.

In similar manner, conspirators are liable for any foreseeable crimes committed by any of their co-conspirators in furtherance of the conspiracy. The rule applies when a defendant’s co-conspirator has committed a violation of Section 924(c).

Sentencing Considerations: The penalties under Section 924(c) were once flat sentences. For example, the penalty for use of a firearm during the course of a predicate offense was a five-year term of imprisonment. Now, they are simply mandatory minimums, each carrying an unspecified maximum term of life imprisonment.

A court may not avoid the mandatory minimums called for in Section 924(c)(1) by imposing a probationary sentence, or by ordering that a Section 924(c)(1) minimum mandatory sentence be served concurrently with some other sentence. A court may, however, take Section 924(c)'s mandatory minimum into account when calculating the appropriate sentence for the underlying predicate offense.

If a criminal episode involves more than one predicate offense, more than one violation of Section 924(c) may be punished. Moreover, the second or subsequent convictions which trigger enhanced mandatory minimum penalties need not be the product of separate trials, but may be part of the same verdict. Thus, a defendant charged and convicted in a single trial on several counts may be subject to multiple, consecutive, mandatory minimum terms of imprisonment.

A number of defendants have sought refuge in the clause of Section 924(c), which introduces the section's mandatory minimum penalties with an exception: "[e]xcept to the extent that a greater minimum sentence is otherwise provided by this subsection or by any other provision of law." Defendants at one time argued that the mandatory minimums of Section 924(c) become inapplicable when the defendant was subject to a higher mandatory minimum under the predicate drug trafficking offense under the Armed Career Criminal Act (18 U.S.C. § 924(e)), or some other provision of law. The Supreme Court rejected the argument in *Abbott v. United States*. The clause means that the standard five-year minimum applies except in cases where the facts trigger one of Section 924(c)'s higher minimums.

Armed Career Criminal Act (18 U.S.C. § 924(e))

In the case of a person who violates section 922(g) of this title and has three previous convictions by any court referred to in section 922(g)(1) of this title for a violent felony or a serious drug offense, or both, committed on occasions different from one another, such person shall be fined under this title and imprisoned not less than fifteen years.... 18 U.S.C. 924(e)(1).

Section 922(g) outlaws the possession of firearms by felons, fugitives, and various other categories of individuals. The Armed Career Criminal Act (ACCA), quoted above, visits a 15-year mandatory minimum term of imprisonment upon anyone who violates Section 922(g), having been convicted three times previously of a violent felony or serious drug offense. The section most often ensnarls felons found in possession of a firearm who have three qualifying prior convictions. More often than not, the prior convictions are for violations of state law.

Section 924(e) begins with unlawful possession of a firearm ("a person who violates section 922(g)"). The threshold possession offense need not itself involve a drug or violent crime. Section 924(e)'s 15-year mandatory minimum term of imprisonment instead flows as a consequence of the offender's prior criminal record ("three prior convictions ... referred to in section 922(g)(1) ... for a violent felony or a serious drug offense"). Not all violent felonies or serious drug offenses count. Certain convictions, principally those which have been overturned, pardoned, or otherwise set aside as a matter of state law, are exempt by definition.

Moreover, the qualifying violent felonies or serious drug offenses must have been committed on different occasions. "[T]o trigger a sentence enhancement under the ACCA, a defendant's prior felony convictions must involve separate criminal episodes. However, offenses are considered distinct criminal episodes if they occurred on occasions different from one another. Two offenses

are committed on occasions different from one another if it is possible to discern the point at which the first offense is completed and the second offense begins.” Thus, separate drug deals on separate days will constitute offenses committed on different occasions though they involve the same parties and location. The fact that two crimes occurred on different occasions, however, must be clear on the judicial record; recourse to police records will not do.

There is “no authority to ignore [an otherwise qualified] conviction because of its age or its underlying circumstances. Such considerations are irrelevant ... under the Act.” Moreover, application of Section 924(e) provides no opportunity to challenge the validity of the underlying predicate offenses.

The section defines serious drug offenses as those violations of state or federal drug law punishable by imprisonment for 10 years or more. Conviction under a statute which carries a 10-year maximum for repeat offenders qualifies, even though the maximum term for first-time offenders is 5 years. It is the maximum permissible term which determines qualification, even when discretionary sentencing guidelines calls for a term of less than 10 years, or when the defendant was in fact sentenced to a lesser term of imprisonment. To qualify as a predicate drug offense, the crime must have been at least a 10-year felony at the time of conviction for the predicate offense. The term “serious drug offense” includes attempts or conspiracies to commit a serious drug offense, as long as the attempt or conspiracy is punishable by imprisonment for 10 years or more. By the same token, there is no need to prove that the defendant knew of the illicit nature of the controlled substance involved in his predicate serious drug offense if the serious drug offense satisfied the 10-year requirement and, in the case of state law predicate, involved the manufacture, distribution, or possession with intent to distribute a controlled substance.

The Supreme Court in *Johnson v. United States* found unconstitutionally vague Section 924(e)’s violent felony residual clause (“the term ‘violent felony’ means any crime punishable by imprisonment for a term exceeding one year ... that ... involves conduct that presents a serious potential risk of physical injury to another.”). The decision raises no question as to the validity of the mandatory minimum sentences imposed under the serious drug offense prong of Section 924(e).

Safety Valve

Low-level drug offenders can escape some of the mandatory minimum sentences for which they qualify under the safety valve found in 18 U.S.C. § 3553(f). Congress created the safety valve after it became concerned that the mandatory minimum sentencing provisions could have resulted in equally severe penalties for both the more and the less culpable offenders. It is available to qualified offenders convicted of violations of the possession-with-intent, simple possession, attempt, or conspiracy provisions of the Controlled Substances or Controlled Substances Import and Export Acts.

For the convictions to which the safety valve does apply, the defendant must convince the sentencing court by a preponderance of the evidence that he satisfies each of the safety valve’s five requirements. He may not have more than one criminal history point. He may not have used violence or a dangerous weapon in connection with the offense. He may not have been an organizer or leader of the drug enterprise. He must have provided the government with all the information and evidence at his disposal. Finally, the offense may not have resulted in serious injury or death.

One Criminal History Point: More than one “criminal history point” is safety valve disqualifying. The criminal history point qualification refers to the defendant’s criminal record. The Sentencing Guidelines assign criminal history points based on a defendant’s past criminal record. Two or

more points are assigned for every prior sentence of imprisonment or juvenile confinement of 60 days or more, or for offenses committed while the defendant was in prison, was an escaped prisoner, or was on probation, parole, or supervised release. A single point is assigned for every other federal or state prior sentence of conviction, subject to certain exceptions. Foreign sentences of imprisonment are not counted; nor are sentences imposed by tribal courts; nor summary court martial sentences; nor sentences imposed for expunged, reversed, vacated, or invalidated convictions; nor sentences for certain petty offenses or minor misdemeanors.

Only the Nonviolent: The safety valve has two disqualifications designed to reserve its benefits to the non-violent. One involves instances in which the offense resulted in death or serious bodily injury. The other involves the use of violence, threats, or the possession of weapons. The weapon or threat of violence disqualification turns upon the defendant's conduct or the conduct of those he "aided or abetted, counseled, commanded, induced, procured, or willfully caused." It is not triggered by the conduct of a co-conspirator unless the defendant "aided, abetted, [or] counsel ..." the co-conspirator's violence or possession. Disqualifying firearm possession may be either actual or constructive. Constructive possession is the dominion or control over a firearm or the place where one is located. Disqualification requires that the threat of violence or possession of a firearm be "in connection with the offense," and may include threats against witnesses. In many instances, possession of a firearm in a location where drugs are stored or transported, or where transactions occur, will be enough to support an inference of possession in connection with the drug offense of conviction.

The Sentencing Guidelines define "serious bodily injury" for purposes of Section 3553(f)(3) as an "injury involving extreme physical pain or the protracted impairment of a function of a bodily member, organ, or mental faculty; or requiring medical intervention such as surgery, hospitalization, or physical rehabilitation." On its face, the definition would include serious bodily injuries, such one that required hospitalization, suffered by the defendant as a result of the offense. Unlike the gun and violence disqualification in Section 3553(f)(2), the serious injury disqualification in Section 3553(f)(3) may be triggered by the conduct of a co-conspirator.

Only Single or Low Level Offenders: The Guidelines disqualify anyone who acted as a manager of the criminal enterprise or who receives a Guideline level increase for his aggravated role in the offense. Thus, by implication, it does not disqualify a defendant to have received a Guideline decrease based on his minimal or minor participation in a group offense or a defendant who acted alone.

Tell All: The most heavily litigated safety valve criterion requires full disclosure on the part of the defendant. The requirement extends not only to information concerning the crimes of conviction, but also to information concerning other crimes that "were part of the same course of conduct or of a common scheme or plan," including uncharged related conduct. Neither Section 3553(f) nor the Sentencing Guidelines explains what form the defendant's full disclosure must take. At least one court has held that under rare circumstances disclosure through the defendant's testimony at trial may suffice. The stipulation of facts in a plea bargain without more ordinarily will not qualify. Most often, the defendant provides the information during an interview with prosecutors or by a proffer. The defendant must disclose the information to the prosecutor, however. Disclosure to the probation officer during preparation of the presentence report is not sufficient. Moreover, a defendant does not necessarily qualify for relief merely because he has proffered a statement and invited the prosecution to identify any additional information it seeks; for "the government is under no obligation to solicit information from a defendant." A defendant's proffer must be "truthful." On the other hand, past lies do not render a defendant ineligible for relief under the truthful disclosure criterion of the safety valve, although they may undermine his credibility.

Substantial Assistance

Upon motion of the Government, the court shall have the authority to impose a sentence below a level established by statute as a minimum sentence so as to reflect a defendant's substantial assistance in the investigation or prosecution of another person who has committed an offense. Such sentence shall be imposed in accordance with the guidelines and policy statements issued by the Sentencing Commission pursuant to section 994 of title 28, United States Code. 18 U.S.C. § 3553(e).

Upon the Motion of the Government: As a general rule, a defendant is entitled to a sentence below an otherwise applicable statutory minimum under the provisions of Section 3553(e) only if the government agrees. The courts have acknowledged that due process or equal protection or other constitutional guarantees may provide a narrow exception. A defendant is entitled to relief if the government's refusal constitutes a breach of its plea agreement. A defendant is also "entitled to relief if the prosecutor's refusal to move was not rationally related to any legitimate Government end." Some courts have suggested that a defendant is entitled to relief if the prosecution refuses to move under circumstances that "shock the conscience of the court," or that demonstrate bad faith, or for reasons unrelated to substantial assistance.

The court is under no obligation to grant the government's substantial assistance motion and the defendant is not entitled to be heard on the issue.

To Reflect a Defendant's Substantial Assistance: Any sentence imposed below the statutory minimum by virtue of Section 3553(e) must be based on the extent of the defendant's assistance; it may not reflect considerations unrelated to such assistance. The district court appears to have some latitude as to the method used to calculate the reduction for substantial assistance, e.g., "offense-level-based reductions, month-based reductions, and percentage-based reductions."

The substantial assistance exception makes possible convictions that might otherwise be unattainable. Yet, it may also lead to "inverted sentencing," that is, a situation in which "the more serious the defendant's crimes, the lower the sentence – because the greater his wrongs, the more information and assistance he had to offer to a prosecutor"; while in contrast, the exception is of no avail to the peripheral offender who can provide far less substantial assistance.

Constitutional Considerations

Defendants sentenced to mandatory minimum terms of imprisonment have challenged their sentences on a number of constitutional grounds beginning with Congress's legislative authority and ranging from cruel and unusual punishment through ex post facto and double jeopardy to equal protection and due process. Each constitutional provision defines outer boundaries that a mandatory minimum sentence and the substantive offense to which it is attached must be crafted to honor. Thus far, constitutional challenges have largely been to no avail.

Author Contact Information

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TRUMBULL COUNTY

Mental Health and Recovery Board

Local Help

INFORMATION/REFERRAL/SUICIDE HOTLINE



Get Connected. Get Answers.

Help Hotline Crisis Center

Core Providers

Alta Behavioral Healthcare

1950 Niles-Cortland Rd. NE
Warren, OH 44484
330-736-0073

Belmont Pines Hospital

615 Churchill-Hubbard Road
Youngstown, OH 44505
330-759-2700 or 800-423-5666
Office Hours: 24 hours/7 days a week

Cadence Care Network / DBA Homes For Kids

165 E. Park Avenue
Niles, OH 44446
330-544-8005 or 800-245-3340
Office Hours: Monday—Friday, 8:30 AM – 4:30 PM

Catholic Charities Regional Agency

175 Laird Avenue, Third Floor
Warren, OH 44483
330-393-4050
Office Hours: Monday —Friday, 8:30 AM—4:30 PM

Coleman Professional Services

103 W. Market Street
Warren, OH 44481
330-394-8831
Office Hours: Monday—Friday, 8:00 AM to 4:30 PM

Coleman Access Center

103 W. Market Street
Warren, OH 44481
330-392-1100
Office Hours: available 24 hours, 7 days a week

Compass Family & Community Services

320 High Street, NE
Warren, OH 44481
330-394-9090
Office Hours: Monday—Thursday, 8:30 AM—7:00 PM
Friday, 8:30 AM—5:00 PM

Riverbend Center
3120 West Market Street
Warren, OH 44485
330-898-6992
Admission by referral, call for visiting hours

Trumbull Intensive Community Treatment Team
Pine Industries
820 Pine Avenue, SE
Warren, OH 44483
330-393-0598

Social Services
535 Marmion Avenue
Youngstown, OH 44502
330-782-5664

Family and Children First Council of Trumbull County
4076 Youngstown Road, S.E., Suite 201
Warren, OH 44484
Ph: 330-675-2765, Ext. 112
Fax: 330-675-2772
Office Hours: Monday—Friday, 8:00 AM – 4:30 PM

First Step Recovery
2737 Youngstown Rd. SE
Warren, OH 44484
330-369-8022

FSR Parkman
4930 Enterprise Dr.
Warren, OH 44481
330-787-0955

Forensic Psychiatric Center of Northeast Ohio
5212 Mahoning Avenue, Suite 317
Youngstown, OH 44515
330-792-1918
Office Hours: Monday—Friday, 8:00 AM – 5:00 PM

Glenbeigh of Niles
29 North Road
Niles, OH 44446
330-652-6770
Office Hours: Monday—Friday, 8:30 AM – 5:00 PM

Greater Warren-Youngstown Urban League
290 W. Market Street
Warren, OH 44481
330-394-3167
Office Hours: Monday—Friday, 9:00 AM – 5:00 PM

Christy House Emergency Shelter
919 Main Avenue, SW
Warren, OH 44483
330-394-4316

Help Network of NE Ohio
261 E. Wood Street
Youngstown, OH 44501
330-747-2696
Office Hours: Monday—Friday, 8:30 AM – 4:30 PM
Crisis, Information and Referral: dial 2-1-1
Hours: 24 hours/7 days a week

Mercy Health
New Start Treatment Center
1296 Tod Avenue, NW Suite 205
Warren, Ohio 44485
(330) 306-5010
Office Hours: Monday—Friday, 8:00 AM – 8:00 PM

Meridian HealthCare
320 High St. NE
Warren, OH 44481
330-318-3871

1950 Niles-Cortland Rd. NE
Warren, OH 44484
330-318-3911

527 N. Meridian Road
Youngstown, OH 44509
330-797-9148
Office Hours: Monday—Friday, 8:00 AM – 5:00 PM

Neil Kennedy Recovery Center

2151 Rush Boulevard
Youngstown, OH 44507
330-744-1181

Office Hours: Monday—Friday, 8:15 AM – 5:15 PM

PsyCare Howland Clinic

8577 East Market Street
Warren, OH 44484
330-856-6663

Office Hours: Monday, 8:00 AM–6:00 PM
Tuesday and Thursday, 8:00 AM –7:00 PM
Wednesday and Friday, 8:00–5:00 PM
Saturday, 9:00–12:00 PM

PsyCare Liberty Clinic

2980 Belmont Avenue
Youngstown, OH 44505
330-759-2310

Office Hours: Monday, Thursday and Friday, 9:00 AM–5:00 PM
Tuesday and Wednesday, 9:00 AM –9:00 PM
Saturday, by appointment

Travco Behavioral Health

2671 Youngstown Rd. SE
Warren, OH 44484
330-822-6545

8261 Market St.
Boardman, OH 44512
330-286-0050

Valley Counseling Services

Adult Services

150 E. Market Street
Warren, OH 44481

Office Hours: Monday, 8:00 AM–7:00 PM
Tuesday—Friday, 8:00–5:00 PM

Children's Office

318 Mahoning Avenue
Warren, OH 44483
330-395-9563

Office Hours: Monday—Friday, 8:30 AM–5:00 PM

Southeast Office

4870- Belmont Avenue
(Liberty Township)
Youngstown, OH 44505
330-759-8237

Office Hours: Monday, Wednesday, Thursday, Friday, 8:30 AM–5:00 PM
Tuesday, 8:30 AM–7:00 PM

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Trumbull County Mental Health and Recovery Board
4076 Youngstown Road, S.E., Suite 201
Warren, Ohio 44484
Phone: (330) 675-2765
Fax: (330) 675-2772

Substance Abuse and Mental Health Services Administration
Center for Behavioral Health Statistics and Quality
Substance Abuse Treatment Facility Locator

Name	Address	Phone	Website
Glenbeigh Outpatient Center of Niles	29 North Road SE Niles, OH 44446	330-652-6770 Intake (440) 356- 7620 Hotline (440) 951- 7000	http://www.glenbeigh.com
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Intensive outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; Private health insurance;		
Age Groups Accepted:	Young adults ; Adults;		
Gender Accepted:	Female; Male;		
Neil Kennedy Recovery Clinic	160 Clifton Drive NE Suite A Warren, OH 44484	330-609-5441- 7102 Intakes 330-609-5441- 2032 800-228-8287- 2032	http://www.nkrc.org
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ; Buprenorphine used in treatment;		
Service Setting (e.g., Outpatient,	Partial hospitalization/day treatment; Outpatient ; Outpatient methadone/buprenorphine or vivitrol; Outpatient Day treatment or partial hospitalization; Intensive outpatient		

Residential, etc.):	treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; State financed health insurance plan other than Medicaid; Private health insurance; Military insurance (e.g., TRICARE); Access to recovery (ATR) voucher;		
Language Services:	Services for the hearing-impaired;		
Special Programs/Groups Offered:	Adolescents;		
Age Groups Accepted:	Children/adolescents; Adults;		
Meridian Community Care	527 North Meridian Road Youngstown, OH 44509	330-797-0070 Intakes 330-797-0070 330-797-0070- x1178	http://www.meridiancommunitycare.org
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ; Detoxification ; Methadone maintenance ; Methadone detoxification ; Buprenorphine used in treatment; Naltrexone (oral); Vivitrol® (injectable Naltrexone); SAMHSA-certified Opioid Treatment Program;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Outpatient detoxification; Outpatient methadone/buprenorphine or vivitrol; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; Private health insurance; Military insurance (e.g., TRICARE); Access to recovery (ATR) voucher;		
Payment Assistance Available:	Sliding fee scale (fee is based on income and other factors);		
Special Programs/Groups	Adolescents:		

Offered:			
Age Groups Accepted:	Adults;		
Neil Kennedy Recovery Clinic	5211 Mahoning Avenue Suite 370 Youngstown, OH 44515	330-792-4724-7133 Intakes 330-792-4724 x2032 800-228-8287 x2032	http://www.nkrc.org
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ; Buprenorphine used in treatment;		
Service Setting (e.g., Outpatient, Residential, etc.):	Partial hospitalization/day treatment; Outpatient ; Outpatient methadone/buprenorphine or vivitrol; Outpatient Day treatment or partial hospitalization; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; State financed health insurance plan other than Medicaid; Private health insurance; Military insurance (e.g., TRICARE); Access to recovery (ATR) voucher;		
Special Programs/Groups Offered:	Adolescents; Adult women; Adult men;		
Age Groups Accepted:	Children/adolescents; Adults;		
Gender Accepted:	Female; Male;		
Saint Joseph Health Center New Start Treatment Center	1296 Tod Avenue NW Suite 205 Warren, OH 44485	330-306-5010 Intakes 330-306-5010 x1 887-306-5010 x1	http://www.hmpartners.orgorwwwmercy.com
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ;		

Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; State financed health insurance plan other than Medicaid; Private health insurance;		
Payment Assistance Available:	Sliding fee scale (fee is based on income and other factors); Payment assistance (check with facility for details);		
Language Services:	Services for the hearing-impaired;		
Age Groups Accepted:	Young adults ; Adults;		
Turning Point Counseling Services Inc	611 Belmont Avenue Youngstown, OH 44502	330-744-2991 Intake 330-744-2991 Hotline 330-747-2696	http://www.turningpointcs.com
Primary Focus of the Provider:	Mental Health Treatment Services;		
Type of Care:	Substance abuse treatment ;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Access to recovery (ATR) voucher;		
Language Services:	Services for the hearing-impaired;		
Special	Persons with co-occurring mental and substance abuse disorders; Lesbian, gay, bisexual, or transgender (LGBT) clients; Veterans; Active duty military; Military families; Clients		

Programs/Groups Offered:	referred from the court/judicial system (other than DUI/DWI); Seniors or older adults; Pregnant/postpartum women; Adult women; Adult men; Persons with HIV or AIDS; Persons who have experien		
Age Groups Accepted:	Young adults ; Adults;		
Meridian Community Care Co Occurring Treatment Program	550 West Chalmers Avenue Youngstown, OH 44511	330-746-6452 Intakes 330-797-0070 330-797-0070x1156	http://www.meridiancommunitycare.org
Primary Focus of the Provider:	Mix of Mental Health and Substance Abuse;		
Type of Care:	Substance abuse treatment ;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; Private health insurance; Military insurance (e.g., TRICARE); Access to recovery (ATR) voucher;		
Payment Assistance Available:	Sliding fee scale (fee is based on income and other factors);		
Special Programs/Groups Offered:	Persons with co-occurring mental and substance abuse disorders;		
Age Groups Accepted:	Young adults ; Adults;		
Neil Kennedy Recovery Clinic	2151 Rush Boulevard Youngstown, OH 44507	330-744-1181 Intakes 330-744-1181-2032 800-228-8287-2032	http://www.nkrc.org
Primary Focus of the Provider:	Substance Abuse Treatment Services;		

Type of Care:	Substance abuse treatment ; Detoxification ; Buprenorphine used in treatment; Vivitrol® (injectable Naltrexone);		
Service Setting (e.g., Outpatient, Residential, etc.):	Residential; Partial hospitalization/day treatment; Outpatient ; Short-term residential; Residential detoxification; Outpatient methadone/buprenorphine or vivitrol; Outpatient Day treatment or partial hospitalization; Intensive outpatient treatment; Regular outpatient treatment; Computerized treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Private health insurance; Access to recovery (ATR) voucher;		
Language Services:	Services for the hearing-impaired;		
Special Programs/Groups Offered:	Adolescents; Adult women; Adult men;		
Age Groups Accepted:	Children/adolescents; Adults;		
Travco Behavioral Health Inc	4030 Boardman Canfield Road Suite 200-C Canfield, OH 44406	(330) 286-0050 Intake (330) 286-0050	http://www.travcobhs.com
Primary Focus of the Provider:	Mix of Mental Health and Substance Abuse;		
Type of Care:	Substance abuse treatment ; Buprenorphine used in treatment;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Outpatient methadone/buprenorphine or vivitrol; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; Private health insurance; Military insurance (e.g., TRICARE); Access to recovery (ATR) voucher;		
Language Services:	Spanish;		

Age Groups Accepted:	Adults;		
Gender Accepted:	Female; Male;		
Discovery House NPA	1914 Mercer Avenue Farrell, PA 16121	724-981-9815 Intake 724-981-9815 Hotline 888-366-7929	
Primary Focus of the Provider:	Substance Abuse Treatment Services;		
Type of Care:	Substance abuse treatment ; Methadone maintenance ; All Clients in Opioid Treatment Program; SAMHSA-certified Opioid Treatment Program;		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Outpatient methadone/buprenorphine or vivitrol;		
Facility Operation (e.g. Private, Public):	Private organization;		
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Military insurance (e.g., TRICARE);		
Age Groups Accepted:	Young adults ; Adults;		
Gender Accepted:	Female; Male;		
Exclusive Services:	Methadone clients only;		
Community Counseling Center	2201 East State Street Hermitage, PA 16148	(724) 981-7141 Intake (724) 981-7141	http://www.cccmer.org/
Primary Focus of the Provider:	Mix of Mental Health and Substance Abuse;		
Type of Care:	Substance abuse treatment ; Naltrexone (oral);		
Service Setting (e.g., Outpatient, Residential, etc.):	Outpatient ; Intensive outpatient treatment; Regular outpatient treatment;		
Facility Operation (e.g. Private, Public):	Private organization;		

(e.g. Private, Public):	Private Organization,
Payment/Insurance Accepted:	Cash or self-payment; Medicaid; Medicare; State financed health insurance plan other than Medicaid; Private health insurance; Military insurance (e.g., TRICARE);
Payment Assistance Available:	Sliding fee scale (fee is based on income and other factors); Payment assistance (check with facility for details);
Language Services:	Services for the hearing-impaired;
Special Programs/Groups Offered:	Persons with co-occurring mental and substance abuse disorders; Adolescents; Persons who have experienced sexual abuse;

NOTIFICATION OF RIGHTS UNDER FERPA

The Family Educational Rights and Privacy Act (FERPA) afford eligible students certain rights with respect to their educational records. An "eligible" student under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution. These rights include:

- The right to inspect and review the student's education records within 30 days after ETI Technical College (school) receives a request for access. A student should submit to the College Registrar or Dean of Student Affairs a written request that identifies the records the student wishes to inspect. The school official will make arrangements for access and notify the student of the time and place where the records may be inspected.
- The right to request the amendment of the student's education record that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA. A student who wishes to ask the school to amend a record should write the school official responsible for the record, clearly identify the part of the record the student wants changed, and specify why it should be changed. If the school decides not to amend the record as requested, the school will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. The student has the right to be assisted at a hearing by other parties, including, at his/her expense, an attorney.
- The right to file a complaint with the U.S. Department of Education concerning alleged failures by the school to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue SW
Washington, DC 20202

- The right to provide written consent before the school discloses personally identifiable information (PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent. The disclosures that a school may make without written consent are:
 1. Disclosures to school officials with legitimate educational interests. A school official is a person employed by the school in an administrative, supervisory, academic, or support staff position; a person serving on the Board of Directors; or a student serving on an official committee, such as grievance or disciplinary committee.
 2. Enrollment and financial aid information may be disclosed to outside agencies who are interested in assisting a student with financial support. Such agencies may include Trumbull/Mahoning County Workforce Assistance, TAA, Bureau of Workers Comp, Bureau of Vocational Rehabilitation, the Ohio Board of Nursing
 3. Disclosures may be made without prior consent to auditors, attorneys, collection agents, or other parties to whom the school has outsourced institutional services or functions. Currently, Partners Financial Services,

Vocational Recovery Solutions, LLC, Wilke and Associates, OACCS, ACCSC are used by ETI.

4. To officials of another school where the student seeks or intends to enroll, or where the student is already enrolled if the disclosure is for purposes related to the student's enrollment or transfer.
5. To authorized representatives of the U.S. Comptroller General, the U.S. Attorney General, the U.S. Secretary of Education, or State and local educational authorities, such as a State postsecondary authority that is responsible for supervising the school's State-supported education programs.
6. Disclosures under this provision may be made in connection with an audit or evaluation of federal or state funding programs, or the enforcement of compliance with federal legal requirements that relate to those programs.
7. In connection with financial aid for which the student has applied or received, if the information is necessary to determine eligibility for aid, determine the amount of aid, or the terms and conditions of the aid.
8. To accrediting organizations to carry out their accrediting functions.
9. To parents of an eligible student if the student is dependent for IRS tax purposes.
10. To comply with a judicial order or lawfully issued subpoena.
11. To caseworkers, child welfare representatives or tribal organizations.
12. To appropriate officials in connection with a health or safety emergency.
13. To parents of a student regarding the student's violation of any federal, state, or local law, or of any rule or policy of the school, governing the use or possession of alcohol or a controlled substance if the school determines the student committed a disciplinary violation and the student is under the age of 21.

The information that is deemed **Directory Information** (Public Personally Identifiable Information) and subject to the disclosures listed above includes:

- Name
- Address
- Telephone including cell phones
- E-mail address
- Major field of study
- Enrollment status
- Attendance
- Degrees, diplomas, honors or awards
- Photographs

Upon request, the school will disclose education records without consent to officials of another school in which a student seeks to enroll or is already enrolled. The school intends to forward these records upon request without the separate consent of the student.

Except for disclosure to school officials, disclosures related to judicial orders or lawfully issued subpoenas, disclosures of directory information, and disclosures to the student, the school is required to keep a record of any disclosures made. A student has the right to review the record of disclosures.

Protected Personally Identifiable Information includes Social Security Number, Race/Ethnicity or Gender, Educational Transcripts, Criminal, Medical, Financial Records, Banking Information, Passport Number, FSA User ID/Password

PERSONALLY IDENTIFIABLE INFORMATION SECURITY POLICY

- Protected Personally Identifiable Information, as noted above, will not be stored on any server or computer accessible to the public.
- Campus e-mail and Internet access is not secure and should not be used for the transmission of confidential or sensitive data.
- All PPII will be stored on secure database servers
- Phone conversations should not include PPII.
- Printouts that contain PPII will be stored in locked storage areas and disposed of by shredding.
- ETI will not sell or give away any PPII to third parties or agencies not directly affiliated with the school or the student's aid package.
- Social security numbers for prospective students who do not enroll will be redacted from questionnaires.

ETI prohibits the following:

- Intentionally communicating or making available to the general public an individual's social security number
- Printing a social security number on any tag or student identification badge
- Requiring an individual to transmit their social security number over the internet, unless the connection is secure such as the FAFSA.ed.gov application site
- Requiring use of a social security number to access a website unless a secure PIN or password is also required
- Printing a social security number on a mailer or postcard not requiring an envelope
- Encoding a social security number on a bar code or magnetic strip
- Including a social security number, except the last four digits,
 - on any mailed materials except application forms, contracts for enrollment, or 1098T forms used for IRS reporting

September 2018

FERPA RELEASE FORM

I, _____ am requesting permission to allow
Student Name

_____ to be present at my Financial
Additional Person/s

Aid/Admission/Placement meeting or discuss my situation by phone. I am aware that in the course of the discussion, personal information including financial information, medical, legal, or family information may be discussed. My GPA or academic standing and grades may also be part of any discussion. This permission request applies to only the date/s indicated below.

STUDENT PRINTED NAME

DATE

SIGNATURE

ETI PERSONNEL

ADMINISTRATIVE OFFICE

Policy on Verification of High School or GED Records

All students in the Associate Degree, Diploma, and Certificate programs must hold a High School Diploma or G.E.D. to be enrolled as a student. A record of the high school transcript or G.E.D. certificate will be required for the academic file.

Verification of the transcript is done by the Admissions Department. The name must match the applicant's name at the time of graduation, graduation date must be listed, and the school must be recognized by a state department of education.

If there is any doubt that the transcript and/or school are not acceptable, we check our list of "unacceptable schools" and also ask the student to get additional proof to verify authenticity. If it is determined that the transcript is unacceptable, the student will not be accepted into the college.

If a student is denied enrollment due to unacceptable records, he/she may direct their complaint to the State Board of Career Colleges and Schools. The Student Complaint/Grievance Procedure can be found at the back of the college catalog.

Voter Registration

Voter registration forms are available year-round in the school building or from the Director of Financial Aid. Voter registration drive is also held by the school during the week before or after Constitution Day, September 17th, which is also Citizenship Day.

Student Government

GET INVOLVED!! You will become better acquainted with your fellow students and make new friends. You will get the chance to earn funds for worthwhile causes and help your school and city communities. It also looks great on a resume; employers like civic-minded employees.

Transcript Policy

Each student whose account is in good standing will be provided an official transcript of record upon completion of his/her program. A charge of \$20.00 will be made for each transcript request thereafter. Official academic transcripts will be withheld for failure to pay tuition and outstanding ETI charges, for default on an education debt, or failure to repay an education grant overpayment.

A former student may receive one single copy of an unofficial transcript per FERPA guidelines. It will not be mailed to a third party such as a prospective employer or to another school. This unofficial transcript will note unpaid financial obligations to the College. No additional unofficial transcripts will be provided so a student should keep a copy of the record. The College will not withhold an official transcript for a student in active bankruptcy or after a discharge of the education debt.

Revised September 2020

ANNUAL SECURITY REPORT 2021

OFFENSE	YEAR	ON-CAMPUS PROPERTY	PUBLIC PROPERTY
MURDER/NON-NEGLIGENT MANSLAUGHTER	2018	0	0*
	2019	0	0*
	2020	0	0*
NEGLIGENT MANSLAUGHTER***	2018	0	0*
	2019	0	0*
	2020	0	0*
SEX OFFENSES, FORCIBLE	2018	0	0*
	2019	0	0*
	2020	0	0*
SEX OFFENSES, NON-FORCIBLE	2018	0	0*
	2019	0	0*
	2020	0	0*
DOMESTIC VIOLENCE	2018	0	0*
	2019	0	0*
	2020	0	0*
DATE RAPE	2018	0	0*
	2019	0	0*
	2020	0	0*
STALKING	2018	0	0*
	2019	0	0*
	2020	0	0*
ROBBERY	2018	0	0*
	2019	0	0*
	2020	0	0*
AGGRAVATED ASSAULT	2018	0	0*
	2019	0	0*
	2020	0	0*
BURGLARY	2018	0	0*
	2019	0	0*
	2020	0	0*
MOTOR VEHICLE THEFT	2018	0	0*
	2019	0	0*
	2020	0	0*
ARSON	2018	0	0*
	2019	0	0*
	2020	0	0*
ARRESTS/DISCIPLINARY ACTIONS WEAPONS: CARRYING, POSSESSIONS, ETC...***	2018	0	0*
	2019	0	0*
	2020	0	0*
ARRESTS/DISCIPLINARY ACTIONS: DRUG ABUSE VIOLATIONS***	2018	0	0*
	2019	0	0*
	2020	0	0*
ARRESTS/DISCIPLINARY ACTIONS: LIQUOR LAW VIOLATIONS***	2018	0	0*
	2019	0	0*
	2020	0	0*
*STATISTICS PROVIDED BY LOCAL LAW ENFORCEMENT			
***CANNOT BE CLASSIFIED AS HATE CRIMES			

ANNUAL SECURITY REPORT 2021 HATE CRIME VIOLATIONS WITH BIAS**						ON-CAMPUS PROPERTY	PUBLIC PROPERTY
RACE BIAS					2018	0	0*
					2019	0	0*
					2020	0	0*
RELIGIOUS BIAS					2018	0	0*
					2019	0	0*
					2020	0	0*
SEXUAL ORIENTATION BIAS					2018	0	0*
					2019	0	0*
					2020	0	0*
STALKING					2018	0	0
					2019	0	0
					2020	0	0*
ETHNICITY BIAS					2018	0	0*
					2019	0	0*
					2020	0	0*
DISABILITY BIAS					2018	0	0*
					2019	0	0*
					2020	0	0*
LARCENY/THEFT IF BIAS PRESENT					2018	0	0*
					2019	0	0*
					2020	0	0*
SIMPLE ASSAULT IF BIAS PRESENT					2018	0	0*
					2019	0	0*
					2020	0	0*
INTIMIDATION IF BIAS PRESENT					2018	0	0*
					2019	0	0*
					2020	0	0*
DESTRUCTION, DAMAGE, VANDALISM OF PROPERTY IF BIAS PRESENT					2018	0	0*
					2019	0	0*
					2020	0	0*
**Bias categories: race, gender, gender identity, religion, sexual orientation, ethnicity, national origin, disability							*NO STATISTICS PROVIDED BY LAW ENFORCEMENT

APPENDIX B

Placement / Employment Chart

	7/1/16-6/30/17 ¹	7/1/17-6/30/18 ¹	7/1/18-6/30/19 ¹
Program	2018	2019	2020
Combination Welding & Fitting Diploma ⁵	87%	90%	87%
Facilities Maintenance Technician Diploma ⁵	95%	73%	100%
Business Diploma ⁵	N/A	0%	N/A
Medical Assistant 12-Month Diploma ⁵	0%	90%	71%
Medical Assistant 16-Month Diploma ⁶	N/A	93%	69%
Medical Assistant 20-Month Degree ⁷	100%	78%	N/A
Medical Assistant 24-Month Degree ⁸	N/A	67%	N/A
Practical Nursing 12-Month Diploma ⁵	100%	100%	100%
Practical Nursing 16-Month Diploma ⁶	N/A	100%	92%
Practical Nursing 20-Month Diploma ⁷	89%	100%	100%
Business Degree ⁷	100%	100%	100%
Legal Assistant Degree ⁸	67%	50%	100%
Legal Assistant w/ Criminal Corrections Degree ⁸	100%	100%	N/A
Phlebotomy Technician Certificate ³	38%	42%	51%
State Tested Nurse Aide ²	86%	90%	89%
Total Program Yearly Averages	73%	78%	87%
Graduate population base	149/203	181/230	182/233

Rates taken from ACCSC Annual Reports

Completion / Graduation Chart

Program	2018 ¹	2019 ¹	2020 ¹
Combination Welding & Fitting Diploma ⁵	80%	87%	84%
Facilities Maintenance Technician Diploma ⁵	86%	85%	88%
Business Diploma ³	N/A	50%	N/A
Medical Assistant 12-Month Diploma ⁵	0%	63%	88%
Medical Assistant 16-Month Diploma ⁶	N/A	83%	67%
Medical Assistant 20-Month Degree ⁷	30%	53%	N/A
Medical Assistant 24-Month Degree ⁸	N/A	25%	N/A
Practical Nursing 12-Month Diploma ⁵	50%	31%	60%
Practical Nursing 16-Month Diploma ⁶	N/A	80%	65%
Practical Nursing 20-Month Diploma ⁷	53%	59%	67%
Business Degree ⁷	60%	71%	73%
Legal Assistant Degree ⁸	100%	40%	100%
Legal Assistant w/ Criminal Corrections Degree ⁸	50%	100%	N/A
Phlebotomy Technician Certificate ³	93%	89%	93%
State Tested Nurse Aide ²	96%	86%	90%
Total Program Yearly Averages	66%	67%	73%
NCLEX-PN pass rates	100%	96.7%	90.9%

Rates taken from ACCSC Annual Reports

¹ ACCSC Reporting Date for G & E Charts

² % averaged from 1-Month Program Cohort Start:

³ % averaged from 2-Month Program Cohort Start:

⁴ % averaged from 3-Month Program Cohort Start:

⁵ % averaged from 12-Month Program Cohort Starts:

⁶ % averaged from 16-Month Program Cohort Starts:

⁷ % averaged from 20-Month Program Cohort Starts:

2018-Mar17-Feb18

2018-Jan17-Dec17

2018-Dec16-Nov17

2018-Oct15-Sep16

2018-April15-Mar16

2018-Oct14-Sep15

2019-Mar 18-Feb19

2019-Jan 18-Dec 18

N/A

2019-Oct 16-Sep 17

2019-April 16-Mar 17

2019-Oct 15-Sep 16

2020-Mar19-Feb20

2020-Jan19-Dec19

N/A

2020-Oct 17-Sep18

2020-Apr17-Mar18

2020-Oct 16-Sep17

DOCUMENT AVAILABILITY ON THE WEBSITE

During my Admissions information meeting, I have been advised that the following information is available for viewing and/or printing at:

www.eticollege.edu

- Annual Security Report and Campus Policies Manual 2021 including crime statistics for the last three calendar years 2018,2019,2020
- Family Educational Rights and Privacy Act (FERPA) policy
- Drug policy and counseling information
- Graduation rates (3 years)
- Placement rates (3 years)
- Student Body Diversity and On-Time Completion Rates Table 2020-2021
- NCLEX-PN pass rates (3 years)
- Plagiarism, copyright infringement, and peer-to-peer file sharing policy
- Sexual harassment and rape crisis intervention information
- Domestic violence, dating violence, stalking definitions and policies
- Weapons policy
- Conduct/dismissal policy
- Student Code of Conduct
- Emergency evacuation procedures
- Crime awareness information
- High school/GED verification policy
- Voter registration information
- Current ETI College Catalog
- I have registered for the Emergency Alert Text system and understand that the standard text message rates apply

This notice will be renewed annually by October 1st. Notices will be distributed by handout to each student and employee to meet the October deadline. Signatures will not be required for the annual distribution. Questions concerning this notice or the information available should be addressed to the Director of Financial Aid who is responsible for the distribution. Crime statistics are gathered from the City of Niles and Weathersfield Township Police Departments, the Ohio State Highway Patrol, and incident reports collected by the school. Paper copies of information listed above may be obtained by request to the Financial Aid Department located in the Administration Building. The request will be processed within two business days. The original signed notification will be kept in each student's academic file.

REMINDER

VOTER REGISTRATION ends 30 days prior to the general election. If you need a voter registration form, see a financial aid officer.

PLEASE VOTE SO YOUR VOICE CAN BE HEARD

EFFECTIVE October 1, 2021 Reg. #93-11-1383T

Tips to Help Detect and Avoid Identity Theft

- Protect personal information such as full name, birth date, Social Security number, and financial and medical account numbers
- Be on the alert for phone, online, or email scams that ask for any of your personal information. Shred printed materials that contain this type of information.
- Take a few moments to open and read any correspondence you receive so that you can proactively identify invoices or notices for accounts you have not authorized.
- Review your monthly statements and immediately contact the financial institution, merchant, or health care provider about possible fraudulent charges or discrepancies.
- Use secure Wi Fi when accessing sensitive information online. Before entering personal information, look for https:// on the site's URL. This helps protect the privacy and integrity of data shared online.
- Create strong passwords, use two-step verification when possible, and avoid using the same password on multiple sites.
- Be aware some identity protection services may use deceptive marketing practices to solicit customers. Generally, you can protect your accounts and check your credit reports on your own by using free tools such as Credit Karma or others.
- If you think your Social Security number may have been compromised, putting a security freeze on your credit reports denies new creditors access to your file if anyone (including you) attempts to open accounts in your name. Keep in mind that freezing/unfreezing may incur a small fee.
- Set up text and/or email alerts for your accounts to automatically inform you when unusual or unauthorized activity may be occurring. You can often set alerts based on the amount charged or a specific number of charges within a 24-hour period.
- The three major credit bureaus, Equifax, TransUnion, and Experian, are required to provide consumers with a free copy of their credit report once per year. For more information, go to <http://www.annualcreditreport.com>

STUDENT BODY DIVERSITY			ON-TIME COMPLETIONS BY PROGRAM		
2020-2021			2020-2021		
UNDERGRADUATE MEN			ASSOCIATE DEGREES		
HISPANIC		1			
AMERICAN INDIAN/ALASKA NATIVE		0	BUSINESS ALL ELECTIVES		7 OF 8 88%
ASIAN		1			
BLACK/AFRICAN AMERICAN		14	LEGAL CRIMINAL CORRECTION		1 OF 1 100%
NATIVE HAWAIIAN/PACIFIC ISLANDER		0			
WHITE		46	LEGAL ASSISTANT		2 OF 2 100%
TWO OR MORE RACES		0			
UNKNOWN		1			
			DIPLOMA PROGRAMS		
			BUSINESS DIPLOMA		2 OF 2 100%
TOTAL MEN		61			
			MEDICAL ASSISTANT		7 OF 8 88%
UNDERGRADUATE WOMEN					
HISPANIC		3	PRACTICAL NURSING		18 OF 20 90%
AMERICAN INDIAN/ALASKA NATIVE		0			
ASIAN		1	FACILITIES MAINTENANCE TECHNICIAN		19 OF 19 100%
BLACK/AFRICAN AMERICAN		45			
NATIVE HAWAIIAN/PACIFIC ISLANDER		0	COMBINATION WELDING AND FITTING		16 OF 16 96%
WHITE		108			
TWO OR MORE RACES		0	TOTAL DEGREES		11
UNKNOWN		0	TOTAL DIPLOMAS		65
			TOTAL GRADUATES		76
TOTAL WOMEN		157			
			ADULT EDUCATION COMPLETIONS BY PROGRAM		
TOTAL UNDERGRAD STUDENT BODY		218			
			PHLEBOTOMY COURSE		74 OF 97 76%
ADULT EDUCATION TOTAL ENROLLED		117			
TOTAL STUDENT BODY 20/21		335	STATE TESTED NURSE AID		15 OF 20 75%
PELL RECIPIENTS	141	65%			

Student Code of Conduct

ARTICLE I. RIGHTS AND RESPONSIBILITIES

Section A. Basic Rights

Students of ETI Technical College have the right to feel safe in an environment conducive to learning.

1. Students have the right to actively participate in class.
2. Students have the right to achieve educational goals, develop career plans, and participate in workshops offered through the College.
3. Students have the right to privacy as dictated by FERPA.
4. Student have the right to file grievances according to the Grievance Policy.

Section B. Basic Responsibilities

Students, as members of the College community, shall have the following responsibilities which are inherent in the basic rights delineated above:

1. To maintain acceptable academic performance.
2. To act in professional and courteous manner to faculty, staff, and other students. To maintain this discipline while working at externships, health fairs, job fairs, and clinical sites.
3. To follow all school regulations and policies. This includes rules outlined in course syllabi.
4. To be responsible for their actions with respect to provisions of local, state, and federal law.
5. To conduct themselves in a manner which helps to create and maintain a learning atmosphere in which the dignity, worth and rights of every individual in the College community are respected.
6. To update contact information with school registrar every semester.
7. Maintain compliance with the Drug-Free School Policy.

8. Review emails and posted materials for updates to any school policies.

9. ETI Technical College mandates an attendance policy so students should closely monitor and stay below the maximum hours permitted per course/program syllabi.

ARTICLE II. STUDENT CONDUCT STANDARDS

The purpose of Student Conduct Standards is to establish practices that foster good character, civility, and community. Article II. provides a set of expectations regarding student conduct in support of the College community. A student may be charged with violating any student conduct standard. The following behaviors may be subject to disciplinary action under The Student Code of Conduct:

A. Acts of dishonesty/unacceptable behavior include, but are not limited to:

1. Academic Cheating by the following methods:

(a) Unauthorized assistance in taking quizzes, tests, assignments, or examinations;

(b) Using any aid that is not authorized by the instructor; aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out other assignments;

(c) Distributing, using, or somehow acquiring academic materials that belong to an ETI College official.

2. Plagiarism, which includes, but is not limited to: the use, by paraphrase or direct quotation, of the published or unpublished work of another person without full and clear acknowledgment. It also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials.

3. Other acts of Academic Dishonesty.

B. Social

1. Providing false information to school instructors or staff, faculty member, or office.
2. Falsifying school documents, letters, identification record, credit card, or instrument of identification.
3. Failing to update directory information with school registrar and administration.
4. Misrepresenting enrollment status and/or achievement at the College to non-College officials.
5. Disrupting Classes
6. Participation in any activity that disrupts the normal operations of ETI Technical College of Niles.
7. Parking in Faculty and Staff areas.
8. Ignoring direct instructions, written or verbal, by an ETI Faculty or Administration member.
9. Failing to complete financial obligations.
10. Violating published College policies.
11. Engaging in any physical or verbal abuse, intimidating other students, or anything that threatens the well-being of other members of the ETI Community.
12. Discriminating against another based on age, sex, religion, race or sexual orientation.
13. Conduct which is disorderly, disruptive, or indecent; breach of peace; or aiding, abetting, or procuring another person to breach the peace on College premises or at functions sponsored, or participated in, by the College or members of the College community.
14. Using any device to record on school grounds without any permission from administrative or faculty.
15. Circulating video or audio recordings of any school community member without consent.

16. Stealing from the school, or from any member of the school community: faculty, staff, peers, etc.
17. Damaging or defacing school property, or the property of a member of the school community.
18. Possessing or duplicating school keys without permission.
19. Being under the influence of, selling, or exchanging any illegal drugs or prescribed drugs or alcohol. This includes narcotics and drug paraphernalia.
20. Possession of firearms, or dangerous substances on school grounds, even if legally possessed, in a manner that harms, threatens, or causes fear to others.
21. Tampering with safety equipment.
22. Any violation of federal, state, or local law.
23. Animals are not permitted on ETI property.
24. Minor children are not permitted to accompany a parent/friend/relative student to class. They are also not permitted to wait in the breakrooms, library, or in a parked car in the parking lot while a student is in class.

INTERNET VIOLATIONS

1. Unauthorized entry into a file to use, read, or change the contents, or for any other purpose
2. Unauthorized transfer of a file
3. Unauthorized use of another individual's identification or password
4. Use of computing facilities and resources to interfere with the work of another student, faculty member, or college official
5. Use of computing facilities and resources to send obscene or abusive messages
6. Use of computing facilities and resources to interfere with the normal operation of the College computing system originating from an on-campus or off-campus source

7. Use of computing facilities and resources in violation of copyright laws

Article III. THE VIOLENCE AGAINST WOMEN ACT, SEXUAL MISCONDUCT, HARASSMENT, DISCRIMINATION

A. Discrimination – Intentional or unintentional act that treats an individual or group in an adverse manner based on a protected category. Protected categories include, but are not limited to; race, color, religion, gender, sexual orientation, national origin, ancestry, disability, genetic information, age, military status or identity as a disabled veteran or veteran of the Vietnam era, recently separated veteran or other protected veteran.

B. Gender Identity – Regardless of an individual's actual or perceived sexual orientation, discrimination and harassment based on a person's gender identity or non-conformity to stereotypes associated with a particular gender is prohibited. This includes discrimination based on an individual's transgender identity.

C. Harassment – Includes intimidation, ridicule or insults that are sufficiently severe, pervasive or persistent as to interfere with or limit the ability of an individual to participate in or benefit from the services, activities or privileges provided by the college; creates an intimidating, hostile or offensive working and/or learning environment; or otherwise adversely affects an individual's work or learning opportunities and is based on an individual's race, color, religion, national origin, ancestry, disability, genetic information, age, military status, identity as a disabled veteran or veteran of the Vietnam era, recently separated veteran or other protected veteran.

D. Gender/Sexual Harassment – A form of unlawful gender discrimination defined as unfavorable or unwelcome treatment, made without consent and based on a person's gender or sex, determined by the reasonable person's standard to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to an education program or academic activity by creating an intimidating,

hostile or offensive working, academic or college environment. Sexual harassment includes but is not limited to:

Verbal and/or physical behavior including, but not limited to sexually explicit jokes, insults and taunts; obscene gestures; offensive pictorial, written or electronic communications; and unwelcome touching.

E. Sexual Misconduct

1. Any intentional sexual touching, however slight, with any body part or object, by a person upon a person, that is without consent.

2. Sexual Exploitation – Taking non-consensual or abusive sexual advantage of another for one's own advantage or benefit or to benefit or advantage anyone other than the one being exploited. Such actions would include, but not be limited to videotaping or recording of a sex act; allowing an observer to a sex act, unknown to one party; or exposing one's genitals in non-consensual circumstances.

3. Knowingly transmitting a sexually transmitted infection or disease through sexual contact without consent.

4. Committing any of the Clery crimes or VAWA offenses detailed in the previous sections (beginning on page 7) of this handbook.

ARTICLE IV. STUDENT CONDUCT RESOLUTION PROCEDURES

Section A. General

1. In order to ensure fairness and the basic elements of due process, the following procedures have been established for use in student conduct proceedings involving students of the College. The last two pages of the College Catalog explain the basic steps to make a complaint or file a grievance concerning school policy or classroom procedure. This may result in a meeting with the student, Director of Education, College Director, Director of Financial Aid or Department Head or Faculty Member, depending on the complaint.

2. For accusations of conduct violations or alleged VAWA, Clery, or Title IX offenses, the Director of Education may assemble a Hearing Panel to determine whether a student has violated any section of the conduct code and to recommend sanctions. The Hearing Panel may

include faculty/staff members and senior representatives from administration.

3. When necessary, the standard of proof utilized in student conduct proceedings shall be a preponderance of evidence, i.e., more likely than not that the alleged conduct occurred.

Section B. Initiation of Complaints and Student Conduct Charges

1. A complaint can be made through the Director of Education or any senior administrator or faculty member. A complaint should be filed within 10 days of the incident, but remember that there is **no time limit** to report Title IX offenses. Notice to any staff/faculty member constitutes notice to the college and triggers the obligation to respond.

2. The Director of Education shall review complaints and decide to dismiss (mandatory) if:

- The incident, even if proved, would not constitute sexual harassment.
- The harassment did not occur in the college's education programs or activities.
- The conduct did not occur in the United States OR

Discretionary Dismissal if:

- The complainant notifies Director in writing that he/she would like to withdraw the complaint.
- The respondent is no longer enrolled or employed by the college.
- Specific circumstances prevent the college from gathering sufficient evidence.

The Director facilitates an informal resolution process such as mediation that does not involve a full investigation and adjudication if:

- Both parties voluntary written consent to informal resolution is received.
- This resolution is NOT an option if allegations are that a college employee or faculty member sexually harassed a student.

3. The Title IX Coordinator will meet with the complainant confidentially to discuss the availability of supportive measures with or

without the filing of a formal complaint and the procedure to file a formal complaint.

4. The Director of Education shall meet with the offender(s) to inform them that a complaint has been filed. In Title IX cases, the complaint shall be delivered to the accused student in person or by regular US mail to the accused student's official address of record at the College. The complaint shall instruct the accused student to contact the Title IX Coordinator/Director of Education to schedule a conduct conference or the accused will be informed that a Hearing Panel has been convened to review the complaint. In the event the accused student does not respond as requested, the Hearing Panel may proceed to conclude the case.

5. A respondent may be suspended from class while the Director conducts an investigation. The responsibility to investigate and gather evidence rests with the school, not the parties. All evidence gathered must be provided to both parties at least ten days prior to dismissing the case or convening a hearing panel, whichever is warranted.

Section C. Hearing Panel

In cases where a Hearing Panel is warranted, the Director of Education/Title IX Coordinator shall assemble: The College President, the Director of Financial Aid, the Director of Admissions, and any other person deemed necessary by the Coordinator. At this live event, the respondent and the complainant each have the opportunity to present information to the assembled Panel and have their representatives' cross-examine the parties and the witnesses with questions deemed relevant by the Coordinator/decision-maker. If a party does not have an advisor, it is the responsibility of the school to provide one at no fee or charge to them.

Either party may request the hearing take place in two separate rooms outfitted with the technology that allows the parties to hear and see each other. Recordings or transcripts of the hearing are required.

Rape shield protections are provided to the complainant by way of deeming irrelevant questions and evidence about the alleged victim's prior sexual behavior unless being used to prove someone other than respondent committed the alleged misconduct.

If a party or witness does not submit to cross-examination, the decision-makers cannot rely on any statements made by them when making determinations BUT they also cannot draw an inference based solely on the refusal to answer questions.

The decision-maker (who is not the Title IX Coordinator/Investigator) must issue a determination regarding responsibility with findings of fact, conclusions about whether the alleged conduct occurred, rationale for the result as to each allegation, any disciplinary sanctions on the respondent, and whether remedies will be provided to the victim. The written determination must be sent simultaneously to the parties along with information about how to file an appeal.

Section D. Sanctions

1. The following sanctions may be imposed upon any student that has been found responsible for a violation of The Conduct Code. Sanctions shall be issued in a progressive fashion.

A. Warning: A written warning will be issued and placed into the student file. Continuation or repetition of inappropriate conduct may be cause for more severe student conduct action. A warning remains in effect for one academic year.

B. Suspension: A student can be suspended from class or school grounds for a period of 1-5 school days.

C. Probation Conference: A Hearing Panel shall outline terms and condition under which student(s) can return.

D. Expulsion: Student will be held responsible for replacing damage at his/her own cost, if applicable.

2. In each case in which a Hearing Panel determines that a student has violated The Conduct Code, the sanction(s) shall be determined and imposed by the same Hearing Panel. The Director of Education shall be responsible for recommending sanctions and for ensuring that

sanctions imposed are consistent with the violation and sanctions imposed for similar violations.

Section E. Appeals

1. A decision or sanction rendered may be appealed by the offender or complainant within 5 working days of the decision. If an appeal is not received, the decision will be final.
2. Appeals must be presented in writing to the Director of Education. The letter should indicate the reason for the appeal, any supporting documentation and any concerns.
3. Grounds for Appeal. During the period of appeal, all sanctions, except interim suspensions, will be held in abeyance. The burden of proof rests with the Appellant filing the appeal. Appeals are not a re-hearing of the student conduct case. Except as required to explain the basis of new evidence, an appeal shall be limited to review of the record of the initial hearing and supporting documents for one or more of the following grounds:
 - a. Additional evidence not presented at the initial hearing
 - b. Additional incidents related to the initial complaint
4. If the Director finds the appeal has merit:
 - a. The matter may be reconsidered.
 - b. The decision may be reversed or restructured.
 - c. Sanction may be increased, reduced, or altered.
 - d. The appeals body may dismiss the appeal if the appeal is not based upon one of the grounds in E.3
 - e. The appeals body may deny the appeal.
5. The decision of the Hearing Panel or the Director of Education after the appellate review is binding and final.
6. The Department of Education's Title IX rule expressly prohibits retaliation. The exercise of rights protected under the First Amendment does not constitute retaliation.