

THE OHIO STATE UNIVERSITY
OFFICIAL PROCEEDINGS OF THE
ONE THOUSAND FIVE HUNDRED AND THIRTY-FIRST
MEETING OF THE BOARD OF TRUSTEES

Columbus, Ohio, June 4 – August 20, 2025

The Board of Trustees and its committees met in Columbus, Ohio, at Longaberger Alumni House, unless noted otherwise herein, and virtually over Zoom on June 4; July 2, 16 and 30; and August 13, 19 and 20, 2025, pursuant to adjournment.

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Minutes of the last meetings were approved.

NOTE: The Degrees and Certificates that were approved at the May 21, 2025 meeting of the Board of Trustees are reflected here in the attached spring and summer commencement bulletins for the ceremonies that took place on May 4 and August 3, 2025.

(See Appendix I for spring commencement background information, page 56; and Appendix II for summer commencement background information, page 156)

LEGAL, AUDIT, RISK AND COMPLIANCE COMMITTEE MEETING

Committee Chair Elizabeth P. Kessler called the meeting of the Legal, Audit, Risk and Compliance Committee to order on Wednesday, June 4, 2025, at 2:00 p.m.

Members Present: Elizabeth P. Kessler, Bradley R. Kastan, Juan Jose Perez, Kendall C. Buchan, John W. Zeiger (ex officio)

Members Present via Zoom: Michael F. Kiggin, Amy Chronis

Members Absent: N/A

It was moved by Ms. Kessler and seconded by Mr. Kastan that the committee recess into executive session to consult with legal counsel regarding pending or imminent litigation; to consider business-sensitive trade secrets; and to discuss personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Ms. Kessler, Mr. Kastan, Mr. Kiggin, Mr. Perez, Dr. Buchan, Ms. Chronis and Mr. Zeiger.

The committee entered executive session at 2:09 p.m. The meeting adjourned at 5:24 p.m.

(See Appendix III for Summary of Actions Taken, page 190)

TALENT, COMPENSATION AND GOVERNANCE COMMITTEE MEETING

Committee Chair Jeff Kaplan called the meeting of the Talent, Compensation and Governance Committee to order on Wednesday, July 2, 2025, at 2:00 p.m. The committee convened in Columbus, Ohio, in room 5000 of University Square South, and virtually over Zoom.

Members Present: Jeff M.S. Kaplan, Elizabeth P. Kessler, Reginald A. Wilkinson, Tomislav B. Mitevski, Juan Jose Perez, Kara J. Trott – arr. 2:11 p.m., John W. Zeiger (ex officio)

Members Present via Zoom: Gary R. Heminger – arr. 2:09 p.m.

Members Absent: N/A

It was moved by Mr. Kaplan and seconded by Mr. Perez that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Kaplan, Ms. Kessler, Dr. Wilkinson, Mr. Mitevski, Mr. Perez and Mr. Zeiger. Mr. Heminger and Ms. Trott were not present for this vote.

The committee entered into executive session at 2:04 p.m. and adjourned at 5:14 p.m.

(See Appendix IV for Summary of Actions Taken, page 215)

ACADEMIC AFFAIRS AND STUDENT LIFE COMMITTEE MEETING

Committee Chair Reginald Wilkinson called the meeting of the Academic Affairs and Student Life Committee to order on Wednesday, July 16, 2025, at 2:00 p.m.

Members Present: Reginald A. Wilkinson, Elizabeth A. Harsh, Jeff M.S. Kaplan, Bradley R. Kastan, Kendall C. Buchan, Eric Bielefeld, John W. Zeiger (ex officio)

Members Present via Zoom: Michael F. Kiggin – arr. 2:40 p.m., Stefanie Sanford – arr. 2:05 p.m.

Members Absent: Elizabeth P. Kessler

It was moved by Dr. Wilkinson and seconded by Mr. Kaplan that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters involving the appointment, employment and compensation of public officials, which are required to be kept confidential under Ohio law.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Dr. Wilkinson, Mrs. Harsh, Mr. Kaplan, Mr. Kastan, Dr. Buchan, Dr. Bielefeld and Mr. Zeiger. Mr. Kiggin and Dr. Sanford were not present for this vote.

The committee entered executive session at 2:02 p.m. and reconvened in public session at 4:07 p.m. The committee adjourned at 4:53 p.m.

(See Appendix V for Summary of Actions Taken, page 216)

MASTER PLANNING AND FACILITIES COMMITTEE MEETING

Committee Chair John Perez called the meeting of the Master Planning and Facilities Committee to order on Wednesday, July 30, 2025, at 1:57 p.m.

Members Present: Juan Jose Perez, Reginald A. Wilkinson, Pierre Bigby, Bradley R. Kastan, Kendall C. Buchan, Robert H. Schottenstein, Keith Myers

Members Present via Zoom: George A. Skestos – arr. 1:59 p.m.

Members Absent: Elizabeth A. Harsh, John W. Zeiger (ex officio)

It was moved by Mr. Perez and seconded by Mr. Bigby that the committee recess into executive session to consult with legal counsel regarding pending or imminent litigation, to

consider business-sensitive trade secrets and to discuss details relative to security arrangements and emergency response protocols.

It was moved by Mr. Perez and seconded by Dr. Wilkinson that the committee recess into executive session to consider business-sensitive trade secrets and to consult with legal counsel regarding pending litigation. A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Perez, Dr. Wilkinson, Mr. Bigby, Mr. Kastan, Dr. Buchan, Mr. Schottenstein and Mr. Myers. Mr. Skestos was not present for this vote.

The committee entered executive session at 1:59 p.m. and reconvened in public session at 4:24 p.m. The meeting adjourned at 4:31 p.m.

(See Appendix VI for Summary of Actions Taken, page 240)

FINANCE AND INVESTMENT COMMITTEE MEETING

Committee Chair Tomislav Mitevski called the meeting of the Finance and Investment Committee to order on Wednesday, August 13, 2025, at 9:30 a.m.

Members Present: Tomislav B. Mitevski, Pierre Bigby, Gary R. Heminger, George A. Skestos, John W. Zeiger (ex officio)

Members Present via Zoom: Michael F. Kiggin, Amy Chronis

Members Absent: Kent M. Stahl

It was moved by Mr. Mitevski and seconded by Mr. Bigby that the committee recess into executive session to consider business-sensitive trade secrets. A roll-call vote was taken, and the committee voted to go into executive session with the following members present and voting: Mr. Mitevski, Mr. Bigby, Mr. Kiggin, Mr. Skestos, Ms. Chronis and Mr. Zeiger. Mr. Heminger was not present for this vote.

The committee entered into executive session at 9:31 a.m. and reconvened in public session at 11:24 a.m. The meeting adjourned at 11:59 a.m.

(See Appendix VII for Summary of Actions Taken, page 257)

TALENT, COMPENSATION AND GOVERNANCE COMMITTEE MEETING

Committee Chair Jeff Kaplan called the meeting of the Talent, Compensation and Governance Committee to order on Wednesday, August 13, 2025 at 1:00 p.m.

Members Present: Jeff M.S. Kaplan, Elizabeth P. Kessler, Gary R. Heminger, Reginald A. Wilkinson, Tomislav B. Mitevski, Juan Jose Perez, Kara J. Trott, John W. Zeiger (ex officio)

Members Present via Zoom: N/A

Members Absent: N/A

It was moved by Mr. Kaplan and seconded by Mr. Heminger that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Kaplan, Ms. Kessler, Mr. Heminger, Dr. Wilkinson, Mr. Mitevski, Mr. Perez, Ms. Trott and Mr. Zeiger.

The committee entered into executive session at 1:05 p.m. and adjourned at 3:25 p.m.

(See Appendix VIII for Summary of Actions Taken, page 382)

FULL-BOARD EXECUTIVE SESSION

Board Chair John W. Zeiger called the meeting of the Board of Trustees to order on Tuesday, August 19, 2025, at 9:28 a.m.

Members Present: John W. Zeiger, Elizabeth P. Kessler, Gary R. Heminger, Jeff M.S. Kaplan, Elizabeth A. Harsh, Reginald A. Wilkinson, Michael F. Kiggin, Tomislav B. Mitevski, Pierre Bigby, Juan Jose Perez, Bradley R. Kastan, George A. Skestos, Kara J. Trott, Patrick J. Tiberi

Members Present via Zoom: N/A

Members Absent: N/A

Mr. Zeiger:

Will the Secretary please advise when a quorum is present?

Ms. Eveland:

A quorum is present.

Mr. Zeiger:

Thank you. At this time, I would like to convene this meeting of the Board of Trustees and move that the board recess into executive session to consult with legal counsel regarding pending or imminent litigation; to consider business-sensitive trade secrets; and to discuss personnel matters involving the appointment, employment and compensation of public officials, which are required to be kept confidential under Ohio law.

Upon the motion of Mr. Zeiger, seconded by Mr. Perez, the Board of Trustees adopted the foregoing motion by unanimous roll-call vote, cast by trustees: Mr. Zeiger, Ms. Kessler, Mr. Heminger, Mr. Kaplan, Mrs. Harsh, Dr. Wilkinson, Mr. Kiggin, Mr. Mitevski, Mr. Bigby, Mr. Perez, Mr. Kastan, Mr. Skestos, Ms. Trott and Mr. Tiberi.

The meeting entered executive session at 9:29 a.m. and adjourned at 12:06 p.m.

WEXNER MEDICAL CENTER BOARD MEETING

Board Secretary Jessica A. Eveland called the meeting of the Wexner Medical Center Board to order on Tuesday, August 19, 2025, at 12:59 p.m.

Members Present: Gary R. Heminger, Tomislav B. Mitevski, Juan Jose Perez, George A. Skestos, Kara J. Trott, Robert H. Schottenstein, Cindy Hilsheimer, Amy Chronis, Hiroyuki Fujita, John W. Zeiger (ex officio), Walter E. Carter Jr. (ex officio), Ravi V. Bellamkonda (ex officio), John J. Warner (ex officio)

Members Present via Zoom: Stephen D. Steinour – arr. 1:03 p.m., Michael Papadakis (ex officio)

Members Absent: Leslie H. Wexner

It was moved by Mr. Schottenstein and seconded by Dr. Warner that the Wexner Medical Center Board recess into executive session to consider business-sensitive trade secrets and quality matters required to be kept confidential.

A roll-call vote was taken, and the Board voted to go into executive session with the following members present and voting: Mr. Heminger, Mr. Mitevski, Mr. Perez, Mr. Skestos, Ms. Trott, Mr. Schottenstein, Mr. Steinour, Ms. Hilsheimer, Ms. Chronis, Dr. Fujita, Mr. Zeiger, President Carter, Dr. Bellamkonda, Mr. Papadakis and Dr. Warner.

The Wexner Medical Center Board entered executive session at 1:40 p.m. and adjourned at 4:21 p.m.

(See Appendix IX for Summary of Actions Taken, page 385)

ATHLETICS COMMITTEE MEETING

Committee Chair Gary Heminger called the meeting of the Athletics Committee to order on Wednesday, August 20, 2025, at 7:59 a.m.

Members Present: Gary R. Heminger, Michael F. Kiggin, Elizabeth P. Kessler, Jeff M.S. Kaplan, Pierre Bigby, Bradley R. Kastan, George R. Skestos, Kendall C. Buchan, John W. Zeiger (ex officio)

Members Present via Zoom: N/A

Members Absent: N/A

It was moved by Mr. Heminger and seconded by Mr. Kaplan that the committee recess into executive session to discuss business-sensitive trade secrets and to discuss personnel matters involving the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Heminger, Mr. Kiggin, Ms. Kessler, Mr. Kaplan, Mr. Bigby, Mr. Kastan, Mr. Skestos, Dr. Buchan and Mr. Zeiger.

The committee entered into executive session at 8:05 a.m., and the meeting adjourned at 9:48 a.m.

(See Appendix X for Summary of Actions Taken, page 560)

FULL-BOARD PUBLIC SESSION

Board Chair John W. Zeiger convened The Ohio State University Board of Trustees on Wednesday, August 20, 2025, at 10:03 a.m.

Members Present: John W. Zeiger, Elizabeth P. Kessler, Gary R. Heminger, Jeff M.S. Kaplan, Elizabeth A. Harsh, Reginald A. Wilkinson, Michael F. Kiggin, Tomislav B. Mitevski, Pierre Bigby, Juan Jose Perez, Bradley R. Kastan, George A. Skestos, Kara J. Trott

Members Present via Zoom: N/A

Members Absent: Patrick J. Tiberi

Mr. Zeiger:

Good morning and welcome to this session of the Board of Trustees meeting of The Ohio State University. Will the Secretary please advise when a quorum of trustees is present?

Ms. Eveland:

A quorum is present.

Mr. Zeiger:

Thank you. I would like to convene this meeting of the Board of Trustees and remind everyone with us today that this meeting is being recorded and livestreamed for the public by WOSU. I also ask that everyone with us this morning follow rules of decorum proper to the conducting of the business at hand.

I'd like to start the meeting this morning by welcoming our two newest members to this Board of Trustees — Trustee Pat Tiberi and Student Trustee Patrick Arp, both of whom have been appointed by Governor DeWine to the Board of Trustees since our last public meeting. Pat Tiberi has had a remarkable career as a public servant, having served — and served with distinction — in the Congress of the United States from the central Ohio area for many years. He's currently the CEO of the Ohio Business Roundtable. Patrick is a junior studying biomedical science and economics — to make sure that he has plenty of things to do — and has already impressed us as a very thoughtful and good contributor. So, we welcome both Pat and Patrick to this board and appreciate your service in this respect.

RECOGNITION OF DISTINGUISHED UNIVERSITY PROFESSORS

Mr. Zeiger:

We have a special event this morning. It focuses on the core mission of this university, which is the education and research that distinguish us from so many other universities. We have the privilege of honoring the newest Distinguished University Professors, each of whom is an accomplished faculty member known as an expert in their field both at the university and well beyond. Each is an outstanding scholar, mentor and educator.

Academic excellence is the highest priority of this Board of Trustees, as we have discussed at many of our meetings. And the accomplishments of these individuals add to the excellence and prestige of our university. So, we welcome our honorees this morning with great pride.

Provost Bellamkonda — if you would please introduce the newest Distinguished University Professors? Thank you.

Dr. Bellamkonda:

Thank you, Mr. Chairman.

Mr. Chairman and members of the board, it is my distinct honor to introduce to you The Ohio State University's Distinguished University Professors for 2025. Before I make the introductions, however, I'd like to explain what the title "Distinguished University Professor" means and what a significant recognition it represents.

This is the highest honor bestowed by Ohio State. Period. Since its creation more than 35 years ago, the Distinguished University Professor title has been awarded to a very limited group of exceptional faculty members each year. This year, we are fortunate to have five. They hold the title in perpetuity. Nominations are put forward by our colleagues and, following an extremely rigorous review process, the candidates' records in teaching, research and scholarly activity, as well as creative work and service, are evaluated, and final recommendations are made by the members of the President and Provost's Advisory Committee, a committee of peers. Distinguished University Professors are awarded \$30,000 as a one-time grant to support their academic work. They also automatically become members of the President and Provost's Advisory Committee. That means that Ohio State can call on their expertise to advise us on how best to promote academic excellence at the university.

This year's Distinguished University Professors are: Dr. Patrick Green, College of Veterinary Medicine; Dr. Peter Hahn, College of Arts and Sciences; Dr. Anita Hopper, College of Arts and Sciences; Dr. Michael Lisa, College of Arts and Sciences; and Dr. Phil Popovich, College of Medicine.

Dr. Green is unable to join us today. However, with your permission, I will introduce Dr. Green as well.

Dr. Patrick Green is internationally recognized for his pioneering research that has significantly advanced the understanding of human T-cell leukemia viruses, or HTLV, and retroviruses. Widely regarded as the preeminent researcher and worldwide leader in the structure-function relationships of HTLV proteins and their role in disease, Dr. Green has not only improved our understanding of cancer-causing retroviruses, but is also applying his discoveries to the development of therapeutics and vaccines to address such conditions.

Dr. Green is the director of our Center for Retroviral Research and is a senior advisor at The Ohio State University Comprehensive Cancer Center. The relevance of Dr. Green's work to human health has been broad and significant, especially with respect to cancer, leading to a long list of prestigious awards and scientific recognitions. He's a Fellow of the American Association of the Advancement of Science, American Academy of Microbiology, American Cancer Society, Leukemia Society of America, amongst other honors. He's been recognized by the International Retrovirology Association for exceptional contributions to the field of HTLV and other related viruses. And, in 2019, he received the Dale McFarlin Award for outstanding service to the association. In 2009,

he was named a University Distinguished Scholar, a recognition of outstanding scholarly activity, research or creative works. May we now see a video of Dr. Green.

[VIDEO PRESENTATION]

Dr. Bellamkonda:

Congratulations to Dr. Green, sir. Thanks.

It is now my pleasure to introduce Distinguished University Professor Peter Han. Peter Hahn is a prominent scholar recognized for his extensive contributions to the field of U.S. foreign policy, especially regarding the Middle East. His work has significantly shaped the understanding of U.S. diplomatic history and international relations, earning him a recognition as the leading expert in his field. He's authored eight books, co-edited a collection of articles and published nearly 100 scholarly reviews, essays and commentaries. His research has been supported by prestigious fellowships, including the National Endowment for the Humanities, the Fulbright Scholar Program and the Office of the Secretary of Defense. In recognition of his research achievements, Dr. Hahn has received the Society for Historians of American Foreign Relations Distinguished Service Award in 2017 and the Stuart L. Bernath Lecture Prize in 1998.

In addition to his research during his over three-decade tenure at Ohio State, Dr. Hahn has exemplified excellence in teaching and mentorship. He has developed and taught courses on U.S. foreign policy, modern U.S. history, including a study abroad program focusing on World War II in Europe. I'd like to go on that program. Dr. Hahn has mentored nearly 40 PhD students and 34 master's students, many of whom have gone on to prestigious careers.

This spring, Dr. Hahn also retired from Ohio State after more than 30 years of service to the university. He now proudly bears the title of professor emeritus. May we now please see the video of Dr. Hahn.

[VIDEO PRESENTATION]

Dr. Bellamkonda:

Congratulations, Dr. Hahn. Would you like to say a couple words?

Dr. Hahn:

I would. Thank you for the opportunity to address the board briefly.

I'm deeply honored to accept this award of Distinguished University Professor. Ohio State University has been a remarkable place for me to pursue my professional aspirations. The Department of History boasts a dynamic cohort of scholars in diplomatic and military history — many of them here this morning — who have earned a reputation for comprising the nation's finest research and graduate education program in those fields. Department chairs, including the current one, Professor Scott Levi, have maintained standards of excellence and have carefully shepherded resources in support of scholarly achievements. The Mershon Center for International Security Studies has been a gateway for interdisciplinary perspectives and discussion that sharpened my scholarship.

To put it succinctly, it's hard to imagine a better environment for me as I analyzed the long and complicated history of U.S. foreign policy in the Middle East.

Ohio State's commitment to excellence among undergraduates has created fabulous opportunities for me to pursue my other passion, which is teaching. In partnership with colleagues David Steigerwald and Peter Mansoor, I learned that there is no better way to instruct students and alumni about the D-Day invasion except to walk with them on Omaha Beach.

I cherish the traditional classroom where I taught the intricacies of U.S. foreign policy to hundreds of undergraduates who were destined for careers in civil and military service, and also in medicine, business and engineering, among other professions — citizens all. Through their questions and comments, I learned how to articulate the narrative more cogently, more evenhandedly and more comprehensively. Semester after semester, they demonstrated the synergy generated by Ohio State's dual commitment to excellence in teaching and excellence in research. My students confirmed my principled view that undergraduate instruction was our original purpose and remains our most important mission.

Thank you.

Dr. Bellamkonda:

Thank you, Dr. Hahn, for everything that you do.

Mr. Chairman, it's my pleasure now to introduce our Distinguished University Professor, Dr. Anita Hopper.

Dr. Anita Harper's groundbreaking research has significantly advanced the understanding of transfer RNA biogenesis and processing. She was the first to discover mutants that accumulate unspliced tRNAs, a finding that has paved the way for numerous biochemical assays in tRNA splicing. Her recent work has identified more than 140 novel proteins involved in tRNA intron turnover and nuclear-cytoplasmic bidirectional movement, providing new insights into tRNA biogenesis.

Throughout her career, Dr. Hopper has published more than 120 peer reviewed papers and has been continuously funded by the National Institutes of Health since 1976. Her exceptional contributions to science have been recognized by numerous awards, including the election to the National Academy of Sciences, the American Academy of Arts and Sciences, the American Academy of Microbiology, and the American Association for the Advancement of Science. She's received the Lifetime Achievements in Science Award from the RNA Society and has also received the Ohio State Distinguished Scholar Award in 2012. In addition to her research, Dr. Hopper is a dedicated educator, having mentored dozens of postdoctoral fellows, graduate and undergraduate and high school students.

Maybe now please see the video of Dr. Hopper.

[VIDEO PRESENTATION]

Dr. Bellamkonda:

Dr. Hopper, congratulations. We're proud of your work. Would you like to share a few words, please?

Dr. Hopper:

OK, most of what I would have liked to say is in that video.

I have three passions I might like to describe. The first is what I do: basic research — what I call discovery research. This is investigations into the unknown, and it is so important because without advances into the unknown, there's no application in medicine, health or the environment. And we do a very good job in basic sciences here at Ohio State.

The second passion is mentorship. So, as a first-generation college student, I would not be here at all if I hadn't had dedicated, supportive mentors who advised me all the way through. So, part of my mission here is payback, to have the next generation of young scientists have the support that they need to pursue.

And then the third passion is state-supported schools. So, all my education and all my academic career has been in state-supported schools, and they are essential to the mission of this country and of our next generation. Ohio State is, I think, the best of the universities that I've been at because it is so crazy large, and we have everything here from sciences to engineering and physics all on one campus, which means we can interact in ways that would not be possible if we were dispersed in different groups. So, this has been a wonderful place for me to teach undergraduates, graduate students, postdocs; to conduct what I think is unique research; and to look forward to next generation of scientists.

Dr. Bellamkonda:

Thank you so much and congratulations.

We now switch gears to atomic physics, in a matter of sense. It is my pleasure to introduce you to Distinguished University Professor, Dr. Michael Lisa.

Dr. Michael Lisa's research bridges the boundary between the traditional fields of nuclear physics and high-energy particle physics. His experimental studies investigate collisions between very heavy atomic nuclei traveling at nearly the speed of light. His goal is to melt these nuclei into a hot stew of quarks, which are usually trapped within the protons, which constitute the nucleus. This phenomenon, known as the quark-gluon plasma, was last seen in nature only microseconds after the Big Bang — not the TV show.

Dr. Lisa's research is responsible for seminal breakthrough discoveries. His development of azimuthally sensitive femtoscopy is a touchstone in the field, allowing for precise measurements of the size and lifetime of the fireball created in nuclear collisions. More recently, his work has led to the exciting development of measuring the vorticity of the quark-gluon plasma, a way to quantify how fast this extreme fluid is swirling.

Widely recognized for his scientific contributions, Dr. Lisa received the Sambamurti Memorial Prize Lectureship from Brookhaven National Lab, where he was, and he was also a Fulbright Scholar. He's a Fellow of the American Association of the Advancement of Science and the American Physical Society. In 2020, he was named a University Distinguished Scholar.

May we now please see a video of Dr. Lisa.

[VIDEO PRESENTATION]

Dr. Bellamkonda:

Congratulations, Dr. Lisa. Would you like to share a few thoughts please?

Dr. Lisa:

Sure. Thank you. Thanks to the Board of Trustees and university. I'm very honored by this title.

It's been a pleasure to be at Ohio State. I bring international research from national labs, from international labs to Ohio State. We're working at scales 100,000 times smaller than a single atom, at very high energies, as was said. And this leads to new phenomenon never anticipated before. And there have been three discoveries — which I won't go into the details on — made here at Ohio State by students at Ohio State.

As I guess the video said, presenting very complex physical systems to bright young minds really can lead to surprising and fascinating results. It's been a pleasure to work with the students here. I'm always — well, I used to be very surprised by what they can do, and now I am no longer surprised. These young students, then, are leading to basically the intellectual infrastructure of our country. They enter the workforce with skills that they really could get nowhere else. I'll sort of echo the words said before that the size of this university allows me to access other scientific departments, the engineering department to promote my scientific research. And the support of the faculty has been tremendous in terms of sharing knowledge from atomic physics, quantum optics, etcetera, to sort of expand my own research. I'd say the collaborative culture of OSU is largely unique. I talked to colleagues at other universities, and this is not ubiquitous. It's something that is special here, and it's a culture that we strive for. I've noticed this, that we strive for this. It leads to excellence and sort of builds on itself, and that's something valuable that we need to keep in mind as we move forward.

The teaching aspect here is also very important. I found the culture very supportive of teaching. Teaching is a passion of mine. I was able to write a textbook on the physics of sports, as a matter of fact, and this actually has been quite popular. And I find that the passion for teaching is also reflected among my colleagues. Once again, this leads to a culture that supports instruction of our young people. I found Ohio State a fantastic place to work and unique place to develop the science and education I've been able to participate in. So, thank you.

Dr. Bellamkonda:

Thank you so much. You're an important part of creating that culture. Thank you.

Finally, it is my pleasure to introduce you to Distinguished University Professor, Dr. Phillip Popovich.

Dr. Phillip Popovich has conducted more than 20 years of groundbreaking research at Ohio State, leading to significant discoveries, including the crucial role of immune cells in regulating spinal-cord injury and repair processes.

Dr. Popovich serves as the chair of the Department of Neuroscience in the College of Medicine as well as the executive director of the Belford Center for Spinal Cord Injury and the director for the Center for Brain and Spinal Cord Repair. Many of you also know him as one of our faculty public members who offers his valuable perspectives and expertise this board.

Throughout his career, he has published more than 160 peer reviewed papers and has secured more than \$90 million in research funding. In recognition of his exceptional research achievements, Dr. Popovich has been honored with the university's Distinguished Scholar award in 2018. In addition to research, Dr. Popovich has also

demonstrated excellence in teaching, mentorship and service. Throughout his tenure, he has mentored more than 140 students, postdoctoral researchers and fellow faculty members. Dr Popovich has a long record of service to Ohio State and his broader field, serving on more than 60 Ohio State committees and over 35 national or international organizations.

May we please now see the video of Dr. Popovich.

[VIDEO PRESENTATION]

Dr. Bellamkonda:

Thank you so much. Would you like to share a few words, Dr. Popovich?

Dr. Popovich:

Sure. Thank you very much. Given the video and your comments, I'll be brief.

Even though I'm being honored with this award today, I think it's important to acknowledge that that my professional accomplishments were made possible because of Ohio State, to the many resources and investments they've made in my lab and in me in particular, but also to the exceptional trainees, colleagues and friends whose collaboration makes this really complex work that we do engaging and rewarding, and a lot of fun to do.

One of the advantages of being an academic scientist is being able to travel the world, and I've been fortunate to do that. I've given hundreds of lectures across the world and have visited many institutions that you often see in our aspirational list of places that we'd like to be like. And I can tell you that none of them surpass Ohio State in terms of quality of faculty, trainees and resources. So, I'm truly honored and proud to be part of this institution. And I again thank the board and my colleagues for nominating me and bestowing me with this honor.

Dr. Bellamkonda:

As your chief academic officer, I also want to convey my thanks to this board. We have incredible faculty, and the board and your focus on academic excellence is an asset to this university, and it gives me pleasure to support our faculty.

May I, at this time, invite Chairman Zeiger and President Carter to please step forward so we can present our faculty with some medallions?

[PRESENTATION OF MEDALLIONS]

Mr. Zeiger:

Wow.

Our board is very committed to academic excellence, and we've seen just an extraordinary display of Ohio State's greatest this morning, and we know there are many other faculty members who are following the same path. So, thank you for the commitment you've made to the university. We are so pleased to honor you for what has just been a tremendous contribution to the university and to the academic world. So, thank you so much.

I'd be remiss if we didn't say also a special thank you to Dr. Popovich, our friend. He has served with distinction as an advisor to, and participant in, a number of our university Board of Trustees committees. He is a respected voice who speaks on behalf of the faculty and gives us a perspective that is unique and important. So, Phil, thank you for that.

Dr. Popovich:

Thank you.

(See Appendix XI for background information, page 561)

APPROVAL OF MINUTES

Mr. Zeiger:

Our next order of business this morning is the approval of the minutes from our May meeting of the Board of Trustees. They have been distributed to the trustees. Are there any additions or corrections to those minutes?

Hearing none, the minutes will be approved as distributed. (*Minutes were approved.*)

PRESIDENT'S REPORT

Mr. Zeiger:

I now invite President Carter to update us on the developments and give us his report. Ted?

Mr. Carter:

Thank you, Mr. Chairman. And I want to add my congratulations to our Distinguished University Professors. And, yes — you do not have to stay for the rest of the meetings. We've held you hostage enough already, so if you do want to depart — or if you do want to stay — you're welcome.

I want to join the chairman in welcoming our two new board members: Trustee Pat Tiberi and our new undergraduate student trustee, Patrick Arp. We are fortunate to be led by a board that cares about our mission and continually challenges us to think big and bold.

Trustee Tiberi couldn't be here today, but to him and Trustee Arp, I would say that we appreciate your service, and I look forward to working closely with you to build a strong future for Ohio State.

We have had a busy summer since this board last met. Of course, the highlight was a few weeks ago when we celebrated the Class of 2025 during our summer commencement ceremony. We awarded 1,769 degrees and certificates that day to the future leaders of Ohio.

I am proud to say that the total number of living Buckeye alumni is now over 629,000. 629,000. That is an incredible network of leaders all around the world who represent the collective power of an Ohio State education.

As we send one class of graduates out into the world, we are excited to welcome the newest cohort of Buckeyes. As you all know, we are six days from the start of the fall semester, and I'm already feeling the energy and excitement as students and faculty return to campus. In fact, today is the first of the move-in days — the biggest move-in day. Forty-five hundred students moving in on campus just today.

As I've said to our university community, last year was an incredible year for us, in terms of student enrollment, success in the classroom, record research activity, record philanthropy and of course our historic run to the national championship. But I have every reason to believe we are going to raise the bar even higher this year.

I look at the quality of our faculty — which was just on display — the talents of our students, the partnerships we have across the community, the opportunities we have to invest in ourselves, and I am as optimistic as I have ever been about Ohio State's future.

So, we are excited to get the fall semester underway and continue our pursuit of excellence.

And when we say we want to compete with the best in everything we do, we mean it. We're looking forward to hosting the No. 1-ranked team in the country at the Horseshoe next week.

Maybe the most significant announcement we made this summer was the launch of Ohio State's new AI Fluency initiative. This is an effort to make sure every Ohio State student, beginning with the Class of 2029, is fluent in artificial intelligence, or AI, when they graduate.

This isn't limited to computer science and technology students; we will integrate AI into every program of study, whether it's agriculture, health care, the arts or accounting. That's because we recognize that AI is transforming just about every part of our lives. We want our students to be ready.

Our goal isn't to teach students how to use ChatGPT, it's about equipping students with the skills they need to use this technology to do good. And it's about preparing a tech-ready workforce for Ohio.

I just read a story that said 57 million people in this country are interested in learning AI, but higher education is only meeting a tiny fraction of that demand. I am proud that Ohio State is out in front.

Our teams have been working hard to implement the AI Fluency initiative in preparation for the fall semester. All undergraduates will be required to participate in a General Education Launch Seminar and GenAI workshops that will be integrated into the First Year Success series.

A new "Unlocking Generative AI" course will also be available to students in all majors. Students in the course will learn skills to interact with AI creatively and responsibly while exploring AI's impact on society.

I want to thank Provost Bellamkonda, who has worked closely with our academic leadership to successfully move this effort forward. This work is key to our vision to define the future of higher education at Ohio State, and we expect that, ultimately, AI will touch almost every aspect of campus life.

We have made several new appointments, by the way, on our senior leadership team. On August 1, we welcomed Rob Lowden as our new vice president and chief information officer. Rob comes to us from Indiana University, where he served for 20 years, and we are pleased to have attracted someone with his experience and expertise to our university. I know he's going to bring big thinking to our work in the technology space.

We also shared the bittersweet news that Elizabeth Parkinson has decided to retire as senior vice president for marketing and communications, effective next March. Elizabeth has capably led our marketing and communications teams for the past four years, and she has graciously given us a runway to prepare for the transition.

Beginning September 1, Mike Eicher will become senior vice president for external affairs and will assume leadership of marketing, as well as our government relations team, in addition to continuing to lead advancement and alumni relations. Senior Vice President for Administration and Planning Chris Kabourek will also become a senior advisor to me and oversee our communications team. I thank both Mike and Chris for taking on these expanded leadership roles.

We are also welcoming a familiar face back to campus — as you can see on the screen. President Emeritus E. Gordon Gee is returning to Ohio State for a one-year residency to consult on academic initiatives. President Emeritus Gee brings significant experience from his many years of leadership at Ohio State and across higher education, and I know we will benefit from his perspectives.

The last time we were together, I discussed our ongoing work to implement the provisions of Senate Bill 1, most of which took effect on June 27. It has been no small task to bring us into compliance with the legislation under a compressed timeline, and I want to again recognize Provost Bellamkonda, Anne Garcia and Stacy Rastauskas for their leadership.

As planned, we have launched a centralized website that covers the full details related to SB 1 and implementation guidance for our university community. We are also in regular communication with faculty and others across our campus as we prepare for a new academic year with the law in place. I'm pleased with our work and our continued commitment to providing all students, faculty and staff with the support they need to successfully learn, teach and do life-saving research.

I'll conclude my report by saying that we have been hard at work building out the details of our Education for Citizenship 2035 strategic plan. I am grateful to this board and our entire campus community for the inputs and ideas they've shared with me about Ohio State's future. And I am excited to share more details as our campus comes back together this fall.

I have said that I believe the future of higher education will run through America's great land-grant universities. And I think Americans are looking to places like Ohio State to lead the way forward. I've seen that recently as I have had opportunities to participate on *Face the Nation* and join the NCAA Board of Governors. Ohio State is driving the conversation forward, and we are very excited to keep that conversation going. There's more to come, very soon.

Mr. Chairman, that concludes my report. Thank you all.

Mr. Zeiger:

Thank you, President Carter.

An institution as large and prominent as Ohio State presents a wide array of pressing matters for our president to deal with on a daily basis. We've learned that it takes a leader who is also an optimist to recognize the abundance of opportunities these challenges present — opportunities in student academics, research, patient care and outreach throughout our state and beyond.

President Carter, the board continues to be impressed by your ability, with the help of your team, to manage the day-to-day complexities of the university while also developing, and now beginning to implement, a plan to enhance Ohio State's unique strengths and position. The board feels a momentum you are generating — changes that will enhance student preparation and academic excellence, grow our already tremendous research portfolio and set the standard for top-tier patient care. We are confident this momentum will continue and gain speed over the next year, benefiting every student and inspiring all who love Ohio State.

You are a fine ambassador to our community and to every constituency of this university. You connect well with students, faculty, staff, alumni and our partners on the Columbus campus, on our regional campuses, and with the leaders and students and citizens of our state.

It goes without saying that the board is deeply appreciative of the collaborative working relationship we have enjoyed with you. Without question, the alignment we have built and maintained over the past 20 months provides us an outstanding foundation for the university's future.

We are grateful for your leadership and your partnership, and we are excited that the future holds great things for Ohio State under your leadership.

CONSENT AGENDA

Mr. Zeiger:

We will now move to our consent agenda, the final item of business this morning.

I think it's important that the public understand that there are 35 items on this consent agenda list, but all of them have been reviewed by our committees, which have met on a regular basis since our last public meeting.

And I hold in my hand the materials that have resulted from these deliberations. For those who are listening but not seeing, this is about a four-inch thick set of resolutions for today, which reflect literally hours and hours and hours of not only administrative time, but time of this board.

Among these various proposals for consideration today are: measures that will approve the university's operating and capital budgets, which are reviewed in great detail by our board; proposals ratifying the policies and procedures for patient care and patient experience at the Wexner Medical Center; and some cleanup, adjusting some of the membership of our committees and some of the authority of our committees.

In addition to these items that have been thoroughly reviewed by our committees, we also have resolutions in memoriam, and we have two hand-carried resolutions that we will deal with this morning. The two hand carried resolutions — one on the board's assessment of President Carter's performance during fiscal year '25 and the related compensation adjustments, and the other identifying presidential goals for fiscal year '26 that the board has set — these both will be part of the materials that will be presented

for action on the consent agenda. Copies of the hand-carried items are available from our media relations team for the public.

Two of the resolutions we deal with this morning implement the requirements of newly passed Senate Bill 1. One of those complies with the legislative mandate that we limit the voting privileges of our student trustees. The board has been and continues to be clear that we believe our student trustees add unique value and are important voices, and frankly, we're disappointed that they will not be voting members going forward. While the university will honor this legislative change, our trustees continue to believe that we have outstanding student trustees, both currently and in the past, and will remain most appreciative of their views as we have our committee meetings in which they will participate fully.

The second resolution this morning implements other provisions of Senate Bill 1. Those documents implementing those provisions reflect just a tremendous amount of work, commitment and focus by many across this university, since as President Carter mentioned, that law went into effect on June 27. On behalf of the trustees, I want to express appreciation to everyone who worked in this major undertaking, particularly since the approach was one of collaboration between diverse groups on this campus — students, faculty and administration all were in participation.

There are significant changes in those provisions that we implement today, but we need to be very, very clear on one fundamental point: These changes have not and will not alter the mission of the university. Ohio State is and will steadfastly remain committed to academic freedom, open inquiry, intellectual diversity and rigorous academic conversation and debate — just as it has been since its founding.

RESOLUTIONS IN MEMORIAM

Resolution No. 2026-15

CAROL A. BAKER

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death of Carol A. Baker, Professor Emeritus in the College of Nursing, on April 24, 2025. She was 88 years old.

Professor Baker received her BSN (1958) and MSN (1972) from The Ohio State University, and she earned her PhD from University of Illinois. Professor Baker became a Professor and Lecturer in 1972 until she retired in 1995 with emeritus status. She was a trailblazer as one of the first nursing faculty to hold a joint appointment at the College of Nursing and the Arthur G. James Cancer Hospital. She loved teaching students and staff nurses how to implement research into practice.

Professor Baker was a very active alumna of The Ohio State University and the College of Nursing, having served as President of the College of Nursing's Alumni Association Board for many years and dedicating time to raise money for student scholarships. She was part of a group of nursing alumni leaders — many of whom had been presidents of the alumni society — who saw a need for nursing student scholarships. They set an ambitious goal of raising \$1 million for scholarships by the College of Nursing's centennial year in 2014. They achieved that goal by organizing letter writing campaigns to nursing alumni, several golf outings, a chocolate fantasy dessert event and a wine tasting.

After retirement, Professor Baker learned how to play golf and discovered a hidden passion for downhill skiing, joining the Columbus and Cleveland Ski Clubs. She enjoyed both

domestic and foreign travel with her husband and close friends. She became an avid gardener and always said to herself, "gardening is taking care of things. That's what nurses do."

Food carried special significance in Carol's life, both during her career and in her volunteerism. She focused on teaching her patients the importance of nutrition and their overall health. She loved caring for and providing service to others, which she continued after retirement as she coordinated and served "Monday Meals" to Friends of the Homeless, a support mission of First Community Church. She credited her organizational skills — attributes learned from teaching — for being able to feed so many people every Monday.

When Professor Baker was asked what she thought her greatest legacy will be, she answered that it was her love for nursing and her enthusiasm for the profession.

On behalf of the entire Ohio State community, the Board of Trustees expresses to the family and loved ones of Professor Carol A. Baker its deepest sympathy and compassion for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to her family as an expression of the board's heartfelt sympathy and appreciation.

ROBERT A. BUERKI

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow upon the passing on June 7, 2025, of Robert A. Buerki, PhD, Professor Emeritus in the College of Pharmacy.

Professor Buerki received his BS in pharmacy from the St. Louis College of Pharmacy in 1963 and his MS in social studies of pharmacy in 1967 from the University of Wisconsin. He received his PhD in adult education and educational development, with a minor in history of science, in 1972 from The Ohio State University and his MA in public history in 1988 from Wright State University. A member of the faculty of The Ohio State University College of Pharmacy Division of Pharmacy Practice and Science since 1965, Dr. Buerki retired in June 2011. As Professor Emeritus, he continued to teach the history of pharmacy and professional ethics on a part-time basis. He served as Secretary-Treasurer, Chairman-Elect and Chairman of the American Association of Colleges of Pharmacy Section of Continuing Professional Education from 1970-1979; Secretary-Treasurer, Vice President and President of Rho Chi Pharmacy Honor Society from 1967-1978; and as Historian for both of these organizations. He also served as President-Elect, President and Secretary of the American Institute of the History of Pharmacy from 1981-1985.

During his 46-year career, Dr. Buerki authored over 80 articles, book chapters and books on various aspects of professional ethics and the history of pharmaceutical education. He received many awards, including the National Rho Chi Society Distinguished Service Award in 1972 and 1978, the Certificate of Commendation from the Academy of the History of Pharmacy in 1987 and the American Association of Colleges of Pharmacy Section of Continuing Professional Education's William L. Blockstein Award for sustained contributions to continuing pharmaceutical education in 2000. Dr. Buerki was inducted into the International Academy of the History of Pharmacy (AIHP) in 2003, received the AIHP's Edward Kremers Award for distinguished pharmaco-historical writing by an American in 2004 and received the Edmund D. Pellegrino Medal for his contributions to health care ethics in 2006.

On behalf of the university community, the Board of Trustees expresses to the family and loved ones of Professor Emeritus Robert Buerki its deepest sympathy for their loss. It is

directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to his family as an expression of the Board's heartfelt appreciation.

KONRAD DABROWSKI

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death of Konrad Dabrowski, Professor in the College of Food, Agricultural, and Environmental Sciences School of Environment and Natural Resources, on June 26, 2025.

Professor Dabrowski joined the faculty in 1989 and served for 36 years with distinction until 2025. Dr. Dabrowski earned his MS and PhD from Agriculture University, Olsztyn, Poland, and his DSc from Agricultural University, Szczecin, Poland. He focused his exemplary scholarly career on aquaculture and fish physiology. Recognized as a foundational figure in the field of aquaculture, Dr. Dabrowski made an indelible mark, becoming an internationally recognized expert in this field. His work sought to advance and broaden the understanding of linkages between nutrition and genetics, primarily in freshwater fish.

Professor Dabrowski has made a lasting scholarly impact on improvements in aquaculture and fish production in controlled environments. Dr. Dabrowski led international collaborations in Southeast Asia, Africa, the Middle East and Europe to advance the understanding of the biological value of fish diet formulations and reproduction, the role of nutrition of early life stages of aquaculture species, and their growth and survival.

Dr. Dabrowski held two patents — one on dietary formulations and one on methods of producing chimeric fish. He served the field of aquaculture and fish physiology generously as an active member of regional, national and international scientific and professional organizations and served on the editorial boards of more than 10 scientific journals. He was the author of more than 390 peer-reviewed publications, and his research shaped global thinking in fisheries science. Over 21,000 citations were credited to his work.

He expanded learning and development for both undergraduate and graduate students through exemplary research, guest lectures and teaching. He mentored generations of undergraduate and graduate students, Fulbright Scholars and visiting scholars from around the world. As an internationally recognized expert, he traveled extensively to present his research, teach, learn new methods and build scientific collaborations.

He facilitated academic and professional growth among students with enduring influence to study-controlled reproduction, early life history, maturation, sex reversal, and gynogenesis of several fish species. He encouraged student engagement in research and outreach communications, including presenting their work at Aquaculture America, and many of his mentees have gone on to careers in academia and government agencies and carry this work forward.

On behalf of the university community, the Board of Trustees expresses to the family and loved ones of Professor Konrad Dabrowski its deepest sympathy for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to his family as an expression of the board's heartfelt sympathy and appreciation.

MELVIN N. GREENBALL

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death on March 27, 2025, of Melvin N. Greenball, Professor Emeritus in the Department of Accounting Management Information Systems in Fisher College of Business. He was 87 years old.

Dr. Greenball received his BS with distinction in accounting and economics from Indiana University in 1958. He went on to earn an MBA with distinction in 1961 from the University of Michigan and his PhD from the University of Chicago in the fields of mathematical methods and computers, economics and accounting in 1966. He passed his CPA exam in Indiana in 1958 and in Ohio in 1987.

His first role in accounting was as an Auditor at Arthur Anderson from 1961-1962. After graduating with his PhD from the University of Chicago, he served as Assistant Professor of business administration at the University of California, Berkeley from 1966-1968.

In 1968, he joined The Ohio State University and became a Professor at the then-College of Administrative Science until 1982. With a brief break from 1982-1986, he would return to the school, now called the College of Business, in 1987. This began his long, storied career as Professor of Accounting at Ohio State that would last until retirement.

Dr. Greenball taught a wide variety of classes, from undergraduate studies in personal individual taxation to macroeconomics. His course offerings included accounting theory and theory of finance seminars and workshops. One of Professor Greenball's unique innovations was his scientific and scholarly approach to teaching classical accounting theories of valuation and income measurement. He designed a set of unifying examples, which helped students develop intuition about the costs and benefits of the various theories. He was always happy to preside over dissertations of PhD candidates seeking to learn from him. Dedicated to his field, Professor Greenball could be found sharing wisdom on radio and television programs as well as consulting.

While he worked hard to be an excellent teacher, he never stopped learning or engaging in vigorous research. This is evidenced by his published texts and articles featured in publications such as the Journal of Accounting Research, Empirical Research in Accounting and others.

When Dr. Greenball was not teaching or writing, he was reviewing the work of others in his field. A theorist at heart, Professor Greenball examined and eloquently spoke about his proposal of a "flat tax system" based on his research on the disparities of tax rates based on income and marital status. This innovative thinking, combined with his love for the field, earned him numerous accolades throughout his career.

Perhaps the greatest compliment is that Dr. Greenball was known as a generous and conscientious instructor who managed to impart his passion for the science of accounting to all of his students. He was granted faculty emeritus status effective April 1, 1997.

On behalf of the entire university community, the Board of Trustees expresses to the family and loved ones of Professor Melvin N. Greenball its deepest sympathy and compassion for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to his family as an expression of the board's heartfelt sympathy and appreciation.

JOHN F. GRIMES

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death on April 16, 2025, of John F. Grimes, Associate Professor Emeritus

with The Ohio State University in the College of Food, Agricultural, and Environmental Sciences (CFAES).

Mr. Grimes began working for Ohio State University Extension in Brown County in March 1986 as an Extension Associate focusing on agriculture. He became the county Extension Agent, focusing on agriculture, in Adams and Brown counties as of January 1990. From January 1994 to mid-February 1998, Mr. Grimes served as an agriculture Extension Agent in Brown County. He was promoted to Assistant Professor during this time. He served as the agriculture and natural resources Extension Educator in Highland County from February 1998 through December 2010. Mr. Grimes then served as the Extension State Beef Coordinator and an Associate Professor from 2011 until his retirement on May 1, 2019.

Mr. Grimes was most recently recognized in 2025 as an inductee into the Animal Science Hall of Fame by the CFAES Department of Animal Sciences at Ohio State for his many years of leadership, research and service to Ohio's beef industry. He received the Industry Excellence Award from the Ohio Cattlemen's Association in 2022 and the Ohio Angus Association's Distinguished Service Award in 2015.

Mr. Grimes was known as an accomplished cattleman, as well as a mentor and a servant leader through his work in Extension and his contributions to many industry organizations. He held several leadership roles in the Ohio Cattlemen's Association, Ohio Beef Council, Ohio Angus Association, National Cattlemen's Beef Association, American Angus Association (board of directors member) and the Beef Improvement Federation. He also chaired the boards of Angus Genetics Inc. and Certified Angus Beef.

Mr. Grimes authored numerous educational publications and videos, and presented programs for beef producers locally and nationally, as well as his colleagues. He was well known for combining academic research and practical knowledge. He provided leadership on the Ohio State University Extension beef team, which provided research, programming and materials for the industry.

His research on early weaning of beef calves was recognized nationally and helped to inform producers nationwide with results of his study presented at meetings of the National Association of County Agricultural Agents, with cattlemen's organizations and in the Journal of Extension. He also conducted research on agronomic crop production, wrote beef resource and livestock judging educational materials for youth throughout the state, and presented educational clinics that addressed a variety of beef production and showmanship topics in multiple Ohio counties and several states.

Mr. Grimes earned his Bachelor's degree in animal science in 1983, and his Master's degree in animal science in 1988, both at The Ohio State University. After his college graduation, before joining Extension, Mr. Grimes returned home and founded Maplecrest Farms, a purebred Angus seedstock operation still in business today.

On behalf of the university community, the Board of Trustees expresses to the family and loved ones of John F. Grimes its deepest sympathy for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees, and that a copy be tendered to his family as an expression of the board's heartfelt sympathy and appreciation.

LOIS ANN HUNGATE

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death on June 12, 2025, of Lois Ann Hungate, Professor Emeritus in the

Department of Agricultural, Environmental, and Development Economics in the College of Food, Agricultural, and Environmental Sciences. She was 95.

Professor Hungate grew up on a vegetable farm and then received her Bachelor's degree, Master's degree and PhD from The Ohio State University. For 31 years, she taught at Ohio State, retiring as Associate Professor of Agricultural Economics. Lois was a member of the American Marketing Association and the American Agricultural Economics Association. She also served as a member of Ohio State's American Agricultural Economics Club for several years and was a 10-year 4-H member.

Professor Hungate had a 100% extension appointment, working closely with food retail management teams during a time when many small grocers needed her expertise. The food retailers she worked with were able to improve the profitability of their stores and to grow their stores because of her extension education. She hosted a weekly radio show at Ohio State on food economics and was a co-author of a book named Food and Economics. She researched and wrote many Extension publications on key topics such as food marketing, consumer demand for different types of retail, and food price inflation.

Members of her department remember Professor Hungate as a wonderful colleague who was always ready to offer a young faculty member advice. She was the only female faculty member for many years and may have been the first woman faculty member in the department. She was a lovely soul who was fervent in her passion for Extension, endowing a graduate fellowship to provide ongoing support for graduate students in extension education.

Professor Hungate took a three-month sabbatical with Ohio State at the University of Hawaii (Oahu). That passion for travel and discovery continued through her life, and she traveled all over the world with the Ohio State Alumni Association. In retirement, she and her husband traveled extensively — including frequent bookings for transit on commercial ships — and shared tales and wisdom about their travels with others.

On behalf of the entire university community, the Board of Trustees expresses to the family and loved ones of Professor Lois Ann Hungate its deepest sympathy and compassion for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to her family as an expression of the board's heartfelt sympathy and appreciation.

ANN LILLY

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death on June 4, 2025, of Ann Lilly, Professor Emeritus in the Department of Dance in the College of Arts and Sciences. She was 95.

After graduating from West Virginia University, Ann accepted a teaching position at Marion-Franklin High School in Columbus. She rented a house on Beck Street in the early days of the German Village restoration movement, unknowingly landing across from a vacant lot that, within days, would become the site of a carnival. She spent the first months of her Columbus life urging her family not to visit, for fear they would take her back to West Virginia if they saw the camp of carnival employees she was now calling neighbors.

Instead, Ann met the moment — and made a life.

Encouraged to apply for a position at The Ohio State University, her experience as a swimming coach was an unexpected match for the needs of the synchronized swimming team. That was her first toe-dip into becoming a Buckeye, leading to decades of meaningful

contributions, legendary tailgates and a Master of Arts degree in physical education in 1964. Her organizational strengths and calm authority led to her being recruited as stage manager for the very first dance performance in Mershon Auditorium in 1960. Ann continued providing occasional support until the Dance Department was formalized in 1968, when she was appointed Assistant to the founding Chair, Helen Alkire.

For nearly two decades, Ann helped orchestrate the rise of what became one of the premier academic dance programs in the country — not from the spotlight, but from the wings, where she made everything run smoother and everyone feel steadier. She later served as Assistant Dean of Curriculum and Advising in the former College of the Arts, helping students navigate their way through Ohio State. Ann had a way of gently pointing out true north that felt like more like remembering than being told.

Two former deans began their tributes with the same sentence: “Most of all, I loved her laugh.” That may say more than any title — or tribute — ever could.

While Ann’s professional world flourished, she also became a steward of German Village’s restoration and preservation movement. She joined the German Village Commission, eventually serving as its long-time Chair. Ann’s leadership extended beyond policy into placemaking. She was instrumental in creating the Grace Highfield Garden in Schiller Park and quietly funded the flower beds at the park entrance and the plantings around the Umbrella Girl fountain. Ann helped establish the nonprofit status of Friends of Schiller Park and led the organization through important milestones as its President. Her leadership style was quiet but unmistakable. The German Village Society honored her with the Frank Fetch Award, the Caretakers of a Legacy President’s Award, and, in 2024, recognized her as a German Village Legend. The awards that seemed to tickle her most were the record-breaking run of “Best in Show” from the Garden Club for her stunning window boxes.

On behalf of the entire university community, the Board of Trustees expresses to the family and loved ones of Professor Ann Lilly its deepest sympathy and compassion for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to her family and loved ones as an expression of the board’s heartfelt sympathy and appreciation.

STEVEN M. STILL

Synopsis: The Board of Trustees of The Ohio State University expresses its sorrow regarding the death, on July 10, 2025, of Steven M. Still, Professor Emeritus in the Department of Horticulture and Crop Science in the College of Food, Agricultural, and Environmental Sciences. He was 80.

Professor Still received his BS in soils, an MS in agriculture education and a PhD in horticulture from the University of Illinois. As a Teaching and Research Assistant at University of Illinois, he noted the need for a better textbook, leading him to write the Manual of Herbaceous Ornamental Plants, which was adopted by over 100 other colleges and universities. He joined the faculty at Kansas State in 1974, and his research into utilizing hardwood bark in potting media transformed greenhouse practices worldwide. He joined the faculty at The Ohio State University in 1979, and he remained there throughout the rest of his 30-year professorial career.

In 1983, Dr. Still organized the first symposium dedicated to growing perennials, sponsored by Ohio State. Following this initial meeting, Steven met with growers and, out of that meeting, the Perennial Plant Association (PPA) was formed. He remained its Executive Director until his retirement in 2017.

One year after joining the faculty at Ohio State, he was appointed as the inaugural Director of Chadwick Arboretum, developing the land into a premier facility to preserve trees, creating a living classroom for students in horticulture and other related areas, and a garden where all could relax and appreciate nature and plants. From this humble beginning, Chadwick Arboretum and Learning Gardens is now 60 acres of trees, shrubs, perennials and annuals. It also includes a 5,000 square foot garden dedicated to Dr. Still.

The Steven M. Still Perennial Garden was originally designed by renowned British designer Adrian Bloom and was dedicated in 2007. In 2024, the garden was completely redesigned and reinstalled in the original style but now includes updated cultivars, pathways and a patio for relaxation. Steven was able to attend the rededication in August 2024 with his family.

Dr. Still served on many boards including: President of the International Plant Propagator's Society and The American Horticultural Society, in addition to his work leading the PPA. He was an award-winning professor and received the Medal of Honor from the Garden Club of America, the LC Chadwick Education Award from the American Nursery and Landscape Association, and the Liberty Hyde Bailey Award from the American Horticultural Society. Trees have been planted in his honor in gardens and arboreta across the country.

Steven was a consummate gentleman, leading with actions, generosity and love for people, education and plants. He embodied all that is vital about horticulture and horticulture education — not just the plant itself, not just the student, but the nurturing of becoming, knowledge-sharing and community building. He inspired students, colleagues and gardeners to see beyond immediate tasks, to recognize the joy in discovery and the responsibility in stewardship. His passion for students, plants and education extended beyond the formal classroom with many memorable lessons taking place at the best public gardens, private landscapes leading production facilities around the state and across the country. His teaching and writing continue to guide professionals and hobbyists. The gardens he helped build survive as dynamic classrooms and tranquil spaces for thousands. His students now scatter worldwide, teaching and designing with the confidence and curiosity he instilled in them.

On behalf of the entire university community, the Board of Trustees expresses to the family and loved ones of Professor Steven M. Still its deepest sympathy for their loss. It is directed that this resolution be inscribed upon the minutes of the Board of Trustees and that a copy be tendered to his family as an expression of the board's heartfelt sympathy and appreciation.

PRESIDENTIAL REVIEW AND COMPENSATION

Resolution No. 2026-16

Synopsis: Approval of changes to the president's base compensation and the issuance of a performance award to the president, is proposed.

WHEREAS it is best practice across higher education for a governing board to conduct an annual performance review of the university president; and

WHEREAS the Procedure for Setting and Reviewing Compensation for University Executives authorizes the chair of the Talent, Compensation and Governance Committee to review and approve the total compensation of the president, subject to ratification by the committee and the Board of Trustees; and

WHEREAS under the terms of President Carter's letter of offer, the president shall be entitled to annual increases in his base salary as determined by the Board of Trustees; and

WHEREAS under the terms of President Carter's letter of offer, the president shall be eligible for an annual performance award for achieving mutually agreed-upon performance measures; and

WHEREAS pursuant to its charter, the Talent, Compensation and Governance Committee has reviewed the performance of the president for Fiscal Year 2025 and believes that President Carter has demonstrated strong leadership and progress with regard to the performance goals set forth by the president and the Board of Trustees last year; and

WHEREAS the Talent, Compensation and Governance Committee has reviewed and recommends for approval the compensation changes set forth below:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves a base salary increase for the president of \$51,233, which amounts to 4.5% of his base salary; and

BE IT FURTHER RESOLVED, That the Board of Trustees hereby approves a performance award for the president of \$398,475 for Fiscal Year 2025.

(See Appendix XII for background information, page 566)

APPROVAL OF FISCAL YEAR 2026 PRESIDENTIAL GOALS

Resolution No. 2026-17

Synopsis: Approval of the attached presidential goals for Fiscal Year 2026, is proposed.

WHEREAS under the terms of President Carter's letter of offer, each fiscal year, the president and the Board of Trustees will set forth the president's goals; and

WHEREAS in order to establish these goals, the president is submitting the attached for review and approval by the Board of Trustees; and

WHEREAS once approved by the Board of Trustees, the attached goals will serve as the basis to evaluate the president during his review period:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the attached goals, which focus on 1) Academic Excellence, 2) Enterprise Artificial Intelligence, 3) Transformative Research and Innovation, 4) Operations, 5) Healthcare and 6) Talent and Culture.

(See Appendix XIII for background information, page 573)

APPROVAL TO ESTABLISH A MASTER OF SYSTEMS ENGINEERING

Resolution No. 2026-18

IN THE COLLEGE OF ENGINEERING

Synopsis: Approval to establish a Master of Systems Engineering degree program in the College of Engineering is proposed.

WHEREAS the proposed Master of Systems Engineering is a professional program aimed at practicing engineers seeking to increase their systems engineering modeling, planning, and decision-making skills; and

WHEREAS the proposed program would be technically based and education on concepts, principles, tools, and methods to model and manage systems engineering projects and programs across engineering settings and disciplines; and

WHEREAS the target audience for the program is engineers in business, industry, healthcare, and government who have worked in the field and are responsible for modeling, designing and deploying complex systems and may be employed in the public or private sectors; and

WHEREAS the curriculum is a minimum of 30 semester credit hours, will be delivered completely online, has well-developed learning outcomes, includes 15 required credit hours, 12 credit hours of electives and a three-credit hour capstone course, with content offered by faculty in the College of Engineering and the John Glenn College of Public Affairs; and

WHEREAS the proposal was reviewed and approved by the Council on Academic Affairs at its meeting on March 19, 2025; and

WHEREAS the University Senate approved this proposal on April 17, 2025:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the proposal to establish a Master of Systems Engineering degree program in the College of Engineering.

(See Appendix XIV for background information, page 574)

FACULTY PERSONNEL ACTIONS

Resolution No. 2026-19

BE IT RESOLVED, That the Board of Trustees hereby approves the faculty personnel actions as recorded in the personnel budget records of the university since the May 21, 2025, meeting of the board, including the following appointments, faculty awards, appointments/reappointments of chairpersons, faculty professional leaves and emeritus titles:

Appointments

Name: ROBERT BAKER
Title: Professor (The Phyllis and Richard Leet Endowed Chair in Chemistry)
College: Arts and Sciences
Term: August 15, 2025, through August 14, 2030

Name: GLEN BARBER
Title: Professor (The Klotz Chair in Cancer Research #2)
College: Medicine
Term: May 1, 2025, through June 30, 2029

Name: AMANDA BERRIAN
Title: Associate Professor (Dr. Tom Mack Endowed Chair in Global One Health)
College: College of Veterinary Medicine
Term: July 1, 2025, through June 30, 2030

Name: ARAVIND CHANDRASEKARAN
Title: Interim Dean (The John W. Berry, Sr. Chair in Business)
College: Fisher College of Business
Term: June 1, 2025, through June 30, 2027, or until a permanent dean is appointed

Name: WEI-LUN (HARRY) CHAO
Title: Associate Professor (College of Engineering Innovation Scholar)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: DENNIS HIRSCH
Title: Professor (The Kara J. Trott Endowed Professorship in Law in honor of Prof. Lawrence Herman)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: YUHENG HU
Title: Associate Professor (Fisher College of Business Distinguished Associate Professor)
College: Fisher College of Business
Term: August 15, 2025, through August 14, 2028

Name: JEN-YI HUANG*
Title: Professor (The Dale A. Seiberling Professorship in Food Engineering)
College: Food, Agricultural, and Environmental Sciences
Term: January 1, 2026, through December 31, 2031

Name: KIM JORDAN
Title: Professor-Clinical (The Joseph S. Platt-Porter, Wright, Morris, & Arthur Professorship)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: MARGARET KWOKA
Title: Professor (The Frank R. Strong Chair in Law)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: GABRIEL LADE*
Title: Professor (The C. William Swank Chair in Rural and Urban Policy)
College: Food, Agricultural, and Environmental Sciences
Term: August 15, 2025, through August 14, 2030

Name: KRISTEN LINDQUIST*
Title: Professor (Robert K. and Dale J. Weary Chair in Social Psychology)
College: Arts and Sciences
Term: August 15, 2025, through June 30, 2030

Name: GREGORY NIXON

Title: Professor-Clinical (The Vision Service Plan (VSP) Chair for the Advancement of Professional Practice)
College: Optometry
Term: June 1, 2025, through June 30, 2026

Name: MASAKI OSHIKAWA*
Title: Professor (Ohio Eminent Scholar in Condensed Matter Theory)
College: Arts and Sciences
Term: January 1, 2026, through June 30, 2030

Name: MARC SPINDELMAN
Title: Professor (The Heck-Faust Memorial Chair in Constitutional Law)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: JOHN STAFFORD*
Title: Professor (The Charles Austin Doan Chair of Medicine Funded by the Charles Austin Doan Fund)
College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: TODD STARKER
Title: Professor-Clinical (Charles W. Ebersold and Florence Whitcomb Ebersold Professorship)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: YU SU
Title: Associate Professor (College of Engineering Innovation Scholar)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: SHIGEO TAMIYA
Title: Associate Professor (The Dr. Frederick H. Davidorf Honorary Professorship Fund)
College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: WEN TANG
Title: Associate Professor (Burghes Professorship in the College of Medicine)
College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: JIN WANG
Title: Professor (Distinguished Professor of Engineering)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: JENNIFER WOYACH
Title: Professor (The Bertha Bouroncle M.D. and Andrew Pereny Chair of Medicine)
College: Medicine
Term: July 1, 2025, through June 30, 2029

Reappointments

Name: GEORGIOS ANAGNOSTOU

Title: Professor (The Miltiadis Marinakis Endowed Professorship of Modern Greek Language and Culture)
College: Arts and Sciences
Term: July 1, 2025, through June 30, 2030

Name: MICHAEL BEVIS
Title: Professor (Ohio Eminent Scholar in Geodynamics)
College: Arts and Sciences
Term: June 1, 2022, through May 31, 2027

Name: STEVEN CLINTON
Title: Professor (The Robert A. and Martha O. Schoenlaub Cancer Research Chair
College: Medicine
Term: July 1, 2025, through June 30, 2029

Name: SARAH COLE
Title: Professor (The Michael E. Mortiz Chair in Alternative Dispute Resolution)
College: Law
Term: June 1, 2025, through May 31, 2030

Name: VADIM FEDOROV
Title: Professor (Corrine Frick Research Chair in Heart Failure and Arrhythmia)
College: Medicine
Term: July 1, 2025, through June 30, 2029

Name: DATTA GAITONDE
Title: Professor (The John Glenn Endowed Chair for Technology and Space Exploration and Ohio Research Scholar in Advanced Propulsion System Integration)
College: Engineering
Term: July 1, 2025, through June 30, 2030

Name: B. SCOTT GAUDI
Title: Professor (The Thomas Jefferson Chair for Discovery and Space Exploration)
College: Arts and Sciences
Term: September 1, 2024, through August 31, 2029

Name: ANDREW GLASSMAN
Title: Professor and Chair (The Frank J. Kloenne Chair in Orthopedic Surgery)
College: Medicine
Term: July 1, 2025, through June 30, 2026

Name: SUSAN OLESIK
Title: Divisional Dean for Natural and Mathematical Sciences
College: Arts and Sciences
Term: July 1, 2025, through June 30, 2027

Name: LISA PINKERTON
Title: Associate Professor-Clinical (The Marie Clay Endowed Chair in Reading Recovery and Early Literacy)
College: Education and Human Ecology
Term: August 15, 2025, through August 14, 2030

Name: FRANK SCHWARTZ
Title: Professor (Ohio Eminent Scholar in Hydrogeology)
College: Arts and Sciences

Term: June 1, 2022, through May 31, 2027

Name: JAMI SHAH

Title: Professor (Honda Designated Professorship in Engineering Design for Manufacturing)

College: Engineering

Term: July 1, 2025, through June 30, 2028

Name: LU ZHANG

Title: Professor (John W. Galbreath Chair in Real Estate)

College: Fisher College of Business

Term: October 1, 2025, through August 14, 2030

*New Hire

University Faculty Awards

Name: BRUCE ACKLEY

Title: Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)

College: Food, Agricultural, and Environmental Sciences

Name: LAURA BOUCHER

Title: Associate Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Medicine

Name: KELLEN CALINGER-YOAK

Title: Assistant Professor-Clinical (Provost's Award for Distinguished Teaching by a Lecturer)

College: Arts and Sciences

Name: MEOW GOH

Title: Associate Professor (Alumni Award for Distinguished Teaching)

College: Arts and Sciences

Name: PETER HAHN

Title: Professor (Distinguished University Professor)

College: Arts and Sciences

Name: L. CAMILLE HÉBERT

Title: Professor (President and Provost's Award for Distinguished Faculty Service)

College: Law

Name: ANITA HOPPER

Title: Professor (Distinguished University Professor)

College: Arts and Sciences

Name: JEFFREY JOHNSTON

Title: Senior Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)

College: Pharmacy

Name: SARA GOMBASH LAMPE

Title: Assistant Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Medicine

Name: MITCHELL LERNER

Title: Professor (President and Provost's Award for Distinguished Faculty Service)

College: Arts and Sciences, Newark

Name: ANDY MAY

Title: Associate Professor (Alumni Award for Distinguished Teaching)

College: Engineering

Name: LISA NGUYEN

Title: Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)

College: Arts and Sciences

Name: TANYA NOCERA

Title: Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Engineering

Name: NIKOLE PATSON

Title: Professor (Alumni Award for Distinguished Teaching)

College: Arts and Sciences, Marion

Name: KRISTIN PAULUS

Title: Senior Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)

College: Education and Human Ecology

Name: PHILLIP POPOVICH

Title: Professor and Chair (Distinguished University Professor)

College: Medicine

Name: COLLEEN SETTINERI

Title: Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Law

Name: RUTH SMITH

Title: Assistant Professor-Clinical (Provost's Award for Distinguished Teaching by a Lecturer)

College: Arts and Sciences

Name: KRISTIN STOVER

Title: Assistant Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Medicine

Name: SARA WATSON

Title: Associate Professor (President and Provost's Award for Distinguished Faculty Service)

College: Arts and Sciences

Name: LINDY WEAVER

Title: Associate Professor-Clinical (Alumni Award for Distinguished Teaching)

College: Medicine

Name: SHIRLEY YU

Title: Associate Professor (Alumni Award for Distinguished Teaching)

College: Education and Human Ecology

(See Appendix XV for background information, page 589)

**ADOPTION OF REQUIRED POLICIES, RULES AND PLANS
PURSUANT TO OHIO SENATE BILL 1, THE ADVANCE OHIO HIGHER EDUCATION
ACT**

Resolution No. 2026-20

Synopsis: Adoption of policies and plans for which Board of Trustees approval is required under Ohio Senate Bill 1, the Advance Ohio Higher Education Act.

WHEREAS Ohio Senate Bill 1 (SB1), the Advance Higher Education Act, took effect on June 27, 2025; and

WHEREAS the university created an implementation committee to identify all applicable requirements in SB1, consult with key organizational constituencies about each such measure (including faculty, staff, and student representatives), and develop appropriate action steps to meet these requirements; and

WHEREAS SB1 requires the Board of Trustees to adopt a series of policies in accordance with statutory requirements, including those concerning diversity, equity, and inclusion (DEI), intellectual diversity, controversial beliefs, faculty annual reviews, post-tenure review, tenure, and retrenchment, and to submit those policies to the chancellor of higher education for review; and

WHEREAS SB1 further requires the Board of Trustees to identify a plan for developing and offering a course or courses on civic literacy, which shall be required for all students beginning with those graduating in the spring semester of the 2029-2030 academic year, and to submit that plan to the chancellor of higher education for approval; and

WHEREAS, to fulfill these requirements, the following policies, which are attached hereto, were revised in consultation with workgroups consisting of faculty, staff, and students from across the university:

- DEI, Intellectual Diversity, and Controversial Beliefs under the Advance Ohio Higher Education Act (as required by R.C. 3345.0217(B));
- Faculty Annual Review, Post-Tenure Review, and Reappointment (as required by R.C. 3345.452(B) and R.C. 3345.453(B)); and
- Faculty Appointments, Tenure, and Retrenchment (as required by R.C. 3345.454(B)); and

WHEREAS SB1 likewise required changes to Faculty Rules 3335-5-04, 3335-5-04.1, and 3335-5-04.4 to address new complaint processes and post-tenure review as set forth in these policies, and these changes were similarly developed in consultation with key university constituents, including Senate leadership, which are attached hereto; and

WHEREAS the university has likewise developed the American Civic Literacy Plan and Request for Approval for providing civic literacy courses pursuant to R.C. 3345.382(B), which is attached hereto; and

WHEREAS the Board supports each policy, rule, and plan developed to meet these requirements, and has an obligation to adopt these provisions directly and submit them to the chancellor of higher education:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby adopts the DEI, Intellectual Diversity, and Controversial Beliefs under the Advance Ohio Higher Education Act policy; the Faculty Annual Review, Post-Tenure Review, and Reappointment policy; the Faculty Appointments, Tenure, and Retrenchment policy; the revisions to Faculty Rules 3335-5-04, 3335-5-04.1, and 3335-5-04.5; and the American Civic Literacy Plan and Request for Approval, and directs the President to take all required steps to submit these policies, rules, and plan to the chancellor of higher education as required by law.

(See Appendix XVI for background information, page 596)

APPROVAL OF FISCAL YEAR 2026 CAPITAL INVESTMENT PLAN

Resolution No. 2026-21

Synopsis: Authorization and acceptance of the Capital Investment Plan for the fiscal year ending June 30, 2026, as proposed.

WHEREAS the university has presented the recommended capital expenditures for the fiscal year ending June 30, 2026; and

WHEREAS the recommended capital expenditures are the result of the university's comprehensive annual capital planning process; and

WHEREAS only those projects outlined in these recommendations will be approved for funding;

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that Capital Investment Plan for the fiscal year ending June 30, 2026, as described in the accompanying documents, be approved; and

BE IT FURTHER RESOLVED, That any request for authorization to proceed with any project contained in these recommendations must be submitted individually by the university for approval by the Board of Trustees, as provided for by Board policy.

(See Appendix XVII for background information, page 652)

APPROVAL TO ENTER INTO/INCREASE PROFESSIONAL SERVICES AND ENTER INTO/INCREASE CONSTRUCTION CONTRACTS

Resolution No. 2026-22

APPROVAL TO ENTER INTO PROFESSIONAL SERVICES CONTRACTS

BLANKENSHIP HALL UPGRADES

BRAIN AND SPINE HOSPITAL – LOWER-LEVEL RENOVATION

DOAN HALL – PET/CT REPLACEMENT

OUTPATIENT CARE EAST – CLINIC RENOVATIONS & RELOCATIONS

APPROVAL TO ENTER INTO/INCREASE PROFESSIONAL SERVICES AND CONSTRUCTION CONTRACTS

EAST HOSPITAL – CHILLER & COOLING TOWER REPLACEMENT

HERRICK DRIVE REBUILD

1922 CLUB

POLARIS MEP UPDATES
600 ACKERMAN – SPECIALTY PHARMACY EXPANSION

APPROVAL TO INCREASE CONSTRUCTION CONTRACTS
TUNNEL REHABILITATION PHASE 1

Synopsis: Authorization to enter into/increase professional services and construction contracts, as detailed in the attached materials, is proposed.

WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts for the following projects; and

	Prof. Serv. Approval Requested	Total Requested	
Blankenship Hall Upgrades	\$1.2M	\$1.2M	University funds
Brain and Spine Hospital – Lower-Level Renovation	\$0.3M	\$0.3M	Auxiliary funds
Doan Hall – PET/CT Replacement	\$0.4M	\$0.4M	Auxiliary funds
Outpatient Care East – Clinic Renovations & Relocations	\$1.1M	\$1.1M	Auxiliary funds

WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts and enter into/increase construction contracts for the following projects; and

	Prof. Serv. Approval Requested	Construction Approval Requested	Total Requested	
East Hospital – Chiller & Cooling Tower Replacement	\$1.2M	\$5.8M	\$7.0M	Auxiliary funds
Herrick Drive Rebuild	\$0.6M	\$3.4M	\$4.0M	University debt
1922 Club	\$0.2M	\$14.3M	\$14.5M	University debt Auxiliary funds
Polaris MEP Updates	\$0.8M	\$6.6M	\$7.4M	Auxiliary funds

600 Ackerman – Specialty Pharmacy Expansion	\$1.2M	\$14.0M	\$15.2M	Auxiliary funds
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WHEREAS in accordance with the attached materials, the University desires to increase construction contracts for the following projects; and

	Construction Approval Requested	Total Requested	
Tunnel Rehabilitation Phase 1	\$5.5M	\$5.5M	University debt University funds State funds Partner funds

WHEREAS the Master Planning and Facilities Committee has reviewed the projects listed above for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance Committee has reviewed the projects listed above for alignment with the Capital Investment Plan and other applicable financial plans.

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that the President and/or Senior Vice President for Business and Finance be authorized to enter into/increase professional services and construction contracts for the projects listed above in accordance with established university and State of Ohio procedures, with all actions to be reported to the board at the appropriate time.

(See Appendix XVIII for background information, page 654)

**APPROVAL OF OHIO STATE ENERGY PARTNERS UTILITY SYSTEM
CAPITAL IMPROVEMENTS PLAN FOR FISCAL YEAR 2026**

Resolution No. 2026-23

Utility System Life-Cycle Renovation, Repair and Replacement Projects

Synopsis: Approval of the Ohio State Energy Partners LLC (“OSEP”) utility system capital improvements plan (“OSEP CIP”) for fiscal year 2026; authorization for OSEP to make such capital improvements pursuant to the terms of the First Amended and Restated Long-Term Lease and Concession Agreement for The Ohio State University Utility System dated July 20, 2018, and as amended (the “Agreement”).

WHEREAS the Agreement requires OSEP to annually submit an OSEP CIP for approval; and

WHEREAS the Board of Trustees approved an interim fiscal year 2026 OSEP CIP in May 2025, prior to the university’s finalization of its capital investment plan for fiscal year 2026; and

WHEREAS the university has now finalized its capital investment plan for fiscal year 2026; and

WHEREAS the fiscal year 2026 OSEP CIP includes the requests for approval of these utility system capital improvement projects for the fiscal year beginning July 1, 2025; and

WHEREAS OSEP has provided detailed descriptions of the proposed capital improvement projects, including the construction schedules and supporting technical data and analysis, pursuant to Section 4.3(c) of the Agreement; and

WHEREAS these utility system capital improvement projects will be delivered pursuant to the terms of the Agreement, including the schedules as detailed in the project approval requests; and

WHEREAS these capital expenditures for the approved OSEP CIP utility system projects will be added to the utility fee pursuant to the Agreement and any associated university directives; and

WHEREAS the university has reviewed and considered the financial, technical, and operational aspects of the projects and the OSEP CIP alignment with university plans and sustainability goals; and

WHEREAS the Master Planning & Facilities Committee has reviewed the OSEP CIP for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance & Investment Committee has reviewed the OSEP CIP for alignment with the Capital Investment Plan and other applicable financial plans:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the fiscal year 2026 OSEP CIP; and

BE IT FURTHER RESOLVED, That the Board of Trustees authorizes OSEP to proceed with these fiscal year 2026 capital improvements to the Utility System as outlined in the attached materials.

(See Appendix XIX for background information, page 664)

APPROVAL FOR DISPOSITION OF REAL PROPERTY

Resolution No. 2026-24

THAYER ROAD BATH TOWNSHIP, ALLEN COUNTY, OHIO

Synopsis: Authorization to sell real property located along Thayer Road, Bath Township, Allen County, Ohio, is proposed.

WHEREAS The Ohio State University seeks to sell 5.369 acres along Thayer Road, Bath Township, Ohio, identified as Allen County parcel number 37-3500-02-001.000, to Allen County so they may improve and widen Thayer Road; and

WHEREAS the sale of this property corresponds with the strategic investment and divestment of land assets in support of the university's current and future needs; and

WHEREAS the administration has identified this site as excess and no longer aligning with current and future planned needs:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that the President and/or Senior Vice President for Business and Finance shall be authorized to take any action required to effect the sale of the aforementioned property upon terms and conditions deemed to be in the best interest of the university and at a sale price at or above the appraised value.

(See Appendix XX for background information, page 673)

APPROVAL OF FISCAL YEAR 2026 OPERATING BUDGET

Resolution No. 2026-25

Synopsis: Approval of the Operating Budget for the Fiscal Year ending June 30, 2026, is proposed.

WHEREAS The State of Ohio Biennial Budget for State Fiscal Years 2026 and 2027, including funding levels for State institutions of higher education, has been signed into law; and

WHEREAS Tuition and mandatory fee levels for the Columbus and Regional Campuses for the Academic Year 2025-2026 were proposed at the May 21, 2025, Board of Trustees meeting; and

WHEREAS The Administration now recommends approval of the Fiscal Year 2026 Operating Budget for the University for the Fiscal Year ending June 30, 2026.

NOW THEREFORE

BE IT RESOLVED, That the University's Operating Budget for the Fiscal Year ending June 30, 2026, as described in the accompanying Fiscal Year 2026 Operating Budget Book for the Fiscal Year ending June 30, 2026, be approved with authorization for the President to make expenditures within the projected income.

(See Appendix XXI for background information, page 675)

APPOINTMENT TO THE SELF-INSURANCE BOARD

Resolution No. 2026-26

Synopsis: Appointment of a member to the Self-Insurance Board is proposed.

WHEREAS the Board of Trustees directed that a Self-Insurance Board be established to oversee the University Self-Insurance Program; and

WHEREAS all members of the Self-Insurance Board are appointed by The Ohio State University Board of Trustees upon recommendation of the President.

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approve that the following individual be appointed as a member of the Self-Insurance Board effective September 1, 2025 for the term specified below:

Christopher A. Cray, term ending June 30, 2027

BE IT FURTHER RESOLVED, That this appointment entitles each member to any immunity, insurance or indemnity protection to which officers and employees of the University are, or hereafter may become, entitled.

UNIVERSITY FOUNDATION REPORT

Resolution No. 2026-27

Synopsis: Approval of the University Foundation Report as of June 30, 2025, is proposed.

WHEREAS monies are solicited and received on behalf of the university from alumni, industry, and various individuals in support of research, instructional activities, and service; and

WHEREAS such gifts are received through The Ohio State University Foundation; and

WHEREAS this report includes: (i) the establishment of two (2) endowed chairs: the Dr. Harold "Hal" Miller and Betty J. Miller Endowed Chair in Organic Chemistry and Biochemistry and the Endowed Chair in Integrative Health; five (5) endowed professorships: the Honda Endowed Professorship in Artificial Intelligence in Mechanics and Manufacturing, the Dr. John M. McGregor Department of Neurosurgery Professorship, the Jeffrey Professorship in Children, Young Adult and Family Psychiatry, The Leon M. McCorkle Jr. Professorship in Commercial Law, and the Colleen McMahon Professorship in Music; two (2) professorship funds: The Ernestine R. Lowrie Professorship Fund in Thoracic Surgery and the Wayne Urban Endowed Professorship Fund; one (1) scholarship as part of the Scarlet and Gray Advantage Endowed Matching Gift Program; and twenty-one (21) additional named endowed funds; (ii) the revision of twenty-six (26) named endowed funds:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves The Ohio State University Foundation Report as of June 30, 2025.

(See Appendix XXII for background information, page 726)

NAMING OF INTERNAL SPACES

Resolution No. 2026-28

IN UNIVERSITY HOSPITAL

Synopsis: Approval for the naming of internal spaces in the University Hospital located at 650 W. 10th Avenue is proposed.

WHEREAS The Ohio State University is taking a major step forward with the development of the new University Hospital that, combined with modern educational space, will enhance a unified Ohio State Wexner Medical Center campus; and

WHEREAS the Ohio State Wexner Medical Center campus provides leading-edge research, outstanding clinical training and world-class patient care; and

WHEREAS the following donors have provided significant contributions to the Wexner Medical Center and University Hospital; and

- Stan and Jodi Ross
- Dr. Mark Landon
- Dawson Fund
- Cindy and Larry Hilsheimer

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned spaces be named the following:

- Stanley D. and Joan H. Ross Neurosciences Critical Care Unit (Floor 14)
- Mark B. Landon, MD and Jane Landon Visitor Lounge (Floor 23 Visitor Lounge)
- Janet and Elden Thomas Sanctuary (Room 2075)
- Cindy and Larry Hilsheimer Chairman's Conference Room (Room 0075)

NAMING OF INTERNAL SPACES

Resolution No. 2026-29

IN THE RIFFE BUILDING

Synopsis: Approval for the naming of the 2nd floor pharmacy classroom (classroom A) and the student lounge in the Riffe Building, located at 496 W. 12th Ave, is proposed.

WHEREAS the College of Pharmacy is consistently ranked a top pharmacy school in the country, home to world-class faculty, dedicated students and innovative researchers working toward improving medications and medication-related health outcomes; and

WHEREAS the College of Pharmacy commits to providing students access to state-of-the-art facilities and spaces to promote learning; and

WHEREAS the donors listed below have provided significant contributions to the Riffe Building renovations; and

- Dr. Robert Weber and Mrs. Barbara Weber
- Mrs. Ann M. Klein and Mr. Barry E. Klein

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned spaces be named the following:

- Dr. Robert J. and Barbara B. Weber Classroom
- Ann & Barry Klein Family Student Lounge

NAMING OF INTERNAL SPACES

Resolution No. 2026-30

IN MASON HALL

Synopsis: Approval for the naming of internal spaces in Mason Hall, located at 250 W. Woodruff Avenue, is proposed.

WHEREAS Mason Hall is currently undergoing renovations to accommodate the growing and changing needs of Max M. Fisher College of Business students, reinforcing the university's commitment to being a preeminent business school that creates transformational ideas and leaders; and

WHEREAS Mason Hall includes state-of-the-art spaces for active learning and research to the benefit of students and faculty; and

WHEREAS the donors listed below have provided significant contributions to Fisher College of Business and are currently recognized with spaces affected by the renovation; and

- Nu Chapter Delta Sigma Pi Corporation
- Kathryn Esselburn
- Charles and Lynne Klatskin

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the spaces be named the following:

- Nu Chapter Delta Sigma Pi Corporation Room (room 133)
- Esselburn Breakout Room (room 140D)
- Neil M. Klatskin Conference Room and Neil M. Klatskin Collaborative and Learning Resource Corridor

NAMING OF INTERNAL SPACE

Resolution No. 2026-31

IN THE JAMES OUTPATIENT CARE

Synopsis: Approval for the naming of room 1234 in The Ohio State University Wexner Medical Center James Outpatient Care facility, located at 2121 Kenny Road, is proposed.

WHEREAS The James Outpatient Care facility provides convenient access to state-of-the-art health services for The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (OSUCCC – James) patients; and

WHEREAS the facility includes a variety of services supporting the OSUCCC – James program; and

WHEREAS Albert & Karen Sheridan and Stephen Sheridan have provided significant contributions to the OSUCCC – James and the James Outpatient Care facility; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the internal space be named the following:

- Generous gift from the Metzger/Sheridan Family Fund (Room 1234)

NAMING OF INNOVATION DISTRICT AT OHIO STATE

Resolution No. 2026-32

Synopsis: Approval for the administrative renaming of the university's innovation community, currently known as Carmenton, is proposed.

WHEREAS the administrative naming of the university's innovation community was approved on May 19, 2022; and

WHEREAS upon further consideration with stakeholders as plans for the district have evolved, a new name is recommended that provides brand clarity and accurately conveys the district's purpose; and

WHEREAS this change does not affect the names of streets approved on May 19, 2022; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Innovation District at Ohio State.

NAMING OF THE WATERMAN – MULTISPECIES ANIMAL LEARNING COMPLEX

Resolution No. 2026-33

IN THE COLLEGE OF FOOD, AGRICULTURAL, AND ENVIRONMENTAL SCIENCES

Synopsis: Approval for the naming of the Multispecies Animal Learning Complex, located at the northwest corner of Lane Avenue and Kenny Road, is proposed.

WHEREAS the new Multispecies Animal Learning Complex (MALC) is being constructed to meet the aims of the Waterman Agricultural and Natural Resources Laboratory to provide comprehensive agricultural education; and

WHEREAS the College of Food, Agricultural, and Environmental Sciences (CFAES) aims to maintain consistent nomenclature across Waterman Complex; and

WHEREAS CFAES recommends and Planning, Architecture and Real Estate reviewed this change; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Waterman—Multispecies Animal Learning Complex.

NAMING OF OUTPATIENT CARE POWELL

Resolution No. 2026-34

IN THE WEXNER MEDICAL CENTER

Synopsis: Approval for the naming of the Powell outpatient care location (building #1046), located at 7171 Sawmill Parkway, is proposed.

WHEREAS the new Powell outpatient facility is part of the Wexner Medical Center's suburban outpatient care program, supporting growth in the region and excellence in academic health care; and

WHEREAS the facility will provide convenient access to comprehensive health care services to the Powell community; and

WHEREAS the Wexner Medical Center recommends and Planning, Architecture and Real Estate reviewed this change; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named Outpatient Care Powell.

NAMING OF COMMERCIAL VEHICLE INNOVATION LABORATORY

Resolution No. 2026-35

IN THE COLLEGE OF ENGINEERING

Synopsis: Approval for the administrative naming of the building located at 920 Kinner Road (building #1145) in the College of Engineering, is proposed.

WHEREAS the building being constructed at 920 Kinner Road will further the mission of the Center for Automotive Research; and

WHEREAS this facility name accurately reflects its purpose and current naming standards within the College of Engineering; and

WHEREAS the College of Engineering recommends and Planning, Architecture and Real Estate reviewed these changes; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Commercial Vehicle Innovation Laboratory.

AMENDMENT TO THE BYLAWS OF THE BOARD OF TRUSTEES

Resolution No. 2026-36

Synopsis: Amendment to the *Bylaws of the Board of Trustees* related to Ohio Senate Bill 1, the Advance Ohio Higher Education Act, and organizational changes to the Academic Affairs and Student Life Committee.

WHEREAS Ohio Senate Bill 1 (SB1), the Advance Higher Education Act, took effect on June 27, 2025; and

WHEREAS SB1 prohibits student trustees from serving as voting members on the full Board of Trustees and from attending Board executive sessions, but student trustees may continue to serve on Board committees, as their input and perspectives deepen the Board's understanding of the student experience; and

WHEREAS the university has reorganized research operations such that the Enterprise for Research, Innovation and Knowledge now reports to the Executive Vice President and Provost, such that all of these operations may be addressed by the Board's Academic Affairs and Student Life Committee, rather than in a separate Research, Innovation and Strategic Partnerships Committee; and

WHEREAS these developments require amending Board Bylaw 3335-1-02 to reflect the changes to student trustee authority and Board committee standing and authority:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby adopts the attached amendment to Board Bylaw 3335-1-02.

(See Appendix XXIII for background information, page 735)

RATIFICATION OF COMMITTEE APPOINTMENTS FY2026

Resolution No. 2026-37

BE IT RESOLVED, That the Board of Trustees hereby approves that the ratification of committee appointments for Fiscal Year 2026 are as follows:

Academic Affairs & Student Life:

Reginald A. Wilkinson, Chair
Elizabeth A. Harsh, Vice Chair
Elizabeth P. Kessler
Jeff M.S. Kaplan
Michael F. Kiggin
Bradley R. Kastan

Kara J. Trott

Patrick C. Arp

Phillip Popovich (faculty member)

Eric Bielefeld (faculty member)

Stefanie Sanford

John W. Zeiger (ex officio)

Athletics:

Gary R. Heminger, Chair
Michael F. Kiggin, Vice Chair
Elizabeth P. Kessler
Jeff M.S. Kaplan
Pierre Bigby
Bradley R. Kastan
George A. Skestos
Patrick C. Arp
John W. Zeiger (ex officio)

Finance & Investment:

Tomislav B. Mitevski, Chair
Pierre Bigby, Vice Chair
Gary R. Heminger
Michael F. Kiggin
George A. Skestos
Kendall C. Buchan
Amy Chronis
Kent M. Stahl
John W. Zeiger (ex officio)

Legal, Audit, Risk & Compliance:

Elizabeth P. Kessler, Chair
Bradley R. Kastan, Vice Chair
Michael F. Kiggin

Master Planning & Facilities:

Juan Jose Perez, Chair
George A. Skestos, Vice Chair
Elizabeth A. Harsh
Reginald A. Wilkinson
Pierre Bigby
Bradley R. Kastan
Kendall C. Buchan
Robert H. Schottenstein
Keith Myers
John W. Zeiger (ex officio)

Talent, Compensation & Governance:

Jeff M.S. Kaplan, Chair
Elizabeth P. Kessler, Vice Chair
Gary R. Heminger
Reginald A. Wilkinson
Tomislav B. Mitevski
Juan Jose Perez
John W. Zeiger (ex officio)

Wexner Medical Center:

Leslie H. Wexner, Chair
Gary R. Heminger
Tomislav B. Mitevski
Juan Jose Perez
George A. Skestos
Kara J. Trott
Kendall C. Buchan
Robert H. Schottenstein
Stephen D. Steinour
Cindy Hilsheimer
Amy Chronis
Hiroyuki Fujita
John W. Zeiger (ex officio, voting)
Walter E. Carter Jr (ex officio, voting)
Ravi V. Bellamkonda (ex officio, voting)
Michael Papadakis (ex officio, voting)
John J. Warner (ex officio, voting)

Juan Jose Perez
Patrick C. Arp
Amy Chronis
John W. Zeiger (ex officio)

Finance Committee, Wexner Medical Center:

Stephen D. Steinour, Chair
John W. Zeiger
Tomislav B. Mitevski
Juan Jose Perez
Pierre Bigby
George A. Skestos
Amy Chronis
John J. Warner
Michael Papadakis

Quality & Professional Affairs Committee, Wexner Medical Center:

Juan Jose Perez, Chair
George A. Skestos
Ravi V. Bellamkonda
Michael Papadakis
John J. Warner
Jay M. Anderson
Eric Bourekas
Carol R. Bradford
Stacy A. Brethauer
David E. Cohn
Scott A. Holliday
Kami J. Maddocks
Elizabeth Seely
Deana Sievert
Corrin Steinhauer
Andrew M. Thomas

Foundation Board Representative:
Pierre Bigby

Alumni Board Representative:
Elizabeth A. Harsh

BE IT FURTHER RESOLVED, That these appointments shall take effect at the adjournment of the meeting at which they are approved and remain in effect through the fiscal year ending June 30, 2026, or until they are superseded by a subsequent action of the board, whichever occurs first, so long as the persons appointed continue to be eligible to serve in such a capacity.

**THE OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER
CLINICAL QUALITY MANAGEMENT, PATIENT SAFETY AND PATIENT
EXPERIENCE PLAN**

Resolution No. 2026-38

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 outlines assessment and improvement of processes in order to deliver safe, effective, optimal patient care and services in an environment of minimal risk for inpatients and outpatients of the University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital; and

WHEREAS the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 was approved by the Quality Leadership Council on May 28, 2025; and

WHEREAS the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 was approved by the University Hospitals Medical Staff Administrative Committee on July 9, 2025; and

WHEREAS on July 22, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital as outlined in the attached document.

(See Appendix XXIV for background information, page 741)

**THE JAMES CANCER HOSPITAL QUALITY, SAFETY AND EXPERIENCE COUNCIL
PLAN**

Resolution No. 2026-39

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the annual review of The James Quality, Safety and Experience Council Plan for FY26 for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS The James Quality, Safety and Experience Council Plan for FY26 outlines assessment and improvement of processes in order to deliver safe, effective, optimal patient care and services in an environment of minimal risk for inpatients and outpatients of The James; and

WHEREAS the annual review of The James Quality, Safety and Experience Council Plan for FY26 was approved by The James Quality, Patient Safety, and Reliability Committee on April 23, 2025; and

WHEREAS the annual review of The James Quality, Safety and Experience Council Plan for FY26 was approved by The James Medical Staff Administration Committee on May 16, 2025; and

WHEREAS on July 22, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of The James Quality, Safety and Experience Council Plan for FY26:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve The James Quality, Safety and Experience Council Plan for FY26 as outlined in the attached document.

(See Appendix XXV for background information, page 767)

PLAN FOR PATIENT CARE SERVICES

Resolution No. 2026-40

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the plan for patient care services for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and The Ohio State University Wexner Medical Center East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the plan for inpatient and outpatient care services describes the integration of clinical departments and personnel who provide care and services to patients at University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital; and

WHEREAS the annual review of the plan for patient care services was approved by the University Hospital Medical Staff Administrative Committee on May 14, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the plan for patient care services:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and Board of Trustees hereby approve the plan for patient care services for the Ohio State University Hospitals, including University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital as outlined in the attached Plan for Patient Care Services.

(See Appendix XXVI for background information, page 786)

PLAN FOR PATIENT CARE SERVICES

Resolution No. 2026-41

**THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE**

Synopsis: Approval of the annual review of the plan for patient care services for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS The James plan for patient care services describes the integration of clinical departments and personnel who provide care and services to patients at The James; and

WHEREAS the annual review of the plan for patient care services was approved by The James Medical Staff Administrative Committee on April 18, 2025; and

WHEREAS on June 24, 2025 the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the plan for patient care services:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the plan for patient care services for The James as outlined in the attached Plan for Patient Care Services.

(See Appendix XXVII for background information, page 798)

**SCOPE OF CARE
THE OHIO STATE UNIVERSITY AMBULATORY SURGERY CENTER
OUTPATIENT CARE NEW ALBANY**

Resolution No. 2026-42

Synopsis: Approval of the annual review of the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the scope of care describes services related to elective outpatient procedures at The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany; and

WHEREAS ON June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the scope of care for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany.

(See Appendix XXVIII for background information, page 814)

**SCOPE OF CARE
THE OHIO STATE UNIVERSITY AMBULATORY SURGERY CENTER
OUTPATIENT CARE DUBLIN**

Resolution No. 2026-43

Synopsis: Approval of the annual review of the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the scope of care describes services related to elective outpatient procedures at The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin; and

WHEREAS ON June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the scope of care for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin.

(See Appendix XXIX for background information, page 823)

PATIENT COMPLAINT AND GRIEVANCE MANAGEMENT

Resolution No. 2026-44

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the review of the Patient Complaint and Grievance Management policy for FY26 for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS in order to promote patient satisfaction, the Wexner Medical Center is committed to resolving any patient complaints and grievances that may arise in a timely and effective manner, and as set forth in the attached Patient Complaint and Grievance Management policy; and

WHEREAS the review of the Patient Complaint and Grievance Management policy was approved by the Ohio State University Hospitals Medical Staff Administrative Committee on June 11, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the Patient Complaint and Grievance Management policy, including the delegation of the responsibility for reviewing and resolving grievances to the Ohio State University Hospitals Grievance Committee:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approves the Patient Complaint and Grievance Management policy for the OSU Wexner Medical Center, including delegation of the responsibility for reviewing and resolving grievances to the Ohio State University Hospitals Grievance Committee.

(See Appendix XXX for background information, page 832)

PATIENT COMPLAINT AND GRIEVANCE MANAGEMENT

Resolution No. 2026-45

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER THE ARTHUR G. JAMES CANCER HOSPITAL AND RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the review of Patient Complaint and Grievance Management policy for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS in order to promote patient satisfaction, The James is committed to resolving any patient complaints and grievances that may arise in a timely and effective manner; and as set forth in the attached Patient Complaint and Grievance Management policy; and

WHEREAS the review of the Patient Complaint and Grievance Management policy was approved by The James Medical Staff Administrative Committee on June 20, 2025:

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the Patient Complaint and Grievance Management policy, including delegation of the responsibility for reviewing and resolving grievances to The James Grievance Committee:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the Patient Complaint and Grievance Management policy, including delegation of the responsibility for reviewing and resolving grievances to The James Grievance Committee.

(See Appendix XXXI for background information, page 838)

**DIRECT PATIENT CARE SERVICES CONTRACTS AND
PATIENT IMPACT SERVICE CONTRACTS EVALUATION**

Resolution No. 2026-46

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the direct patient care service contracts and patient impact service contracts for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the Ohio State University Hospitals direct patient care services contracts and patient impact service contracts are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for inpatient and outpatient care at University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital; and

WHEREAS the annual review of these contracts was approved by the Ohio State University Hospital Medical Staff Administrative Committee on June 11, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the direct patient care service contracts and patient impact service contracts for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the annual review of the direct patient care service contracts and patient impact service contracts for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital as outlined in the attached University Hospitals Contracted Services Annual Evaluation Report.

(See Appendix XXXII for background information, page 844)

**DIRECT PATIENT CARE SERVICES CONTRACTS AND
PATIENT IMPACT SERVICE CONTRACTS EVALUATION**

Resolution No. 2026-47

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the annual review of the direct patient care services contracts and patient impact service contracts for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS The James direct patient care services contracts and patient impact service contracts are evaluated annually to review the scope, nature and quality of services provided to clinical departments and personnel who provide care and services for inpatient and outpatient care at The James; and

WHEREAS the annual review of these contracts was approved by The James Medical Staff Administrative Committee on June 20, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the direct patient care service contracts and patient impact service contracts for The James:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the annual review of the direct patient care service contracts and patient impact service contracts for The James as outlined in the attached The James Contracted Services Annual Evaluation Report.

(See Appendix XXXIII for background information, page 854)

**CONTRACTED SERVICES THE OHIO STATE UNIVERSITY AMBULATORY
SURGERY CENTER OUTPATIENT CARE NEW ALBANY**

Resolution No. 2026-48

Synopsis: Approval of the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the contracted services are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for the mission of The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany.

(See Appendix XXXIV for background information, page 864)

**CONTRACTED SERVICES THE OHIO STATE UNIVERSITY AMBULATORY
SURGERY CENTER OUTPATIENT CARE DUBLIN**

Resolution No. 2026-49

Synopsis: Approval of the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the contracted services are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for the mission of The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board and the Board of Trustees hereby approve the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin.

(See Appendix XXXV for background information, page 867)

Mr. Zeiger:

Given these consent agenda items, we will have two votes, each of which will be by roll call. First, we will vote on item No. 7 — Approval of the Fiscal Year 2026 Capital Investment Plan — and item No. 11, which is the Approval of the Fiscal Year 2026 Operating Budget.

Mr. Kaplan has been advised to abstain.

Upon the motion of Mr. Zeiger, seconded by Dr. Wilkinson, the Board of Trustees adopted the foregoing resolutions by unanimous roll-call vote, cast by the following trustees: Mr. Zeiger, Ms. Kessler, Mr. Heminger, Mrs. Harsh, Dr. Wilkinson, Mr. Kiggin, Mr. Mitevski, Mr. Bigby, Mr. Perez, Mr. Kastan, Mr. Skestos and Ms. Trott. Mr. Kaplan abstained.

Ms. Eveland:

Motion carries.

Mr. Zeiger:

Thank you. I will now move that the board approve the remaining items on the consent agenda.

Upon the motion of Mr. Zeiger, seconded by Mr. Heminger, the Board of Trustees adopted the foregoing resolutions by majority roll-call vote, cast by the following trustees: Mr. Zeiger, Ms. Kessler, Mr. Heminger, Mr. Kaplan, Mrs. Harsh, Dr. Wilkinson, Mr. Kiggin, Mr. Mitevski, Mr. Bigby, Mr. Perez, Mr. Kastan, Mr. Skestos and Ms. Trott.

Ms. Eveland:

Motion carries.

Mr. Zeiger:

Thank you again. Is there any further business to come before the board today?

Hearing none, this meeting will be adjourned. Thank you so much.

The meeting adjourned at 10:53 a.m.

Attest:

John W. Zeiger
Chairman

Jessica A. Eveland
Secretary

APPENDIX I



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

DEGREES AND CERTIFICATES

Resolution No. 2025-86

Synopsis: Approval of Degrees and Certificates for spring and summer terms of 2025 is proposed.

WHEREAS pursuant to paragraph (E) of rule 3335-1-06 of the Administrative Code, the Board has authority for the issuance of degrees and certificates; and

WHEREAS the faculties of the colleges and schools shall transmit, in accordance with rule 3335-9-29 of the Administrative Code, for approval by the Board of Trustees, the names of persons who have completed degree and certificate requirements:

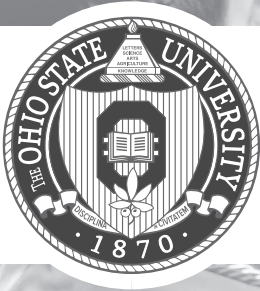
NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the degrees and certificates to be conferred on May 4 and August 3, 2025, to those persons who have completed the requirements for their respective degrees and certificates and are recommended by the colleges and schools.

CERTIFIED

This is to certify that the foregoing is a true and accurate excerpt from the minutes of the Board of Trustees meeting held May 21, 2025.

Jessica A. Eveland
Secretary



Spring Commencement

THE OHIO STATE UNIVERSITY
MAY 4, 2025



Pomp, circumstance, and other songs of a lifetime

—by Professor David Citino, 1947–2005, Late University Poet Laureate
(Originally presented as the 2000 Winter Commencement address)

If you're like me, you've got a big head,
not to mention a funny robe, full of music—
poems and melodies, the tunes
we move to, shower and shave by,
study, write to. Not just the incidental,

but the momentous music keeping time.
Our histories are measures of song.
Listen to your heart: drums of Africa,
sea-spume of blind, far-sighted Homer,
Sappho's honeyed love lyrics. Often,

music speaks for us, one note saying
a thousand words. Like Rodolpho
in Puccini's *La Bohème*, Sono un poeta.
I am a poet. Che cosa faccio? What
do I do? Scrivo. I write. This ceremony

is loud music—pomp and circumstance
of the life you began freshman year
or that first day of graduate school.
In my head I press Play, and the CD
of *Big Days* kicks on. I leap and linger

over moments too sweet, nearly, for words.
I'll never escape rhymes from the nursery.
Up above the world so high, like a diamond
in the sky. We knew from the start
our universe was aglow with wonder.

Italian, Latin, English songs in nasal accents
of Cleveland. *Gaudeamus igitur*, *Juvenes
dum sumus*. So, let us rejoice, while
we are young. Youth is that gift we can't
comprehend while we're young. This ceremony

means you all are less young than you were.
Don't let the heavy knowledge gained
from your studies deprive you of the gifts
of youth, to be able to rejoice at the drop
of a hat, to care for, be moved by others.

Now I hear golden hits of five decades.
Big Mama Thornton, and that so-called King
(King of what, fried butter sandwiches?)
who stole away her hound dog. You ain't
never killed a rabbit, you ain't no friend

of mine. As with those profs and TAs,
course after course, you had to produce—
kill some rabbits—to earn respect.
And at times OSU may have seemed
like Heartbreak Hotel, down at the end

of Lonely Street, so difficult was it
to do your best. Tennessee Ernie Ford,
"Sixteen Tons": St. Peter don't you
call me 'Cause I can't go. I owe
my soul to the company store.

You have been digging deep in mines
of knowledge. We all owe our souls
to Ohio State, company store of learning,
shared experience—precious ore
we have in common forever.

Now I hear Domenico Modugno's
fervent urging to wish, sing, fly,
Volare, Wo-oo. *Cantare*, Wo-o-o-o-o.
My grandfather was a peasant farmer,
a *contadino* in Calabria in the toe

of Italy. He knew it's the human lot
to dream of flying. Lucky, lucky,
lucky me, I'm a lucky son-of-a-gun.
I work eight hours, I sleep eight hours,
That leaves eight hours for fun.

Hey! He sailed in steerage across
the Atlantic, came to Cleveland, where
he stayed long enough to work 52 years
for the B&O Railroad, before lying down
to rest in good Ohio soil. So many of us

here today came from elsewhere,
or ancestors did. From Tennessee, Italy,
Africa, Asia, Appalachia—even,
President Kirwan, the wilds of Kentucky
and Maryland. Women and men with backs

supple as birch trunks. The courage
it took to pick up stakes and begin again
in a new world! Think of the work
those older ones did. For you. You all
are facing a change right now.

This sheepskin is your passport.
You're bound for emigration to
the next song of your life. Ohio State
is the ark on which you've been sailing.
You've been the precious cargo.

But, as Noah once said, I can see
clearly now the rain is gone. The ark,
our university, was filled to overflowing
with the diversity of us. Diversity.
Networks and talk shows devalue the word.

(continued on inside back cover)

The Ohio State University 439th Commencement

Spring 2025 • May 4, 2025 • 12:00 P.M. • Ohio Stadium

Presiding Officer

Walter E. Carter Jr.
President

Prelude—11:30 a.m. to 12 p.m.

The Ohio State University
Wind Symphony
Russel C. Mikkelson, Conductor

Welcome

Melissa S. Shivers
Senior Vice President for Student Life

Processional

National Anthem

Graduates and guests led by
Samantha M. Sayar
Class of 2025

Invocation

Imani Jones
Director
Department of Chaplaincy and
Clinical Pastoral Education
Wexner Medical Center

Commencement Address

Charles F. Bolden Jr.
Major General, U.S. Marine Corps
(Retired)
12th NASA Administrator
Founder & CEO Emeritus,
The Charles F. Bolden Group

Conferring of Honorary Degree

Recipient presented by
John W. Zeiger, Chair
Board of Trustees

Atul Gawande
Doctor of Science

Conferring of Distinguished Service Awards

Recipients presented by
John W. Zeiger

William B. Farrar

Elizabeth B. Germain and
Richard B. Germain

Conferring of Degrees in Course

Colleges presented by
Ravi V. Bellamkonda
Executive Vice President and Provost

Welcome to New Alumni

Molly Ranz Calhoun
President and CEO
The Ohio State University Alumni
Association
Senior Vice President, Engagement

Alma Mater—Carmen Ohio

Graduates and guests led by
Samantha M. Sayar

Oh! Come let's sing Ohio's praise,
And songs to Alma Mater raise;
While our hearts rebounding thrill,
With joy which death alone can still.
Summer's heat or winter's cold,
The seasons pass, the years will roll;
Time and change will surely show
How firm thy friendship—O-hi-o!

Awarding of Diplomas



Excerpts from the commencement ceremony will be broadcast on WOSU-TV, Channel 34, on Tuesday, May 6, at 7 p.m.

Livestream coverage and a replay of the ceremony in its entirety can be viewed at commencement.osu.edu.

Commencement Address

Charles F. Bolden Jr.

Charles F. Bolden Jr., Major General, U.S. Marine Corps (Ret.), was the Administrator of the National Aeronautics and Space Administration (NASA) from 2009 until 2017. He has dedicated his life to service to the United States, working to secure our nation's security and prosperity, and guiding efforts to explore our universe and better understand our planet.

Major General Bolden's 34-year career with the Marine Corps included 14 years as a member of NASA's Astronaut Office and four Space Shuttle missions. He piloted Space Shuttle Columbia in 1986 (STS-61C) and Space Shuttle Discovery in 1990 (STS-31) — the mission that deployed the Hubble Space Telescope. He served as Mission Commander on Space Shuttle Atlantis in 1992 (STS-45) and Space Shuttle Discovery in 1994 (STS-60). His tenure also

included the triumph of the Mars Curiosity rover landing, the success of the Juno mission that is helping us better understand the planet Jupiter, increasing the number of satellites tasked with Earth observation tasks, and progress toward the 2021 launch of the James Webb Space Telescope.

Major General Bolden also had a distinguished military career. A graduate of the U.S. Naval Academy, he flew more than 100 combat missions during the Vietnam War. He was Assistant Commandant of Midshipmen at the Naval Academy, and Commanding General of the Marine expeditionary force attached to Operation Desert Thunder in Kuwait as well as the Commanding General of the 3rd Marine Aircraft Wing. His honors include three Defense Distinguished Service Medals, the Defense Superior Service

Medal, the Distinguished Flying Cross, eight Air Medals, three NASA Exceptional Service Medals and four NASA Space Flight Medals. He is an inductee of the U.S. Astronaut Hall of Fame and the National Aviation Hall of Fame.

Today, he serves as Founder and CEO Emeritus of The Charles F. Bolden Group, providing leadership in the areas of space and aerospace exploration, national security, STEM+AD education and health initiatives.

Major General Bolden is a graduate of C.A. Johnson High School in Columbia, S.C. He earned a Bachelor of Science degree from the U.S. Naval Academy and a Master of Science degree from the University of Southern California.

He and his wife, Alexis, have two children and five grandchildren.

Recipients of Honors

Atul Gawande

DOCTOR OF SCIENCE

Dr. Atul Gawande is a renowned surgeon, author and public health leader who has become one of the country's most influential health care researchers and innovators. He led the development of a now-globally adopted team checklist for surgery that reduced deaths by more than one-third and other systems innovations that have improved global childbirth outcomes and care at the end of life. He was Assistant Administrator for Global Health at the U.S. Agency for International Development from January 2022 to January 2025. He was previously a practicing general and endocrine surgeon at Brigham and Women's Hospital and a professor at Harvard Medical School and the Harvard T.H. Chan School of Public Health. Dr. Gawande co-founded and chaired Ariadne Labs, a joint center for

health systems innovation, and Lifebox, a nonprofit organization making surgery safer globally. From 2018 to 2020, he was CEO of Haven, the Amazon, Berkshire Hathaway and JPMorgan Chase health care venture.

Born in Brooklyn, New York, Dr. Gawande was raised in Athens, Ohio, where his parents were local physicians. After graduating from Athens High School, he attended Stanford University and received a B.A.S. in 1987. He received an MA from Oxford University, where he was a Rhodes Scholar, an MD from Harvard Medical School, and an MPH from the Harvard School of Public Health.

Dr. Gawande is also a longtime staff writer for *The New Yorker* magazine, and has written four *New York Times* best-selling books:

Complications, *Better, The Checklist Manifesto*, and *Being Mortal*. The latter has proven to be a valuable contribution to the growing literature on aging, death and dying, and is a call for change in the philosophy of health care. With his writings, Dr. Gawande has become a uniquely sensitive and powerful voice for surgery and medicine in general.

He was also executive producer for the Emmy-nominated documentary film adaptation of *Being Mortal* (2016) and for the Oscar-nominated documentary film *To Kill a Tiger* (2024).

Dr. Gawande has multiple awards to his credit, including a MacArthur Fellowship in 2006, the Lewis Thomas Prize for science writing, the Massachusetts Governor's Award in the Humanities, and multiple honorary degrees.

Recipients of Honors

William B. Farrar

DISTINGUISHED SERVICE AWARD

Dr. William B. Farrar dedicated nearly five decades to The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (OSUCCC – James) as a surgical oncologist, cancer researcher and medical administrator, helping elevate the cancer program to an internationally recognized institution.

During his tenure, Dr. Farrar served as Director of the Division of Surgical Oncology for 28 years and established the Stefanie Spielman Comprehensive Breast Center, the first free-standing, multi-disciplinary breast center at OSUCCC – James. He was appointed interim CEO of the James Cancer Hospital and Solove Research Institute in 2017 and assumed the permanent role in 2019, serving until his retirement

in May 2022. Over his career, he performed more than 20,000 cancer operations, treating nearly every type of cancer except brain cancer.

In that time, Dr. Farrar led the oncology fellowship program at Ohio State and The James, training more than 71 fellows who have since become leaders in the field.

On a national level, Dr. Farrar served as President of the U.S. National Committee for the International Union Against Cancer and as Principal Investigator for the National Surgical Adjuvant Breast and Bowel Project Clinical Trial group at Ohio State. He also contributed to numerous national committees, including the Training Directions Committee for the Society of Surgical Oncology, the Joint Council for Advanced Training in Head and Neck Oncology Surgery,

the American College of Surgeons Committee on Cancer, and the American Association of Clinical Endocrinologists.

Beyond his professional contributions, Dr. Farrar has been a steadfast supporter of The James, building strong relationships with donors, board members, and colleagues and inspiring others to join his efforts. Even in retirement, he continues to serve on The OSUCCC – James Foundation Board, contributing his experience and expertise.

Dr. Farrar earned his bachelor's degree from Illinois Wesleyan University and his MD from the University of Virginia. He and his wife of fifty years, Kathryn, have four children and seven grandchildren.

Elizabeth B. Germain and Richard B. Germain

DISTINGUISHED SERVICE AWARD

Libby and Rick Germain have devoted their philanthropy, talents and energy to a wide variety of programs and initiatives at The Ohio State University, including Student Life, Athletics, The James Cancer Hospital, Pelotonia and the Foundation Board.

Mrs. Germain actively supports The Ohio State University in a variety of ways. She currently serves as a director on The Ohio State University Foundation Board and has served as a member of The James Foundation Board since 2015. Beyond her involvement with Ohio State, she serves as Board Chair for the Nationwide Children's Hospital Foundation, among other community activities.

Mr. Germain spent his career experiencing progressive growth in the automotive industry. He is the owner of Germain Automotive Partnership, which currently operates 17 locations with 1,300

employees across Ohio, Florida and Michigan. He serves as a board member of Recreation Unlimited. Under his leadership, Germain Automotive formed a Pelotonia team that will celebrate its 10th year in 2025.

A high philanthropic priority for the Germain family has been supporting Ohio State's efforts to recruit and retain top physicians. They contributed generously to the Cancer Strategic Support Fund, allowing The James to embark upon a bold recruiting process to attract top talent. The Germain family also supported the Cellular Therapy and Cancer Immunology Program, a collaboration with Nationwide Children's Hospital.

The Germain family has devoted significant time and resources to the Office of Student Life and the development of an exceptional student experience. Mrs. Germain is particularly interested in programs

that foster student leadership, such as BuckeyeThon, Ohio State's largest student-run philanthropy. Mrs. Germain mentors students, helps them fundraise, and supports events to benefit patients at Nationwide Children's Hospital.

As passionate supporters of Ohio State Athletics, the Germain family has made leadership gifts to scholarships, the football program, Olympic sports, and contributed to the creation of first-class facilities for Buckeye student-athletes. They are also strong advocates for students involved in the Brutus Buckeye mascot program.

Mrs. Germain is an alumna of The Ohio State University, while Mr. Germain graduated from the University of Denver. The couple have four children and 11 grandchildren. They reside in Columbus, Ohio, but enjoy spending time in Naples, Florida, and at their farm in Knox County.

A Message from President Carter



Dear Graduates,

Congratulations on earning your degree from The Ohio State University. It is an honor to join you and your loved ones in celebrating this momentous occasion.

Throughout your time with us as students, you have proven repeatedly that you possess the grit and determination to achieve success and reach your goals. Now that you count yourself among the hundreds of thousands of Buckeye alumni around the globe, I am certain you will continue to strive for excellence in all that you do as leaders in your fields and in your communities.

As you start the next chapter of your life, remember to lead with purpose and build upon the knowledge you have gained at Ohio State. Together, we can make great progress toward addressing the challenges the world faces today.

Congratulations, again — and Go Buckeyes!

Sincerely,

A handwritten signature in black ink that reads "Walter E. Carter, Jr." The signature is written in a cursive, flowing style.

Walter "Ted" Carter Jr.
President

Congratulations and Welcome to the Alumni Association

Dear Ohio State Alumni,

The moment has arrived! You are graduates of The Ohio State University.

This graduating class pushes the number of living Ohio State alumni to more than 625,000. Welcome to your very large and loving Ohio State alumni family.

Your time on campus has been filled with countless memories, relationships and learning experiences that have shaped you into the remarkable individuals you are today. From frantic all-night cram sessions to national championships, each moment has contributed to your growth and development. As you embark on this new adventure, remember that your connection to Ohio State doesn't end with graduation.

Your Alumni Association is an excellent resource for career guidance, professional development, or simply staying connected with fellow Buckeyes. I hope to see you around at the many events and activities we sponsor, whether you're staying nearby or moving to the other end of the world. Ohio State will always be a part of who you are, and there are so many ways of staying connected to the Buckeye community.

Enjoy Graduation Day. It's one you'll always remember. We'll be ready to celebrate your next momentous occasion, as you reach further milestones and make new memories.

Congratulations, Class of 2025. The world awaits your talents. The entire Ohio State family can't wait to see where your next adventure takes you.

Go Bucks!

In firm friendship,

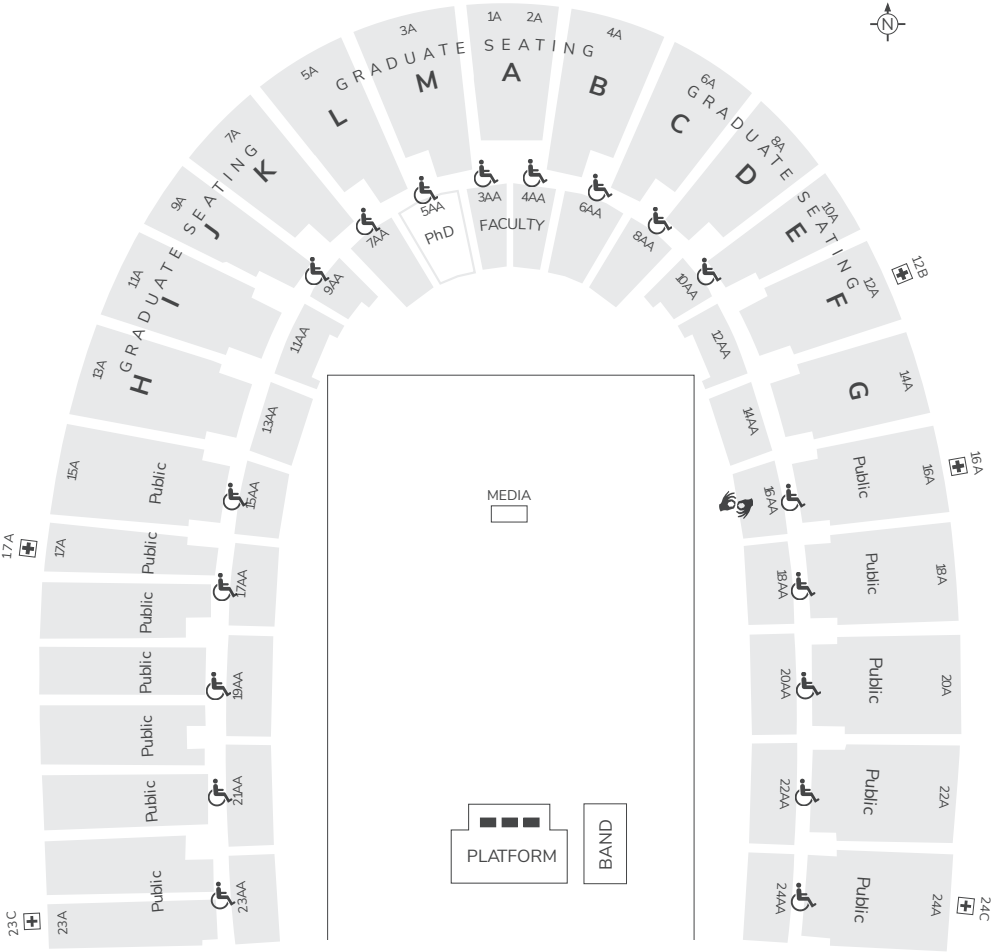


Molly Ranz Calhoun '86
President and CEO, The Ohio State University Alumni Association
Senior Vice President, Engagement

P.S. Follow me @BuckeyeMolly on Twitter and Instagram, and discover what's available to you as graduates of this great university:
osu.edu/alumni/resources/recent-grads



Stadium Seating



A – Optometry; Nursing; Arts and Sciences	H – Veterinary Medicine; Engineering
B – Arts and Sciences	I – Engineering
C – Arts and Sciences	J – Social Work; Food, Agricultural, and Environmental Sciences
D – Dentistry; Arts and Sciences	K – Education and Human Ecology
E – Law; Medicine	L – Masters
F – Public Affairs; Business	M – Pharmacy; Public Health; Masters
G – Business	

Public seating also available in all B, C and D deck sections.

Please be seated by 11:30 a.m. for the beginning of the Processional.

This program is not an official graduation list.

This printed program lists students who were eligible to graduate for Spring Semester 2025, as of 5:00 p.m., April 23, 2025, pending the outcome of final examinations and final grades. Therefore, it should not be used to determine a student's academic or degree status. The University's official registry for conferral of degrees is the student's permanent academic record, kept by the Office of the University Registrar, Student Academic Services Building, 281 West Lane Avenue, Columbus, OH 43210-1132.

The Graduate School

Dean: **Mary E. Stromberger**

Doctor of Musical Arts

Sarah Rose Baker

B.Music (University of Northern Iowa)
M.Mus. (Northern Arizona University)
Music
Dr. Russel Mikkelsen

David Cabrera

B.Music, M.Mus. (The Ohio State University)
Music
Dr. Michael Torres

Meagan Marie Gaskill

B.Music, B.S. (Pacific Lutheran University)
M.Mus., M.A. (The Ohio State University)
Music
Dr. Katherine Jones

Huiwen Jiang

B.Music, M.Mus., M.A. (The Ohio State University)
Music
Dr. Caroline Hong

Malik Khalfani

B.Mus.Educ. (Cleveland State University)
M.Mus. (The Ohio State University)
Music
Dr. Miriam Burns

Cheng Peng

B.A. (Central Conservatory of Music)
M.Mus. (Miami University)
Music
Dr. Bruce Henniss

Samuel Conrad Sherer

B.Music (Furman University)
M.Mus. (University of South Carolina)
Music
Dr. Susan Powell

Kaleigh McGee Simmons

B.Music (Auburn University)
M.Mus. (The Ohio State University)
Music
Dr. Caroline Hartig

Francesca Rose Wantuch

B.Music (Ohio University)
M.Mus. (The Ohio State University)
Music
Dr. Michael Torres

Doctor of Philosophy

Nihanth Adina

B.Tech. (Manipal University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Jin Wang

Daisy Marie Ahlstone

B.A. (University of Oregon)
M.A. (Utah State University)
Comparative Studies
Dr. Maurice Stevens

Gamze Akbas

Bachelor's (Kocaeli University)
M.A. (Istanbul University)
Near Eastern Languages and Cultures
Dr. Sean Anthony

Samir Al Zubaydi

B.S. (University of Minnesota)
Chemistry
Dr. Christo Sevov

Nathaniel Jesse Albright

B.S.Nurs. (The Ohio State University)
M.S. (Otterbein University)
Nursing
Dr. Dianne Morrison-Beedy

Mona Aljuhani

Bachelor's, M.S. (King Abdul Aziz University)
Integrated Biomedical Science Graduate Program
Dr. Vidu Garg

Erin Taylor Allen

B.A. (University of Notre Dame)
Music
Dr. Ryan Skinner

Jamie Rye Allen

B.S. (Virginia Polytechnic Institute and State University)
Environment and Natural Resources
Dr. Nicole Sintov

Megan Monica Allyn

B.S. (Kettering University)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Andre Palmer
Dr. Katelyn Reilly

Abdulaziz Saleh S Alqasem

Bachelor's (King Saud University)
M.S. (The Ohio State University)
Physics
Dr. Louis DiMauro

Yesenia Alvarez Padilla

Bachelor's (University of Nevada, Reno)
M.S.W. (The Ohio State University)
Social Work
Dr. Jacqueline Kagotho

Aya Mohammed Alwan

B.S.F.A.B.E. (The Ohio State University)
Mechanical Engineering
Dr. Manoj Srinivasan

Lindsay Marie Ammirante

B.A. (Bethany College)
M.A. (West Virginia University)
Education
Dr. Wvonne Goddard Sage
Dr. Donna Ford

Cole Philip Anderson

B.S.Biomed.Eng., M.S. (The Ohio State University)
Biomedical Engineering
Dr. Christopher Breuer

Anthony Ryan Annerino

B.S.Mat.Sci.Eng., M.S. (The Ohio State University)
Materials Science and Engineering
Dr. Pelagia-Iren Gouma

Wentao Bao

B.S. (Beihang University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Jin-Fa Lee

Brittani M. Becher

B.A. (University of Toledo)
Human Sciences
Dr. Brian Turner

Taylor Nicole Becker

B.S. (The Ohio State University)
Integrated Biomedical Science Graduate Program
Dr. Christopher Breuer

Aliyah Nicole Bennett

B.S. (State University of New York at Buffalo)
Integrated Biomedical Science Graduate Program
Dr. Jessica Gunn

Michela Bertossa

B.A., M.A. (Universitat Zurich)
M.A. (The Ohio State University)
Italian
Dr. Dana Renga
Dr. Jonathan Mullins

Kyle Gerard Binder

B.A. (Baylor University)
M.S. (The Ohio State University)
Mathematics
Dr. Eric Katz

Jade Anne Blackwell

B.A., B.S. (Saint Ambrose University)
M.A. (University of North Carolina)
M.S. (The Ohio State University)
Ph.D. (University of Arizona)
Molecular, Cellular, and Developmental Biology
Dr. Ruth Barrientos-Wood

Joel Borchering

B.S. (Missouri University of Science and Technology)
Food Science and Technology
Dr. Devin Peterson

Tyler Justin Borgard

B.S. (Purdue University)
Mathematics
Dr. Christopher Miller

Katherine Bowman

Bachelor's (University of Missouri-Columbia)
Bachelor's (Columbia College)
M.P.H. (Saint Louis University)
Environmental Science
Dr. Laura Pomeroy

Michaela Rose Breach

B.S. (Indiana University)
M.S. (The Ohio State University)
Neuroscience Graduate Studies Program
Dr. Kathryn Lenz

Dustin Robert Broderick

B.S. (Brigham Young University)
M.S. (The Ohio State University)
Chemistry
Dr. John Herbert

Bear Brown

B.A. (University of Kentucky)
M.A. (The Ohio State University)
Political Science
Dr. Michael Neblo

Rachel Anne Brown

B.S. (Morehead State University)
Integrated Biomedical Science Graduate Program
Dr. Eugene Oltz

Katelynn Brianne Brusach

B.S. (Michigan State University)
Comparative Biomedical Science
Dr. Jessica Quimby

Ju Seung Byun

B.S. (Inha University)
M.S. (University of Southern California)
Computer Science and Engineering
Dr. Andrew Perrault

Rodrigo Cabrera Alpas

Bachelor's, Licenciado, Master's (Pontifical Catholic University of Peru)
Chemistry
Dr. Rafael Bruschweiler

Yuxin Cai

B.Engr. (Liverpool John Moores University)
M.S. (University of Florida)
Industrial and Systems Engineering
Dr. Allen Yi

Alison Leigh Casey

B.A. (University of Illinois at Urbana-Champaign)
M.P.A. (University of Arizona)
M.A. (The Ohio State University)
Sociology
Dr. Cynthia Colen

Christopher Soo Chae

B.S.Mat.Sci.Eng. (The Ohio State University)
Materials Science and Engineering
Dr. Jinwoo Hwang

Srija Chakraborty

B.Tech. (Maulana Abul Kalam Azad University of Technology)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Aleksander Skardal

Shi Ryoung Chang

B.A., B.S.Elec.Eng. (Yonsei University)
M.A. (The Ohio State University)
Economics
Dr. Robert de Jong

Hui-Jun Chen

B.A., M.A. (National Tsing Hua University)
M.A. (The Ohio State University)
Economics
Dr. Aubhik Khan

Zhaozhe Chen

B.S. (Southeast University)
M.S. (Stevens Institute of Technology)
M.S. (The Ohio State University)
Earth Sciences
Dr. Ozeas Costa

Ziqi Chen

B.Engr. (Wuhan University)
Computer Science and Engineering
Dr. Xia Ning
Dr. Srinivasan Parthasarathy

Naeyeoung Choi

B.S., Bachelor's, M.S. (Dankook University)
Plant Pathology
Dr. Guo-Liang Wang

Yoonyoung Choi

B.A., B.S. (Ewha Womans University)
M.A. (University of California, Irvine)
Sociology
Dr. Hui Zheng
Dr. Reanne Frank

Anna Claire Church

B.A., M.A. (University of Memphis)
Sociology
Dr. Sarah Hayford

Victoria Lee Coan

B.S. (Virginia Polytechnic Institute and State University)
M.A. (The Ohio State University)
Sociology
Dr. Rachel Dwyer

Fabiano Colet

B.S.Agr. (Universidade Federal de Santa Maria)
M.S. (The Ohio State University)
Horticulture and Crop Science
Dr. Laura Lindsey

Rosalie Connell

B.S.Biomed.Eng. (The College of New Jersey)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Julie Mansfield

Dylan Robert Cronin

B.S. (Bowling Green State University)
Microbiology
Dr. Virginia Rich

Dylan Nathaniel Crosson

B.A. (Spring Arbor University)
M.A. (Pennsylvania State University)
Music
Dr. Graeme Boone

Cara Adina D'Alesio

B.A. (University of Essex)
M.A. (The Ohio State University)
Political Science
Dr. Sarah Brooks

Robert Michael Dahlberg-Sears

B.A., M.A. (University of Missouri - Saint Louis)
Music
Dr. Ryan Skinner

Kayley Eden DeLong

B.A. (Washington State University)
Women's, Gender, and Sexuality Studies
Dr. Treva Lindsey

Dira Melissa Delphech

Engineer (University of Rhode Island)
M.Eng.Mgt. (The Ohio State University)
Engineering Education
Dr. Emily Dringenberg

Blaine Matthew Derbigny

B.S. (Xavier University of Louisiana)
M.S. (The Ohio State University)
Chemistry
Dr. Davita Watkins

Ronak Nikhil Desai

B.A., B.S. (Rowan University)
M.S. (The Ohio State University)
Physics
Dr. Christopher Orban

Jason Alen DeWitt

B.A. (University of Tennessee-Knoxville)
M.A. (University of Wisconsin)
Philosophy
Dr. Christopher Pincock

Gaurang Satish Dharap

B.Tech. (University of Mumbai)
M.S. (The Ohio State University)
Mechanical Engineering
Dr. David Talbot

Debra Ann Dill-Jones

B.S. (Urbana University)
Master's (Franklin University)
Education
Dr. Ann Allen

Leslie Michelle Dillon

B.S. (Ball State University)
M.S. (Texas Woman's University)
Human Sciences
Dr. Samuel Hodge

Fiona Claire Doherty

B.S. (Cornell University)
M.S.W. (The Ohio State University)
Social Work
Dr. Smitha Rao

Balaji Ravindra Dontha

B.Eng. (University of Mumbai)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Asimina Kiourti

Jared Grant Doremus

B.S. (University of Toledo)
Chemistry
Dr. Psaros McGrier

Wenxin Du

B.A. (Reed College)
M.S. (The Ohio State University)
Statistics
Dr. Mario Peruggia

Daniela Nicole Edmeier

B.A. (Kenyon College)
M.A. (The Ohio State University)
History
Dr. Alice Conklin

Dina Salem Mahmoud Samy Eissa

B.S. (American University in Cairo)
Chemical Physics
Dr. Louis DiMauro

Lori Michelle Esposito

B.A. (Rocky Mountain College of Art + Design)
M.A. (Ohio University)
M.F.A. (University of North Carolina)
Arts Administration, Education and Policy
Dr. John Richardson

Sepideh Fakhretaha Aval

Bachelor's (University of Tehran)
Ohio State Biochemistry Program
Dr. Kurt Fredrick

Junchong Fan

B.Eng. (Zhejiang University)
Electrical and Computer Engineering
Dr. Jin Wang

Xiaoyi Fang

Bachelor's (Zhengzhou University of Light Industry)
M.S. (Purdue University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Ani Katchova

Julia Nicole Faraone

B.S. (Rochester Institute of Technology)
M.S. (The Ohio State University)
Molecular, Cellular, and Developmental Biology
Dr. Shan-Lu Liu

Jing Feng

Bachelor's (Southern University of Science & Technology)
M.S. (Florida State University)
M.A. (The Ohio State University)
Economics
Dr. Bruce Weinberg

Geoffery Fernquist

B.S. (Brigham Young University)
M.S. (Northern Illinois University)
Anatomy
Dr. James Cray
Dr. Melissa Quinn

Mara Anabel Figueroa Berroca

Engineer (National University of San Juan)
Master's (University of Extremadura)
Geodetic Science and Surveying
Dr. Demian Gomez

Bailey Lyons Fitzgerald

B.A. (Denison University)
Earth Sciences
Dr. Derek Sawyer

Lorianne Renae Fitzgerald

B.A. (Ohio Wesleyan University)
M.A. (The Ohio State University)
Education
Dr. Shayne Piasta
Dr. Michiko Hikida

Margaret Mary Fitzpatrick

B.S. (University of Connecticut)
Nursing
Dr. Jodi Ford

Dylan Isaac Flint

B.A. (University of Washington)
M.A. (Simon Fraser University)
Philosophy
Dr. Lisa Downing

Anna Teresa Freeman

B.A. (College of Charleston)
M.A. (Florida State University)
Arts Administration, Education and Policy
Dr. Christine Morris
Dr. Richard Fletcher

Mengcun Gao

B.S., M.S. (The Ohio State University)
M.A. (Teachers College, Columbia University)
Psychology
Dr. Vladimir Sloutsky

Jacob James Anton Garwood

B.S. (La Salle University)
M.S. (The Ohio State University)
Chemistry
Dr. David Nagib

Ryan Layne Gaynor

B.S. (University of Kentucky)
Evolution, Ecology and Organismal Biology
Dr. Ian Hamilton

Bryan Thomas Gemler

B.S.Chem.Eng., M.S. (The Ohio State University)
Biophysics
Dr. Ralf Bundschuh

Austin Robert Cole Gerlt

B.S. (Missouri University of Science and Technology)
M.S. (Carnegie Mellon University)
Materials Science and Engineering
Dr. Stephen Niezgoda

Mohammad Moein Ghaniyoun

Bachelor's (Shahid Beheshti University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Mircea-Radu Teodorescu

Daryl Timothy Giglio

B.S.Chem.Eng. (University of Idaho)
Nuclear Engineering
Dr. Lei Cao

Daniel G. Gilmore

B.S.Hlth.Reh.Sci., M.S. (The Ohio State University)
Health and Rehabilitation Sciences
Dr. Brittany Hand

Tessa Siobhan Gilmore

B.S.Mat.Sci.Eng., M.S. (The Ohio State University)
Materials Science and Engineering
Dr. Pelagia-Iren Gouma

Cameron James Givens

B.A. (Boston College)
M.A. (The Ohio State University)
History
Dr. Bruno Cabanes

Birkan Gokbag

B.S.Cptr.Sci.Eng. (The Ohio State University)
Integrated Biomedical Science Graduate Program
Dr. Lang Li

Kyle Justin Gordon

B.S. (University of Michigan)
Integrated Biomedical Science Graduate Program
Dr. Richard Gumina

David Lindsey Green

B.S. (University of Texas at Austin)
Mathematics
Dr. David Penneys

Yu Gu

B.S., Master's (Nanjing University)
Computer Science and Engineering
Dr. Yu Su

Fiana Estefany Guevara Guillen

Titulo.Bach. (Escuela Politecnica del Ejercito)
Plant Pathology
Dr. Maria Benitez Ponce

Antonio Fernando Gutierrez Zalvidea

B.S. (Universidad Nacional de Ingenieria)
M.S. (Technische Universitaet Dortmund)
Industrial and Systems Engineering
Dr. Allen Yi
Dr. Jose Castro

Jonathon Reid Hales

B.S., M.S. (Brigham Young University)
M.S. (The Ohio State University)
Mathematics
Dr. Gailth Hiary

Seyedhamed Hanitabaeiazavareh

B.S. (K.N. Toosi University of Technology)
Industrial and Systems Engineering
Dr. William Marras

Kyle Harris

B.S. (Miami University)
M.S. (Youngstown State University)
Education
Dr. Ann Allen

Jordan Leigh Hartman

B.S. (Wingate University)
M.S. (North Carolina State University)
Horticulture and Crop Science
Dr. Jessica Cooperstone

Rudi Hartono

Bachelor's (Sriwijaya University)
M.A. (Indiana University of
Pennsylvania)
Education
Dr. Peter Sayer

Yuki Hattori

B.A. (Kinjo University)
*East Asian Languages and
Literatures*
Dr. Mineharu Nakayama

Zachary Allen Haverfield

B.S.Hlth.Reh.Sci., M.S. (The Ohio
State University)
Health and Rehabilitation Sciences
Dr. Amanda Agnew

Joseph Michael Hazel

B.S. (University of North Carolina
at Charlotte)
M.S. (The Ohio State University)
Chemistry
Dr. Mark Foster

Yuntian He

B.Engr. (Xi'an Jiaotong University)
M.S. (University of Science and
Technology of China)
Computer Science and Engineering
Dr. Srinivasan Parthasarathy

Jack Perry Hedberg

B.S. (University of Minnesota)
Integrated Biomedical Science
Graduate Program
Dr. Elaine Mardis
Dr. Kevin Cassidy

Joseph Hunter Holbrook

B.S. (Eastern Kentucky University)
Ohio State Biochemistry Program
Dr. Amanda Hummon

Jason Hollick

B.S.Agr. (The Ohio State University)
Horticulture and Crop Science
Dr. Chieri Kubota

Dustin Roger Horton

B.A. (Alaska Pacific University)
B.S.Elec.Eng. (University of Alaska
Anchorage)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Joel Johnson

Allison Paige Howell

B.S., M.P.H. (The Ohio State
University)
Food Science and Technology
Dr. Nicole Arnold
Dr. Barbara Kowalczyk

Hetian Hu

B.S., M.S. (Pennsylvania State
University)
*Food, Agricultural and Biological
Engineering*
Dr. V. M. Balasubramaniam

Tengmu Hu

B.S.Bus.Adm., B.S., M.S.,
M.Ac.Q.R.Mgt. (The Ohio State
University)
Industrial and Systems Engineering
Dr. Theodore Allen

Xiaojun Hu

B.S. (University of Glasgow)
Master's (Imperial College London)
Pharmaceutical Sciences
Dr. Blake Peterson

Changkuk Im

B.A., M.A. (Sogang University)
M.A. (The Ohio State University)
Economics
Dr. John Rehbeck

Nathaniel Wellington Irby

B.Music, M.Mus. (University of
Oregon)
Music
Dr. David Hedgecoth

Cullen Thomas Irvine

B.A. (Carleton College)
M.S. (The Ohio State University)
Chemistry
Dr. Joshua Goldberger

Polina Isurin

B.F.A. (The Ohio State University)
M.F.A. (Tufts University)
*Arts Administration, Education
and Policy*
Dr. Shari Savage
Dr. Richard Fletcher

Jane Iversen

B.Bus.Adm. (Florida International
University)
M.B.A. (Thunderbird School of
Global Management)
Business Administration
Dr. Aravind Chandrasekaran

Darwin Julian Marcel Jacobs

B.S. (Central Michigan University)
M.A. (The Ohio State University)
Education
Dr. Scott Graves

Iresha Nadeeshani Jayasinghe

B.S. (University of Peradeniya)
M.S. (Illinois State University)
Environment and Natural Resources
Dr. Kristi Lekies

Javad Jeddi

B.A., M.S. (Amir Kabir University
of Technology)
M.S. (University of Tennessee-
Knoxville)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Joshua Sangoro

Zhenbang Jiao

B.S. (Jilin University)
Statistics
Dr. Yoonkyung Lee

Ross DeVashon Jordan

B.A. (Morehouse College)
M.A. (Teachers College, Columbia
University)
Human Sciences
Dr. Samuel Hodge

Kamyar (Kam) Kamyar

B.S.Honors (Drexel University)
Economics
Dr. James Peck

Diana Daeun Kang

B.A.Honors (Williams College)
Pharmaceutical Sciences
Dr. Alexander Sparreboom
Dr. Yizhou Dong

Alex Michelle Kempler

B.A. (Whitman College)
M.A. (The Ohio State University)
Sociology
Dr. Townsend Price-Spratlen

Robert Malcolm Kent

B.S. (University of Richmond)
M.S. (The Ohio State University)
Physics
Dr. Gregory Lafayette

Jacob Scott Kepes

B.A. (University of Georgia)
M.A. (The Ohio State University)
Sociology
Dr. Townsend Price-Spratlen

Sahar Abbas Khaleel

B.S.Arch. (United Arab Emirates
University)
M.S. (Khalifa University)
City and Regional Planning
Dr. Bernadette Hanlon

Aelim Kim

B.F.A., M.A. (Hongik University)
M.A. (University of South Carolina)
*Arts Administration, Education
and Policy*
Dr. Jani Acuff

Nathaniel King-Smith

B.S. (Ohio University)
*Food, Agricultural and Biological
Engineering*
Dr. Katrina Cornish
Dr. Frederick Michel

Natalia Kravtsova

Diploma (Moscow State
Conservatory)
B.S., M.Math.Sci., M.S. (The Ohio
State University)
Mathematics
Dr. Adriana Dawes

Troy Krizak

B.S. (University of Saint Thomas)
M.S. (The Ohio State University)
Aerospace Engineering
Dr. Kiran D'Souza

Jamie Kronenberg

B.S., D.P.T. (Ithaca College)
Health and Rehabilitation Sciences
Dr. Laura Schmitt

Meghan Dougherty Kuehnle

B.A. (Boston College)
M.Educ. (University of Notre Dame)
Education
Dr. Caroline Clark

Edward George Kunz

B.A., M.A. (University of North
Carolina at Wilmington)
History
Dr. Peter Hahn
Dr. Raymond Parratt

Jesse Ladanyi

B.S. (University of North Georgia)
M.A. (The Ohio State University)
Psychology
Dr. Russell Fazio

Kelsey Marie Lammy

B.A., M.A. (The Ohio State
University)
Education
Dr. Darcy Granello
Dr. Noelle Arnold

Devan Michelle Lander

B.S. (Utah State University)
Speech and Hearing Science
Dr. Christina Roup

Joseph Anthony Lanier

B.S. (Xavier University)
M.S. (The Ohio State University)
Physics
Dr. Fengyuan Yang

Jamison Drew Law

B.S., M.S. (Purdue University Fort
Wayne)
Ohio State Biochemistry Program
Dr. Venkat Gopalan
Dr. Charles Bell

Michelle Maria Leao

B.A. (The College of New Jersey)
M.Educ. (Indiana University)
Education
Dr. Stephen Quay

Cheol Woo Lee

Bachelor's, Master's (Korea
University)
M.A. (The Ohio State University)
Economics
Dr. Pok-Sang Lam
Dr. Sean McCrary

Jaehyuk Lee

B.A., M.A. (Seoul National University)
*East Asian Languages and
Literatures*
Dr. Meow Goh

Min Hee Lee

B.A., M.A. (Ewha Womans
University)
M.A. (The Ohio State University)
Economics
Dr. Matthew Weinberg

Jessica Cristina Lemos Motta

Bachelor's (Sao Paulo State
University)
M.S. (Universidade de Sao Paulo)
Animal Sciences
Dr. Alvaro Garcia Guerra

Sedrick Garth Leslie

Bachelor's (Mico University College)
M.S. (University of South Wales)
M.A. (The Ohio State University)
Education
Dr. Edward Fletcher

Madeline Sophie Lewis

B.S. (University of Michigan)
M.P.H. (The Ohio State University)
Public Health
Dr. Mark Weir
Dr. Parvati Singh

Yutong Li

B.S.Food.Sci. (The Ohio State
University)
Food Science and Technology
Dr. Hua Wang

Ziqi Li

B.Engr. (Qingdao University of
Science and Technology)
M.P.H. (Fudan University)
Food Science and Technology
Dr. Rachel Kopec

Tong Liang

Bachelor's (University of Electronic
Science and Technology of China)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. James Davis

Rui Liu

Bachelor's (Chongqing University)
M.S. (Oregon State University)
Electrical and Computer Engineering
Dr. Julia Zhang

Ruoqi Liu

B.Engr. (Wuhan University)
Computer Science and Engineering
Dr. Ping Zhang

Wenfang Liu

B.Med. (Huazhong University of
Science and Technology)
*Molecular, Cellular, and
Developmental Biology*
Dr. Paul Herman

Bertha Lotsi

B.S. (Kwame Nkrumah University of Science and Technology)
M.S. (East Tennessee State University)
Chemistry
Dr. Psaras McGrier

Alex Riley Lovins

B.S. (Indiana Wesleyan University)
Chemistry
Dr. Christopher Hadad

Hannah Brooke Lovins

B.S. (Indiana Wesleyan University)
M.S. (The Ohio State University)
Molecular, Cellular, and Developmental Biology
Dr. Kimberly Gowdy

Szu Yu Lu

B.A. (Washington University in Saint Louis)
M.Educ. (University of Virginia)
Education
Dr. Tzu-Jung Lin

Sabrina Mackey-Alfonso

B.S. (Johns Hopkins University)
M.S. (The Ohio State University)
Neuroscience Graduate Studies Program
Dr. Ruth Barrientos-Wood

Tomas Mallmann Paganin

Mech.Eng., M.S.Mech.Eng.
(Universidade Federal do Rio Grande do Sul)
Nuclear Engineering
Dr. Richard Vasques

Cody James Mansfield

B.S. (Chapman University)
D.P.T. (Duke University)
Health and Rehabilitation Sciences
Dr. James Onate

James Marshall Reber

B.S. (Purdue University)
Mathematics
Dr. Andriy Gogolyev

Eric G. Martin

B.S.Elec.Cptr.Eng., M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Ronald Reano

Simon Alexander MacGillivray Mason

B.S.Mat.Sci.Eng. (Johns Hopkins University)
Materials Science and Engineering
Dr. Stephen Niezgoda

August Twopearls Masonheimer

B.A. (University of California, Santa Cruz)
M.A. (The Ohio State University)
Education
Dr. Christopher Walters

Mark Austin Matthews

B.A., M.S. (The Ohio State University)
M.A. (University of Dayton)
Psychology
Dr. Duane Wegener
Dr. Richard Petty

Tyler J. Maykovich

B.S. (Mount Aloysius Junior College)
M.S. (Indiana University of Pennsylvania)
Anatomy
Dr. James Cray

Nathaniel James McBride

B.A. (Asbury University)
M.A. (University of Toledo)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Eugenia Romero

Krutant Jiten Mehta

B.S. (Wright State University)
Electrical and Computer Engineering
Dr. Inder Gupta

Samantha Noel Mertens

B.A., M.A. (California State University, San Marcos)
Environment and Natural Resources
Dr. Nicole Sintov

Alexander Milder

B.S. (Haverford College)
M.S. (The Ohio State University)
Chemistry
Dr. Patrick Woodward

Emika Shenice Miller

B.S. (Park University)
B.S. (Chamberlain University)
M.S. (The Ohio State University)
Nursing
Dr. Mary Happ

Jonathan Miller

B.S. (University of Wyoming)
D.V.M. (Washington State University)
Comparative Biomedical Science
Dr. Stefan Niewiesk

Bradley Montgomery

B.A. (Indiana University)
M.A. (The Ohio State University)
Sociology
Dr. David Melamed

Jeongwoo Moon

Bachelor's, M.A. (Pusan National University)
M.A. (The Ohio State University)
Economics
Dr. Kyle Dempsey

Joon Moon

B.S., M.S. (Korea University)
Industrial and Systems Engineering
Dr. Qadeer Ahmed

Curtis Dean Moore

B.S. (Ohio University)
Chemical Engineering
Dr. Shang-Tian Yang

Cynthia Anne Moore

B.Bus. Adm. (Mount Vernon Nazarene University)
M.Bus. Op. Excel. (The Ohio State University)
Nursing
Dr. Bernadette Melnyk
Dr. Jin Jun

German Jose Mora Saenz

Bachelor's (Universidad de Costa Rica)
M.S. (The Ohio State University)
Mathematics
Dr. Saleh Tanveer

Mary Dominique Nagasawa

B.S. (State University of New York at Binghamton)
Entomology
Dr. Sarah Short

Fawz Naim

Master's (Indian Institute of Technology (ISM) Dhanbad)
Earth Sciences
Dr. Ann Cook

Sriram Narayanan

B.Engr. (Anna University)
M.S. (University of Southern California)
Aerospace Engineering
Dr. Debdipta Goswami

Aditya Nechiyl

B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering
Dr. Robert Lee
Dr. Gregg Chapman

Matthew James Newman

B.S.Mech.Eng., M.S. (The Ohio State University)
Mechanical Engineering
Dr. Marcello Canova
Dr. Jay Sayre

Alexander Nichols

B.A. (Davidson College)
M.Educ. (Vanderbilt University)
Education
Dr. Stephen Quayle

Stefan Nikoloski

B.S. (Middle East Technical University)
Mathematics
Dr. Stefan Patrikis

Shreya Madhav Nuguri

B.Engr. (Institute of Chemical Technology)
Food Science and Technology
Dr. Luis Rodriguez-Saona

Brian Patrick O'Rourke

B.A., M.A. (Case Western Reserve University)
Public Health
Dr. Tasleem Padamsee

Margo Nicole Overholt-Seckel

B.S.Agr. (The Ohio State University)
Master's (Oklahoma State University)
Agricultural Communication, Education, and Leadership
Dr. Emily Buck
Dr. Theresa Ferrari

Tricia Oyster

B.Engr. (Case Western Reserve University)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Samir Ghadiali

Yagmur Ozturk

B.S. (Bilkent University)
Electrical and Computer Engineering
Dr. Kubilay Sertel

Felipe Fabricio Pacci Evaristo

Bachelor's (Universidade de Sao Paulo)
M.S. (University of Chicago)
M.S. (The Ohio State University)
Materials Science and Engineering
Dr. Lisa Hall

DeGrath A. Palmore III

B.S. (University of Akron)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Caglar Yardim

Yue Pan

B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering
Dr. Orlando Simonetti

Vaughn Papenhausen

B.A. (Haverford College)
Philosophy
Dr. Tristram McPherson

Cherrie Park

B.A. (Korea University)
M.A. (Ewha Womans University)
Social Work
Dr. Holly Dabelko-Schoeny

Jongeeun Park

B.A. (Konkuk University)
Master's (KDI School of Public Policy and Management)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Abdoul Sam

Sungmin Park

B.A.Honors (Columbia University)
Economics
Dr. Yaron Azrieli

Youngmin Park

B.S. (Oregon State University)
M.S. (The Ohio State University)
Molecular Genetics
Dr. Jian Zhu

Benjamin Pastore

B.S. (State University of New York at Geneseo)
Ohio State Biochemistry Program
Dr. Wen Tang

Bhumi Bharatkumar Patel

B.A. (Agnes Scott College)
M.A. (Florida State University)
M.F.A. (Mills College)
Dance
Dr. Hannah Kosstrin

Jacob Thomas Pellicotte

B.S.Mech.Eng., M.S. (University of Texas at El Paso)
Mechanical Engineering
Dr. Calvin Stewart

Camila Perdoncini Carvalho

B.S. (Uberlandia Federal University)
M.S. (The Ohio State University)
Plant Pathology
Dr. Feng Qu

Aonijtra Phanrungsuwan

D.D.S. (Mahidol University International College)
Oral Biology
Dr. Brian Foster

Arden Blair Piepho

B.A., B.S. (Indiana University)
Integrated Biomedical Science Graduate Program
Dr. Jill Rafael-Portney

Avinash Pokala

B.S.Nutrition, M.S. (The Ohio State University)
Ohio State University Nutrition
Dr. Richard Bruno

Ian Franklin Price

B.S. (Wright State University)
Ohio State Biochemistry Program
Dr. Wen Tang

Charles Philip Rabolli

B.S. (Rutgers University-New Brunswick)
Biomedical Engineering
Dr. Thomas Hund
Dr. Federica Accornero

Sidrah Afriani Rachman

B.Educ., M.Educ. (University Negeri Makassar)
M.A. (The Ohio State University)
Education
Dr. Adrian Rodgers

Nina Kristen Elizabeth Randolph

B.S. (Christopher Newport University)
D.V.M. (Virginia Polytechnic Institute and State University)
Comparative Biomedical Science
Dr. Jenessa Winston
Dr. Thomas Wittum

Alexander Reifsnyder

B.S. (University of Utah)
M.S. (The Ohio State University)
Materials Science and Engineering
Dr. David McComb

Hannah Lee Reyes

B.S. (Mississippi State University)
M.Ed. (Auburn University)
Education
Dr. Kristen Mills

Aliyanna Rice

B.S. (Clemson University)
Electrical and Computer Engineering
Dr. Asimina Kiourti

Charise Renuika Richards

B.A. (Agnes Scott College)
M.A. (Teachers College, Columbia University)
Education
Dr. Michiko Hikida

Amanda Tobin Ripley

B.A. Honors (Oberlin College)
M.Ed. (Harvard University)
Arts Administration, Education and Policy
Dr. Dana Kletchka

Jeremy Ritchey

B.S., M.S. (Eastern Michigan University)
Chemistry
Dr. Dehua Pei

Annie Kathleen Ryan

B.S. Biomed. Eng. (Duquesne University)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Matthew Reilly

Shane Anthony Scaggs

B.S. (Boise State University)
Anthropology
Dr. Sean Downey

Travis Sheadler

B.A. (Wilmington College)
M.S. (University of Kentucky)
M.S.W. (The Ohio State University)
Social Work
Dr. Lauren Blaney Lee McInroy

Balea Jo Schumacher

B.S., M.S. (University of South Florida)
Human Sciences
Dr. Leeann Lower-Hoppe
Dr. Keeley Pratt

Sriram Sekaripuram Muralidhar

B.Tech. (National Institute of Technology Karnataka)
Mechanical Engineering
Dr. Manoj Srinivasan

Karan Sunder Shakya

B.A. (Dickinson College)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Leah Bevis

Elizabeth Rebecca Share

B.S. Agr., M.S. (The Ohio State University)
Animal Sciences
Dr. Maurice Eastridge

Saurav Kumaraswami Shastri

B. Engr. (Visvesvaraya Technological University)
Electrical and Computer Engineering
Dr. Philip Schniter

Alec Sheets

B.S. (The Ohio State University)
Evolution, Ecology and Organismal Biology
Dr. Bryan Carstens
Dr. Andreas Chavez

Yue Sheng

B.A. (Huaiyin Normal University)
M.A. (The Ohio State University)
Education
Dr. Eric Anderman
Dr. Michael Glassman

Hyeseon Shin

B.A., M.A. (Seoul National University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Ian Sheldon

Jong Hoon Shin

B.S. (University of Wisconsin)
M.A. (Seoul National University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Abdoul Sam

Jocelyn DeJung Shoemaker

B.A. (University of Chicago)
M.P.H. (University of Pittsburgh)
M.A. (The Ohio State University)
Psychology
Dr. Charles Emery

Prabhjot Kaur Singh

B.A. (Gustavus Adolphus College)
M.S. (The Ohio State University)
Environmental Science
Dr. Matthew Hamilton

Joseph Stephen Smith

B.S.F.A.B.E., B.A., M.S., M.A. (The Ohio State University)
Environmental Science
Dr. Ryan Winston

Donald Elwood Soles III

B.S., J.D. (Regent University)
M.A. (Texas Tech University)
Philosophy
Dr. Declan Smithies

Benjamin James St. Angelo

B.A., M.A. (The Ohio State University)
History
Dr. Hasan Jeffries
Dr. Randolph Roth

Katherine Alice Starr

B.S. (Gannon University)
M.S. (The Ohio State University)
Pharmaceutical Sciences
Dr. James Fuchs

Nicole D. Stevens

B.A., M.A. (University of Alabama)
Comparative Studies
Dr. Barry Shank

Stephanie Lynn Stillman

B.F.A., M.S. (Rochester Institute of Technology)
Arts Administration, Education and Policy
Dr. Dana Kletchka
Dr. Jennifer Richardson

Brian Strzempkowski

B.S., M.A. (The Ohio State University)
Education
Dr. Ann Allen
Dr. Richard Voithofer

Wenjun Sun

B.S. (Kent State University)
M.S. (The Ohio State University)
Chemistry
Dr. Christopher Jaroniec

Vishal Sunder

B.Tech. (IIT - Banaras Hindu University)
Computer Science and Engineering
Dr. John Foster-Lussier

Zhenghuan Tang

B.S. Mech. Eng. (The Ohio State University)
Mechanical Engineering
Dr. Jung Hyun Kim
Dr. Jay Sayre

Olivia Braun Taylor

B.S. (California University of Pennsylvania)
Neuroscience Graduate Studies Program
Dr. Andrew Fischer

Jessica Tjiu

B.A. (University of California, Berkeley)
M.A. (San Francisco State University)
Women's, Gender, and Sexuality Studies
Dr. Jennifer Suchland
Dr. Thalia Namiko Kunimoto

James Tompsett

B.A. Honors (Oberlin College)
M.A. (The Ohio State University)
Sociology
Dr. Vincent Rascigno

Samantha Rochelle Trzinski

B.A. (The Ohio State University)
M.A. (Florida State University)
English
Dr. Clare Simmons

Mackenzie Turner

B.S. (Xavier University)
M.S. (The Ohio State University)
Molecular, Cellular, and Developmental Biology
Dr. Christopher Breuer

Jeremiah Shu-Fan Vannest

B.S. Elec. Cptr. Eng. (The Ohio State University)
Electrical and Computer Engineering
Dr. Julia Zhang

Alexis Wafer

B.A., B.S. (University of Cincinnati)
Evolution, Ecology and Organismal Biology
Dr. Stephen Hovick

Han Wang

Bachelor's (Zhongnan University of Economics and Law)
M.S. (University of Wisconsin)
M.A. (The Ohio State University)
Economics
Dr. Yaron Azrieli

Ningyi Wang

B.S. (McGill University)
Food Science and Technology
Dr. Devin Peterson

Shen Wang

Bachelor's (Nanjing University)
Pharmaceutical Sciences
Dr. Xiaolin Cheng

Sicong Wang

Bachelor's (University of Hong Kong)
Master's (Chinese University of Hong Kong)
Business Administration
Dr. Michael Weisbach
Dr. Isil Erel

Yixuan Wang

B.S. (Beijing Normal University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Elena Irwin
Dr. Yao Wang

Mariah Kathryn Warner

M.A. (The Ohio State University)
Sociology
Dr. Hollie Nzitatira

Evangeline Grace Radtke Warren

B.A. (Kenyon College)
M.A. (The Ohio State University)
Sociology
Dr. Cynthia Colen

Jeffrey Yu Wen

B.S. (University of Wyoming)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Philip Schniter
Dr. Rizwan Ahmad

Ziye Wen

B. Educ. (Zhejiang Normal University)
M.A. (The Ohio State University)
Education
Dr. Michael Glassman
Dr. Tzu-Jung Lin

April Frye White

B.S. Agr., M.S. (The Ohio State University)
Ohio State University Nutrition
Dr. Jeffrey Firkins

Jeremy Winston

B.A. (Oakwood College)
M.A. (Morgan State University)
Education
Dr. Jan Nespor

Emily Suzanne Wojniak-Heselton

B.A., M.A. (The Ohio State University)
M.A. (Ashland Theological Seminary)
Education
Dr. Kisha Radloff

Zachary Arnold Wright

B.S. (Brigham Young University)
Business Administration
Dr. John Gray

Yining Wu

B.S. (China Agricultural University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Brent Sohngen

Zhenyu Wu

Bachelor's (Wuhan University)
Molecular, Cellular, and
Developmental Biology
Dr. Jian Zhu
Dr. Netty Santoso

Yixin Xiao

B.Eng., Master's (Wuhan University)
Geodetic Science and Surveying
Dr. Michael Bevis

Michael Jerome Yaeger

B.S., M.S. (East Carolina University)
Integrated Biomedical Science
Graduate Program
Dr. Kimberly Gowdy

Keyu Yan

B.A. (Saint Olaf College)
M.A. (The Ohio State University)
History of Art
Dr. Julia Andrews

Biqing Yang

B.S. (Jilin University)
M.A. (Wake Forest University)
Statistics
Dr. Xinyi Xu
Dr. Bo Lu

Felix Yang

B.S. (Rice University)
Integrated Biomedical Science
Graduate Program
Dr. Kristin Stanford
Dr. Tamar Gur

Xuerui Yang

B.A. (University of Minnesota
Morris)
M.S., M.A. (University of Michigan)
M.Appl.Stat. (The Ohio State
University)
Human Sciences
Dr. Robert Scharrf

Yuqing Yang

B.Engr. (Nanjing University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Zhiqiang Lin

Guanting Yi

Bachelor's (University of Hong Kong)
M.A. (The Ohio State University)
Economics
Dr. Bruce Weinberg
Dr. Kurt Lovetti

Jihoon Yun

B.Eng., M.S. (University of Suwon)
M.S. (University of Nebraska-Lincoln)
Computer Science and Engineering
Dr. Anish Arora

Irma Jesenia Zamora Fuerte

B.A. (Amherst College)
M.A. (The Ohio State University)
English
Dr. Pranav Jani
Dr. Paloma Martinez-Cruz

Min Zeng

Bachelor's (Southwest University)
Ohio State University Nutrition
Dr. Richard Bruno

Dan Zhang

B.S. (Nanjing Agricultural University)
M.S. (Shanghai Jiao Tong University)
Food Science and Technology
Dr. Osvaldo Campanella

Shiqi Zhang

B.S.Nutrition (The Ohio State
University)
Ohio State University Nutrition
Dr. Jiangjiang Zhu

Xinyu Zhang

B.Act.Sci., B.S. (Jilin University)
M.A. (Wake Forest University)
Statistics
Dr. Steven MacEachern

Yifei Zhang

Bachelor's (Nanjing University of
Aeronautics and Astronautics)
M.S. (The Ohio State University)
Industrial and Systems Engineering
Dr. Theodore Allen

Yiran Zhang

B.Laws (East China University of
Aeronautics and Law)
M.S.W. (University of Pennsylvania)
Social Work
Dr. Michelle Johnson-Motoyama

Yixuan Zhang

B.Engr. (Southeast University)
Computer Science and Engineering
Dr. Dellang Wang

Ze Zhong Zhang

B.S. (University of Oregon)
Master's (Case Western Reserve
University)
Human Sciences
Dr. Sherman Hanna

Hongxi Zhao

B.S. (University of Southern
California)
M.S. (Tufts University)
Agricultural, Environmental, and
Development Economics
Dr. Henry Klaiber

Yilin Zheng

B.S. (Peking University)
M.S. (Purdue University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Atilla Eryilmaz

Yuhan Zheng

Bachelor's (University of Electronic
Science and Technology of China)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Patrick Roblin

Mengxi Zhou

B.S. (Zhejiang University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Rajiv Rammath

XuJin Zhou

Bachelor's (Shanghai Jiao Tong
University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Atilla Eryilmaz
Dr. Irem Eryilmaz

Yunan Zhu

B.A., B.S. (Colorado State University)
B.S. (East China Normal University)
M.S. (The Ohio State University)
Agricultural, Environmental, and
Development Economics
Dr. Henry Klaiber

Kathryn Elise Zimmermann

B.A. (Boston College)
M.S. (The Ohio State University)
Human Sciences
Dr. Arya Ansari

Astrid Pohl Zuckerman

B.A. (Universitet Hamburg)
M.A. (College of Notre Dame of
Maryland)
M.S. (The Ohio State University)
Psychology
Dr. Stephen Petril

Doctor of Audiology

Haidyn Isenhardt

B.A. (The Ohio State University)
Speech and Hearing Science

Chloe Danielle Lammers

B.A. (The Ohio State University)
Speech and Hearing Science

Breanna Nicole Langenek

B.A. (The Ohio State University)
Speech and Hearing Science

Haley Michelle Laycock

B.S. (Miami University)
Speech and Hearing Science

Morgan Erin Leatherman

B.A. (The Ohio State University)
Speech and Hearing Science

Hailey Renae Long

B.S. (Cleveland State University)
Speech and Hearing Science

Khadeja Raid Mahmood

Bachelor's (American University
of Madaba)
Speech and Hearing Science

Aubrey Wade Stoll

B.S. (University of Cincinnati)
Speech and Hearing Science

Doctor of Education

Michael Robert Allbright

B.A. (Wilmington College)
M.Educ. (Wright State University)
Education

Heidi K. Aune

B.A. (The Ohio State University)
M.P.A. (Keller Graduate School of
Management)
Education

Georgia L. Bass

B.A. (University of Central
Lancashire)
M.Educ. (Southern Arkansas
University)
Education

Isabel Katherine Bozada-Jones

B.S.Educ., M.A. (The Ohio State
University)
Education

Jennifer Myers Brello

B.Educ., M.Educ. (University of
Toledo)
Education

Kendall Jasen Coffman

B.A. (Otterbein University)
M.S. (University of Kentucky)
M.A. (University of Central Florida)
Education

Jennifer Grant Couch

B.A. (College of William and Mary)
M.A. (The Ohio State University)
Education

Lisa Marie Duffy

B.A. (Hope College)
M.S. (Miami University)
Education

Heather Marie Dwyer

B.S., M.Educ. (Grand Valley State
University)
Education

Ivory Meshawn Hister

B.S. (Franklin University)
M.B.A. (Ashland University)
M.A. (The Ohio State University)
Education

Aaron Daniel Klein

B.S., M.Educ. (University of Illinois
at Urbana-Champaign)
Education

James Kloepper

B.A. (The University of Findlay)
M.S. (University of Dayton)
Education

Richard Logue III

B.Educ. (University of Toledo)
M.Educ. (Ashland University)
Education

Ramel Lemar Mitchell

B.S. (Urbana University)
M.Educ. (Wright State University)
Education

Shantay Hawkins Piazza

B.A. (The Ohio State University)
M.S. (Franklin University)
Education

Shelli Lee Shoemaker

B.S.Educ. (Miami University)
M.S. (Eastern Kentucky University)
Education

Alexandra P. Sommer

B.A., B.S. (Miami University)
M.Educ. (Kent State University)
Education

Anna Gretel Stewart

B.S.Soc.Work, M.S.W. (The Ohio
State University)
Education

Latasha Turner

B.S. (Ohio Dominican University)
M.A. (Ashland University)
Education

Allison M. Williams

B.S., O.T.D. (University of Toledo)
Education

Doctor of Nursing Education

Megan Lyn Ashcraft

B.S.Nurs. (University of Kansas)
M.S. (University of Missouri-
Kansas City)
Nursing

Bradley Morgan Bell

B.S., M.S. (Western Governors
University)
Nursing

Tracy Jo Koehler

Bachelor's (Baker University)
Master's (MidAmerica Nazarene
University)
Nursing

Victoria Amber Lambert

B.S.Nurs., M.S. (University of
Texas at El Paso)
Nursing

Rebecca Anne Lane

B.S.Nurs. (Mercy College of Ohio)
Master's (Walden University)
Nursing

Alana Lewis Long

B.S. (Salisbury State University)
M.S. (Wilmington University)
Nursing

Penny Michelle Maready

B.S.Nurs. (Gardner-Webb College)
M.S. (Western Governors University)
Nursing

Kelly Marie McCormick

B.S.Nurs. (Pennsylvania State University)
Master's (Moravian College)
Nursing

Kimiko Layne McCulloch

B.S. (California Polytechnic State University)
M.S. (Western Governors University)
Nursing

Marciene Linn Morgan

B.S.Nurs., M.S. (Davenport University)
Nursing

Florence Nwoga Okafor

B.S.Nurs., M.S., M.P.H. (University of Baltimore)
Nursing

Constance R. Powers

B.S.Nurs., M.S. (Grand Canyon University)
Nursing

Dana Nichole Scott

B.S.Nurs., M.S. (Wright State University)
Nursing

Rachel Ann Sinz

B.S.Nurs. (Winston-Salem State University)
M.S. (University of North Carolina at Wilmington)
Nursing

Laura Smochko Smith

B.S., M.S. (Roberts Wesleyan College)
Nursing

Abby Leigh Suarez

B.S.Nurs. (The Ohio State University)
Master's (Capital University)
Nursing

Doctor of Nursing Practice

Yuka Adams

B.S.Nurs. (Ohio University)
M.S. (The Ohio State University)
Nursing

Erica Elizabeth Adkins

B.S. (Kansas State University of Agriculture and Applied Science)
B.S.Nurs. (Mount Carmel College of Nursing)
M.Hltcare.Innov. (The Ohio State University)
Nursing

Ann Frances Allison

B.S.Nurs. (Valparaiso University)
M.S. (Indiana University Purdue University Indianapolis)
Nursing

Joyce Attey

B.S.Nurs. (Seton Hall University)
M.S. (The Ohio State University)
Nursing

Andrea Nicole Bales

B.S.Nurs. (Mercy College of Ohio)
M.S. (The Ohio State University)
Nursing

Elizabeth K. Braithwaite

B.A., B.S.Nurs. (The Ohio State University)
M.B.A. (University of Phoenix)
Nursing

Theresa Carlisle

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Emily Amanda Cherko

B.S.Nurs. (Wright State University)
M.S., M.B.A. (University of Toledo)
Nursing

Alison B. DeLucia

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Laura Jean Droll

B.S. (Roberts Wesleyan College)
M.S. (The Ohio State University)
Nursing

Madison Morgan Gardner

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Jonathan Keith Garfin

B.S.Nurs. (East Carolina University)
M.S. (The Ohio State University)
Nursing

Pamela E. Garlinghouse

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Kayla ReNee Harris

B.S. (University of Rio Grande)
M.S. (Wright State University)
Nursing

Sharon Katherine Heaton

B.S.Nurs. (Otterbein University)
M.S. (The Ohio State University)
Nursing

Phuong C. Hoang

B.S.Nurs. (University of Akron)
M.S. (The Ohio State University)
Nursing

Hunter J. Jefferis

B.S.Nurs. (Ohio University)
M.S. (Xavier University)
Nursing

Lisa Johnson

B.S. (University of Toledo)
Diploma (Huron Hospital School of Nursing)
B.S.Nurs. (Ohio University)
M.S. (The Ohio State University)
Nursing

Julie Marie Kadiri

B.A., M.S. (University of Toledo)
Nursing

January Kyung Hwa Kim

B.S., M.S. (The Ohio State University)
Nursing

Jillian Eve Maitland

B.S.Nurs. (Mount Carmel College of Nursing)
M.B.A. (Indiana Wesleyan University)
Nursing

Jennifer Leigh Manazer

B.S.Nurs. (Ohio University)
M.S. (The Ohio State University)
Nursing

Daniel W. Martin

B.A. (Texas Tech University)
B.S.Nurs. (University of Texas at Arlington)
M.S. (The Ohio State University)
Nursing

Colleen Martucci

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Kristina Rose Mathey

B.S.Nurs., M.S. (The Ohio State University)
Nursing

Glenn Agape Edillor Montero

B.S.Nurs. (Northern Illinois University)
M.S. (The Ohio State University)
Nursing

Megan Catherine Mooney

B.S.Nurs. (Eastern Michigan University)
M.S. (The Ohio State University)
Nursing

Nathaniel Moreno

B.S.Nurs. (West Suburban College of Nursing)
M.S. (The Ohio State University)
Nursing

Shavonda Lynn Neal

B.S.Allid.Hlth.Prof. (The Ohio State University)
B.S., M.S. (Mount Carmel College of Nursing)
Nursing

Justin Thomas Perdue

B.S.Nurs., M.Hlth.Adm. (Ohio University)
Nursing

Daniel Pomponio

B.S.Nurs., M.S. (Youngstown State University)
Nursing

Kathryn Elizabeth Roberts

M.S. (University of Pennsylvania)
Nursing

Kimberly Sue Smith

B.S. (University of Toledo)
M.S. (Lourdes University)
Nursing

Ruth Snowden

B.S.Nurs. (Cedarville University)
M.S. (Wright State University)
M.B.A. (Liberty University)
Nursing

Meghan Wanvisah Vickery

B.S., M.S. (The Ohio State University)
B.S.Nurs. (Capital University)
Nursing

Laura Renae Zawodni

B.S.Nurs. (Chamberlain University)
M.S. (The Ohio State University)
Nursing

Doctor of Occupational Therapy

Sarah Cate Abromowitz

B.S. (Miami University)
Health and Rehabilitation Sciences

Emily R. Bolton

B.S. (Bowling Green State University)
Health and Rehabilitation Sciences

Bethany J. Boyd

B.S.Pub.Hlth. (The Ohio State University)
Health and Rehabilitation Sciences

Stephanie Ann Cline

B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Grace Ardith Cross

B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Olivia Claire Daeger

B.S.Educ. (Bowling Green State University)
Health and Rehabilitation Sciences

Emily Elizabeth Davis

B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Julie Ann Donnelly

B.S. (University of Mary)
Health and Rehabilitation Sciences

Kaylee Diane Dunkle

B.S. (Defiance College)
Health and Rehabilitation Sciences

Melissa Beatriz Elias

B.S. (Miami University)
Health and Rehabilitation Sciences

Marissa Rae Fogg

B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Katarina Marie Garibian

B.S. (Oakland University)
Health and Rehabilitation Sciences

Caroline Clare Golonka

B.S. (University of Illinois at Urbana-Champaign)
Health and Rehabilitation Sciences

Delaney Marie Hall

B.A. (Transylvania University)
Health and Rehabilitation Sciences

Ciara DeSha Hampton

B.S. (Virginia Polytechnic Institute and State University)
Health and Rehabilitation Sciences

Samantha Mae Hepp

B.S. (Kent State University)
Health and Rehabilitation Sciences

Mackenzie Ann Hupp

B.A. (Westminster College)
Health and Rehabilitation Sciences

Meagan Eileen Krellwitz

B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Haewon Kwon

B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Garrett E. Lockwood
B.S. (University of Kentucky)
Health and Rehabilitation Sciences

Cassandra Jane Loew
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Anne Marie Longo
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Allison Elizabeth Lucas
B.S. (Bowling Green State University)
Health and Rehabilitation Sciences

Keely Mankins
B.S. (University of Kentucky)
Health and Rehabilitation Sciences

Sarah Elizabeth Marsh
B.S.Educ. (Miami University)
Health and Rehabilitation Sciences

Rebecca Maurer
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Megan Mitchell
B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Alexandria Loris Montalbano
B.A., Bachelor's (Coe College)
Health and Rehabilitation Sciences

Megan Lea Nixon
B.S. (University of Akron)
Health and Rehabilitation Sciences

Lauren Elizabeth Rumbalski
B.S. (Otterbein University)
Health and Rehabilitation Sciences

Rachel Leann Saltz
B.S. (Eastern Kentucky University)
Health and Rehabilitation Sciences

Isabella Olimpia Sansone
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Kenadie Deanne Schmitz
B.S. (Texas A&M University)
Health and Rehabilitation Sciences

Olivia Asher Sensky
B.S. (Ohio University)
Health and Rehabilitation Sciences

Emily Rose Simila
B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Margaret Elizabeth Smith
B.S. (Cleveland State University)
Health and Rehabilitation Sciences

Sydney Cassandra Smith
B.S.H.D.F.S. (The Ohio State University)
Health and Rehabilitation Sciences

Lauren Parker Stacey
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Brianna Marie Tersigni
B.S. (University of Dayton)
Health and Rehabilitation Sciences

Olivia Grace Tipsword
B.S. (University of Dayton)
Health and Rehabilitation Sciences

Lauren Elizabeth Traviolia
B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Lauren Mae Voegele
B.S. (University of Cincinnati)
Health and Rehabilitation Sciences

Veronica Kay Voinovich
B.S. (Bowling Green State University)
Health and Rehabilitation Sciences

Kennedy Elizabeth Williams
B.Appl.Sci. (Youngstown State University)
Health and Rehabilitation Sciences

Katryanna Redd Wilson
Bachelor's (Brigham Young University)
Health and Rehabilitation Sciences

Savanna Yates
B.S. (University of Indianapolis)
Health and Rehabilitation Sciences

Doctor of Physical Therapy

Erin Marie Anderson
B.S. (University of Dayton)
Health and Rehabilitation Sciences

Logan Alan Avalos
B.S.H.P.N.E.S. (University of Toledo)
Health and Rehabilitation Sciences

Abigail Ann Beck
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Morgan Suzanne Billstein
B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Claire Irene Black
B.S. (DePaul University)
Health and Rehabilitation Sciences

April Noel Chimera
B.S.Ath.Trng. (The Ohio State University)
Health and Rehabilitation Sciences

Amanda Marie Cinadr
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Steven Thomas Ciolek
B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Katie Crane
B.S. (University of Akron)
Health and Rehabilitation Sciences

Emily Elizabeth Daniels
B.S. (Taylor University)
Health and Rehabilitation Sciences

Kaitlin Marie DiGiovine
B.S. (University of Pittsburgh)
Health and Rehabilitation Sciences

Colton K. Dowd
B.S. (University of Akron)
Health and Rehabilitation Sciences

Molly Rae Fagin
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Mark Gaied
B.S. (Oakland University)
M.S. (Case Western Reserve University)
Health and Rehabilitation Sciences

Karen Marie Gallant
B.Music (University of Illinois at Urbana-Champaign)
M.Mus. (University of Texas at Austin)
Health and Rehabilitation Sciences

Ashwini Ganesh
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Taylor Leigh Given
B.S.Biomed.Eng. (The Ohio State University)
Health and Rehabilitation Sciences

Kelsey Bodnar Halloran
B.S. (University of Pittsburgh)
Health and Rehabilitation Sciences

Jackson Eugene Hauger
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Emma Nicole Humenay
B.S. (Miami University)
Health and Rehabilitation Sciences

Diane Minoti Kalita
B.S. (Salisbury State University)
Health and Rehabilitation Sciences

Trang Thuy Le
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Alicia Ma
B.S. (University of Pittsburgh)
Health and Rehabilitation Sciences

Malina Mitchell
B.S. (West Virginia University)
Health and Rehabilitation Sciences

Joshua Charles Moeller
B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Karinne Kathryn Moore
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Marquis Anthony Netter
B.S.Ath.Trng. (The Ohio State University)
Health and Rehabilitation Sciences

Benjamin David Okenge
B.A. (Asbury University)
Health and Rehabilitation Sciences

Dylan Jacob Papali
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Danielle Marie Poeppelman
B.S. (University of Toledo)
Health and Rehabilitation Sciences

Olivia Marie Powers
B.S. (Western Michigan University)
Health and Rehabilitation Sciences

Emily Christine Schlichting
B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Paige Hannah Nicole Shealy
B.S. (Ashland University)
Health and Rehabilitation Sciences

Aminderpal Singh
B.S. (University of Cincinnati)
Health and Rehabilitation Sciences

Jireh Zuriel Soto
B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Julia Marie St. John
B.A. (Denison University)
Health and Rehabilitation Sciences

Rachel M. Strayer
B.S. (Carson-Newman University)
Health and Rehabilitation Sciences

Hayley Ann Suchland
B.S. (Wilmington College)
Health and Rehabilitation Sciences

Victoria Lee Sullivan
B.S. (Mercyhurst University)
Health and Rehabilitation Sciences

Aleitha Kathryn Tefft
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Peyton Joel Thomas
B.S. (Marshall University)
Health and Rehabilitation Sciences

Catherine Elizabeth Van Curen
B.S.Biomed.Eng. (The Ohio State University)
Health and Rehabilitation Sciences

Xing Wei
B.A. (Liaoning Normal University)
Health and Rehabilitation Sciences

Jena Nicole Wharton
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Jacob Gareth Zerkle
B.S. (Ohio University)
Health and Rehabilitation Sciences

Jiaze Zhu
B.S. (University of Pittsburgh)
Health and Rehabilitation Sciences

Specialist in Education

Hannah Elizabeth Berger
B.A.Honors (University of Dayton)
M.A. (The Ohio State University)
Education

Anna Lauren Davis
B.S. (Franklin University)
M.A. (The Ohio State University)
Education

Adam Keith Friend
B.A., M.A. (The Ohio State University)
Education

Margaret Mae Friend
B.A. (Otterbein University)
M.A. (The Ohio State University)
Education

Alison Nicole Mroczkowski
B.A. (The Ohio State University)
Education

Master in Animal Sciences

Jessica Eagle
B.S. (The University of Findlay)
Animal Sciences

Allison Elizabeth Magyar
B.S.Agr. (The Ohio State University)
Animal Sciences

Grace Marie Trepczyk
B.S. (The University of Findlay)
Animal Sciences

Valerie Matheson Van Meter
B.S. (Otterbein University)
Animal Sciences

Master in the Study of Law

Danyah Hatem Abdelqader
B.S.Educ. (The Ohio State University)
Law

Sydney Anderson
B.F.A. (Ringing College of Art and Design)
Law

Matthew J. Busser
B.A. (Kent State University)
M.P.A. (Ohio University)
Law

Dina Khaled Elhindi
B.S. (University of Akron)
Law

Ellen Elizabeth French
B.S. (Franklin University)
M.P.A. (Ohio University)
Law

Jay Hanna
B.A. (Ohio Dominican University)
Master's (Kent State University)
Law

Kesla B. Klingler
B.S. (Indiana University East)
M.S.W. (The Ohio State University)
Law

Megan Smetana
Pharm.D. (University of Kentucky)
Law

Breanna Thayer
B.A. (Columbia College)
Law

Master of Accounting

Zachary M. Abraham
B.A. (Heidelberg University)
Accounting and Management Information Systems

Josephine Appiah
B.A. (Ohio University)
Accounting and Management Information Systems

Jackson Bailey
B.S. (Montana State University Billings)
Accounting and Management Information Systems

Jacqueline Elizabeth Baron
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Stuart Franklin Bills
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Jacob I. Black
B.A. (University of Texas at Austin)
Accounting and Management Information Systems

Martina Brode
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Owen Anthony Burk
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Lily Grace Cronley
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Michael William Dallas
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Colin Toussaint Daly
B.Bus.Adm. (Temple University)
Accounting and Management Information Systems

Kimberly Ann Nicole Davis
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Joshua Gregory DeCicco
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Catherine Sophia Dorsey
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Juliette Nkafu Ekokobe
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Matthew Elias
B.A. (Case Western Reserve University)
Accounting and Management Information Systems

Andrew Grant Fisher
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Jack Forsman
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Robert Martin Gibbs III
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Sophia Ann Gillis
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Kent Traylor Gordon
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Patricia Elaine Gustian
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Ciara Catherine Niccole Hanson
B.S. (Hampton University)
Accounting and Management Information Systems

Brianna Renee Harris
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Jie Ji
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Joseph Josiah Jones
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Okan Kardzhala
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Olivia Kaufman
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Penelope Jane Kern
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Muen Li
B.A. (University of Washington)
Accounting and Management Information Systems

Kaleb Bryce Madewell
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Ryan Patrick Mayr
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Michael Anthony McShannic
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Taylor M. Neubert
B.S. (Bowling Green State University)
Accounting and Management Information Systems

Paul Park
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Shivani Saurabhbbhai Patel
B.Comr.Three (Sardar Patel University)
Accounting and Management Information Systems

Yash Patel
B.S. (Rutgers University)
Accounting and Management Information Systems

Jacob Pfander
B.S. (Ohio University)
Accounting and Management Information Systems

Carmen Taylor Reis
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Kyle Rodriguez
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Cooper T. Roe
B.A. (The Ohio State University)
Accounting and Management Information Systems

Thomas Scherer
B.S. (University of Dayton)
Accounting and Management Information Systems

Michael Redd Schloss
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Robert Mitchell Schloss
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Jacob Andrew Selby
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Chao Shi
B.S. (Shanghai Lixin University of Accounting & Finance)
Accounting and Management Information Systems

Hugh Phillip Silberman
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Guanrong Song
B.S. (University of Toledo)
Accounting and Management Information Systems

Hope R. Tageson
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Brigham Taylor, Jr.
B.S. (Utah State University)
Accounting and Management Information Systems

Taniah Monae Thomas
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Adam Kvido Tucek
B.A. (Michigan State University)
Accounting and Management Information Systems

Marissa Rose Turner
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Alex J. Umanzor
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Andrew David Van Horn
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Hannah Mary Verhoff
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Abbie Waddell
B.A. (Ohio Wesleyan University)
Accounting and Management Information Systems

Kexin Wang
B.S. (Wenzhou-Kean University)
Accounting and Management Information Systems

Elise Elizabeth Wenz
B.S.Bus.Adm. (The Ohio State University)
Accounting and Management Information Systems

Ruijia Zhou
Bachelor's (Nanjing University of Finance & Economics)
M.Acct. (University of Shanghai for Science and Technology)
Accounting and Management Information Systems

Master of Actuarial and Quantitative Risk Management

Adam Purdy
B.S. (Notre Dame College)
M.B.A. (Concordia University Wisconsin)
Actuarial and Quantitative Risk Management

Qiutong Wang
Bachelor's (Southern Methodist University)
Actuarial and Quantitative Risk Management

Master of Applied Economics

Nathan Andrew Brey
B.S. (College of Charleston)
Applied Economics

Chehara Lakshini Dias Amaratunga
B.S. (University of London)
Master's (University of Adelaide)
Applied Economics

Peter Hayden
B.S. (The Ohio State University)
Applied Economics

Benjamin David Hofecker
B.S.Bus.Adm. (Liberty University)
Applied Economics

Yiyi Jiang
Bachelor's (Harbin Institute of Technology)
Applied Economics

Brian Knott
B.S. (The Ohio State University)
Applied Economics

Jiatong Liu
B.S.Agr. (University of Illinois at Urbana-Champaign)
Applied Economics

Avery Elizabeth Lowden
B.S. (The Ohio State University)
Applied Economics

Nicolas Henry Sentelle
B.A. (The Ohio State University)
Applied Economics

Matthew Benjamin Taylor
B.S. (The Ohio State University)
Applied Economics

Evan O'Neill Williams
B.S.Bus.Adm. (The Ohio State University)
Applied Economics

Yulin Yu
B.A. (The Ohio State University)
Applied Economics

Master of Applied Statistics

Yuheng Ou
Bachelor's (Guangdong University of Finance and Economics)
Statistics

Master of Architecture

Doroteo Arreola Carrera
B.S.Arch. (The Ohio State University)
Architecture

Kelsey Marie Bartalsky
B.S.Arch. (The Ohio State University)
Architecture

Siana Myrrh Bennett
B.S.Arch. (The Ohio State University)
Architecture

Adriana Maria Chesterfield
B.A. (Miami University)
Architecture

Devon Taylor Duch
B.S.Arch. (The Ohio State University)
Architecture

Narges Eghlidos
B.A. (Islamic Azad University)
Architecture

Angela Matilde Evans
B.A. (Miami University)
Architecture

Samuel Richard Ferguson
B.S.Arch. (The Ohio State University)
Architecture

Lillie Pearl Gillespie
B.Bus.Adm. (University of Cincinnati)
Architecture

Olivia C. Jackson
B.S. (University of Virginia)
Architecture

Catherine Elizabeth Jahnke
B.S.Arch. (University of Michigan)
Architecture

Devanshi K. Jariwala
B.S. (Kent State University)
Architecture

John Xides Jesionek
B.S.Arch. (The Ohio State University)
Architecture

Michael Thorne Johnson
B.S.C.R.P. (The Ohio State University)
Architecture

Nandita Shripad Joshi
Architect (University of Mumbai)
Architecture

Benjamin Laurance Kaufman
B.S.Arch. (Bowling Green State University)
Architecture

Markie Justalyn Mathews
B.S. (The Ohio State University)
Architecture

Claire Elizabeth O'Verko
B.S.Arch. (The Ohio State University)
Architecture

Roxana Pena
B.A. (Florida International University)
Architecture

John Patrick Ryan
B.A. (Loyola University Chicago)
Architecture

Angela Eleni Sakis
B.S.Arch. (The Ohio State University)
Architecture

Cierra Janelle Stevens
B.S.Arch. (The Ohio State University)
Architecture

Master of Arts

Riley Katherine Adleta
B.A. (The Ohio State University)
Education

Mindy Grace Agranoff
B.A. (The Ohio State University)
Speech-Language Pathology Program

Nicolas Aguia Betancourt
B.Music (Universidad Sergio Arboleda)
B.A. (Pontificia Universidad Javeriana)
M.A. (New York University)
Ph.D. (University of Pittsburgh)
Spanish and Portuguese

Ali Ahmed Al Khafaf
B.S. (University of Texas at Austin)
Education

Sage Albert
B.Educ. (University of North Carolina)
Education

Grace Louise Amato
B.A. (The Ohio State University)
Speech-Language Pathology Program

Luke Anderson
B.Music (University of Nebraska-Lincoln)
Education

Melissa Anderson
B.Music (Boston University)
Music

Channing Alexandria Baker
B.A. (Wofford College)
East Asian Studies

Adam Benjamin Banks
B.A. (Washington University in Saint Louis)
Comparative Studies

Mac Cole Bardayan
B.A. (The Ohio State University)
East Asian Languages and Literatures

Melike Gul Baspinar
B.A. (The Ohio State University)
Speech-Language Pathology Program

Morgan Elizabeth Beebe
B.S., M.D. (University of Central Florida)
Education

Joan Wagoner Beetstra
B.S.Educ., M.S. (Baylor University)
Education

Esteban Eduardo Benalcazar Cepeda
B.A. (Pontificia Universidad Catolica del Ecuador)
Master's (International University of La Rioja)
Spanish and Portuguese

Luke William Bendick
B.A. (The Ohio State University)
Slavic and East European Studies

Lydia Jean Bentley
B.S. (The Ohio State University)
Bioethics

Camila Naiquen Bracamonte
B.A. (University of Cordoba)
Spanish and Portuguese

Ariel Paige Burns
B.S.Educ. (Bowling Green State University)
Education

Robert Lee Burt III
B.S. (The Ohio State University)
Education

Cheyenne Martine Carey
B.A. (University of South Florida)
Speech-Language Pathology Program

Felipe Alberto Caro Lopez
Titulo.Bach. (Universidad de Chile)
M.B.A. (Indiana Institute of Tech)
Public Policy and Management

Holland Toye Cavanaugh
B.S.Bus.Adm. (The Ohio State University)
Education

Kaidra Dawn Chapin
B.A. (The Ohio State University)
Education

Andrea Nicole Cheney
B.A. (Miami University)
M.A. (The Ohio State University)
Education

Hayeong Cho B.S. (Pennsylvania State University) <i>Education</i>	Maryam Elmajdoubi Bachelor's (Ohio Dominican University) <i>Education</i>	Kelly Anna Gallagher B.A.Honors (College of The Holy Cross) <i>Slavic and East European Languages and Cultures</i>	Amber Lynn Haist B.S.Educ. (The Ohio State University) <i>Education</i>	Isobel Lee Hooker B.A. (Colgate University) <i>Slavic and East European Studies</i>
Joshua Michael Cornelius B.A.Honors (University of Houston) <i>English</i>	Farhiya Abdi Elmi B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	William Joseph Gaskeen B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Julia Grace Hall B.S., M.Educ. (Miami University) <i>Education</i>	Christopher Jordan Hope B.A. (University of Delaware) <i>French and Italian</i>
Kala Ann Coyan-McClure B.A. (The Ohio State University) <i>Education</i>	Emma Emrich B.A. (Cedarville University) <i>Education</i>	Madeline Elle Gautreaux B.A. (Capital University) <i>Education</i>	Tianran Han B.A.Honors (University of British Columbia) M.A. (University of Toronto) <i>East Asian Languages and Literatures</i>	Yuika Inami B.A. (International Christian University) <i>East Asian Languages and Literatures</i>
Jessica Crabtree B.A., Bachelor's (Denison University) <i>English</i>	Courtney Alvis Esau B.S. (University of Georgia) M.D. (Medical College of Georgia) <i>Education</i>	Alyssa Danielle Gift B.S.Humn.Ecol. (The Ohio State University) <i>Education</i>	Emoni Nicole Harmon B.A. (The Ohio State University) <i>Women's, Gender, and Sexuality Studies</i>	Natasha Cristina Jimenez Marchany B.S. (The Ohio State University) <i>Education</i>
Shelemiah Azalia Crockett B.A. (Indiana University) <i>Speech-Language Pathology Program</i>	Logan Noelle Favor B.A. (The Ohio State University) <i>African-American and African Studies</i>	Maryum Tariq Gill B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Emma Leigh Heideman B.A. (The Ohio State University) <i>Education</i>	Katie Elizabeth Jividen B.Educ. (The University of Findlay) M.A. (Walden University) <i>Education</i>
Sohan Philip Daniel B.S. (West Virginia University) <i>Education</i>	Richard Eamon Ferguson B.S., M.D. (State University of New York at Buffalo) M.B.A. (Auburn University) <i>Bioethics</i>	Jacob Aaron Glorioso B.S.Educ. (The Ohio State University) <i>Education</i>	Evan E. Hennington B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Adam Robert Johnson B.A. (University of North Carolina at Greensboro) <i>Slavic and East European Languages and Cultures</i>
Ashley Renee Davis B.A. (Wake Forest University) <i>Women's, Gender, and Sexuality Studies</i>	Rebecca Ann Fiete B.A. (Wittenberg University) <i>Education</i>	Tori Lynn Glowacki B.S. (Bowling Green State University) <i>Speech-Language Pathology Program</i>	Conner Scott Hicks B.A. (The Ohio State University) <i>Education</i>	Chandler Jones B.A. (Miami University) <i>Education</i>
Joana de Assis Pacheco Videira B.A. (Universidade de Sao Paulo) <i>Communication</i>	Amelia Jeannette Figler <i>History</i>	Megan Elizabeth Goebel B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Meredith Katherine Hilke B.S.Soc.Work (University of Cincinnati) <i>Education</i>	Thomas Morgan Jones B.A., B.Educ. (Miami University) <i>Education</i> <i>Latin American Studies</i>
Maria Di Meglio B.Music, M.Mus. (Indiana University) <i>Speech-Language Pathology Program</i>	Victoria Ann Finwall B.A. (The Ohio State University) <i>Sociology</i>	Karissa Anne Gonzalez B.S. (University of California, Riverside) <i>Bioethics</i>	Michael Alexander Hilty B.A. (The Ohio State University) <i>Education</i>	Bethany B. Jones-Augustine B.S. (University of Tennessee-Knoxville) M.S.W. (The Ohio State University) <i>Bioethics</i>
Abbey Lee Dillon B.A. (Ohio Dominican University) <i>Education</i>	Megan Leigh Fisher B.S. (College of Wooster) <i>Education</i>	Katie Gouge B.A.Honors (University of Tennessee-Knoxville) <i>Political Science</i>	Hamda Ismail Hirs B.A., B.S. (The Ohio State University) M.A. (University of Denver) <i>Political Science</i>	Klaire Nicole Kazmerzak B.A. (The Ohio State University) <i>Education</i>
Mauricio Antonio Dos Santos Licenciatu (Universidad Reg do Cariri) <i>Education</i>	Samantha Joy Flanagan B.S. (The Ohio State University) <i>Communication</i>	Eleanor Ruth Grazier B.A. (The Ohio State University) <i>Slavic and East European Languages and Cultures</i>	Zoe Catherine Hiss B.A. (The Ohio State University) <i>Education</i>	Ava Rana Keller B.A. (The Ohio State University) <i>Education</i>
Jessica Emick Drown B.A. (The Ohio State University) <i>Education</i>	Allison Nicole Fry B.S.Educ. (Bowling Green State University) <i>Education</i>	Adeline Elizabeth Green B.S.Educ. (The Ohio State University) <i>Education</i>	Hannah Mae Holbert <i>History</i>	Alexa Nicole Kennedy B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>
James Harvey Duffee B.A. (Antioch College) M.D. (University of Texas Health Science Center) M.P.H. (The Ohio State University) <i>Bioethics</i>	Emma Elizabeth Fry B.S.Educ. (The Ohio State University) <i>Education</i>	Emma Sheridan Guritza B.A. (Kent State University) <i>Education</i>	Alison Holmes B.S.Humn.Ecol., M.Educ. (The Ohio State University) <i>Education</i>	Shelly Marie Kingham B.S. (Ohio Dominican University) <i>Education</i>
Savanna Eggens B.A. (West Virginia University) <i>East Asian Studies</i>	Shelby Frye B.A. (Miami University) M.A. (University of Texas at Austin) <i>Sociology</i>	Jay Alexander Marsh Hadfield B.A. (Willamette University) <i>Slavic and East European Languages and Cultures</i>	Christopher Edward Holt B.A. (North Carolina Agricultural and Technical State University) <i>Speech-Language Pathology Program</i>	Morgan Marie Kirk B.S. (Ohio Dominican University) <i>Speech-Language Pathology Program</i>

Katelynn Anna Klemm
B.A. (Michigan State University)
East Asian Studies

Sarah Renee Kline
B.A., B.S.Educ. (The Ohio State University)
Education

Kyle Knott
B.S., B.S.Educ. (Northern Illinois University)
Comparative Studies

Lauren Nicole Kowal
B.A., B.Mus. (Western Michigan University)
M.Mus. (The Ohio State University)
Arts Administration, Education and Policy

Olivia Ann Kroh
B.A. (Hillsdale College)
Theatre

Erin Michiko Kubota
B.A. (Sarah Lawrence College)
History of Art

Mei Yu Kuo
B.A. (National Chengchi University)
M.A. (National Taiwan University)
Sociology

Santiago Thomas Lacroix Eussler
B.A. (Universidad de Ciencias)
B.A. (Universidad de San Andres)
Political Science

Briahna Colleen Lally
B.A. (Muskingum University)
Education

Ashley Nicole Lane
B.A. (The Ohio State University)
Bioethics

Matthew C. Lang
B.A. (University of Akron)
Education

Madelin Larick
B.A., Bachelor's (Miami University)
Education

Hannah Lewis
B.A. (Miami University)
Education

Warren Kiabtoom Lor
B.Bus.Adm. (University of Wisconsin)
Education

Morgan Claire Lunsford
B.S. (Bowling Green State University)
Speech-Language Pathology Program

Shea Elizabeth Mangan
B.A. (The Ohio State University)
Speech-Language Pathology Program

Carlyn Megan Marsh
B.S.Educ. (The Ohio State University)
Education

Jessica Paige McCallum
B.S. (Bowling Green State University)
Education

Rachel Martha McKim
B.A.Honors (University of Mount Union)
Education

Cara Teresa McKinley
B.S.Educ. (The Ohio State University)
Education

Quantazia Merchant
B.S.Bus.Adm. (The Ohio State University)
Education

Jennifer Anne Middendorf
B.A. (The Ohio State University)
Speech-Language Pathology Program

Tristan Monteith
B.A. (The Ohio State University)
Public Policy and Management

Kylee Ann Montgomery
B.A. (University of Oklahoma)
Sociology

Vivienne Therase Moore
B.Bus.Adm. (Strayer University)
Education

Anna Isabelle Moreau
B.A. (The Ohio State University)
Speech-Language Pathology Program

Luis Moreno
B.A. (Central Washington University)
English

Andrew Scott Morgan
B.A. (Texas State University)
Germanic Languages and Literatures

Jordan Kai Mori
B.A. (The Ohio State University)
Speech-Language Pathology Program

Elise Marielle Nelson
B.A. (The Ohio State University)
Education

Alyssa Mary Newman
B.S. (Cleveland State University)
Education

Tatum Elizabeth Nicols
B.S. (University of Pittsburgh)
Education

Sterling Nix II
B.A. (Virginia Polytechnic Institute and State University)
History of Art

Jessica Nodo
B.A. (American University, Washington, DC)
Public Policy and Management

Monica Anne O'Neill
B.A. (The Ohio State University)
Speech-Language Pathology Program

Rita Catherine Offutt
B.A. (La Salle University)
Education

Collin Olen-Thomas
B.A. (Hope College)
M.A. (Princeton Theological Seminary)
Bioethics

Ruth Nneoma Oliwe
B.S. (Michael Okpara University of Agriculture)
Education

Elliott J. O'Malley
B.A. (Otterbein University)
Public Policy and Management

Filiz Oskay
B.A. (Middle East Technical University)
Education

Collin Gerald Parks
B.A. (University of Michigan)
Greek and Latin

Abigail Jane Phillips
B.S.Educ. (The Ohio State University)
Education

Kirah Pringle
B.S. (University of Cincinnati)
Speech-Language Pathology Program

Orlando Ramirez
B.A. (Florida International University)
Education

Mathilde Valentine Robert
B.A. (Bowling Green State University)
French and Italian

Annelise Frieda Robinson
B.A. (The Ohio State University)
Education

Nicholas Martin Rodgers
B.S. (The Ohio State University)
Education

Connor Caston Rouillier
B.A. (Louisiana State University, Baton Rouge)
M.A. (The Ohio State University)
Linguistics

Morgan Thandiwe Rowan
B.A.Honors (Walsh University)
Education

Diego Ernesto Ruiz Tagle Munoz
B.A., Master's (Universidad de Concepcion)
Spanish and Portuguese

Yurie Oh Sarver
B.S.Bus.Adm. (The Ohio State University)
Education

Cierra Sawyer
B.S.Educ. (The Ohio State University)
Education

Emma Kate Schaefer
B.A., M.A. (Saint Louis University)
Spanish and Portuguese

Madison Kay Scheiner
B.Educ. (Capital University)
Education

Nichole Rayna Schiff
B.A. (University of Richmond)
Education

Mary Hope Schmidt
B.A. (University of Cincinnati)
Education

Julie Marie Schnell
B.A. (The Ohio State University)
Education

Olivia May Sexton
B.S.H.D.F.S. (The Ohio State University)
Education

Kyla Michele Shabazz
B.A. (The Ohio State University)
Education

Catherine Shirley
B.A. (The Ohio State University)
Speech-Language Pathology Program

Victoria Antonette Smith
B.A. (Allegheny College)
Theatre

Kathleen Snelling
B.S. (Colorado State University)
Communication

Anastasia Sotnikova
Arts Administration, Education and Policy

Olivia Grace Spradlin
B.A. (The Ohio State University)
Education

Elaine Rene Stearn
B.S. (Oklahoma Wesleyan University)
Bioethics

Samantha Jeanne Stephens
B.A. (Auburn University)
Education

Kirsten Renee Talley
B.A. (The Ohio State University)
Speech-Language Pathology Program

Kelli C. Trinoskey
B.A. (Marquette University)
Medical Humanities and Social Sciences

Annemarie Michelle Turpin
B.A. (Indiana University Purdue University Indianapolis)
M.B.A. (The Ohio State University)
Education

Jack Everett Van Dine
B.A. (Sonoma State University)
English

Andrew Lloyd Vassel
B.A. (Cleveland State University)
Education

Macy Joy Wade
History

Maya Elizabeth Wadhwa
B.A. (Bucknell University)
Women's, Gender, and Sexuality Studies

Nicole Marie Wargo
B.S. (Baldwin Wallace University)
Education

Alexis Rose Webster
B.S.Hlth.Reh.Sci. (The Ohio State University)
Bioethics

Kortney Jonae Weeks
B.S. (The Ohio State University)
M.D. (Rosalind Franklin University of Medicine and Science)
Education

Elizabeth Grace Westrick
B.A., B.S. (Bowling Green State University)
Education

Hannah Joy White
B.A. (The Ohio State University)
Speech-Language Pathology Program

Sarah Nicole Williams
B.A. (Bowling Green State University)
Education

Jillian Kaitlyn Wood
B.S. (Baldwin Wallace University)
Education

Emerson Woodbury
B.S.Pharm.Sci. (The Ohio State University)
Bioethics

Lila Wright
B.A. (Boston University)
English

Sophia Ann Zamarelli
B.S.Educ. (The Ohio State University)
Education

Tracy Lynn Zeller
B.S.Nurs., B.S.Bus.Adm.
(Youngstown State University)
Bioethics

Yongnan Zhang
B.A., M.A. (Shanghai International Studies University)
French and Italian

Master of Athletic Training

Jennifer Bendokas
B.S.H.P.N.E.S. (Ohio University)
Health and Rehabilitation Sciences

Darian Jade Blanchard
B.S. (Grand Valley State University)
Health and Rehabilitation Sciences

Sarah Grace Born
B.S. (Ohio University)
Health and Rehabilitation Sciences

Kate Ferry
B.S.H.P.N.E.S. (Grand Valley State University)
Health and Rehabilitation Sciences

Taylor Ann Finnerty
B.S. (State University of New York College at Brockport)
Health and Rehabilitation Sciences

Zachary Michael Francek
B.S.Educ. (The Ohio State University)
Health and Rehabilitation Sciences

Ethan Minshall
B.S. (Miami University)
Health and Rehabilitation Sciences

Alexis Victoria Morton
B.S.H.P.N.E.S. (The Ohio State University)
Health and Rehabilitation Sciences

Rosalie Rabin
B.S. (Indiana University)
Health and Rehabilitation Sciences

Elizabeth Schneider
B.S. (Miami University)
Health and Rehabilitation Sciences

Master of Business Administration

Jason Abady
B.Mus.Educ. (The Ohio State University)
Business Administration

Isaac Otokpa Aboh
B.S. (Manhattan College)
Business Administration

Sai Kiran Aelakurthy
B.Tech. (Jawahar Lal Nehru Technological University)
Business Administration

Oluwakemi Deborah Ajala
Diploma (Lagos State Polytechnic)
Business Administration

Subbaiah Annamalai
Diploma (Thiagarajar Polytechnic)
B.Engr. (Bharathiar University)
Business Administration

Ezichi Adanna Anokwuru
B.S. (University of Lagos)
Business Administration

Shanelle Aranha
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Elizabeth Hart Austin
B.S. (Duke University)
M.S. (Vanderbilt University)
Business Administration

Nicholas Basting
B.A. (Bowling Green State University)
Business Administration

John Baus
B.S. (The Ohio State University)
Business Administration

Skyllar M. Beckel
B.S. (Pennsylvania State University)
Business Administration

Sakhi S. Beeru
B.Med., B.Surg. (Gulf Medical University)
Business Administration

Steven Billups
B.S. (The Ohio State University)
M.S. (Ohio Dominican University)
Business Administration

Emily Biondo
B.S. (Miami University)
Business Administration

Willis E. Blackshear, Jr.
B.A. (Wright State University)
Business Administration

Robblyn Branch
B.S. (Grambling State University)
Business Administration

Connor J. Brennan
B.S.Bus.Adm. (Duquesne University)
Business Administration

Austin Brizee
B.S.Educ. (The Ohio State University)
Business Administration

Zachary Brown
B.S.Mat.Sci.Eng. (The Ohio State University)
Business Administration

Clayton Burke
B.A. (Heidelberg University)
Business Administration

Aaron D. Bush
B.S. (Ohio Valley University)
Business Administration

Anthony M. Cassano
Bachelor's (Gannon University)
Business Administration

Nicholas Cebulko
Bachelor's (University of Dayton)
Business Administration

Gar D. Chatain
B.A. (The Ohio State University)
Business Administration

Gayatri A. Cheruvu
B.S. (Andhra University)
M.S. (Bharathidasan University)
Business Administration

Anthony John Ciammaichella
B.S., Master's (Marquette University)
Business Administration

Belkis Angelina Clark
B.A., M.A. (University of Central Florida)
Business Administration

Kyle Clark
B.S.Bus.Adm., B.S. (University of Arizona)
Business Administration

Rachel Yiping Ho Close
B.S. (Purdue University)
Business Administration

James Michael Colestro
B.S. (University of Pittsburgh)
Business Administration

Erica J. Conway
B.S. (University of Wisconsin)
Business Administration

Autumn Cooper
B.Bus.Adm. (Tiffin University)
Business Administration

Todd P. Cooper
B.S., M.S. (Case Western Reserve University)
Business Administration

Jarrod N. Crano
B.S.Bus.Adm. (Kent State University)
Business Administration

Grace Harley Day
B.A. (Capital University)
Business Administration

Alexander C. Douglas
B.S. (Ohio University)
Business Administration

Taylor Ashley Dunbar
B.S.Biomed.Eng. (The Ohio State University)
Business Administration

Alex J. English
B.Bus.Adm. (Ohio University)
Business Administration

LaShawn Evans, Jr.
B.A., Bachelor's (University of Kentucky)
Business Administration

James Fox
B.S. (University of Maryland)
M.S. (University of Cincinnati)
Business Administration

Matthew Fox
B.A. (Franciscan University of Steubenville)
Business Administration

Maxwell Garrison
B.A.Journal. (The Ohio State University)
Business Administration

Jarid D. Gelinas
B.S. (University of Dayton)
Business Administration

Ryan D. Gordon
B.S.Bus.Adm. (Bowling Green State University)
Business Administration

Sai Charan Gunda
B.Educ. (Osmania University)
Business Administration

Jeremy T. Hall
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Yi Han
B.Engr. (Shanghai Normal University)
Master's (City College of the City University of New York)
Business Administration

Margaret Lee Hand
B.S.Dent.Hygn. (The Ohio State University)
Business Administration

Westin Hart
B.A. (Ohio University)
Business Administration

William Hauser
B.S. (Carnegie Mellon University)
Business Administration

Ryan Hayes
B.S. (The Ohio State University)
Business Administration

Nikisha Hirani
Bachelor's (University of Akron)
Business Administration

Shelby L. Hirzel
B.S., D.P.T. (The University of Findlay)
Business Administration

Blaine Hornbuckle
B.S. (Bellevue University)
Business Administration

Rania M. Ibrahim
B.A. (Montclair State University)
Business Administration

Amanda Nicole Ingram
B.S. (University of Pittsburgh)
Business Administration

Ikechukwu Sylvester Iwuala
B.S. (Nnamdi Azikiwe University)
M.S. (University of Benin)
Business Administration

Samantha Mary Jaglowski
B.S., M.D., M.P.H. (The Ohio State University)
Business Administration

Lance M. Jones
B.S.Arch. (The Ohio State University)
Business Administration

Michael D. Juchau
B.S. (Brigham Young University)
Business Administration

Christopher M. Judd
B.S. (Ashland University)
Business Administration

Ryan Keefe
B.S. (Union College)
Business Administration

Bethannie J. Kittrell
B.S. (Western Carolina University)
M.S. (Michigan State University)
Business Administration

Garrett Knappe
B.A. (Adrian College)
Business Administration

Alexander James Kocheff
B.S. (University of Mount Union)
Business Administration

Krishna Chaitanya Konduri
Bachelor's (Indian Institute of Technology)
Business Administration

Tamara Jean Lampert
B.S.Humn.Ecol. (The Ohio State University)
Business Administration

Jeffrey Laubert
B.S.Hlth.Reh.Sci. (The Ohio State University)
Business Administration

Larri' D. Lee
B.Bus.Adm. (American Intercontinental University)
Business Administration

Antonia Tadiesha Janiel Leslie
B.S. (The University of the West Indies)
Business Administration

Hannah Catherine Lindesmith
B.S. (University of Dayton)
Business Administration

Alex Macaуда
B.A., B.S. (Miami University)
Business Administration

Nikolas Madaris
Bachelor's (Ohio University)
Business Administration

Kayla D. Malone
B.F.A. (University of Rio Grande)
Business Administration

Maura E. Manning
B.S. (Miami University)
Business Administration

Mira Massoud
B.Med., B.Surgery. (Ain Shams University)
Business Administration

Brian McClure
B.S.Mech.Eng. (Michigan State University)
Business Administration

Shane Mendoza
B.S. (University of California, San Diego)
Business Administration

Robert Onyinye Moka
Bachelor's (Federal University of Technology)
Business Administration

MaryRose Moore
B.A. (The Ohio State University)
Business Administration

Samantha Morgan
B.S.Hsp.Mgt. (The Ohio State University)
Business Administration

Kyle Musiala
B.S. (Capital University)
D.P.T. (The Ohio State University)
Business Administration

Samuel Benson Ndaeyo
B.S. (University of Calabar)
Business Administration

Andrew R. Newcomb
B.A. (Loyola University Chicago)
Business Administration

Thuy Trang Nguyen
B.A. (Foreign Trade University, Vietnam)
Business Administration

Matthew James Nienkirchen
B.S. (The Ohio State University)
Business Administration

Aishat Olutosin Olukotun
Bachelor's (University of Ibadan)
Business Administration

Steve Oznowich
B.S. (University of Cincinnati)
Master's (Case Western Reserve University)
Business Administration

Jinal R. Patel
Bachelor's (University of Cincinnati)
Business Administration

Frank Angelo Patrizio
B.S.Cptr.Sci.Eng. (The Ohio State University)
Business Administration

Anna Rose F. Periyappurathu
B.S. (University of Detroit Mercy)
Business Administration

Gaston Richard Pleiman
B.S. (University of Toledo)
D.P.T. (University of Dayton)
Business Administration

Nicholas Potts
B.S. (Middle Tennessee State University)
Business Administration

Kevin Przybylski
B.S.Agr., D.V.M. (The Ohio State University)
Business Administration

Oybek Rakhmatillaev
B.A. (University Of Sunderland)
Business Administration

Taylor E. Rankin
B.S. (Ohio Dominican University)
Business Administration

Margaret M. Rode
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Michael Rose
B.S. (Kent State University)
Business Administration

Carrie Ruppen
B.Engr. (University of Akron)
Business Administration

Chad R. Rybicki
B.A. (The Ohio State University)
Business Administration

Rishita Saha
B.Engr. (Visvesvaraya Technological University)
Business Administration

Farah Aini Shazlin Binti Salleh
Bachelor's (Universiti Tenaga Nasional)
Business Administration

Kristen Sandvos
B.S. (University of Missouri-Columbia)
Business Administration

Emily Grace Schaupp
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Kyle W. Schembechler
B.A. (Boston University)
Business Administration

Sumaire S. Shamal
B.S. (Temple University)
Business Administration

Shuchi Sharma
B.S.Cptr.Sci.Eng. (Arizona State University)
Business Administration

Adam Garrett Heigle Sharp
B.A. (Miami University)
M.A. (Yale University)
Business Administration

Christo Simatupang
B.S. (Universitas Klabat)
Business Administration

Justin R. Skaggs
B.A. (Ohio Wesleyan University)
Business Administration

Alexander R. Snyder
B.A. (Wright State University)
Business Administration

Chelsey E. Spiller
Pharm.D. (Ohio Northern University)
Business Administration

Bailey Spitler
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Samuel Stalnaker
B.S. (Embry-Riddle Aeronautical University)
Business Administration

Ryan Storck
B.A. (Ohio University)
Business Administration

Douglas Strange
B.S. (University of Cincinnati)
Business Administration

Tyler Jacob Stuckey
B.S. (Bowling Green State University)
M.S. (Marietta College)
Business Administration

Quentin Switzer
B.S. (Michigan State University)
Business Administration

Duong Duy Thai
Bachelor's (Foreign Trade University, Vietnam)
Business Administration

Courtney Thraen
B.A.Journal. (The Ohio State University)
Master's (University of Mass Dartmouth)
Master's (Boston University)
Business Administration

Katherine Timmerman
B.Bus.Adm. (University of Toledo)
Business Administration

Maria Fernanda Torres Pastrana
B.S. (ITESM Monterrey)
Business Administration

Cristiane M. Ueno
M.D. (Universidade de Sao Paulo)
Business Administration

Elizabeth Varga
B.S. (DePauw University)
M.S. (University of Cincinnati)
Business Administration

Pankaj Verma
B.Tech. (Shoolini University)
Business Administration

Matthew Jeffery Wall
B.S. (Miami University)
Business Administration

Jacob K. Waltermeyer
B.A. (University of South Carolina)
Business Administration

Li Chen Wang
B.Bus.Adm. (Fu Jen Catholic University)
Business Administration

Alexa Webb
B.S. (University of Maryland)
M.S. (Louisiana State University, Baton Rouge)
Business Administration

Scott D. Wiley
B.A. (State University of New York at Oswego)
Business Administration

Michelle R. Wisecup
B.S. (Wright State University)
D.V.M. (The Ohio State University)
Business Administration

Olivia Renee Wysong
B.S.Agr. (The Ohio State University)
Business Administration

Yu I Yu
B.A. (Fu Jen Catholic University)
Business Administration

Kayla Zellers
B.S.Chem.Eng. (The Ohio State University)
Business Administration

Jiangjiang Zhu
B.S. (Donghua University)
Ph.D. (University of Vermont)
Business Administration

Kristin Lorraine Ziehm
B.S. (The Ohio State University)
Business Administration

Tori Taylor Zimmerman
B.S. (University of Akron)
Business Administration

Jake A. Zusman
B.S. (University of Oregon)
Business Administration

Master of City and Regional Planning

Willow Amelia Artherholt
B.S. (Youngstown State University)
City and Regional Planning

James Condo
B.A. (George Mason University)
City and Regional Planning

Taylor Marie Franco
B.S.Env.Nat.Res. (The Ohio State University)
City and Regional Planning

Anna Kathryn Goulson
B.A. (The Ohio State University)
City and Regional Planning

Chloe Green
B.S. (Ohio University)
City and Regional Planning

Jade Fontaine Lantz
B.A. (Arizona State University)
City and Regional Planning

Lucas Julian Martinez
B.A. (American University, Washington, DC)
City and Regional Planning

Pranav Maruti Naukudkar
Architect (Yashwantrao Chavan Mah U)
City and Regional Planning

Kairsten Nitsch
B.A., Bachelor's (Michigan State University)
City and Regional Planning

Tyler Phelps
B.S.Bus.Adm. (The Ohio State University)
City and Regional Planning

Cecilia Sloan Russell
B.S. (The Ohio State University)
City and Regional Planning

Michael Joseph Smith
B.A. (The Ohio State University)
City and Regional Planning

Master of Clinical Research

Meghan Margaret Bradshaw Eaton
B.S.Nurs. (University of Virginia)
Clinical Research

Kimberly Kertulis
B.S. (Auburn University at Montgomery)
Clinical Research

Heather Marie Niccum Haag
B.S.Nurs. (Indiana Wesleyan University)
Clinical Research

Cara Evelyn Wilson
B.S.Nurs. (College of St. Scholastica)
Clinical Research

Jennifer Ann Zvosec
B.S.Humn.Ecol. (The Ohio State University)
Clinical Research

Master of Dietetics and Nutrition

Jennifer Clare Boey
B.S. (John Carroll University)
Health and Rehabilitation Sciences

Kaitlin Elizabeth Cline
B.S. (Miami University)
Health and Rehabilitation Sciences

Courtney Lynn Cooper
B.S.Bus.Adm. (The Ohio State University)
Health and Rehabilitation Sciences

Jennifer Josie Cullen
B.S.Nutrition (The Ohio State University)
Health and Rehabilitation Sciences

Denise Louise Elshoff
B.Music (The Ohio State University)
M.A., M.Philos., Ph.D. (Yale University)
Health and Rehabilitation Sciences

Lydia Marie Forsthoefel
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Joseph Merritt Ramsey Goldman
B.A., B.S. (Tulane University of Louisiana)
Health and Rehabilitation Sciences

Lauren Hinze
B.S.Nutrition (North Carolina State University)
Health and Rehabilitation Sciences

Anna Olivia Kelley
B.S.H.P.N.E.S. (The Ohio State University)
Health and Rehabilitation Sciences

Meredith Lee Kiss
B.S. (West Virginia University)
Health and Rehabilitation Sciences

Margaret Jane Kramer
B.S.Nutrition (The Ohio State University)
Health and Rehabilitation Sciences

Sydney Morgan Levy
B.S.Nutrition (The Ohio State University)
Health and Rehabilitation Sciences

Sarah Jamison Makepeace
B.S. (Palm Beach Atlantic University)
Health and Rehabilitation Sciences

Madison Jo Manns
B.A. (Ohio Wesleyan University)
Health and Rehabilitation Sciences

Mackenzie Jordan Peeke
B.S. (Otterbein University)
Health and Rehabilitation Sciences

Katia Ringler
B.S.H.P.N.E.S. (Cleveland State University)
Health and Rehabilitation Sciences

Caitlin Elizabeth Rizzo
B.S.Nutrition (The Ohio State University)
Health and Rehabilitation Sciences

Claire Marie Roche
B.S. (Xavier University)
Health and Rehabilitation Sciences

Ashley Taylor Shagrin
B.S.Nutrition (Miami University)
Health and Rehabilitation Sciences

Cristina Isabel Sierra
Bachelor's (Florida State University)
Health and Rehabilitation Sciences

Amanda Christine Socha
B.S.Nutrition (The Ohio State University)
Health and Rehabilitation Sciences

Tiffany Ann Soisson
B.A. (Ohio Wesleyan University)
Health and Rehabilitation Sciences

Melissa Sullivan
B.S. (Universidad Auto de Tamaulipas)
Health and Rehabilitation Sciences

Sasathorn Thongkhao On
B.A. (Miami University)
Health and Rehabilitation Sciences

Gabrielle Lee VanHouwe
B.S. (Colorado State University)
Health and Rehabilitation Sciences

Master of Education

Iqra Abdullahi Abdi
B.A. (The Ohio State University)
Education

Saynab Abdi Ahmed
B.A. (The Ohio State University)
Education

Elizabeth Blackshire
B.A. (The Ohio State University)
Education

Summer Dawn Brecht
B.A. (The Ohio State University)
Education

Sophie Rose Clark
B.A. (The Ohio State University)
Education

Wilson Harry Cole
B.A. (The Ohio State University)
Education

David Jess Eubank II
B.A. (The Ohio State University)
Education

Victoria Grace Haller
B.A. (The Ohio State University)
Education

Claire Elise Hinterschied
B.S. (The Ohio State University)
Education

Haley Nicole Kaylor
B.S.Educ. (The Ohio State University)
Education

Frances Elizabeth Marshall
B.A. (The Ohio State University)
Education

Jillian Paige Matejka
B.A. (The Ohio State University)
Education

Chelsea Marie McGlinch
B.A. (The Ohio State University)
Education

Paul David Mendola
B.A. (The Ohio State University)
Education

Stephanie Mesa-Sanchez
B.A. (Otterbein University)
Education

Ava Marguerite Moore
B.A. (The Ohio State University)
Education

Myles Frederick Nessif
B.A. (The Ohio State University)
Education

Shrey Rahul Patel
B.A. (The Ohio State University)
Education

Taylor Lee Pemberton
B.A. (The Ohio State University)
Education

Gretchen Renee Rudolph
B.A. (The Ohio State University)
Education

Isaac Christopher Shui
B.S. (The Ohio State University)
Education

Olivia Marie Starr
B.A. (The Ohio State University)
Education

Lauren Elizabeth Sullivan
B.A. (The Ohio State University)
Education

Nathanael J. Swart
B.A. (The Ohio State University)
Education

Sydney Iona Toshok
B.A. (The Ohio State University)
Education

Sumedha Bhaskari Vadlamani
B.S.H.D.F.S. (The Ohio State University)
Education

Carter Williams
B.A. (The Ohio State University)
Education

Peyton Nicole Williams
B.S.Agr. (The Ohio State University)
Education

Master of Engineering Management

Adil Mohammedberhan Abdulkadir
B.S.C.S.M. (The Ohio State University)
Engineering Management

Garrett William Behrje
B.S.Mech.Eng. (Purdue University)
Engineering Management

Joshua Scott Bello
B.S.Mech.Eng. (University of Utah)
Engineering Management

David Steven Riley Brelsford
B.S.Elec.Eng., M.B.A. (Old Dominion University)
M.S. (George Washington University)
Engineering Management

Josh Scott Conarton
B.S. (University of Utah)
Engineering Management

Kelsey Doolittle
B.S. (Massachusetts Institute of Technology)
Engineering Management

Joseph Ryan Dwyer
B.S.Mech.Eng. (University of Nevada, Reno)
Engineering Management

Jeffrey Jon Herron
B.S. (Michigan State University)
Engineering Management

Kathryn Ann Kenney
B.S.Biomed.Eng. (University of Akron)
Engineering Management

Majd Khattab
Bachelor's (Hashemite University)
Engineering Management

Matthew Klips
B.S.Mech.Eng. (The Ohio State University)
Engineering Management

Mariah Mae Lewellen
B.S. (University of Cincinnati)
Engineering Management

Markus Roy Miller
B.S.Mech.Eng. (The Ohio State University)
Engineering Management

Scott Payne
B.S.Ind.Sys.Eng. (University of Arizona)
Engineering Management

Matthew Zellner
B.S.Mech.Eng. (University of Cincinnati)
Engineering Management

Master of Environment and Natural Resources

Erin Leigh Baer
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Jay Joseph Clark
B.S.Educ. (Bowling Green State University)
Environment and Natural Resources

Jason Deangelo Farmer
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Grace Garrity
B.S. (Ohio University)
Environment and Natural Resources

Kairsten Nitsch
B.A., Bachelor's (Michigan State University)
Environment and Natural Resources

Matthew Jeffery Wall
B.S. (Miami University)
Environment and Natural Resources

Master of Fine Arts

Skyler Arden Barnes
B.A. (University of Iowa)
English

Noah Bennett
B.A. (University of Florida)
Theatre

Isabel Bowser
B.F.A. (Alfred University)
Dance

Jalen Marques Carr
B.F.A. (Dillard University)
Theatre

Mandy Lynn Darrington
B.F.A. (Brigham Young University)
Art

Lucile McCarthy Dillon
B.F.A. (University of California, Irvine)
Dance

Annelise Woodward Duque
B.F.A. (Brigham Young University)
Art

Gianna Maria Gaetano
B.A. (Coastal Carolina University)
English

Breana Cheyane Hendricks
B.F.A. (State University of New York at New Paltz)
Art

Alisha Sue-Yi Jihn
B.A. (Saint Olaf College)
M.A. (Columbia College)
Dance

Megan Alexandra Jones
B.A. (Oakland University)
M.A. (Wayne State University)
English

Julie Ae Kim
B.S., Bachelor's (Carnegie Mellon University)
English

Trista Jillian Lee Koehler
B.A. (The Ohio State University)
English

Kathryn Grace LeMon
B.A., (Kenyon College)
English

Paitton Lewis
B.A. (University of Alaska Anchorage)
Theatre

Heather Leah McCabe
B.A. (Kenyon College)
English

Shannon McCarren
B.A. (Indiana University of Pennsylvania)
Theatre

Catherine Patricia McMahan
B.F.A. (University of Truman State University)
English

Andrew J. Mehall
B.F.A. (College for Creative Studies)
Art

Margaret Francis Miller
B.F.A. (University of Idaho)
Theatre

Catalina Munoz Arias
Bachelor's (Universidad del Valle de Colombia)
Design

Danielle Marie Batalion Ola
B.A. (Stanford University)
English

Claudia Owusu
B.A. (Otterbein University)
English

Christopher Ryan Quiroz
B.F.A. (Texas State University)
Theatre

Julian Cecil Robbins
B.A. (The Ohio State University)
Art

Andrew James Romriell
B.S., M.S. (Utah State University)
English

Katelyn Rose Roth
B.A., M.A. (Pittsburg State University)
English

Isabella Marie Saraceni
B.F.A. (University of Connecticut)
Art

Katherine Elizabeth Simon
B.A. (Vassar College)
Theatre

Alexandra Rose Smereka
B.A., M.A. (Wayne State University)
English

Joshua Anthony Smith
B.A. (Oregon State University)
Theatre

Sappho Stanley
B.A. (East Tennessee State University)
English

Angelina V. Steshenko
B.A. (University of California, Berkeley)
Theatre

Alexandra Tripe
B.F.A. (New York University)
Art

Kierra Camille Williams
B.F.A. (Indiana University)
Dance

Master of Global Engineering Leadership

Thomas Hoang-Khoa Do
B.S.Mat.Sci.Eng. (The Ohio State University)
Global Engineering Leadership

Master of Health Administration

Anna Avery Bass
Bachelor's (University of Texas at Austin)
Health Services Management and Policy

John Bennion
B.S. (Brigham Young University)
Health Services Management and Policy

Jacob Andrew Charlton
B.A. (The Ohio State University)
Health Services Management and Policy

Kagatou Diallo
B.S.Soc.Work (The Ohio State University)
Health Services Management and Policy

Jamie Claire Doak
B.S. (George Washington University)
Health Services Management and Policy

Lauren Fleetwood
B.S. (Indiana University)
Health Services Management and Policy

Autumn Grace Forte
B.A. (The Ohio State University)
Health Services Management and Policy

Rabaca Mohamed Haji Ibrahim
B.S. (Franklin University)
Health Services Management and Policy

Johnny Henry III
B.S.Pub.Hith. (The Ohio State University)
Health Services Management and Policy

Sebastian Imitola
B.A. (The Ohio State University)
Health Services Management and Policy

Jordan Johnsamson
Bachelor's (University of Texas at Austin)
Health Services Management and Policy

Erin Elise Kane
B.A. (Wayne State University)
Health Services Management and Policy

Alexandria Elizabeth Karpacs Brown
B.A. (The Ohio State University)
Health Services Management and Policy

Emma Grace Klemanski
B.A., B.S. (Mount Vernon Nazarene University)
Health Services Management and Policy

Elizabeth Anne LaPlante
B.A. (Miami University)
Health Services Management and Policy

Courtney Irene Martin
B.S. (Purdue University)
Health Services Management and Policy

Maeve McLoughlin
B.S., M.P.H. (The Ohio State University)
Health Services Management and Policy

Kanna Randi Miskin
B.S. (Utah Valley University)
Health Services Management and Policy

Hannah Michelle Nawrocki
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health Services Management and Policy

Gina Xuan Nguyen
B.S. (University of North Florida)
Health Services Management and Policy

Hannah Kaye Nosbisch
B.S.Bus.Adm. (University of Nebraska-Lincoln)
Health Services Management and Policy

Noor Odat
B.S. (Cleveland State University)
Health Services Management and Policy

Roxana Paredes
B.S. (The Ohio State University)
Health Services Management and Policy

Na'Maya Jiae' Perry
B.A. (Denison University)
Health Services Management and Policy

Todd Pilkington
B.S. (University of Cincinnati)
Health Services Management and Policy

Alexis Ciara Reynolds
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health Services Management and Policy

Kent Dean Tilger, Jr.
B.S. (Trinity University)
Health Services Management and Policy

Orezimena Useh
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health Services Management and Policy

Dallas Walter Ward
B.A. (The Ohio State University)
Health Services Management and Policy

Stephanie Nicole Wilkins
B.A. (University of Washington)
Health Services Management and Policy

Kyle Yungbluth
B.S.Hlth.Reh.Sci. (University of Missouri-Columbia)
Health Services Management and Policy

Ethan James Zaller
B.A. (The Ohio State University)
Health Services Management and Policy

Master of Healthcare Innovation

Deanie Elaine Anderson
B.S.Alld.Hlth.Prof. (The Ohio State University)
Nursing

Madeline Grace Beil
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Elizabeth Bower
Bachelor's (Ohio University)
Nursing

Emily C. Charnota
B.A. (DePaul University)
Nursing

Jenee K. Corbin
Diploma (Pennsylvania College of Health Sciences)
B.S.Nurs. (University of Pittsburgh)
Nursing

Brittany Kathleen Duro
B.S.Humn.Ecol. (The Ohio State University)
Nursing

Elizabeth Martha Gilbert
B.S.Nurs. (Capital University)
Nursing

Abbey Dianne Haas
B.S.Nurs. (Otterbein University)
Nursing

Jacqueline M. Hanna
Bachelor's (Franklin University)
Nursing

Cole Douglas Harkins
B.S.Nurs. (Wright State University)
Nursing

Sarah E. Klamfoth
B.A. (University of Toledo)
B.S.Nurs. (Ohio University)
Nursing

Evanne Gene McGraw
B.Appl.Sci. (Ohio University)
Nursing

Sara Beth McKinniss
B.A. (Wittenberg University)
Nursing

Amanda Sue Muetzel
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Chelsea C. Nichols
B.S.Nurs. (Chamberlain University)
Nursing

Heather Lynette O'Neal
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Navik Arun Patel
B.S. (The Ohio State University)
B.S. (Chamberlain Coll of Nursing)
Nursing

Lauren Hall Pepperney
B.S.Nurs. (Youngstown State University)
Nursing

Jose A. Ponce Vega
B.S. (Southern Illinois University Carbondale)
Doctorate (Walden University)
Nursing

Amanda R. Robinson
B.S.Nurs. (Grand Canyon University)
Nursing

Zahra Salim
B.S.Bus.Adm. (The Ohio State University)
Nursing

Carmen Elizabeth Schooley
B.S.Alld.Hlth.Prof. (The Ohio State University)
Nursing

Ashley M. Shepherd
B.S.Nurs. (Bowling Green State University)
Nursing

Brandi Nickole Stahl
B.S.Nurs. (The Ohio State University)
Nursing

Madison Anne Staiger
B.A. (The Ohio State University)
Nursing

Ekua Steiner
B.Bus.Adm. (University of Ghana)
Nursing

Alexis Marie Viola
B.S.Nurs. (The Ohio State University)
Nursing

Jordan Ashley Zboray
B.S.Nurs. (Texas A&M University)
Nursing

Master of Human Resource Management

Ife O. Akinshilo
B.A. (University of California, Santa Barbara)
Human Resource Management

Eric Gordon Funk
B.A. (The Ohio State University)
Human Resource Management

Master of Landscape Architecture

Kate Elizabeth Grazzini Broussard
B.A. (Pennsylvania State University)
M.A. (University of Texas at Austin)
Landscape Architecture

Ismael Gad
B.S.Civ.Eng. (University of Toledo)
Landscape Architecture

Caressa Darrelle Givens
B.F.A. (Milwaukee Inst Art Design)
Landscape Architecture

Kamran Cyrus Khorshidi
B.S.C.R.P. (The Ohio State University)
Landscape Architecture

Pranav Maruti Naukudkar
Architect (Yashwantrao Chavan Maharashtra Open University)
Landscape Architecture

Mahmoud Oulad Adime
Architect (National School of Architecture)
Landscape Architecture

John Patrick Ryan
B.A. (Loyola University Chicago)
Landscape Architecture

Master of Learning Technologies

Sarah M. DeShon
B.A. (Saint Mary's College)
Education

Noah Emmet Grissett
B.A. (Grove City College)
M.A. (Kent State University)
Education

Sydney Jayne Palsgrove
B.S. (Kent State University)
Education

Janet Lynn Smith
B.S.Bus.Adm. (Bowling Green State University)
Education

Master of Music

Luke Colson Bingham
B.Mus.Educ. (The Ohio State University)
Music

Leah Nicole Buczec
B.Music (Slippery Rock University)
Music

Joshua Aaron Crooks
B.Music (Slippery Rock University)
Music

Lucinda Theresa Dunne
B.Music (Royal College of Music)
Music

Uiliami Opeti Fihaki
B.Music (California State University, Sacramento)
Music

Geoffrey William Gear
B.Music (Otterbein University)
Music

Brandon Paul Golpe
B.A. (Bowling Green State University)
Music

Noah Hollingsworth Landrum
B.A. (Valdosta State University)
Music

Annie Charlene Moon
B.Music (West Virginia University)
Music

Jordan Azul Padilla
B.Music (University of Arizona)
Music

Aaron Gerard Pearson
B.Music (University of North Carolina at Greensboro)
Music

Kye Cole Pyeatt
B.Mus.Educ. (McMurry University)
Music

Yiyi Suo
B.Music (Minzu University of China)
Music

Master of Plant Health Management

Noelle Raylynn Barnes
B.S. (Kent State University)
Plant Health Management

Frank Daniel Becker
B.S.Agr. (The Ohio State University)
Plant Health Management

Liz Mariel Camps
Bachelor's (Universidad Metropolitana)
Plant Health Management

Jannessa Corinna Moreno
B.S. (California State University Channel Islands)
Plant Health Management

Anna Rose Casdorph Williamson
B.S.Env.Nat.Res. (The Ohio State University)
Plant Health Management

Master of Public Administration

Kendall Brier Ahern
B.A. (The Ohio State University)
Public Policy and Management

Madison Elizabeth Zhen Brown
Public Policy and Management

Douglas Burnett III
B.A. (Morehouse College)
Public Policy and Management

Jacob Andrew Charlton
B.A. (The Ohio State University)
Public Policy and Management

Michael Austin Cochenour
B.A. (The Ohio State University)
Public Policy and Management

Ethan W. Combs
B.A. (West Virginia University)
Public Policy and Management

Grace Harley Day
B.A. (Capital University)
Public Policy and Management

Robert Anthony Duncanson
B.A. (University of Colorado)
M.S. (Webster University)
Public Policy and Management

Emma Nicole Engel
B.A. (The Ohio State University)
Public Policy and Management

Jack Erickson
Bachelor's (University of Mount Union)
Public Policy and Management

Lauren Erickson
Public Policy and Management

Zachary Joseph Ferko
B.S. (The Ohio State University)
Public Policy and Management

Dalin McPherson Frantz
B.A. (Kenyon College)
Public Policy and Management

Isabelle Katherine Frohlich
B.S. (The Ohio State University)
Public Policy and Management

Abigail Lillian Geesling
B.A. (The Ohio State University)
Public Policy and Management

Akeesha Carina Giddings
B.S.Bus.Adm. (The Ohio State University)
Public Policy and Management

John Michael Holzaepfel
B.A. (The Ohio State University)
Public Policy and Management

Cassandra Johnson
B.A. (University of Kentucky)
Public Policy and Management

Jack Dallas Johnston
B.A. (The Ohio State University)
Public Policy and Management

Kathryn E. Koch
B.A. (The Ohio State University)
Public Policy and Management

Sarah Lentz
B.A. (University of Pennsylvania, College of General Studies)
Public Policy and Management

Dalonte' Devion Manley
B.S.H.D.F.S. (The Ohio State University)
Public Policy and Management

Cathleen Mullee McLaughlin
B.A. (Miami University)
Public Policy and Management

Courtney Danelle Moore
B.A. (The Ohio State University)
Public Policy and Management

Haylie Nulph
B.A. (The Ohio State University)
Public Policy and Management

Thomas Anthony Parran
B.A. (The Ohio State University)
Public Policy and Management

Seneca Elizabeth Ransom
B.A. (Malone University)
Public Policy and Management

Elizabeth Mary Raynard
B.A. (The Ohio State University)
Public Policy and Management

Hailey Joy Ridenour
B.A. (Miami University)
Public Policy and Management

Casey Elese Smith
B.A. (Muskingum University)
Public Policy and Management

Hannah Streaty
B.A. (The Ohio State University)
Public Policy and Management

Jackson Thomas Sturtevant
Public Policy and Management

Michael Simon Szczepkowski
B.S. (The Ohio State University)
Public Policy and Management

Melissa Ward
B.S.Soc.Work, M.S.W. (The Ohio State University)
Public Policy and Management

Krystina Zabek
B.S. (The Ohio State University)
Public Policy and Management

Master of Public Administration and Leadership

Colin Mack Andrews
Bachelor's (Bowling Green State University)
Public Policy and Management

Gerard Christopher Basalla
B.A. (The Ohio State University)
Public Policy and Management

Katie Jo Breidenbach Wooding
B.A. (Manchester University)
Public Policy and Management

Cody Conley
Bachelor's (Bowling Green State University)
Public Policy and Management

Samuel David Deskin
B.A. (The Ohio State University)
Public Policy and Management

Roy W. Evans
B.S. (University of Akron)
Public Policy and Management

Courtney Elizabeth Gandy
B.A. (University of Notre Dame)
Public Policy and Management

Jacqueline Cierra Hall
B.S.H.D.F.S. (Ohio University)
Public Policy and Management

Jessica Colleen Hufford
B.S. (Ball State University)
Public Policy and Management

Ryan Michael Hutter
B.S. (University of Wisconsin)
Public Policy and Management

Adam Kamoun
B.S. (Northeastern University)
Public Policy and Management

Amanda Jane Koenig
B.A. (Wright State University)
Public Policy and Management

Myro Lu
B.S. (Case Western Reserve University)
M.D. (Ohio University)
Public Policy and Management

Julie Louise Macmann
B.A. (Bowling Green State University)
Public Policy and Management

Nicholas J. Stancato
B.A. (The Ohio State University)
Public Policy and Management

Lisa R. Wareham
B.S.Humn.Ecol. (The Ohio State University)
Public Policy and Management

Kimberly Suzanne Whitman
B.A. (The Ohio State University)
Public Policy and Management

Andrew M. Winchell
B.A. (The Ohio State University)
Public Policy and Management

Master of Public Health

Katelyn Morgan Abeln
B.S.Pub.Hlth. (The Ohio State University)
Public Health

Sora Talal Mohammad Al-Faris
B.Med., B.Surgery, Jordan University of Science and Technology
Public Health

Sarah Al-Hashemi
B.S.Pub.Hlth. (The Ohio State University)
Public Health

Brittany Marie Alexander
B.A. (University of Kentucky)
Public Health

Sara Alqasem
B.S., B.A. (The Ohio State University)
Public Health

Aboli Kishor Ambarkar
B.S., M.S. (University of Pune)
Public Health

Sherif Essameeldin Mohamed Ammar
B.Dent.Surg. (Misr International University)
Public Health

Akua Amponsah Chrippah
B.S. (York University)
M.D. (Wayne State University)
Public Health

Beakal Araya Amsalu
B.S. (University of Pittsburgh)
Public Health

Samir Mohammad Atai
B.S. (The Ohio State University)
Public Health

Kimberly Rowe Balmer
B.S. (Colorado State University)
Public Health

Miriam Beck
B.S. (Eastern Mennonite College)
Public Health

Christina Grace Becker
B.S. (American University, Washington, DC)
Public Health

Evan Jon Behmer Porter
B.S. (The Ohio State University)
Public Health

Robin Kathleen Braglin
B.S. (Montana State University)
Public Health

Brooke Nicole Crockett
B.A. (The Ohio State University)
Public Health

Miguel Lawrence Elijah Del Valle
B.S.Pub.Hlth. (The Ohio State University)
Public Health

Braden James DeLullo

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Hibaq Deria

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Camila Digulis

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Miriam Nuontee Donneyong

Bachelor's (University for Development Studies)
Public Health

Anne Elizabeth Driscoll

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Delaney Rae Durham

B.S. (The Ohio State University)
Public Health

Dalia Khalid Elased

B.S. (The Ohio State University)
Public Health

Adar Abdiaziz Elmi

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Marissa Zi Qi Guo

B.S. (University of Notre Dame)
Public Health

Billan Gurreh

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Selam Lebsu Habtemariam

B.A. (Kenyon College)
Public Health

Olivia Madison Hall

B.A. (Miami University)
Public Health

Michael Kent Haight

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Alyssa Ann Hesse

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Reham Ibrahim

B.Med., B.Surgery. (Cairo University)
Public Health

Tinu Egweifo Ijewemen

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Ander Pearl Jackson

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Sabrina Jackson

B.S. (The Ohio State University)
Public Health

Kyle Patrick Jagodzinski

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Emma Elizabeth Jankowski

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Judson L. Jeffries

B.A. (Old Dominion University)
M.A. (State University of New York at Binghamton)
Ph.D., M.A. (University of Southern California)
Public Health

Tahirah Jones

B.S. (North Carolina Agricultural and Technical State University)
Public Health

Aminat Oluwakemi Jubril

B.S. (Southeastern Louisiana University)
Public Health

Sara Gail Kleine

B.A., B.S.Pub.Hlth. (The Ohio State University)
Public Health

Anna Kozar

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Maria Gina Krantz

B.S.Pub.Hlth., B.S. (The Ohio State University)
Public Health

Ligang Liu

Pharm.D. (University of Nebraska Medical Center)
Public Health

Caroline Martin

B.Dent.Surg. (Annamalai University)
Public Health

Shannon Marie McGill

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Vikas Munjal

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Michelle M. Nassal

B.S. (University of California, San Diego)
Ph.D., M.D. (Case Western Reserve University)
Public Health

Olivia Madison Nurre

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Alice Pozzi

B.S.Agr. (The Ohio State University)
Public Health

Najhee LJ Purdy

B.S. (University of Wisconsin)
Public Health

Patrick Leon Quinn

Bachelor's (University of Michigan)
B.S. (Rutgers University-New Brunswick)
M.D. (University of Medicine and Dentistry of New Jersey)
Public Health

Emma Cassidy Rademacher

B.S.Pub.Hlth. (Miami University)
Public Health

Melanie Natasha Rayan

M.D. (Spartan Health Sciences Univ)
M.D. (University of Central Florida)
Public Health

Sydney Rentsch

B.A. (Connecticut College)
Public Health

Ilana Rose Richter

B.A. (Kenyon College)
Public Health

Ariyn Robert

B.A. (The Ohio State University)
Public Health

Alyssa Marie Sabol

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Jackson Secor

B.S. (The Ohio State University)
Public Health

Sage Menesse Smith

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Summer Leigh Smith

B.S. (University of Tennessee-Knoxville)
D.V.M. (The Ohio State University)
Public Health

Monica Faith Stanwick

B.S. (Marshall University)
M.A.Teach. (Mercer University-Macon)
Public Health

Riley Jade Summers

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Lauren E. Sweeney

B.S. (Ohio University)
Public Health

Morgan Elizabeth Taylor

B.S. (DePaul University)
Public Health

Annabelle Marie Thomas

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Brett Tracy

B.S. (Siena College)
M.D. (George Washington University)
Public Health

Deborah Elizabeth Vogt

B.S.Agr. (The Ohio State University)
Public Health

Madelyn Wendt

B.A. (The Ohio State University)
Public Health

Alison Augsburg Whalen

B.S. (Wofford College)
M.D. (University of South Carolina)
Public Health

Sydney Simpson Wittenberg

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Master of Respiratory Therapy

Andrew Michael Pinkerton

B.A. (The Ohio State University)
Health and Rehabilitation Sciences

Master of Science

Radhika Talukdar Abeywickrama

B.S. (The Ohio State University)
Molecular Genetics

Ibrahim Jamal Abuzer

B.Engr. (German-Jordanian University)
Biomedical Engineering

Emma Adams

B.S. (The Ohio State University)
Genetic Counseling Graduate Program

Rachel Lauren Adams

Bachelor's (University of Dayton)
Electrical and Computer Engineering

Shanti R. Adhikari

B.S. (California State University, Sacramento)
Nursing

Roman Anthony Adomanis

B.S.Chem.Eng. (The Ohio State University)
Chemical Engineering

Sajjad Akherati

Bachelor's (Sharif University of Technology)
Electrical and Computer Engineering

Regina Naa-Darkua Akrong-Lamptey

B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Abdullah Alhag

B.S.Cptr.Sci.Eng., B.S.Eng.Physics (The Ohio State University)
Physics

Ilhan Muse Ali

B.S.Nurs. (Mount Carmel College)
Nursing

Istahil Abdulkadir Ali

B.S.Pub.Hlth. (The Ohio State University)
Nursing

Muzamil Ali

B.S.Mech.Eng. (Pakistan Institute of Engineering and Applied Sciences)
Mechanical Engineering

Shatha Ibrahim M Almousa

Bachelor's (A M Schwartz Coll of Phar)
Computer Science and Engineering

Utkarsh Tushar Ambani

Diploma (Shri Bhagubhai Mafatlal Polytechnic)
B.Engr. (University of Mumbai)
Computer Science and Engineering

Matthew Tolman Andrew

B.S. (Brigham Young University)
Vision Science

Ryan Lee Arcuri

B.S.Educ. (The Ohio State University)
Human Sciences

Enes Arda

B.S. (Bogazici University)
Electrical and Computer Engineering

Jonathan Shawn Aristide

B.S.Hlth.Reh.Sci., B.S.Nurs. (The Ohio State University)
Nursing

Mollie Joanne Arnott

B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Valeria Itzel Arteaga Muniz

B.S. (Universidad Autonoma de Zacatecas)
Physics

Saraswathy Arunachalam

B.Eng. (Anna University)
Electrical and Computer Engineering

Camryn Taylor Ashcroft

B.S. (The Ohio State University)
Nursing

Lidiya Beriuh Atsibeha

B.S. (Addis Ababa University)
Civil Engineering

Nabilla Ersya Audina

B.S. (Gadjah Mada University)
Human Sciences

Brooke Ellen Babbinn

B.S.Nurs. (The Ohio State University)
Nursing

Umu Bah

Bachelor's (Mount Vernon Nazarene University)
Nursing

Megan Nicole Bailey

B.S. (Otterbein University)
M.A. (Bluefield College)
Human Sciences

Madison Renee Baker

B.A., B.S. (Miami University)
D.V.M. (The Ohio State University)
Comparative Biomedical Science

Sean Michael Baker

B.S. (Arizona State University)
Human Sciences

Laith Tareq Adnan Bali

B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Tovia Banks

B.S. (University of Tennessee-Knoxville)
D.D.S. (Meharry Medical College)
Dentistry

Aldriel Valdez Barnum

B.S.Elec.Cptr.Eng., B.S. (The Ohio State University)
Electrical and Computer Engineering

Adam Vincent Barstow

B.A. (Wittenberg University)
Nursing

Hayley Marie Barta

B.S. (Xavier University)
Molecular, Cellular, and Developmental Biology

Radhika Basarakodu

B.Med., B.Surg. (Dr NTR University of Health Sciences)
Translational Pharmacology

Anandi Batabyal

B.Tech. (National Institute of Technology - India)
Molecular, Cellular, and Developmental Biology

Maria Suzanne Kaczmarek Baum

B.A. (Luther College)
Nursing

Chad Beal

B.S.Ald.Hlth.Prof. (The Ohio State University)
Nursing

Blaire Alisan Beavers

B.S.Pub.Hlth. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Liam Beith

B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Margaret Anne Belcher

B.S.Nurs. (Duquesne University)
Nursing

Gabrielle Leigh Bender

B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Alison McKenna Benner

B.S.Nurs. (The Ohio State University)
Nursing

Lydia Jean Bentley

B.S. (The Ohio State University)
Genetic Counseling Graduate Program

Maranda Ruth Berger-Morrow

B.S.Agr. (The Ohio State University)
Horticulture and Crop Science

Griffin Joseph Beyer

Bachelor's, M.S. (University of Dayton)
Chemical Engineering

Aniket Bhaumik

B.Tech. (Maulana Abul Kalam Azad University of Technology)
Computer Science and Engineering

Anna M. Biasella

B.S.Nurs. (Ohio University)
Nursing

Brian Anthony Bing

B.A. (The Ohio State University)
B.S.Nurs. (Chamberlain University)
Nursing

Ian Daniel Lee Binns

B.S. (The Ohio State University)
Vision Science

Zachary Bland

Bachelor's (Chamberlain University)
Nursing

Bridget Boakye

B.A. (Kwame Nkrumah University of Science and Technology)
M.S. (SOAS, University of London)
Nursing

Michael John Boals

B.S.Nurs. (The Ohio State University)
Nursing

Emily RuthAnn Bode

B.S. (Ohio Wesleyan University)
Evolution, Ecology and Organismal Biology

Johannah Karen Bogart

B.A. (The Ohio State University)
Human Sciences

Vladimir Bogdanov

B.S. (Saint Petersburg State Agrarian University)
M.S. (Saint Petersburg State University)
Biophysics

Taylor M. Boggs

B.S.Nurs. (Ohio University)
Nursing

Lindsay Boldon

B.S. (The Ohio State University)
Nursing

Hrithik Devaiah Bollachettira

Ajithkumar
B.Eng. (Visvesvaraya Technological University)
Computer Science and Engineering

Robert M. Bolz

B.S. (Denison University)
Ohio State Biochemistry Program

Vanessa Michelle Bose

B.A., B.S., M.S. (Ohio University)
Nursing

Cherliesa C. Boyd

B.S. (Oklahoma State University)
Nursing

Brenna Nicole Braasch

B.S. (The Ohio State University)
Comparative Biomedical Science

Chance Brandt

B.S. (University of Washington)
M.S. (University of Colorado)
Chemistry

Victoria Lynn Bratke

B.S.Nurs. (Marshall University)
Nursing

Noah D. Briggs

B.S.Nurs. (The Ohio State University)
Nursing

Tyson James Brinkerhoff

B.S. (Utah State University)
B.S.Nurs. (Colorado Mesa University)
Nursing

Margaret Elizabeth Broeren

B.S., Bachelor's (University of Wisconsin)
Psychology

Christina Rose Brooks

B.S.Nurs. (The Ohio State University)
Nursing

Lily Brouder

B.A. (University of Notre Dame)
Psychology

Ryan Brown

B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Abigail Bruner

Bachelor's (Florida State University)
Human Sciences

Shane Curtis Brunner

B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Jenna Renata Buglioni

B.S.Educ. (The Ohio State University)
Human Sciences

Lauren Elizabeth Burner-Kitzler

B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Lorraine Ann Burnett

B.S. (State University of New York College at Oneonta)
Human Sciences

Ryan Charles Burrows

B.S.Chem.Eng. (The Ohio State University)
Chemical Engineering

Brett Burton

B.A. (Gettysburg College)
Psychology

Ethan Jacob Butler

B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Savannah Jo Butt

B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Najma Ali Buwe

B.S. (The Ohio State University)
Nursing

Sarah Margaret Cain

B.S.Nurs. (The Ohio State University)
Nursing

Madison Casey Campbell

B.S.Pharm.Sci., Pharm.D. (The Ohio State University)
Pharmaceutical Sciences

Nathan Capek

B.S. (Indiana University)
Human Sciences

Kolby Reene Carothers

B.S.H.P.N.E.S. (University of Colorado at Colorado Springs)
Human Sciences

Jennifer Renee Cauchi

B.S. (Hondros College)
Nursing

Sudarshan Chakravarthi

B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Julia Nicole Chalif

B.A. (Northwestern University)
M.D. (The Ohio State University)
Medical Science

Cameron Chambers

B.S. (Bowie State University)
Integrated Biomedical Science Graduate Program

Courtney Renee Chambers
B.S.Dent.Hygn. (Tennessee Wesleyan College)
Dental Hygiene

Donald Maurice Chatman II
B.Bus.Adm. (Tiffin University)
Human Sciences

Hao Chen
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Luke M. Chen
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Melanie Chen
B.S. (John Carroll University)
Public Health

Zexu Chen
B.S.Mat.Sci.Eng. (The Ohio State University)
Materials Science and Engineering

Yun Chieh Cheng
B.S. (Yuan Ze University)
Computer Science and Engineering

Toni Raye Chinchar
B.S.Env.Eng. (The Ohio State University)
Food, Agricultural and Biological Engineering

Johnathan Chisam
B.S. (Middle Tennessee State University)
Chemistry

Chloe Junya Chiu
B.S. (University of California, Riverside)
Entomology

Satyaki Roy Chowdhury
B.Tech. (Shiv Nadar University)
Electrical and Computer Engineering

Bianca Josephine Christopher
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Annika Simone Chura
B.A. (Case Western Reserve University)
Molecular, Cellular, and Developmental Biology

Kaylee Nicole Cleghorn
B.S.Nurs. (The Ohio State University)
Nursing

Kate Morgan Clelland
B.S.Chem.Eng. (The Ohio State University)
Electrical and Computer Engineering

Jessica Cloud
B.A. (Sarah Lawrence College)
Psychology

Payton Elizabeth Clum
B.S.Nurs. (The Ohio State University)
Nursing

Riley Alden Coburn
B.A., B.S. (Denison University)
Statistics

Niamh Coffey
B.S. (University of Limerick)
Human Sciences

Alexandria Evelyn Collins
B.A. (The Ohio State University)
Anatomy

Chauncey Trevon Collins
B.S.Educ. (Wright State University)
Human Sciences

Courtney Mae Collins
B.S. (University of Michigan)
M.D. (University of Kentucky)
Medical Science

Mikayla Tamia Colvin
B.S. (West Virginia University)
Human Sciences

Haley Jo Conley
B.S.Nutrition (The Ohio State University)
Nursing

Sarah Rachel Conrad
B.S.Nurs. (Ohio University)
Nursing

Hajah Memunatu Conteh
B.S.Nurs. (South University)
Nursing

Cameryn Adriana Cooley
B.A. (New York University)
Psychology

Mai Elizabeth Paige Cooper
B.S. (The Ohio State University)
Nursing

Hector Joel Cotto Ortiz
B.S. (University of Puerto Rico)
Geodetic Science and Surveying

Carissa Mary Cox
B.S.Nurs. (Ohio University)
Nursing

Alina Elizabeth Coy
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Gavin Thomas Craig
Pharm.D. (Purdue University)
Pharmaceutical Sciences

Natalie Lynn Crawford
B.S.H.P.N.E.S. (The Ohio State University)
Human Sciences

Alexandru Crisan
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Elvira Cruz-Cruz
B.S. (University of California, Irvine)
Astronomy

Wenhao Cui
B.S. (University of California, Los Angeles)
Mathematics

Kaitlyn Noel Cummin
B.S.Nurs. (Otterbein University)
Nursing

Patrick Queiroz Da Silva
B.S. (The Ohio State University)
Computer Science and Engineering

Natalie Joanne Dajani
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Chenhao Dang
B.S. (The Ohio State University)
Chemistry

Janaki Chetan Dave
B.S. (Indiana University Purdue University Indianapolis)
Human Sciences

Seth Micheal Davis
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Zoe Anne Davis
B.S.Nutrition (The Ohio State University)
Nursing

Ella Victoria Sara Dawber
B.S.Hlth.Reh.Sci. (University of Western Ontario)
Nursing

Haley Alexis DayArmond
B.A., B.S. (Northern Kentucky University)
Psychology

Allison Rose Dean
B.A. (The Ohio State University)
Nursing

Samantha Nicole DeAngelo
Bachelor's (University of New England)
Health and Rehabilitation Sciences

Hannah Renee Dehus
B.S. (The Ohio State University)
Environmental Science

Xavier Michael Deloatch
B.A. (University of Colorado at Colorado Springs)
Human Sciences

Tomasina Marie DeLong
B.S.Ind.Sys.Eng. (The Ohio State University)
Industrial and Systems Engineering

Demetra Demopoulos
B.S. (The Ohio State University)
Nursing

Hugh William Dennin
B.S. (University of Florida)
Mathematics

Kathleen Rita Dietrich
B.S. (The Ohio State University)
Nursing

Samantha Marie Dietz
B.S. (The Ohio State University)
Nursing

Christopher James Dobrozsi
B.S.Mech.Eng. (The Ohio State University)
Biomedical Engineering

Ashley Dawn Doherty
B.A. (The Ohio State University)
Nursing

Sara Dolatyabi
D.V.M. (University of Tehran)
Animal Sciences

Mackenzie Renee Dolhun
B.S. (Kent State University)
Nursing

Alexis Donahue
B.S.Biomed.Sci. (Auburn University)
Translational Pharmacology

Kelsey Doolittle
B.S. (Massachusetts Institute of Technology)
Industrial and Systems Engineering

Mackenzie Elizabeth Dore
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Brian Thomas Dowd
B.S. (State University of New York at Stony Brook)
Genetic Counseling Graduate Program

Victoria Elizabeth Drumm
B.S. (Brandeis University)
Environment and Natural Resources

Jingwen Duan
B.S. (Messiah College)
Human Sciences

Yukun Duan
B.S. (Illinois Institute of Technology)
Computer Science and Engineering

Mary Redican Ebner
B.S.Nurs. (The Ohio State University)
Nursing

Elaxis Renay Edwards
B.A. (The Ohio State University)
Human Sciences

Steven Benjamin Egnaczyk
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Trey Christopher Elerick
B.S.Hlth.Reh.Sci. (The Ohio State University)
Human Sciences

Gwen Browning Elfrink
Diploma (Hondros College)
B.S.Nurs. (The Ohio State University)
Nursing

Nicholas Alexander Ellis
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Carl August Engstrom
B.S. (Pennsylvania State University)
Environment and Natural Resources

Estina Nchong Enoabane
M.D. (University of Bonn)
Bachelor's (Mount Carmel College of Nursing)
Nursing

Emily Joanna Enslin
B.S.Pharm.Sci. (Cincinnati State Technical and Community College)
B.S.Pharm.Sci., Pharm.D. (The Ohio State University)
Translational Pharmacology

Markeeta Shareas Evans
B.S.Humn.Ecol. (The Ohio State University)
B.S.Nurs. (Chamberlain University)
Nursing

Adam Michael Exley
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Samuel Henry Faber
B.S.Hlth.Reh.Sci. (The Ohio State University)
Immunology and Microbial Pathogenesis

Yuyao Fan
B.Engr. (Nanning Normal University)
Electrical and Computer Engineering

James Alexander Farrell
B.S. Mech. Eng. (The Ohio State University)
Mechanical Engineering

Brianna Nicole Faulk
B.S.Nurs. (Kent State University at Salem)
Nursing

A K M Sarwar Hossain Faysal
B.S., M.S. (University of Dhaka)
Electrical and Computer Engineering

Joseph Donald Fickes
B.S. (The Ohio State University)
B.S.Nurs. (Capital University)
Nursing

Abigail Rose Flamm
B.A. (The Ohio State University)
Civil Engineering

Ryan Michael Flanagan
B.S.F.A.B.E. (The Ohio State University)
Food, Agricultural and Biological Engineering

Myron Orlando Fletcher, Jr.
Bachelor's (University of Dayton)
Electrical and Computer Engineering

Kelly Danielle Flowers
B.S.Nurs. (State College of Florida)
Nursing

Emily Anne Fogler
B.S.Hlth.Reh.Sci. (The Ohio State University)
Translational Pharmacology

David Anthony Fraas
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Cristin Nicole Frantz
B.S., M.S.W. (University of Kentucky)
Nursing

Chelsea Ann Friedrich
B.S. (The Ohio State University)
Nursing

Grace Diane Fruth
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Lindsay Nicole Fry
B.S.Nurs. (Kent State University)
Nursing

Justin Andrew Furby
B.S. (Marshall University)
Evolution, Ecology and Organismal Biology

Joshua Anthony Gallup
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Thilini Wathsala Gangodawila
B.Med., B.Surg. (University of Kelaniya)
Translational Pharmacology

Aditi Garg
B.Tech. (Thapar Institute of Engineering and Technology)
Computer Science and Engineering

Robert Gengler
B.S. (University of Cincinnati)
B.S.Nurs. (Ursuline College)
Nursing

Alisa M. Georgeff
B.S.Nurs. (University of Washington)
Nursing

Arnob Ghosh
B.S. (Bangladesh University of Engineering and Technology)
Electrical and Computer Engineering

Gautam Ghosh
B.S. (Florida Institute of Technology)
M.S. (College of Charleston)
Ohio State Biochemistry Program

Matthew Paul Giannobile
B.S. (The Ohio State University)
Nursing

Roy Richard Gildersleeve III
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Ashley Rose Gill
B.A. (University of New Hampshire)
B.S. (Oregon State University)
Evolution, Ecology and Organismal Biology

Maria E. Gilles
B.S.Nurs. (Wright State University)
Nursing

Jessica Gillespie
B.S. (Wittenberg University)
B.S. (The Ohio State University)
Public Health

Jacob Tyler Gleim
B.Bus.Adm. (Southern Illinois University Carbondale)
Human Sciences

Aidan Go
B.A. (Bard College at Simon's Rock)
Vision Science

George John Gogidze
B.S.Mech.Eng. (University of Dayton)
Aerospace Engineering

Lindsey Joy Gordon
B.S.Hlth.Reh.Sci. (The Ohio State University)
Anatomy

Sommer Rhandell Goldman
Diploma (Hocking College)
B.S.Nurs. (Wayland Baptist University)
Nursing`

Miriam Yochana Goldstein
B.A. (City University of New York, Queens College)
Public Health

Alexa Rae Golloh
B.S. (The Ohio State University)
Nursing

Bradley R. Golowin
B.A. (University of Northern Colorado)
Human Sciences

Chase Evan Gough
B.S.Mech.Eng., M.Globl.Eng. Ldrshp. (The Ohio State University)
Welding Engineering

Kaytlyn C. Graver
B.S. (Bowling Green State University)
Agricultural Communication, Education, and Leadership

Mikalyn Marie Gray
B.S.Nurs. (Cedarville University)
Nursing

Jasmine Jacqueline-Floyd Green
B.S.Nurs. (Case Western Reserve University)
Nursing

Madison Ashlee Greene
B.S.Educ. (The Ohio State University)
Human Sciences

Jijie Gu
B.A. (Skidmore College)
Computer Science and Engineering

Jalynn Noel Marie Guice
B.A., B.S. (University of Cincinnati)
Nursing

Hannah Lee Guise
B.S.Educ. (The Ohio State University)
Anatomy

Purvi Gujarathi
B.Tech. (MIT World Peace University)
Computer Science and Engineering

Sudeshna Gun
B.Tech., M.Tech. (National Institute of Technology - India)
Chemical Engineering

Dongyang Guo
B.Engr. (Hebei University of Technology)
Computer Science and Engineering

Jiacheng Guo
B.Engr. (Xidian University)
Electrical and Computer Engineering

Yi Guo
B.S. (Florida Institute of Technology)
Mechanical Engineering

Paul Gusmano
B.S.Mech.Eng. (Cedarville University)
Mechanical Engineering

Jhoan Sebastian Guzman Hernandez
B.Engr. (Industrial University of Santander)
M.S. (Universidade de Sao Paulo)
Welding Engineering

Alma Habib
B.S.Nurs. (Saint Mary College)
M.D. (University of Kansas)
Medical Science

Zineb Habroune
B.S.Pub.Hlth. (The Ohio State University)
Nursing

Allyson Corrine Haines
B.S. (Kent State University)
Nursing

Alec Hall
B.S.Civ.Eng. (The Ohio State University)
Civil Engineering

Jonathan Michael Hall
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

William Criddle Halling
B.S. (Brigham Young University)
Vision Science

Nicklaus Richard Halloy
B.S. (University of Dayton)
M.Appl.Neurosci. (The Ohio State University)
Neuroscience Graduate Studies Program

Nana A. Hammond
B.A. (University of Ghana)
Diploma (Columbus State Community College)
B.S.Nurs. (Otterbein University)
Nursing

Cara Elizabeth Hanna
B.S.Nurs. (Ohio University)
Nursing

Emma Hanners
Bachelor's (University of Cincinnati)
Environment and Natural Resources

Narmeen Haq
B.S. (San Jose State University)
Nursing

Sydney E. Harmon
B.S.Nutrition (The Ohio State University)
Translational Pharmacology

Mohammed Harris
B.A. (Rutgers University)
M.S. (Johns Hopkins University)
M.S. (University of Medicine and Dentistry of New Jersey)
M.B.A. (University of Illinois at Urbana-Champaign)
Translational Pharmacology

Caitlin Marie Hawkins
B.S. (Kent State University)
M.S., Pharm.D. (University of Cincinnati)
Pharmaceutical Sciences

Lin He
B.S. (University of Manitoba)
Computer Science and Engineering

Zixuan He
B.S. (Southeast University)
Electrical and Computer Engineering

Helen Grace Healy
B.S.Nurs. (University of Texas at Arlington)
Nursing

Ally Marie Heiland
B.A. (University of Arkansas)
Psychology

Taryn Ann Heldenbrand
B.A. (The Ohio State University)
B.S. (Capital University)
Nursing

Alexa Rae Helsel
B.S. (University of Pittsburgh Johnstown)
Nursing

Adam Jordan Helton
B.S. (The Ohio State University)
Molecular Genetics

Daniel Stewart Hemphill
B.S. (Kansas State University of Agriculture and Applied Science)
Horticulture and Crop Science

Kaylee R. Henry
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Rachel Louise Henry
B.A. (University of Kentucky)
Environment and Natural Resources

Danielle Marlene Herman
B.S.Nurs. (The Ohio State University)
Nursing

Heather Grace Hermiller
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Ethan Robert Hessick
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Emmitt Xavier Higgins
Bachelor's (Central State University)
Food, Agricultural and Biological Engineering

Faye Emma Higgins
B.A. (State University of New York at Geneseo)
Earth Sciences

Taryn Thomas Higinbotham
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Tyler Dunn Hinline
B.S.Nurs. (The Ohio State University)
Nursing

Hollie R. Hinton
B.A. (University of Cincinnati)
Human Sciences

Joseph Warner Hinz
B.S. (Northern Arizona University)
Environment and Natural Resources

Oliver Davis Hoffman
B.S. (Colorado State University)
Environment and Natural Resources

Lauren Holaday
B.S.Nurs. (Wittenberg University)
Nursing

Brandon Holcomb
B.S. (The Ohio State University)
Microbiology

Rachel Alaïre Horvath
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Jun Huang
B.S.Cptr.Sci.Eng. (Sun Yat-sen University)
Computer Science and Engineering

Tinghao Huang
B.S. (Sun Yat-sen University)
Mathematics

Yu Hsun Huang
B.S. (National Tsing Hua University)
M.S. (Indiana University)
Molecular Genetics

Helen Huegemann
B.S. (The Ohio State University)
Nursing

Lauren Nicole Hummel
B.S. (The Ohio State University)
Nursing

Devonna Nikki Huynh
B.S. (The Ohio State University)
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Jon Deniz Ider
B.S.Ind.Sys.Eng. (The Ohio State University)
Industrial and Systems Engineering

Tierra Nicole Jackson
Pharm.D. (University of Georgia)
Pharmaceutical Sciences

Zoe Symone Jackson
B.S.Hlth.Reh.Sci. (The Ohio State University)
Human Sciences

Alyssa Jacobs
B.S. (Otterbein University)
Nursing

Bradley Craig Jacobs
B.Eng. (Stellenbosch University)
Mechanical Engineering

Taylor Nathaniel Jahr
B.S. (The University of Findlay)
Nursing

Karthik Mahendra Jain
B.Tech. (MIT World Peace University)
Computer Science and Engineering

Srujan Jaladi
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Wafeeq Ahamed Jaleel
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Jay Bharat Jani
B.Tech. (University of Mumbai)
Computer Science and Engineering

Tanay Ashish Jawdekar
B.Eng. (Institute of Chemical Technology)
Chemical Engineering

Connor Bailee Jenkins
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Kaylee Michele Jester
B.A. (Michigan State University)
Nursing

Brittany D. Jeter
B.S.Nurs. (The Ohio State University)
Nursing

Katherine Grace Jeziorowski
B.A. (Miami University)
B.S.Nurs. (Capital University)
Nursing

Xin Jiang
B.S.Nurs. (Wenzhou-Kean University)
Electrical and Computer Engineering

Yi Jiang
Bachelor's (Shandong University)
Integrated Biomedical Science Graduate Program

Julie Jin
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Sharie Nicola Johnson
B.A. (The Ohio State University)
Nursing

Kristen Lee Johnston
B.S.Nurs. (Kent State University)
Nursing

Carley Jones
B.S.Educ. (The Ohio State University)
Human Sciences

Rudra Mayur Joshi
B.Tech. (Charotar University of Science & Technology)
Electrical and Computer Engineering

Adrian Jourdan
B.S. (The Ohio State University)
Health and Rehabilitation Sciences

Alex William Joyce
B.S., M.S. (University of Toledo)
Integrated Biomedical Science Graduate Program

Ciara Jo Juenger
B.S.Soc.Work (The Ohio State University)
Nursing

Madison Wynne Kacica
B.S.F.A.B.E. (The Ohio State University)
Environmental Science

Ali Kaiss
B.Eng. (Lebanese American University)
Electrical and Computer Engineering

Shrikrishna Kaje
B.Eng. (Visvesvaraya Technological University)
Electrical and Computer Engineering

Ali Kalhori
B.S. (Islamic Azad University)
Human Sciences

Patrick Daniel Kalush
B.S.Civ.Eng. (Rensselaer Polytechnic Institute)
Civil Engineering

Nikhil Pavan Kanaka
B.Tech. (Jawaharlal Nehru Technological University)
Computer Science and Engineering

Minseong Kang
Bachelor's, M.Appl.Econ. (Korea University)
Agricultural, Environmental, and Development Economics

Connor Thomas Kannally
B.S.Ind.Sys.Eng. (The Ohio State University)
Industrial and Systems Engineering

Momoko Karashima
D.D.S. (Osaka University)
Dentistry

Madeline Claire Chun Karolak
B.S.Agr. (The Ohio State University)
Animal Sciences

Vignesh Karunakaran
B.Tech. (National Institutes of Technology, India)
Materials Science and Engineering

Kira Elizabeth Katterle
B.S.Biomed.Eng. (The Ohio State University)
Human Sciences

Jocelyn A. Keaton
B.S.Nurs. (The Ohio State University)
Nursing

Habel Z. Kebede
B.Laws (Jimma University)
M.Laws (University of Aberdeen)
Nursing

Kyle Edwin Keeler
B.S. (Excelsior College)
B.S.Nurs. (University of Akron)
Nursing

Connor Swaim Kelly
B.S. (University of North Florida)
M.S. (University of Central Florida)
Physics

Alexander James Kelsey
B.S. (The Ohio State University)
B.S.Nurs. (Capital University)
Nursing

Jade Olivia Kempton-Trainer
B.S.Educ. (The Ohio State University)
Human Sciences

Amir Kermani
B.S. (University of Tehran)
Mechanical Engineering

Naga Krishna Sai Kumar Ketha
M.Tech. (Vellore Institute of Technology)
Computer Science and Engineering

Anvi Khanna
B.Tech. (Manipal University)
Computer Science and Engineering

Khwannarin Khmsom
B.S.Honors (Kasetsart University)
M.S. (Mahidol University)
Plant Pathology

Eugene George Kim
B.S. (United States Air Force Academy)
Psychology

Kelly D. King
B.S.Nurs. (Youngstown State University)
Nursing

Jacob Andrew Klausner
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Amy Elizabeth Kless
B.S. (Purdue University)
B.S. (Florida Gulf Coast University)
Public Health

Adam Benjamin Kling
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Lindsay M. Koenig
B.S. (The Ohio State University)
Nursing

Halea Alexis Kohl
B.A. (Washington & Jefferson College)
Vision Science

Hunter Kailyn Koker
B.S.Nurs. (Ohio University)
Nursing

Kikelomo Kolawole
B.A. (Rutgers University-New Brunswick)
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Venkata Naga Hemanth Kolipara
B.Tech. (Vellore Institute of Technology)
Computer Science and Engineering

Peixiang Kong
B.S.Mat.Sci.Eng. (Duke University)
B.S.Mat.Sci.Eng. (Duke Kunshan University)
Electrical and Computer Engineering

Grace Makayla Koppelman
B.S.Agr. (The Ohio State University)
Food, Agricultural and Biological Engineering

Kenzington Lorene Kottenbrock
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Peter Myles Kowalski
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Sharbel Kozhaya
B.S. (Lebanese American University)
Electrical and Computer Engineering

Abigail Elizabeth Kramer
B.S.Bus.Adm. (The Ohio State University)
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Collin Kramer
Bachelor's (Southeast Missouri State University)
M.S., D.V.M. (Colorado State University)
Comparative Biomedical Science

Andrea Marie Kuhn
B.S. (The Ohio State University)
Statistics

Aditya Kumar
B.S. (The Ohio State University)
Nursing

Lina Kurdi
B.S.Nurs. (The Ohio State University)
Nursing

Brett Shawn Lambert
B.S. (Louisiana State University at Alexandria)
Evolution, Ecology and Organismal Biology

Ashley Nicole Lane
B.A. (The Ohio State University)
Genetic Counseling Graduate Program

Ryan Thomas Lang
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Marjorie Mazzullo Lardner
B.S.Nurs. (Duquesne University)
Nursing

Sara Bailey LaRussa
B.S. (Ohio University)
Human Sciences

Pietro Alessandro Lavezzo
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Jessica S. Lechner
B.S. (Murray State University)
Nursing

Joshua Lees
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Seth Lee Lemons
B.S. (The Ohio State University)
B.S.Nurs. (Ohio University)
Nursing

Ryan Anthony Leo
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Tianxi Li
Bachelor's (University of Electronic Science and Technology of China)
Computer Science and Engineering

Xiang Li
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering Mathematics

Yishen Li
B.Engr. (Fuzhou University)
Electrical and Computer Engineering

Chengbo Liang
B.S.Elec.Eng. (Florida International University)
B.S.Elec.Eng. (Hebei University of Technology)
Electrical and Computer Engineering

Chenxi Liang
B.S. (Nanjing University)
Integrated Biomedical Science Graduate Program

Chenkai Liao
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Kristin Hannah Lilly
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Vedant Shailesh Limaye
B.Tech. (Indian Institute of Technology Madras)
Mechanical Engineering

Hao Tong Lin
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Vincent J. Lin
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Pearle Marie Lipinski
B.S. (Massachusetts Institute of Technology)
J.D. (The Ohio State University)
Nuclear Engineering

Amanda A. Liston
Bachelor's (Florida Atlantic University)
B.S.Nurs. (Kent State University)
Nursing

Jie Liu
Bachelor's (Southern Medical University)
M.Dent.Surg. (Wuhan University)
Ph.D. (Queen Mary University of London)
Dentistry

Xingyu Liu
B.Engr. (University of Science and Technology Beijing)
Electrical and Computer Engineering

Rina Lodh
B.S., M.S. (National University, San Diego)
Nursing

Himanshu Sunil Lodha
B.Tech. (University of Pune)
Electrical and Computer Engineering

Victoria Kay Lohr
B.S.Dent.Hygn. (The Ohio State University)
Dental Hygiene

Rachel Bethany Long
B.S. (Otterbein University)
D.V.M. (The Ohio State University)
Comparative Biomedical Science

Sarah Faye Longo
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Jessica Marie Looney
B.S.Nurs. (Ohio University)
Nursing

Darian Shea Louke
B.A. (Ohio Wesleyan University)
Nursing

Elisson Christine Luthy
Bachelor's (Miami University)
Human Sciences

Joseph Benjamin Lutman
B.A. (The Ohio State University)
Industrial and Systems Engineering

Amanda Lyons
B.S.Nurs. (Muskingum University)
Nursing

Zhiheng Lyu
B.Engr. (University of Bristol)
Electrical and Computer Engineering

Alexander Louis Machtay
B.S. (The Ohio State University)
Physics

Julia Marie Madick
B.S. (The Ohio State University)
Nursing

Nisha Mahajan
B.Med., B.Surgery. (Dibrugarh University)
B.S.Nurs. (Xavier University)
Nursing

Eric Peter Maher
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Tomas Mallmann Paganin
Mech.Eng., M.S.Mech.Eng. (Universidade Federal do Rio Grande do Sul)
Nuclear Engineering

Jiayu Mao
B.S. (Beijing Institute of Technology)
Electrical and Computer Engineering

Mason James Marek
B.S. (Eastern Michigan University)
M.S. (The Ohio State University)
Nursing

Kevin James Markiewicz
B.S.Nurs. (University of Pittsburgh)
Nursing

Valerie L. Mash
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Sarah Elizabeth Mason
B.S.Nurs. (The Ohio State University)
Nursing

Seaira Rynee Mason
B.A. (The Ohio State University)
Nursing

Peyton Alexandra Mast
B.S.Nurs. (The Ohio State University)
Nursing

Kaylin Marie Maxwell
B.S. (University of Pittsburgh Johnstown)
Vision Science

Sophia Alice Mayone
B.S. (Lehigh University)
Chemical Engineering

Gregory McClanahan
B.A. (North Carolina State University)
M.S. (Marshall University)
Biomedical Engineering

Alyssa Taylor McDaniel
B.S. (University of Nevada, Reno)
Nursing

Casey Alexander McDaniel
B.S. (Tiffin University)
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Mario John McDonald
B.S.Educ. (The Ohio State University)
Human Sciences

William McIntyre
B.Bus.Adm. (University of Cincinnati)
Human Sciences

Aaron Jarrod McKee
B.S.Nurs. (The Ohio State University)
Nursing

Michelle LeAnne McKinney
B.S.Nutrition (University of Kentucky)
Nursing

Chinyere Chanecia McLean
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Katrina Ann McLeod
B.A. (The Ohio State University)
Nursing

Victoria Marie McTurner
B.S.Nurs. (The Ohio State University)
Nursing

Isabelle Rose Meehan
B.S.Nurs. (The Ohio State University)
Nursing

Kari Mae Melberger
B.S.Bus.Adm. (Bucknell University)
Human Sciences

Arianna Guadalupe Mena
B.S.Mat.Sci.Eng. (The Ohio State University)
Materials Science and Engineering

Xiaolei Meng
B.S.Pharm.Sci. (The Ohio State University)
Pharmaceutical Sciences

Daniel Avin Meringolo
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Julian Edgardo Meza
B.S. (University of Michigan)
Translational Pharmacology

Ian Lee Mikesell
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Marisa Miller
B.S.Nurs. (Shawnee State University)
Nursing

Morgan Elizabeth Miller
B.S.Educ. (The Ohio State University)
Human Sciences

Nevaeh Miller
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Reagan Rae Milliken
B.S.H.D.F.S. (The Ohio State University)
Human Sciences

Hayley Frances Milliron
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Kwasi Minta
B.A. (The Ohio State University)
B.S.Nurs. (Ohio University)
Nursing

Callie Michele Mitchell
B.S. (University of Texas at Austin)
M.S. (Texas Woman's University)
Nursing

Brittany Nicole Moenter
B.S.Allh.Hlth.Prof. (The Ohio State University)
B.S.Nurs. (Chamberlain University)
Nursing

Amina Mohamed
B.S.Nurs. (Chamberlain University)
Nursing

Ayan Mohamud
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Bailey Moraes
B.S. (Bowling Green State University)
Nursing

Gaurav Rajendra More
B.Engr. (University of Mumbai)
Biomedical Engineering

Natalie A. Mostacada
B.S. (Ohio Dominican University)
B.S. (Mount Carmel College of Nursing)
Nursing

Camryn Schwab Moulton
B.S.Nutrition (The Ohio State University)
Human Sciences

David Umorjah Mualen
B.S. (University for Development Studies, Ghana)
Biomedical Engineering

Gretchen Marie Murray
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Likith Narukurthi
B.Tech. (Gandhi Institute of Technology and Management)
Computer Science and Engineering

Julia Nauman
B.S. (Tulane University of Louisiana)
Psychology

Humara Nazeer
M.D. (National University of Sciences and Technology, Pakistan)
Translational Pharmacology

Ashley Lauren Nerusu
B.S.Nurs. (Bowling Green State University)
Nursing

Vaal Ndoumbe Ngalla
B.A. (Hiram College)
M.S. (College of Mount Saint Joseph)
Nursing

Jasmine Diemmy Nguyen
B.A. (The Ohio State University)
Nursing

Kristin Y-Nhi Nguyen
B.S. (University of California, Irvine)
D.D.S. (University of California, Los Angeles)
Dentistry

Minh Luong Nhat Nguyen
B.S. (University of Cincinnati)
Statistics

Trevor Thanh Nguyen
B.S. (The Ohio State University)
Genetic Counseling Graduate Program

John Maxwell Nicolaus
B.S.Hlth.Reh.Sci. (The Ohio State University)
Anatomy

Emily Nell Niemann
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Chris Alejandro Nieto
B.S. (Elmhurst College)
Chemistry

Emily E. Nogay
B.S. (Pennsylvania State University)
D.V.M. (University of Pennsylvania)
Comparative Biomedical Science

Nelly Ntim
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Quintin Thomas O'Boyle
B.S. (The Ohio State University)
Biomedical Engineering

Connor Michael O'Keefe
B.S.Env.Eng. (University of Cincinnati)
Civil Engineering

Michael Patton O'Toole
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Avik Kumar Ojha
B.S.Honors (University of Calcutta)
M.S. (Indian Assoc Cult of Science)
Chemistry

Joseph Michael Onderko, Jr.
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Oluwatosin Olubunmi Onihale
B.Tech. (Ladoke Akintola University of Technology)
Civil Engineering

Ismael Orelief
B.S.Civ.Eng. (The Ohio State University)
Civil Engineering

Edward D. Osborn
B.S.Nurs. (Walsh University)
M.A. (The Ohio State University)
Nursing

Andrew Joseph Ostavitz
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Zhaoting Ou
B.S. (Ocean University of China, Qingdao)
Electrical and Computer Engineering

Javan Otieno Owiti
B.S., Master's (Egerton University)
Agricultural Communication, Education, and Leadership

Jnapika Palacharla
Microbiology

Paarmita Pandey
B.S., M.S. (Indian Institute of Science Education & Research)
Astronomy

Kennedy Deanna Parries
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Jordan Jeffrey Parrish
B.A. (The Ohio State University)
Immunology and Microbial Pathogenesis

Laurel Kate Paskell
B.S. (The Ohio State University)
Nursing

Krushni Kiran Patel
B.S.Hsp.Mgt. (The Ohio State University)
Human Sciences

Nicole Saurabh Patel
B.S.Dent.Hygn. (The Ohio State University)
Dental Hygiene

Debosmita Pathak
B.A. (Grinnell College)
Astronomy

German Jesid Peralta Camacho
B.S.Honors (Universidad Nacional de Colombia)
Pharmaceutical Sciences

Amanda Nicole Perez
Mech.Eng. (Florida International University)
Mechanical Engineering

Michael Thomas Pieschel
B.A. (University of Minnesota Duluth)
B.S. (College of St. Scholastica)
Nursing

Mckenna Ryann Podracky
B.S.Ind.Sys.Eng. (The Ohio State University)
Industrial and Systems Engineering

Christian Viade Popovski
B.S. (The Ohio State University)
Nursing

Lucas Prada Gutierrez
Bachelor's (Universidad de La Salle)
Comparative Biomedical Science

Avneesh Kiran Pradhan
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Geetanjali Prasad
B.Engr. (Visvesvaraya Technological University)
Electrical and Computer Engineering

Hannah Louise Pullem
B.S.Nurs. (The Ohio State University)
Nursing

Shreyas Shanmukha Pulluri
B.S. (The Ohio State University)
Microbiology

Sana Syeda Qamar
B.S. (The Ohio State University)
Nursing

Jia Ou
B.S., M.S. (China Pharmaceutical University)
Integrated Biomedical Science Graduate Program

Jacob Brian Queiser
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Lauren Michelle Rahe
B.S. (The Ohio State University)
B.S.Nurs. (Ursuline College)
Nursing

Rezoanoor Rahman B.S., M.S. (University of Dhaka) <i>Statistics</i>	Farida Rezk B.S. (The Ohio State University) <i>Translational Pharmacology</i>	Madison Lynn Roth B.S.Hlth.Reh.Sci., O.D. (The Ohio State University) <i>Vision Science</i>	Samantha Savard Pharm.D. (University of Cincinnati) <i>Pharmaceutical Sciences</i>	Kelly Kathleen Shanor B.S. (Wittenberg University) <i>Nursing</i>
Sarah Elizabeth Rainey B.S. (University of Michigan) <i>Dentistry</i>	Mackenzie Blayze Rhoades B.A. (The Ohio State University) <i>Nursing</i>	Megan Elizabeth Roth B.S. (University of Cincinnati) <i>Immunology and Microbial Pathogenesis</i>	Anastasia Savchenko B.S.Mech.Eng. (The Ohio State University) <i>Mechanical Engineering</i>	Kanishk Sharma Bachelor's (Manav Rachna International University) <i>Computer Science and Engineering</i>
Suriyaa Valliapan Ramanathan B.Tech., M.Tech. (Indian Institute of Technology Madras) <i>Physics</i>	William Tyler Rich B.S.Agr. (University of Kentucky) <i>Horticulture and Crop Science</i>	Mallory Rae Rowan B.S.F.A.B.E. (The Ohio State University) <i>Biomedical Engineering</i>	Kristin Leann Saylor B.S.Nurs. (Ohio University) <i>Nursing</i>	Utkarsh Sharma Bachelor's (Deenbandhu Chhotu Univ) Master's (Indian Institute of Technology Kanpur) <i>Computer Science and Engineering</i>
Farid Ramezan Pour Bachelor's (Kyiv Polytechnic Institute) <i>Welding Engineering</i>	Sarah Anna Richards B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Human Sciences</i>	Blake Madison Rowell B.S. (The Ohio State University) <i>Genetic Counseling Graduate Program</i>	Carly Schmelzer B.A. (Ohio University) <i>Nursing</i>	Ethan Gerard Shaw B.S.Elec.Cptr.Eng. (The Ohio State University) <i>Electrical and Computer Engineering</i>
Donald Giovanni Ranieri B.S.Aero.Eng. (The Ohio State University) <i>Aerospace Engineering</i>	Breanne Nicole Riemann B.S.Nurs. (Cleveland State University) <i>Nursing</i>	Rajarshi Roychowdhury B.Tech. (Maulana Abul Kalam Azad University of Technology) M.S. (University of Pennsylvania) <i>Electrical and Computer Engineering</i>	Aspen Richard Schneller B.S.Biomed.Eng. (The Ohio State University) <i>Mechanical Engineering</i>	Yu Tong Shen B.Bus.Adm. (Soochow University, Taiwan) <i>Computer Science and Engineering</i>
Julia Katherine Rank B.A. (The Ohio State University) <i>Computer Science and Engineering</i>	Daniel Timothy Riffe B.A. (The Ohio State University) <i>Nursing</i>	Ashutosh Shivaji Rudraksh B.Engr. (University of Pune) <i>Computer Science and Engineering</i>	Lara Schober B.S.Mech.Eng. (The Ohio State University) <i>Biomedical Engineering</i>	Brooke Alexis Shields B.A. (The Ohio State University) <i>Human Sciences</i>
Aishwarya Srinivasa Rao B.Engr. (Visveswaraiah Technological University) M.Tech. (National Institute of Technology, Warangal) <i>Chemical Engineering</i>	Eleanor Rimmerman B.A. (Tufts University) M.S. (Case Western Reserve University) <i>Biophysics</i>	La'Ria Erlae Ruiz B.A. (University of Akron) <i>Nursing</i>	Brianna Rose Schonhiutt B.S. (The Ohio State University) <i>Nursing</i>	Morgan Michelle Shields B.S. (Otterbein University) D.V.M. (The Ohio State University) <i>Comparative Biomedical Science</i>
Katherine Anne Rapp B.S.Nurs. (The Ohio State University) <i>Nursing</i>	Jacob Britton Roberts B.S., M.Appl.Econ. (The Ohio State University) <i>Statistics</i>	Adam Ryan B.S.Cptr.Sci.Eng. (The Ohio State University) <i>Computer Science and Engineering</i>	Jayson Schott B.S.Educ. (The Ohio State University) <i>Human Sciences</i>	Shekhar Ganapati Shinde B.Engr. (Institute of Chemical Technology) <i>Chemical Engineering</i>
Keerthana Ravi B.S. (Nanyang Technological University, Singapore) <i>Chemistry</i>	Saúl Rodríguez Martín Bachelor's (Universidad Complutense de Madrid) Master's (University of Cambridge) <i>Mathematics</i>	Alexander Joel Ryan B.S.Bus.Adm. (John Carroll University) <i>Agricultural, Environmental, and Development Economics</i>	Madeline Nicole Schumacher B.S. (University of Vermont) <i>Evolution, Ecology and Organismal Biology</i>	Atinuke Aaliyah Shittu B.S. (University of Maryland Eastern Shore) <i>Immunology and Microbial Pathogenesis</i>
Shannay Rawal B.Tech. (Narsee Monjee Institute of Management Studies) <i>Civil Engineering</i>	Jorge Luis Rodríguez Miranda Bachelor's (Universidad Nacional de Agricultura) <i>Horticulture and Crop Science</i>	Hayden Michael Sabovik B.S.Educ. (The Ohio State University) <i>Human Sciences</i>	Carly Anne Schwartz B.S.Biomed.Eng. (The Ohio State University) <i>Biomedical Engineering</i>	Amir Shoja B.S. (Wright State University) <i>Immunology and Microbial Pathogenesis</i>
Rachel Rayburn B.S. (Utah State University) <i>Human Sciences</i>	Collin Gregory Rogus B.S.Mech.Eng. (The Ohio State University) <i>Mechanical Engineering</i>	Richard Sami Salloum B.S. (The Ohio State University) <i>Nursing</i>	Arian Seighali B.S.Biomed.Eng. (The Ohio State University) <i>Biomedical Engineering</i>	Jonathan Shue B.S. (Millersville University of Pennsylvania) D.D.S. (University of Pennsylvania School of Dental Medicine) <i>Dentistry</i>
Maggie Josee Fortier Raymond B.A. (University of North Carolina at Charlotte) <i>Pharmaceutical Sciences</i>	Nancy Romo B.A. (University of California, Los Angeles) <i>Physics</i>	Tanmay Nagesh Salvi B.Engr. (Institute of Chemical Technology) <i>Chemical Engineering</i>	Berkay Selcuk B.S. (Middle East Technical University) M.A. (Sabanci University) <i>Biophysics</i>	Samantha Elizabeth Simms B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Nursing</i>
Abbey Elizabeth Redding B.S. (University of California, Los Angeles) <i>Human Sciences</i>	Andrew John Roseboro B.S.Env.Eng. (State University of New York at Buffalo) <i>Civil Engineering</i>	Chamyukthan Pillai SampathKumar B.S.Elec.Cptr.Eng. (The Ohio State University) <i>Electrical and Computer Engineering</i>	Bhabatosh Senapati B.Tech. (Biju Patnaik University of Technology) <i>Computer Science and Engineering</i>	Rileigh Ann Simpson B.S. (Muskumgum University) <i>Translational Pharmacology</i>
William Payne Reed B.S.Aero.Eng. (The Ohio State University) <i>Aerospace Engineering</i>	Alia Joy Ross B.S.Nurs. (The Ohio State University) <i>Nursing</i>	Courtney Morgan Sanderson B.S. (The Ohio State University) <i>Microbiology</i>	Abigail J. Shake B.A. (University of Mississippi) <i>Evolution, Ecology and Organismal Biology</i>	Rand Jerdon Singer B.S.Cptr.Sci.Eng. (The Ohio State University) <i>Computer Science and Engineering</i>
Ann Marie Resetar B.S.Nurs. (Walsh University) <i>Nursing</i>		Alexis Rocchio Sauer B.S. (The Ohio State University) <i>Comparative Biomedical Science</i>		

Brittney Christine Sjulstad
B.A. (Luther College)
Pharm.D. (University of Colorado)
Pharmaceutical Sciences

Somer Elizabeth Slappey
Pharm.D. (University of Florida)
Pharmaceutical Sciences

Ambria Michelle Small
B.S.Agr. (The Ohio State University)
Plant Pathology

Allison N. Smith
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Erika Nicole Smith
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Pierce Andrew Smith
B.S.Nurs. (Brigham Young University)
Nursing

Matthew William Soileau
B.S.Educ. (The Ohio State University)
Human Sciences

Karina Spulgis
B.S.Hlth.Reh.Sci. (Ohio University)
Nursing

Andrea Nicole Spurck
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Sean M. Starrett
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Zachary John Stephens
B.S.Pharm.Sci., Pharm.D. (The Ohio State University)
Translational Pharmacology

Amber Rose Stiller
B.S. (University of North Carolina at Charlotte)
Entomology

Ivana Stojkic
B.S. (Emory University)
M.D. (Medical College of Georgia)
Medical Science

Nathan Daniel Stoltzfus
B.S.F.A.B.E. (The Ohio State University)
Food, Agricultural and Biological Engineering

Maria Gwen Stoughton
B.S. (University of Wyoming)
M.S. (Regis University)
Nursing

Patrick Suggett
B.S.Nurs. (Ohio University)
Nursing

Samar Suleiman
B.A. (The Ohio State University)
Nursing

Kinga Magdalena Suwada
B.S. (Loyola University Chicago)
Translational Pharmacology

Tejaswini Talluri
Microbiology

Michelle Henthorn Tan
B.S. (The Ohio State University)
Immunology and Microbial Pathogenesis

Luke Terry
B.S. (Saint John Fisher College)
Integrated Biomedical Science Graduate Program

Alex Darrell Thomas, Jr.
B.S. (Auburn University)
Food, Agricultural and Biological Engineering

Austin Jay Tiley
B.S. (Wright State University)
Welding Engineering

Zhaolun Tong
B.Eng. (Agricultural University of Hebei)
Electrical and Computer Engineering

Alexa Michelle Tovanche
B.S.Pub.Hlth. (The Ohio State University)
B.S.Nurs. (Cleveland State University)
Nursing

Taylor Kristine Trejo
Bachelor's (Miami University)
Nursing

Paige Marie Trentman
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Kendra Carley Trevant
B.A. (The Ohio State University)
Nursing

Reece Joseph Trowbridge
B.A. (Ohio Wesleyan University)
Anatomy

Diamantis Tsilimigras
Bachelor's (National & Kapodistrian University of Athens)
Medical Science

Bethany Renee Tull
B.S. (Ohio University)
Environment and Natural Resources

Manuel Adam Tzagournis
B.S. (The Ohio State University)
Master's (Wright State University)
Nursing

Caleb Uebelein
B.S., Pharm.D. (Harding University)
Translational Pharmacology

Ankur Vijay Upadhyay
B.Tech. (Institute of Chemical Technology)
Food Science and Technology

Amelia Katherine Utley
B.A. (Loyola University Chicago)
Nursing

Michael John Valcarcel
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Ethan Valentine
B.A. (Calvin College)
Genetic Counseling Graduate Program

Tyler Jon VanLandingham
B.S.Agr. (The Ohio State University)
Horticulture and Crop Science

LeighAnn Nicole Vargo
B.S.Nurs. (The Ohio State University)
Nursing

Rachel Varughese
B.S.Chem.Eng. (The Ohio State University)
Chemical Engineering

Andres Eduardo Velasco Delgado
B.S.Agr. (Escuela Agrícola Panamericana el Zamorano)
Horticulture and Crop Science

Roxanne Maude Vermette
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Lauren Taylor Vitanza
B.S. (Kansas State University of Agriculture and Applied Science)
Animal Sciences

Vivian Anh Phuong Vuong
B.S.Nurs. (Case Western Reserve University)
Nursing

Nidia Belissa Waite
B.S.Nurs. (Cedarville University)
Nursing

Maya Walker
B.S. (Columbia School of Engineering and Applied Science)
Human Sciences

Nathan Isaac Waltz
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Tsuhao Wang
Bachelor's (National Central University, Taiwan)
Chemistry

Xuefei Wang
B.Eng. (China University of Petroleum)
Electrical and Computer Engineering

Megan Lynn Warnecke
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Valerie Warthen
B.A.Honors (University of New Mexico)
Nursing

Summer Denise Washington
B.S.Nurs. (Ohio University)
Nursing

David Glenn Watson
B.S. (The Ohio State University)
B.S.Nurs. (Ohio University)
Nursing

Regan Shea Webber
B.S. (The Ohio State University)
Genetic Counseling Graduate Program

Alexis Rose Webster
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Makenna Soleil Webster
B.A. (The Ohio State University)
Human Sciences

Abigail Alexis Weller
B.A. (Xavier University)
Human Sciences

Jamie Lynn Welu
B.S. (The Ohio State University)
Public Health

Catherine Bea Whitney
B.S. (La Salle University)
Chemistry

Thomas William Whittington
B.S. (Wheaton College)
Agricultural, Environmental, and Development Economics

Michelle Wilkinson
B.S. (Ohio University)
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Allison Shelby Williams
B.S. (The Ohio State University)
Genetic Counseling Graduate Program

Dylan Lee Williams
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Madison Alicia Willis
B.S.H.D.F.S. (The Ohio State University)
Nursing

Christopher Wilson
B.S.Mech.Eng. (Ohio University)
Welding Engineering

Emma Lucille Wilson
B.S.Nurs. (The Ohio State University)
Nursing

Mark Joseph Wolf
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Adeline Wolfe
B.S.Nurs. (Wright State University)
Nursing

Caroline Elizabeth Fortes Shelt Wolfe
B.A., B.S. (University of Vermont)
Environment and Natural Resources

Mitchell Wong
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Elizabeth Woodhouse
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Emily Theresa Woodruff
B.S. (The Ohio State University)
Nursing

Ryan Jacob Workman
Bachelor's (University of Wisconsin)
Earth Sciences

Mary Beth Wright
B.S.Nurs. (Mount Carmel College of Nursing)
Nursing

Mariah Leigh Wright-Nadkarni
B.A., M.D. (Wake Forest University)
Translational Pharmacology

Anbo Wu
B.A. (College of The Holy Cross)
Mathematics

Chu Liang Wu
B.S. (National Chiao Tung University)
Electrical and Computer Engineering

Shengping Wu
B.S. (Macau University of Science & Technology)
Electrical and Computer Engineering

Siyang Xu
B.S. (University of Kentucky)
Pharmaceutical Sciences

Aine C. Yacapsin
B.S.Pharm.Sci. (The Ohio State University)
Translational Pharmacology

Mahmod Tayb M Yahya
Bachelor's (Seventh of April University)
Master's (Wayne State University)
Civil Engineering

Juchen Yang
B.Engr. (North China Electric Power University)
Electrical and Computer Engineering

Tsai Ching Yang
B.S. (Feng Chia University)
Electrical and Computer Engineering

Zhenyu Yang
B.Engr. (University of Electronic Science and Technology of China)
Electrical and Computer Engineering

Jason Yao
B.A. (Skidmore College)
Physics

Chethana Yerramsetty Prashant
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Bowen Yu
B.Engr. (Technion - Israel Institute of Technology)
Materials Science and Engineering

Samuel Ho Yu
B.A. (The Ohio State University)
Human Sciences

Jungwon Yun
B.S. (Yeungnam University)
Chemical Engineering

Robert Tyler Zajec
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Kiara Diane Zanon
B.S.Educ. (The Ohio State University)
Human Sciences

Benjamin Scott Zeiger
B.S. (The Ohio State University)
Environment and Natural Resources

Liliang Zhang
B.S. (University of Electronic Science and Technology of China)
Electrical and Computer Engineering

Peiyu Zhang
B.S. (Denison University)
Electrical and Computer Engineering

Yunqi Zhang
B.S.Bus.Adm., B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Bowen Zheng
B.Engr. (Zhejiang University)
Electrical and Computer Engineering

Zirui Zhu
Bachelor's (Wuhan University)
M.S. (University of Michigan)
Chemistry

E'mari Zurko Richardson
B.A. (The Ohio State University)
B.S.Nurs. (Cleveland State University)
Nursing

Master of Social Work

Emma Abbott
B.S. (Miami University)
Social Work

Jennifer Lynn Abraham
B.S.Educ. (Ohio University)
M.Educ. (Ashland University)
Social Work

Adegbemisola Adeduro
B.S. (Towson University)
Social Work

Tabitha Renee Adkins
B.A. (The Ohio State University)
Social Work

Jasmine Hina Ahmad
B.A. (University of Kentucky)
Social Work

Natalie Elizabeth Alderson
B.S. (The Ohio State University)
Social Work

Brittany Marie Alexander
B.A. (University of Kentucky)
Social Work

Mackenzie Kay Ambrozich
B.A. (The Ohio State University)
Social Work

K Anand-Gall
B.A. (Nebraska Wesleyan University)
M.A. (San Francisco State University)
M.F.A. (Miami University)
Social Work

Charlie Andorka
B.S.Pub.Hlth. (The Ohio State University)
Social Work

Brenda Parent Applegate
B.S.Ald.Hlth.Prof. (The Ohio State University)
M.S. (University of Indianapolis)
Social Work

Jessica Ilene Armet
Bachelor's (Capital University)
Social Work

Allison Marie Armstrong
B.S.Educ., M.A. (Otterbein University)
Social Work

Travis James Armstrong
B.A. (Otterbein University)
M.Educ. (American College of Education)
Social Work

Anna Arsham
B.S. (Ohio University)
Social Work

Nayeli Avila Galvan
B.S.Soc.Work (San Jose State University)
Social Work

Kevin Neal Babic
B.A. (Cleveland State University)
Social Work

Eva Rose Baird
B.S.Soc.Work (The Ohio State University)
Social Work

Megan Nicole Baisden
B.S. (The Ohio State University)
Social Work

Meredith Leigh Baldwin
B.S. (Kennesaw State University)
Social Work

Zahra Renee Barnes
B.A. (State University of New York at Binghamton)
Social Work

Casey Lea Barrett
B.A. (Mercer University-Macon)
Social Work

Kelly Lynn Beck
B.Bus.Adm. (University of Maryland Global Campus)
Social Work

Roxanna Ray Beers
B.S.Soc.Work (The Ohio State University)
Social Work

Joshua David Beltran
B.A. (The Ohio State University)
Social Work

Jaceyce Marie Bentley
B.A. (The Ohio State University)
Social Work

Justice Alexander Berry
B.S.Soc.Work (The Ohio State University)
Social Work

Emily Bishop
B.A. (Waldorf College)
Social Work

Haylie Beth Boehringer
B.A. (Niagara State University)
Social Work

Robin Lynn Boggs
B.S. (Texas Tech University)
Social Work

Victoria Jean Bonner
B.S.Soc.Work (The Ohio State University)
Social Work

Shiana Christine Bookless
B.A., B.S.H.D.F.S. (The Ohio State University)
Social Work

Angela M. Bower
B.S. (North Dakota State University)
Social Work

Carlyn Bower
B.A. (Miami University)
Social Work

Monroe Andrew Bradley
B.S.Bus.Adm., M.Hum.Res.Mgt. (The Ohio State University)
Social Work

Deanna Jacqueline Brenner
B.A. (State University of New York at Buffalo)
Social Work

Meridith Elise Brinkman
Bachelor's (Bluffton University)
Social Work

Lesley Ann Brose
B.S. (State University of New York College at Cortland)
M.A. (University of Dayton)
Social Work

Skyler Timms Brown
B.S.Soc.Work (The Ohio State University)
Social Work

Zibby Longstreth Brown
B.A. (The Ohio State University)
Social Work

Allison Nicole Browning
B.S.Soc.Work (The Ohio State University)
Social Work

Caitlin J. Buehler
B.A. (Niagara University)
Social Work

Jesse Bultsma
B.A. (Grand Valley State University)
Social Work

Casey Nicole Buoni
B.A. (The Ohio State University)
Social Work

Hailey Anjolique Burkholder
B.A. (The Ohio State University)
Social Work

Lynsey Erin Burkins
B.S. (Bowling Green State University)
M.A. (The Ohio State University)
Social Work

Bella Grace Busch
B.S. (Ohio University)
Social Work

Anthony Joseph Buss
B.S.Educ. (The Ohio State University)
Social Work

Cameron Elizabeth Byers
B.A. (University of Cincinnati)
Social Work

Teresa Elizabeth Cahalan
B.S. (The Ohio State University)
Social Work

Amanda Brooke Cahill
B.S.Educ. (Indiana University)
Social Work

Patrick Michael Callicotte
B.Art.Educ., M.A. (The Ohio State University)
Social Work

Paige Madeline Carter
B.A. (The Ohio State University)
Social Work

Suzanne Elizabeth Case
B.A. (Capital University)
Social Work

Cassie Anne Casias
B.S. (University of Utah)
Social Work

Kai May Caudill
B.S.Soc.Work (The Ohio State University)
Social Work

Dominique Cherry
B.S.Soc.Work (University of Akron)
Social Work

Emily Anne Childress
B.A. (University of West Florida)
Social Work

Daniel Joseph Chojnacki
B.A. (Canisius College)
Social Work

Megan Mary Chunias
B.A. (Miami University)
Social Work

Samantha Rae Clarke
B.A. (Kent State University)
Social Work

Abigail Cole
B.A. (Grace College)
Social Work

Valerie Anne Coleman
B.S. (Defiance College)
Social Work

Meredith Susan Collins
B.S.Soc.Work (The Ohio State University)
Social Work

Tina Marie Colter
B.S.Bus.Adm. (The Ohio State University)
Social Work

Nicole Ashley Conner
B.A. (Washington State University)
Social Work

Alexa Cooper
B.S. (Gwynedd Mercy University)
Social Work

Kerry Leigh Cope
B.A. (University of California, Santa Barbara)
Social Work

Kara Corpman
B.S., M.A. (The Ohio State University)
M.Educ. (Miami University)
Social Work

Jamie Lee Costello
B.A. (University of Akron)
Social Work

Tara Novy Crawford
B.S. (University of Iowa)
Social Work

Danielle Crowder
B.S. (Rasmussen-Moorhead)
Social Work

Dylan Crum
B.A. (Miami University)
Social Work

Emily Kathleen Davis
B.A. (The Ohio State University)
Social Work

Everett Davis
B.S.Soc.Work (Capital University)
Social Work

Seville Naomi Davis
B.S.Soc.Work (The Ohio State University)
Social Work

Megan Marie Dean
B.S.Educ. (The Ohio State University)
Social Work

Elizabeth Diaz Martinez
B.A. (San Jose State University)
Social Work

Emily Jane Diehl
B.S.Soc.Work (The Ohio State University)
Social Work

McKenna Jo Dietze
Bachelor's (Wisconsin Lutheran College)
Social Work

Margaret Anna Dillon
Bachelor's (Bowling Green State University)
Social Work

Katrina Elizabeth Dobler
B.S. (Brigham Young University)
Social Work

Allison Paige Dujua
B.S. (University of Wisconsin)
Social Work

Eric Joseph Dunn
B.S.Soc.Work (The Ohio State University)
Social Work

Nicole Ann Durant
B.S.Educ. (The Ohio State University)
M.A.Teach. (American College of Education)
Social Work

Allyson Lynn Easterday
B.S. (Clemson University)
Social Work

Giavanna Marie Edgell
B.A. (The Ohio State University)
Social Work

Maria D'Rynn Edmondson
B.S.Soc.Work (The Ohio State University)
Social Work

Zachary Thomas Edwards
B.A. (University of Cincinnati)
Social Work

Meghan Marie Elmore
B.A. (The Ohio State University)
Social Work

Ashley Mae Emanuel
B.A. (The Ohio State University)
Social Work

Victoria Lynn Fellows
B.A. (The Ohio State University)
Social Work

Carolann Thomas Ferrier
B.A. (Indiana University of Pennsylvania)
Social Work

Caitlyn Fisher
B.S. (Lipscomb University)
Social Work

Amanda Elizabeth Flussi
B.S.Pub.Hlth. (The Ohio State University)
Social Work

Brenna Regina Forrest
B.A., B.S. (University of Cincinnati)
Social Work

Michele Suzanne Frank
B.Bus.Adm. (American Intercontinental University)
Social Work

Paige Jordan Fuller
B.S.Soc.Work (The Ohio State University)
Social Work

April Nicole Gargac
B.A. (Bowling Green State University)
Social Work

Kaitlyn Garrett
B.S.Soc.Work (The Ohio State University)
Social Work

Laura Elizabeth Gentil
B.S. (Ball State University)
M.Educ. (Ashland University)
Social Work

Courtney Gentry
B.A. (Oral Roberts University)
Social Work

Paula Gillotti
B.S. (Wright State University)
M.Educ. (University of Dayton)
M.S. (Malone University)
Social Work

Haley Nicole Gniadek
B.S. (University of Missouri-Columbia)
Social Work

Michaela Christine Goldstein
Bachelor's (Tiffin University)
Social Work

Savana Gomes
B.A. (Goa University)
Diploma (Wigan & Leigh College)
Social Work

Kelly Marie Graves
B.S.Soc.Work (The Ohio State University)
Social Work

Elizabeth Greisman
B.A. (University of Maryland)
Social Work

Amy Lynn Grismore
B.A. (Anderson University)
Social Work

Hunter Luke Hackworth
B.A. (Harding University)
Social Work

Morgan Emalee Hampton
B.S.Soc.Work (The Ohio State University)
Social Work

Sierra Dawn Hart
B.S.Educ. (University of Idaho)
M.Educ. (Northwest Nazarene University)
Social Work

Jessie Gabriella Hartman
B.S. (The Ohio State University)
Social Work

Rebecca Irene Haselberger
B.Educ., M.Educ. (Ashland University)
Social Work

Terry Elaine Haworth
B.A. (California State University, Chico)
Social Work

Abigail Anne Hays
B.A. (Ozark Christian College)
Social Work

Elizabeth Anne Hernandez
B.A. (The Ohio State University)
Social Work

Bailey Nicole Hill
B.A. (The Ohio State University)
Social Work

Destiny Bernae Hill
B.S.Soc.Work (The Ohio State University)
Social Work

Lauren Lorraine Hill
B.A. (West Virginia University)
Social Work

Tonya Marie Hinkle
Bachelor's (Tiffin University)
Social Work

Trevor Lee Holsinger
B.A. (Shawnee State University)
Social Work

Alexandria Hughes
B.S. (The Ohio State University)
Social Work

Danielle Alayna Hughes
B.A. (Kent State University)
Social Work

Alyssa Christine Idzkowski
B.S.Comm. (Ohio University)
Social Work

Julia Madeline Insler
B.A. (The Ohio State University)
Social Work

Victoria Lynn Ivan
B.S. (Kent State University)
Social Work

Abigail Brooke Jankowski
B.S.Agr. (The Ohio State University)
Social Work

Nicholas Patrick Janos
B.S.H.D.F.S. (The Ohio State University)
Social Work

Hannah Jihyang Jin
B.A. (The Ohio State University)
Social Work

Katie Rose Jones
B.A. (The Ohio State University)
Social Work

Alexis June
B.A. (Muskingum University)
Social Work

Juhyen Kim
B.A. (University of California, Los Angeles)
Social Work

Hannah Deeb Klopfenstein
B.A. (The Ohio State University)
Social Work

Kayla Marie Klotz
B.S.Soc.Work (The Ohio State University)
Social Work

Roxanne Oleta Knepp
B.A. (The Ohio State University)
Social Work

Raleigh Autumn Marguerite Knotts
B.S.Soc.Work (The Ohio State University)
Social Work

Stephanie Jack Knotts
B.S. (The Ohio State University)
Social Work

Meghan Lee Krohn
B.S. (Western Kentucky University)
Social Work

Quinn Li Lamp
B.S.Soc.Work (Bowling Green State University)
Social Work

Courtney Kayla Landin
B.A. (The Ohio State University)
Social Work

McKenzie Lane
B.A. (Arizona State University)
Social Work

Anne Elizabeth Lawrence
B.S. (Ohio University)
M.A. (Capital University)
Social Work

Elizabeth Tia Lima
B.S.Pub.Hlth. (The Ohio State University)
Social Work

Gabriella Michelle Longo
B.S.Soc.Work (The Ohio State University)
Social Work

Emily Megan Lopez
B.S.Nurs. (Creighton University)
Social Work

Matthew Jacob Luc
B.A. (The Ohio State University)
Social Work

Mackenzie Rose Lyon
B.A. (The University of Findlay)
Social Work

Zoe Maier
Bachelor's (The University of Findlay)
Social Work

Marena Mang
B.A. (The Ohio State University)
Social Work

Alicia Mars
B.A. (Rice University)
Social Work

Sarah Rose Marti
B.S.Soc.Work (Ohio University)
Social Work

Jacob William Martinez
B.A. (State University of New York at Buffalo)
Social Work

Kristyn Marie Mason
B.S.Soc.Work (University of Toledo)
Social Work

Ray Marie Mathew-Santhosham
B.S.Soc.Work (The Ohio State University)
Social Work

Natalie Collins May
B.A. (University of Cincinnati)
Social Work

Cara Marie Maze
B.A. (The Ohio State University)
Social Work

Mackenzie Diane McCloy
B.S.Soc.Work (The Ohio State University)
Social Work

Jade Marie McCoy
B.A. (Ohio Christian University)
Social Work

Jarel Semaj McRae
B.S. (Kennesaw State University)
M.Educ. (Angelo State University)
Social Work

Ava Mae Mercker
B.S.Soc.Work (The Ohio State University)
Social Work

Kelley Devine Meury
B.S., M.B.A. (Saint Joseph's University)
M.Educ. (Loyola University Maryland)
Social Work

Nicole Gabriella Michal
Bachelor's (California State University, Sacramento)
Social Work

Jordan Michelle Mikhtarian
B.A. (California State University, Stanislaus)
Social Work

Blake Carey Miller
B.S.Soc.Work (The Ohio State University)
Social Work

Claire Elizabeth Miller
B.A. (Loyola University Chicago)
Social Work

Emily Elise Milligan
B.S.Soc.Work (The Ohio State University)
Social Work

LaRonda Michelle Minto
B.S.Soc.Work (The Ohio State University)
Social Work

Brett Christopher Monzel
Bachelor's (University of Maine at Presque Isle)
Social Work

Sarah Elizabeth Mooney
B.A. (University of Dayton)
Social Work

Devon Marisa Morgan
B.S. (Johnson and Wales University)
Social Work

Victoria D. Morris
B.S. (Full Sail University)
B.S.Soc.Work (The Ohio State University)
Social Work

Katherine Morrisroe
B.S.Soc.Work (Bowling Green State University)
Social Work

Ashlyn Michelle Moseley
B.A., M.S. (University of Dayton)
Social Work

Margaret Olivia Mulligan
B.A., B.S.Soc.Work (The Ohio State University)
Social Work

Morgan Nicole Murley
B.S.Humn.Ecol. (The Ohio State University)
Social Work

Giovanni Kay Musto
B.A. (The Ohio State University)
Social Work

Lillian Faith Myers
B.A. (Bowling Green State University)
Social Work

Nile Ahsam Najmi
B.S. (University of Cincinnati)
Social Work

Alana Naylor
B.A. (The Ohio State University)
Social Work

Abigail Lee Nelson
B.S.Soc.Work (The Ohio State University)
Social Work

Emily Nichols
B.S.Educ. (The Ohio State University)
Social Work

Emily Ann Nothnagle
B.A., B.S. (The Ohio State University)
Social Work

Chelsea Christine O'Brien
B.A. (Youngstown State University)
Social Work

Anisa Abdi Osman
B.A. (The Ohio State University)
Social Work

Taylor Alexis Paglieri
B.A.Honors (Gallaudet University)
Social Work

Leah Grey Parrill
B.A. (University of Akron)
Social Work

Julia Nicole Patterson
B.A., B.S.Soc.Work (Capital University)
Social Work

Melissa Marie Pedersen
B.S.Soc.Work (The Ohio State University)
Social Work

Katherine Ann Pendergrass
B.A. (Midwestern State University)
Social Work

Kayla Ann Pennie
B.S. (University of Dayton)
Social Work

Elizabeth Cathleen Peterson
B.A. (University of California, Davis)
M.A. (Pepperdine University)
Social Work

Joy Marie Pitzer
B.S.Soc.Work (The Ohio State University)
Social Work

Kathleen Therese Poling
B.A., M.L.H.R. (The Ohio State University)
Social Work

Lauren Polk
B.S. (Wright State University)
Social Work

Kathlene Poplin
B.A. (Wright State University)
Social Work

Abigale Ruth Powell
B.S.Soc.Work (Ohio University)
Social Work

Monica Ek Presume
B.S.Soc.Work (The Ohio State University)
Social Work

Emily Jeanette Prusak
B.A. (Kent State University)
Social Work

Amanda Ravenscroft
Bachelor's, Diploma (Limerick Inst of Technology)
Social Work

Heather Humeniuk Reeves
B.S. (Ohio University)
Social Work

Janet Anne Reymann
B.A. (Ohio Wesleyan University)
Social Work

Callie Rose Riback
B.S. (University of Georgia)
Social Work

Lydia Joy Richard
B.A. (Truman State University)
Social Work

Brianna Richey
B.S. (University of Nebraska-Lincoln)
Social Work

Destiny Marie Robison
Bachelor's (Miami University)
Social Work

Kylee Alyssa Roby
B.S. (University of Minnesota)
Social Work

Julia Elizabeth Roche
B.S. (Eastern Michigan University)
Social Work

Kimberly Rodemeyer
B.S. (University of Nebraska at Kearney)
Social Work

Megan Elizabeth Rohr
B.S.Soc.Work (The Ohio State University)
Social Work

Daria Rudova
Diploma (Moscow State University)
Social Work

Jessica Lee Ryan
B.A. (Capital University)
Social Work

Briana Salgado
B.A. (Kent State University)
Social Work

Gabrielle Elizabeth Sasala
B.A. (The Ohio State University)
Social Work

Shannon T. Savage
B.S.Soc.Work (The Ohio State University)
Social Work

Kathleen Isabel Schlueter
B.S. (The Ohio State University)
Social Work

Alexis Nicole Schwartz
B.A. (Wright State University)
Social Work

Kassie Annette Scott
Bachelor's, Master's (Friends University)
Social Work

Julie Ann Sespico
B.A. (University of Mount Union)
Social Work

Lindsey Marie Shaffer
B.S. (Wright State University)
Social Work

Dawn Camille Shaheed-Long
B.A. (California State University, Fullerton)
Social Work

Colleen Marie Bennett Shryock
B.S. (Youngstown State University)
Social Work

Brigid Mary Simmons
B.A., B.S.Soc.Work (The Ohio State University)
Social Work

Aliza Skinner
Bachelor's (Wright State University)
Social Work

Elizabeth Ella Smallwood
B.S. (University of Cincinnati)
Social Work

Beatriz Solorio
B.S.Soc.Work (California State University, Sacramento)
Social Work

Kari Beth Sprout
B.S. (University of Akron)
Social Work

Annie Jane Steele
B.S.Soc.Work (The Ohio State University)
Social Work

Alexandra Stepanenko
B.A. (Duke University)
Social Work

Ramona Angela Stephenson
B.A. (The Ohio State University)
Social Work

Claire Sterling
B.A. (Ohio Wesleyan University)
Social Work

Andrea Renee Stitt
Bachelor's (Hendrix College)
Social Work

Ryann Lynn Storey
B.A. (The Ohio State University)
Social Work

Faith Ann Strapp
B.A. (The Ohio State University)
Social Work

Amy Jane Ellen Sumner
B.A. (Rutgers University-New Brunswick)
M.A. (Saint Peters University)
Social Work

Kate Marie Swigert
B.S.Soc.Work (The Ohio State University)
Social Work

Jeremy Alexander Thomson
B.S.Bus.Adm. (Towson University)
Social Work

Emily Rian Toops
Bachelor's (Capital University)
Social Work

Nathan Joseph Toppins
B.A. (The Ohio State University)
Social Work

Alayna Torgerson
B.S. (Utah State University)
Social Work

Joshua Trejos
B.A. (University of Maryland)
Social Work

Christina Jo VanBuskirk
B.A. (Capital University)
Social Work

Sarah Vanell
B.A. (Hollins University)
Social Work

Cynthia Vang
B.S. (University of Wisconsin)
Social Work

Alyssa Samone Veopaseuth
B.A. (The Ohio State University)
Social Work

Megan Olivia Vollmer
B.S.Soc.Work (The Ohio State University)
Social Work

MacKynzi Marie Vonderhaar
B.S.Soc.Work (University of Cincinnati)
Social Work

Nicole Kimberly Vutha
B.A. (Excelsior College)
M.A. (University Texas Permian Basin)
Social Work

Ryan Christian Walker
B.A. (Otterbein University)
Social Work

Talya Warner
B.A. (Muskingum University)
Social Work

Tanner Abdullah Rahim Watson
B.S.Educ. (The Ohio State University)
Social Work

Tiffany Marie Weaver
B.S. (The Ohio State University)
Social Work

Amanda Wien
B.A. (Western Connecticut State University)
Social Work

Victoria Madit Wiley
B.S. (California Coast University)
Social Work

Brooke Mackenzie Williams
B.A. (The Ohio State University)
Social Work

Lauren Elizabeth Willson
B.A. (The Ohio State University)
Social Work

Allison Melinda Wilson
B.S. (The Ohio State University)
Social Work

Heika Lynn Wilson
B.S. (Eastern Oregon University)
Social Work

Lauren Michelle Wisenbarger
B.A. (Muskingum University)
Social Work

Taylor Wochnick
B.A. (University of Nebraska at Omaha)
Social Work

Carolyn Renee Wood
B.S.H.D.F.S. (Bowling Green State University)
Social Work

Anna Wright
B.S. (Utah State University)
Social Work

Madison Jaye Young
B.A. (The Ohio State University)
Social Work

Craig Richard Zesiger
B.S. (University of Kentucky)
M.Educ. (Ohio Dominican University)
M.S. (University of Dayton)
Social Work

Allison Zimmermann
B.S.Soc.Work (The Ohio State University)
Social Work

Audrie Zinger
B.S.Soc.Work (Capital University)
Social Work

Abby R. Zuckerman
B.S. (University of Wisconsin)
Social Work

Master of Sports Coaching

William Martin Bertsch
B.S.H.D.F.S. (The Ohio State University)
Human Sciences

Riley Marie Brengman
B.S.Educ., M.S. (The Ohio State University)
Human Sciences

Kohl Kutsch
B.Bus.Adm. (Lincoln Memorial Univ)
Human Sciences

Klay Thomas Reeves
B.S.Educ., M.S. (The Ohio State University)
Human Sciences

Keaton Gerald Royce
B.S.Educ. (The Ohio State University)
Human Sciences

Thomas Matthew Scarpa
B.A. (Marist College)
Human Sciences

Master of Structural Engineering

Cameron Thomas Hagely
B.S.Civ.Eng. (The Ohio State University)
Structural Engineering

Ted Michael Haselman II
B.S.Civ.Eng. (University of Cincinnati)
Structural Engineering

Mohamed Mohamed Salim
B.S.Civ.Eng. (The Ohio State University)
Structural Engineering

Master of Supply Chain Management

John F. Cavanagh
B.S. (University of Akron)
Supply Chain Management

Carolyn Cook
B.S.Bus.Adm. (The Ohio State University)
Supply Chain Management

Isaac J. Day
B.A. (Ohio University)
Supply Chain Management

John L. Finch
B.S.Bus.Adm. (The Ohio State University)
Supply Chain Management

Kyle Green
B.S.Honors, B.S. (Arizona State University)
Supply Chain Management

Matthew Hawks
B.A. (Walsh University)
Supply Chain Management

Thomas Loncar
B.S. (Central Michigan University)
Supply Chain Management

John Langley Miller
B.S.Educ. (The Ohio State University)
Supply Chain Management

Amanda O. Moona
B.Bus.Adm. (Texas A&M University-Commerce)
Supply Chain Management

Mohammed L. Musah
B.A. (Kwame Nkrumah University of Science and Technology)
Supply Chain Management

Adam W. Napier
Bachelor's (Beckfield College)
Supply Chain Management

Dustin J. Owens
B.S. (Wright State University)
M.B.A. (University of Dayton)
Supply Chain Management

Richard Tucker
B.S. (American Military University)
Supply Chain Management

Elizabeth Paige Wigal
B.A. (The Ohio State University)
Supply Chain Management

Alissa E. Yakali
B.Bus.Adm. (Western Michigan University)
Supply Chain Management

Master of Translational Data Analytics

Art Adduci

B.S., M.B.A. (Southern New Hampshire University)
Translational Data Analysis

Lanakila Michaels Alexander

B.S. (Austin Peay State University)
Translational Data Analysis

Matthew Thomas Bigelow

B.S.Allid.Hlth.Prof., M.B.A. (The Ohio State University)
Translational Data Analysis

Erin Elizabeth Bosse

B.S.Hlth.Reh.Sci. (The Ohio State University)
Translational Data Analysis

Florian Boyaka

B.S.Cptr.Sci.Eng. (Miami University)
Analysis

Robert Merritt Butts

B.Bus.Adm. (Kent State University)
Translational Data Analysis

Sean Patrick Collins

Bachelor's (Walsh University)
M.S. (The Ohio State University)
Translational Data Analysis

James Dwyer

B.A. (Loyola Marymount University)
M.S. (Grand Canyon University)
Translational Data Analysis

Benjamin David Hood

B.S. (Taylor University)
Translational Data Analysis

Makayla Marie Johnson

B.S.Hlth.Reh.Sci. (The Ohio State University)
Translational Data Analysis

Rachael Nicole Kincaid

B.A. (The Ohio State University)
Translational Data Analysis

Jonathan Olsen Mead

B.S. (University of Toledo)
Translational Data Analysis

Heechang Na

B.S. (Chung-Ang University)
Ph.D., M.S. (Indiana University)
Translational Data Analysis

Ryejung Na

B.S. (Seoul Women'S University)
Ph.D. (Hallym University)
Translational Data Analysis

Jeel Patel

B.S. (Virginia Commonwealth University)
Translational Data Analysis

Rachel Marie Romestan

B.S. (The Ohio State University)
Translational Data Analysis

Waliah Saif

B.S. (The Ohio State University)
Translational Data Analysis

Akwasi Mensah Sarpong

B.S.Elec.Cptr.Eng. (The Ohio State University)
Translational Data Analysis

Nathan Sepeda

B.S. (University of Minnesota)
Translational Data Analysis

Yiting Wang

B.A. (Jiangnan University)
M.F.A. (The Ohio State University)
Translational Data Analysis

Xiaoying Wei

B.S. (China Agricultural University)
M.Educ. (The Ohio State University)
Translational Data Analysis

Specialized Master in Business

Ramsha Adil

B.Tech. (Jamia Millia Islamia)
Business Administration: Finance

Paige Marie Blue

B.S.Bus.Adm. (The Ohio State University)
Business Administration: Finance

Natalie E. Bongirno

B.A. (University of Florida)
Business Administration: Finance

Cameron Thomas Bridges

B.S.Bus.Adm. (The Ohio State University)
Business Administration: Finance

Yuchen Cao

B.S.Bus.Adm. (The Ohio State University)
Business Administration: Finance

Yung Ching Chao

B.S. (National Chung Cheng University)
Business Administration: Finance

Garrett William Frazier

B.S.Bus.Adm. (The Ohio State University)
Business Administration: Finance

Thomas Gilej

B.S. (The Ohio State University)
Business Administration: Finance

Yilan Guo

B.S. (Jiangxi University of Finance and Economics)
Business Administration: Finance

Victoria Elizabeth Hacker

B.S.Civ.Eng. (The Ohio State University)
Business Administration: Finance

Hao Liu

B.A. (University of Minnesota)
Business Administration: Finance

Mark I. Markulin

B.S. (Kent State University)
Business Administration: Finance

Luke Blaine Maynard

B.S.Humn.Ecol. (The Ohio State University)
Business Administration: Finance

Akshobh Mirapurkar

B.S. (Ohio University)
Business Administration: Finance

Parker Nicely

B.S. (Florida State University)
Business Administration: Finance

Valerie Ong

B.Bus.Adm. (Kent State University)
Business Administration: Finance

Animesh Pagey

B.Tech. (Vellore Institute of Technology)
Business Administration: Finance

Prasun Pariya

B.S. (The Ohio State University)
Business Administration: Finance

Sahil Patel

B.A. (Kent State University)
Business Administration: Finance

Daniel Patten

B.S. (Cleveland State University)
Business Administration: Finance

Ram Kumar Kaushal Pendyala

B.Tech. (Punjab Engineering College, Chandigarh)
Master's (Symbiosis International University)
Business Administration: Finance

Niharika Kishore Rangwani

B.Com.Three (Rashtrasant Tukadoji Maharaj Nagpur University)
Business Administration: Finance

Mohith Tadakara Reddy

B.Tech. (REVA University)
Business Administration: Finance

Sergio Rodrigo Ribeiro Da Silva

Bachelor's (University Federal Fluminense)
Bachelor's (Universidade Veiga de Almeida)
M.B.A. (Fundacao Getulio Vargas)
Business Administration: Finance

Evan Nathan Saylor

B.S.Bus.Adm. (The Ohio State University)
Business Administration: Finance

David Ryan Sherwood

B.S. (Youngstown State University)
Business Administration: Finance

Ethan Snyder

B.S. (University of Dayton)
Business Administration: Finance

Griffin Turner

B.S. (Hofstra University)
Business Administration: Finance

Feifan Wang

B.S. (The Ohio State University)
Business Administration: Finance

Zhenghao Xu

B.S. (Shanghai Lixin University of Accounting & Finance)
Business Administration: Finance

This program is not an official graduation list.

This printed program lists students who were eligible to graduate for Spring Semester 2025, as of 5:00 p.m., April 23, 2025, pending the outcome of final examinations and final grades. Therefore, it should not be used to determine a student's academic or degree status. The University's official registry for conferral of degrees is the student's permanent academic record, kept by the Office of the University Registrar, Student Academic Services Building, 281 West Lane Avenue, Columbus, OH 43210-1132.

College of Arts and Sciences

Dean: David G. Horn

**Dana Renga, Divisional Dean
Arts and Humanities**

**Susan V. Olesik, Divisional Dean
Natural and Mathematical
Sciences**

**Ryan D. King, Divisional Dean
Social and Behavioral Sciences**

Bachelor of Arts

Michelle B. Abbeyquaye

Cum Laude
with Honors in the Arts and Sciences

Abdullah Abdeldayem

Summa Cum Laude

Habiba Mohamed Abdelhamid

Magna Cum Laude

Nour Abdelrahman Awad

Abdelrahman

Hafsa Raage Abdi

Naval Abdikadir

Cum Laude

Sakarie F. Abdullahi

Malak Abouneama

Armias Hailu Abraham

Salma Hussein Absie

Cum Laude

Reilly Grace Ackermann

Catherine Adams

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Geography

Tyler Matthew Adams

Magna Cum Laude

Abdikadir Adde

Salma Abdirashid Shire Aden

Madison Lenee Adkins

Magna Cum Laude

Michael Adusei

Liladhar Adusumilli

Gabrielle Martina Advent

Summa Cum Laude

Shivangi Agarwal

Summa Cum Laude

Parth Sandeep Agate

Ana Carmen Aguilar

Lorena Airado

Andrew Sam Akarri

Summa Cum Laude

Mubarak Saeed Khamis Khalifa

Al Khaili

Cum Laude

Ahmad AlAjlouni

Rachael Marie Albanese

Braelyn Albano

Summa Cum Laude

Emma Nichole Albert

Magna Cum Laude

Zoey Albrecht

Magna Cum Laude

Haley Lauren Aldrich

Kidist Desta Alemayehu

Summa Cum Laude

Abdulmajeed Nassir A Alharthy

Summa Cum Laude

Ilham Ali

Sumaya Ali

Magna Cum Laude

Sabrina Ali Aliyo

Magna Cum Laude

Leena B. Alkhafaji

Tajah Mufeed Alkhalifa

Cum Laude

Colton Matthew Allemong

Alesha Marie Tene Allen

Cum Laude

Ari Allen

Cameron Allen

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors in the Arts and Sciences

with Honors Research Distinction in

International Studies

Sean Christopher Allingham

Nouralkamal Ali Alshahal

Noshin Saiyara Amin

Terrianna Lanae Ammons

Cum Laude

Abby Marie Amrine

Benjamin Parker Amsterdam

Sarah Sebene Andebrhan

Magna Cum Laude

Yonaton Andebrhan

Chase Andrew Anderson

Jay Stewart Anderson

Summa Cum Laude

AlexAndrea Marie Anthony

Magna Cum Laude

Amber Leigh Anthony

Magna Cum Laude

Riley Morgan Anthony

Magna Cum Laude

Adriana Marie Antuono

Cum Laude

Marcelino Aponte III

Audrey Souzan Arman

Magna Cum Laude

Jacob Taylor Armstead

Cum Laude

Pedro Arreguin

Cum Laude

Ikran Farhan Artan

Natalie Theresa Artino

Sarah Grace Ash

Magna Cum Laude

Alexandrea Joy Ashmun

Magna Cum Laude

Arthur Jack Ashton

Cum Laude

Ian Kane Ashworth

Kirill Asmirk

Cum Laude

Hawwii Beyan Asoba

Magna Cum Laude

Tyler Joel Azer

Madeline Virginia Babcock

Clarissa Marie Bachelder

Summa Cum Laude

Maya Sofia Badhwar

Summa Cum Laude

Nicole Lee Bahleda

Tianqi Bai

Magna Cum Laude

Jocelyn Bailey

Cum Laude

Keshaun Dominique Bailey

Leo Bain

Magna Cum Laude

Sarah Helene Bain

Emerson Patrizi Baird

Cum Laude

Connor Henry Bajuk

Jasmine Lou Balduf

Jo Ruth Baldwin

Jack Monte Ballenberg

Anabella Sophia Ballone

Nina Tonia Bana

Summa Cum Laude

Zachary Nicholas Banaszak

Cindy Bar

Madeline Kate Barhorst

Lauren Kathleen Barker

Gabrielle Paige Barlow

Noah Patrick Barnett

Suhair Mohamed Abdi Barod

Cum Laude

Bryn Dustin Barr

Magna Cum Laude

Fatimata Mamadou Barro

Khyriesha NyVaughna

Bartholomew

Avery Rhyen Bartholow

Justin Michael Bartos

Jack David Basinski

Ephraim Baturin

Cum Laude

Eddie Bautista Garcia

Summa Cum Laude

Kinidy Ray Beaulieu

Summa Cum Laude

Noah Matthew Beaulieu

Julia Grace Begley

Dustin L. Belcher

Cum Laude

Izabella Marija Belesovski

Frank Patrick Bell

Magna Cum Laude

Jalaysia Bell

Jillian Marie Bell

Sydney Simone Bell

Cum Laude

Noah Christian Belles

Summa Cum Laude

Taylor Katherine Benedict

Magna Cum Laude

Matthew Orrin Benton

Brenna Colleen Berean

Jakob Aaron Bering

Summa Cum Laude

Joseph Ilan Berkowitz

Summa Cum Laude

Samuel Dorn Bermudez

Reece Allen Berrier

Mashayla Kirstin Berry

Summa Cum Laude

Maya Elizabeth Berry

Summa Cum Laude

Code Alwyn Beschler

Cum Laude

London Brionna Bess

Pratyay Bhattacharyya

Puiyata Bhattarai

Nellie Marie Bianchi

Cum Laude

Sydney Bianchin

Elena Grace Bianconi

Magna Cum Laude

Kayla Renee Bielke

Summa Cum Laude

Aaliyah Monet Binford

Magna Cum Laude

Hannah Black

Cum Laude

Madalyn Lee Blackford

Ellis Avalon Blackstone

Summa Cum Laude

Adam Michael Blair

Summa Cum Laude

with Research Distinction in History

Madison Samantha Blake

Leuviah Blakma

Magna Cum Laude

Jaiden Martinez Blancafor

Magna Cum Laude

with Honors in the Arts and Sciences

Lucas Blaufuss

Christopher Andrew Blauman

Summa Cum Laude

Lindy Eden Bobrow

Caitlin Bock

Summa Cum Laude

Ava Kathleen Bockbrader

Magna Cum Laude

Adam Boggs

Cum Laude

Jack Michael Boltz

Aurora Evelyn Boothby

Claire Jacquelyn Borders

Magna Cum Laude

Sarah Gail Borling

Cum Laude

Carly Elise Borovetz

Magna Cum Laude

Nolan Thomas Borowy

Heather Marie Bothe

Sarah Marie Botti

Summa Cum Laude

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Science

Andrew Bourget

Amanda Lynn Bovenzi

Summa Cum Laude

Renn Brennah-Marie Bowen

Cum Laude

Noah Scott Bowman

Kayla Marie Bowser

Katarina Joelle Bowyer

Cum Laude

Minami Portia Boyd

Summa Cum Laude

Regan Bradish

Ava Florence Euphrasia Brady

Magna Cum Laude

Arlo Maddox Braman

Cum Laude

Colleen Mae Brandewie

Summa Cum Laude

Cameron Bratchette

Jacob Nathaniel Braun

Megan Marie Braun

Cum Laude

Daniel Harrison Brenner

Cum Laude

AyDrane Knise Brewer

Richard Lee Brink

Gabriela Lisvette Brito

Olivia Ann Brooks

Summa Cum Laude

with Research Distinction in

Biochemistry

Meagan Kai Brosneck

Magna Cum Laude

with Research Distinction in History

Aaron Cliff Brown, Jr.

Enrique Miguel Tadena Cabotage

Cum Laude

Ruolin Cai

Cum Laude

Ashley Nicole Caldwell

Cum Laude

Megan Riley Callow

Summa Cum Laude

Christopher Allen Campbell

Lauren Andrea Campbell

Madelyn Leigh Campbell

Summa Cum Laude

Shaun Cameron Campbell

Joseph Cannon

Magna Cum Laude

Guoliang Cao

Tara Capers

Cum Laude

Georgianna Therese Caputo

Magna Cum Laude

Felix Skau Carbetta

Magna Cum Laude

Roberto Daniel Cardona Mendez

Jacob Grant Raphael Carlson

Summa Cum Laude

Shandaysha KayLynn Carmon

Cum Laude

Chloe Grace Carney

Victoria Faith Carney

Chloe Rose Carpenter

Ian James Carroll

Robert Scott Carroll, Jr.

John Carter Carstens

Cum Laude

with Honors in the Arts and Sciences

Cydney S. Carter

Cum Laude

Spencer Gray Lincoln Carver

Cum Laude

Alexis Brianna Cash

Cum Laude

Kate Alison Cassa

Magna Cum Laude

Mira Cassell

Isabel Catherine Cassidy

Mira Bella Catania

Jesse Caton

Cum Laude

Chloe Grace Caudill

Summa Cum Laude

with Honors in the Arts and Sciences

Rachel Ellen Cavote

Cum Laude

Jessenia Lee Cedeño

Stephanie Cervantes

Audrey Elizabeth Cesar

Magna Cum Laude

Gabriella Ann Chahine

Magna Cum Laude

Meredith Claire Chambers

Cum Laude

Gloria Van Benthuyssen Chan

Summa Cum Laude

Chaobo

Morgan Beth Chase

Emmon'e Breon Cheers

Karen Chen

Letian Chen

Cum Laude

Michael Lihong Chen

Tingxuan Chen

Summa Cum Laude

Yang Chen

Yifei Chen

Zewei Chen

Joshua Isaac Chernick

Cum Laude

Saketh Chirumamilla

Corey Wilson Chmara

Bennett Howard Christian

Le'Ana Christian

Luisa Joy Christian

Reagan Elizabeth Christie

Magna Cum Laude

Catherine Constance Christy

Magna Cum Laude

Stephen James Churak

Abigail Elizabeth Ciaramella

Isabella Alyssa Cicora

Dominic Edward Cipiti

Olivia Marie Clady

Summa Cum Laude

with Honors in the Arts and Sciences

Richard Wayne Claggett

Cum Laude

Hattie Anne Clark

Summa Cum Laude

Ja'Chi James Delano Clark

Magna Cum Laude

Nicholas William Clark

Summa Cum Laude

Taylor Renee Clark

Magna Cum Laude

Lorne Emanuel Clarke

Sarah Wells Clarke

Hazel Christina Claybon

Austin N. Clemens

Summa Cum Laude

Isabella Marie Cleveland

Cum Laude

Emma Ann Cliff

Tabitha Renee Clifton

Abby Coate

Lily Elaine Coates

Sophia Amalie Cobb

Magna Cum Laude

Meredith Claire Coffield

Summa Cum Laude

Jelena Kassidy Coleman

Caity Grace Collins

Jacob Thomas Collins

Magna Cum Laude

Tylie Michelle Collins

Makenzie Renee Compton

Emma Conkle

Summa Cum Laude

Seth Nathaniel Conklin

Brandon Lucas Conley

Elise Marie Conrad

Magna Cum Laude

Joseph Reid Constantino

Ava Francesca Contenza

Magna Cum Laude

Mason Matthew Conway

Magna Cum Laude

Leah D. Cook

John Joseph Cooke

Charles Taylor Coolidge

Summa Cum Laude

Kevin Donald Cooper

Magna Cum Laude

Kristen Danielle Cooper

Summa Cum Laude

Christopher Nelson Corcoran

Summa Cum Laude

Iori Cornejo Mendoza

Nicole Danielle Cornelius

Jessica Rose Cornell

Mylo Cowell

Annabella Marie Cowley

Magna Cum Laude

Myla Marie Cox

Summa Cum Laude

Jaelyne Aria Craft-Eickemeyer

Trinity Lajae Craig

Samuel William Crandall

Cum Laude

Nariya Crayton

Caitlin Grace Creach

Summa Cum Laude

Sara Crepeau

Magna Cum Laude

Lucas Owen Crider

Cum Laude

Kathryn Herlihy Cronin

Summa Cum Laude

Isabel Grace Croutch

Zavier Cruz-Ginez

Jeena Marie Culbertson

Leila Noelle Culp

Magna Cum Laude

Dylan Michael Curran

Daryn Reese Cutler

Courtney Czekaj

Cum Laude

Alessia Nicole D'Ambrosio

Emma Grace D'Amico

Magna Cum Laude

with Honors in the Arts and Sciences

Ruoyao Dai

Sheng Dai

Yuang Dai

Matthew G. Dallas

Connor James Dalton

Magna Cum Laude

Sydney Maia DaLuz

Andrew Brian Daniels

Bre'Ashia Niaire Daniels

Diane Darius

Casey Micah Daumeyer

Cum Laude

Carmen Sydney Davis

Cum Laude

Ethan Jacob Fremont Davis

Ra'Kieya Janae Davis

Cum Laude

Madina Davlatboyeva

Magna Cum Laude

Danielle Amber de Zwaan

Ashley Lorraine DeAngels

Cum Laude

Olivia Dearth

Cum Laude

Michael Emile Debs

Emma Grace Degnan

Cum Laude

Alexis Diana Delaney

Summa Cum Laude

John David DeLeo

Cum Laude

Jillian Taylor DeMarco

Magna Cum Laude

Judeline Denestant

Lintao Deng

Olivia Dennis

Brandon David DePerro

Arrieonna Dajanai Derricoatte

Cum Laude

Chyrisa DeSantis

Magna Cum Laude

with Honors in the Arts and Sciences

Alyssa Faith Detillion

Magna Cum Laude

Mackenzie Deirdre Joan DeWitt

Magna Cum Laude

Laila Dheag

Halimatu Diallo

Houleymatou Diallo

Huining Diao

Magna Cum Laude

Amanda Daniela Diaz Guevara

Sarah Ann DiCapua

Cum Laude

with Research Distinction in History

Charlotte Olivia Dickinson

Sally Diep

Madison Ann Digilio

Cum Laude

Jacob Michael Diller

Grace Marie Dillon

Cum Laude

Josh Frederick Dillon

Mark T. Dinehart

Nan Ding

Naima Iman Diop-West

Summa Cum Laude

Sara Abdi Diriye

Francesca Bangudi Dishueme

Magna Cum Laude

Carolyn Danielle Dixon

Shannon Lorraine Dods

Magna Cum Laude

Elena Rose Dollinger

Rachel Mae Dom Dera

Magna Cum Laude

Gabriella Noel Donatucci

Summa Cum Laude

Katherine Ann Dorton

Summa Cum Laude

Lucas Doty

Madison Marie Doughty

Magna Cum Laude

Mariah Rose Doughty

Summa Cum Laude

Dakota Alexander Dowding

Magna Cum Laude

Aidan Eoin Doyle

Magna Cum Laude

Madeline Jane Drake

Magna Cum Laude

Michael David Draper

Andrew Matthew Drellishak

Evie Grace Drennen

Jillian Addison Drinnon

Summa Cum Laude

Elisabeth Hope Droz

Lauren Elise Drozdowski

Summa Cum Laude

John Anthony Drury

Magna Cum Laude

Livia Marie Dubbs

Magna Cum Laude

Mia Elizabeth Li Duff

Cum Laude

Jack Kill Duffy

Cum Laude

Gillian Erinn Dunahoe

Cum Laude

Briana Dunbar

Brandon Matthew Feltz Ziyi Feng <i>Cum Laude</i>	Elizabeth Grace Gallagher <i>Summa Cum Laude</i>	Shivani Gopal <i>Cum Laude</i>	Cooper John Happensack Emily Lou Harbison <i>Cum Laude</i>	Hector Ivan Hernandez Martinez <i>Summa Cum Laude</i>
Kyleigh Nicole Ferrall <i>Magna Cum Laude</i>	Grace Lynee Gallagher Sara Noel Gallagher <i>Magna Cum Laude</i>	Ella Claire Gould <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Nateshawn Trequez Hargrove George Gregory Harkenrider Paige James Harmon <i>Magna Cum Laude</i>	Ethan Robert Hersey <i>Cum Laude</i>
Makyla Mae Ferris <i>Cum Laude</i>	Abrianna Terese Gallo <i>Summa Cum Laude</i>	Megan E. Graeler <i>Summa Cum Laude</i>	Kylie Elizabeth Harper Piper Elizabeth Mize Harrell <i>Magna Cum Laude</i>	Danielle Morgan Hershenson <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>
Iiana Rose Feuerman <i>Cum Laude</i>	Shelby Ann Gambill Dawson Garrett Gamble Nolan Gardner Miriam Hana Gardsbane <i>Magna Cum Laude</i>	Lauren Anne Graffice Dana Hadassah Granot Bethany Faith Gray <i>Cum Laude</i>	Faith Harris <i>Magna Cum Laude</i>	Derek Charles Heskett <i>Cum Laude</i>
Amelia Jeannette Figler <i>Summa Cum Laude</i>	Meghan McKayla Garens <i>Magna Cum Laude</i>	David Joseph Green <i>Magna Cum Laude</i>	Grant Harris <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Zoe Anne Hess Sonali Bianca Hettipola Adam James Hettrick Ronan Brian Hickey Isabelle Jolynn Higgins <i>Summa Cum Laude</i>
Jasmine Elizabeth Finch <i>Cum Laude</i>	Sarah Ella Garfinkel <i>Summa Cum Laude</i>	Maxwell James Greene <i>Magna Cum Laude</i>	Kendal Avery Harris <i>Magna Cum Laude</i> <i>with Research Distinction in African American and African Studies</i>	Trinitee Starr Higgins Gabrielle Rebecca Hile <i>Cum Laude</i>
Yobiel Tesfamichael Fishation <i>Magna Cum Laude</i>	Keera Lynn Garmon <i>Magna Cum Laude</i>	Devyn Marie Greenfield <i>Summa Cum Laude</i>	Andrea Jeanne Harrison <i>Cum Laude</i>	Jayla Antoine Hill Zachary Thomas Hirschy Melissa Nicole Hobson Brooke Marie Hocht <i>Summa Cum Laude</i>
Lily Rose Fishel <i>Cum Laude</i>	Sadie Rebecca Garner Brianna Garrett Michael Todd Garrett Shaylee Rose Gatch <i>Summa Cum Laude</i>	Lauren Jessica Greenwald Olivia June Greer <i>Summa Cum Laude</i>	Dane Anthony Harter <i>Cum Laude</i>	Sydney Anne Hoepfner <i>Summa Cum Laude</i>
Raegan Elizabeth Fisher <i>Magna Cum Laude</i>	Megan Elizabeth Gatsch Sharon Elouise Gattshall <i>Cum Laude</i> <i>with Research Distinction in History</i>	Hannah Gabrielle Gremling Brendan Christopher Gribben Sebastian Petrou Griffith <i>Summa Cum Laude</i>	Megan Cali Hartung Duncan Shepperd Harvey <i>Magna Cum Laude</i>	Matthew David Hofferber Julia George Hoffer <i>Cum Laude</i>
Mackenzie Grace Fitzgerald Jane Fleetwood <i>Magna Cum Laude</i>	Jess Colby Gavin Kaixin Ge Carina Carol Geissler <i>Summa Cum Laude</i>	Cheney Gross <i>Magna Cum Laude</i>	Holly Priscilla Harvey Amun Mohamed Hassen <i>Magna Cum Laude</i>	Sally Hofmans-Curie <i>Magna Cum Laude</i>
Ethan Wesley Fletcher Blaze Gabbro Fletcher-Broderson <i>Magna Cum Laude</i>	Alexis Julia Geltzeiler <i>Summa Cum Laude</i>	Annie Gu <i>Magna Cum Laude</i>	Liv Astrid Haugen <i>Magna Cum Laude</i>	Hannah Mae Holbert <i>Magna Cum Laude</i>
Jenna Rose Foos <i>Magna Cum Laude</i>	Lukas Hunter George Grant George Germann <i>Magna Cum Laude</i>	Yiwen Gu <i>Magna Cum Laude</i>	Isaac James Haught <i>Magna Cum Laude</i>	Emma Marie Holden <i>Cum Laude</i>
Leela Magdalene Ford Sierra Ford <i>Magna Cum Laude</i>	Sophia Paige Gerspser <i>Magna Cum Laude</i>	Nicholas Mathew Guerrieri <i>Summa Cum Laude</i>	Nicholas Anthony Haydock Kathryn Leigh Haynes <i>Cum Laude</i>	Benjamin Gary Holm-Bertelsen <i>Cum Laude</i>
Isabella Christine Forsyth Annabelle Tullis Foster <i>with Honors in the Arts and Sciences</i>	Mary Elizabeth Gesner Dagmawit Getnet <i>Magna Cum Laude</i>	Khushboo Gupta <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Ashley Brooke Hazen <i>Summa Cum Laude</i>	Maxwell Ryan Holtman <i>Cum Laude</i>
Jamie Lee Foust <i>Cum Laude</i>	Tabarek Najah Ghulam <i>Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Idil Abokor Gurreh <i>Cum Laude</i>	Richard Cline Hearty Sydney Heckeler Kaitlyn Grace Heckler <i>Magna Cum Laude</i>	Qianhui Hong Jake Edward Hoover <i>Magna Cum Laude</i>
Madeline Ann Foust <i>Magna Cum Laude</i>	Mikayla Erichsen Gibbons <i>with Honors in the Arts and Sciences</i>	Phillisen Gurreh Eli Andrew Gurski Madison Shae Guthrie <i>Summa Cum Laude</i>	Erin Elizabeth Heckman Elise Marie Hedrick <i>Summa Cum Laude</i>	Kayleigh Hopper Gabrielle Ava Hornung Robyn Nicole Horison Stephanie Anna Houser <i>Magna Cum Laude</i>
Samantha Rose Fox <i>Magna Cum Laude</i>	Dinah Lynn Gigandet <i>Summa Cum Laude</i>	Amaresh Aberra Haddis <i>Cum Laude</i>	Hannah Nicole Heffernan <i>Cum Laude</i>	Baylee Michelle Howell Sydney Elizabeth Howells Elena Grace Hoyt <i>Magna Cum Laude</i>
Sara Marta Franquesa-Guivernau <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Hailey Rae Gilchrist <i>Cum Laude</i>	Brandi Lee Hafen <i>Summa Cum Laude</i>	Erich Christopher Heinz <i>Magna Cum Laude</i>	Weijun Hu <i>Cum Laude</i>
Noelle Katherine Fraser Miranda Wynne Freedman <i>Magna Cum Laude</i>	Bethany Gillespie <i>Summa Cum Laude</i>	Olivia Grace Haines Anirudh Ujwal Halkatti <i>Summa Cum Laude</i>	Yara Fallaq Hejazeen <i>Magna Cum Laude</i>	Xinwen Hu <i>Cum Laude</i>
Giovanna Linda Christine Freeman <i>Summa Cum Laude</i>	Sarah Leslie Gilliam Owynn Alexander Githens Jordan Michael Gladwell Nicholas Michael Glahn <i>with Honors in the Arts and Sciences</i>	Carly Marie Hall <i>Magna Cum Laude</i>	Abdulaziz Helal <i>Cum Laude</i>	Jiale Huang <i>Magna Cum Laude</i>
Mohamed Keiku Freeman Natali Lyn Freihammer <i>Cum Laude</i>	Hailey Rae Gilchrist <i>Cum Laude</i>	Gillian Marie Hall <i>Summa Cum Laude</i>	Abdullah Mohanud Helal <i>Magna Cum Laude</i>	Paul Shao-Young Huang <i>Magna Cum Laude</i>
Mia Layne Freiman Mark Donald Frenndberg Lydia Grace Frey <i>Summa Cum Laude</i>	Kathryn Lynne Good Hallie Elizabeth Goodman <i>Summa Cum Laude</i>	Kristin Nicole Hall Paige Ellen Hall <i>Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Alyssa Marie Heller Trey Walker Heller <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Xinrui Huang <i>Magna Cum Laude</i>
Ashlyn Taylor Friedlander <i>Magna Cum Laude</i>	Raven A. Glover Evan Joseph Goddard <i>Cum Laude</i>	Karli Rita Halperin <i>Cum Laude</i>	Mackenzie Jean Helm <i>Summa Cum Laude</i>	Jonathan Morgan Hubbard Meghan Grace Hubbard <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>
Matthew Thomas Fronczek Sarah Elizabeth Fronista <i>Summa Cum Laude</i>	Leah Goldenberg <i>Cum Laude</i>	Audrey Grace Halvorson Malak T. Hamed Naomi Rebekah Hammond Olivia Brianne Hammond Stephanie Alandrea Hammonds Tori Lenelle Hammonds Hamza M. Hamza Bridget Paige Hanna <i>Summa Cum Laude</i>	Spencer Joseph Helms <i>Summa Cum Laude</i>	Aaron Hughes Erin Elizabeth Hunley <i>Cum Laude</i>
Julia Rae Frost <i>Summa Cum Laude</i>	Paul Gonciulea <i>with Honors in the Arts and Sciences</i>	Hamza M. Hamza Bridget Paige Hanna <i>Summa Cum Laude</i>	Kaia Janay Henderson Sean Patrick Henderson Lena Amelia Henicle Kodi Nicole Hennebert <i>Cum Laude</i>	Shawnta Ta'Janae Hunter <i>Cum Laude</i>
Alivia Joy Frye <i>Summa Cum Laude</i>	Kathryn Lynne Good Hallie Elizabeth Goodman <i>Summa Cum Laude</i>	Ziqi Hao	Abbigail Marie Herman <i>Cum Laude</i>	Yu Huo Yuhui Huo Rory Katherine Huseman <i>Cum Laude</i>
Jed William Fulton Nyah Ariel Funderburke Isabella Hope Funk <i>Cum Laude</i>			Sydne Mae Hermiller Riley Elizabeth Hernandez <i>Magna Cum Laude</i>	Iman M. Hussein <i>Magna Cum Laude</i>
Nandita Sai Gaddam <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>				Caleb Lawton Hutchinson <i>Summa Cum Laude</i>
Claire Teresa Galavotti <i>Magna Cum Laude</i>				

June 4 - August 20, 2025, Board of Trustees Meetings

Sophia Angela Iacobucci
Fatima Ibrahim
Bridget Taylor Ilg
Summa Cum Laude
Zamira Ilyasova
Antonino Bane Imbroscio
Cum Laude

Diana Marie Imre
Summa Cum Laude
Nathan Gabe Incze
Cum Laude

Andrew Andy Inthavongsone
Isabelle Cheri Irion
Maximilian Russell Irmen
Patricia Alexandra Issa Isaac
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in History of Art

Casey Wade Isenbarger
Madina Iskandarova
Farzana Islam
Macie Kathleen Ivey
Madeline Elise Jackson
Magna Cum Laude

Rebecca Elaine Jackson
Sarah Elizabeth Jacobs
Cum Laude
with Research Distinction in Russian

Jaclyn Rose Jakubick
Magna Cum Laude
Fatmata Jalloh
Yusuf I. Jama
Lana Nicole Jamal
Cum Laude

Madison Grace-Nicole James
Summa Cum Laude
William C. James
Alexa Milena Jamet
Logan David Janik
Cum Laude

Catherine Grace Jankunis
Magna Cum Laude
Margaret Anne Jantz
Cum Laude

Bryan C. Jay
Olivia C. Jay
Akeighla Michelle Jenkins
Magna Cum Laude
Linsey Sierra Jenkins
Rheagan Christine Jennings
Claire Marie Jesionowski
Summa Cum Laude

Jie Ji
Magna Cum Laude
Walter Omar Jimenez Rodriguez
Cum Laude

Nade Jin
Riley Marie Johansen
Summa Cum Laude

Angela L. Johnson
G'Von Tonio West Johnson
Mac Oliver Johnson
Magna Cum Laude

Marissa Nicole Johnson
Nathan Richard Johnson
Cum Laude

Nicholas Anthony Johnson
Cum Laude
Sydney Johnson
Summa Cum Laude

Taylor Janae Johnson
Zoe Markham Johnson
Jonah Bradford Johnston
Daniel Curtis Jones
Sarah Shih-rou Jones
Cum Laude

Shaleyia L. Jones
Magna Cum Laude
Sydney Kay Jones
Magna Cum Laude

Sydney Monet Jones
William Brian Jones III
Charles Thomas Joranko
Magna Cum Laude

Isabella Marie Joseph
Cum Laude
Catherine Grace Joyce
Cum Laude

Andrew Juarez
Summa Cum Laude
Luis Angelo Juarez
Magna Cum Laude

Hyein Jung
Julia Jungbluth
Magna Cum Laude

Benjamin Scott Jurkowski
Isabella Catherine Justice
Magna Cum Laude
with Research Distinction in Psychology

Kayleen Mariah Kaatz
Magna Cum Laude
Olivia Eren Kaczmarek
Skye Isabella Kades
Cum Laude

Yasmine Noha Kadimi Skalli
with Research Distinction in Geography
Emmett Joseph Kahnert
Cum Laude

Genevieve Anne Kanarowski
Jina Kang
Magna Cum Laude

Brigham Riley Kannally
Vidhya Kannan
Jonah Michael Karnofel
Jaclyn Faith Karpinsky
Summa Cum Laude

Laurn N. Kashkin
Magna Cum Laude
Yasmine Kashubeck
Summa Cum Laude

Prabhav Sai Katari
Summa Cum Laude
Seth Daniel Kauffman
Summa Cum Laude
Grant Henry Kaufman
Jacob Alexander Kaufman
Summa Cum Laude

Erin Patricia Kauth
Magna Cum Laude
Arianna Kelawala
Summa Cum Laude

Joelea Jia Jie Kelley
Magna Cum Laude
Caleb R. Kelly
Summa Cum Laude

Ethan Michael Kelly
Kayla Michelle Kendall
Alexander Michael Kenish
Gavin Anthony Kennedy
Isabella Clare Kennedy
Magna Cum Laude

Brooke Diane Keppel
Salma M. Khursh
Cum Laude
Kennedy Alesse Kidd
Landon Kate Kilpatrick
Magna Cum Laude

Alexander Yongsup Kim
Juyoung Kim
Cum Laude
Li-Ryang Kim
Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction

Robert Kim
Tae Yeon Kim
Taeheon Kim
Magna Cum Laude

Jacob Andrew Kimble
Summa Cum Laude
Cheyenne Kimbrough
Tyanna Ale'si King
Summa Cum Laude

Samuel Aidan Kingery
Jacob Wade Kinkead
Matthew Dean Kirchner
Elias Obi-Wan Polynikes Kirker-Napiorkowski
Cum Laude

Hallee Faith Kisor
Magna Cum Laude
Rita Kleem
Magna Cum Laude
Sara Esther Klein
Conrad Kleiner
Cum Laude

Sophie Rose Kleinman
Natalie Noel Klenzman
Summa Cum Laude

Brady Klesmit
Summa Cum Laude
Holden Cozad Klym
Natalie Helen Knaggs
Magna Cum Laude
John Newman Knellinger
Magna Cum Laude

Karis Juliann Knight
Magna Cum Laude
Katherine Ilse Koennecke
Magna Cum Laude
Emily Elizabeth Kompier
Summa Cum Laude

Edward Jude Hartwell Kondrad
Michaela Kopczewski
Sophia Kortan
Kamryn Jo Kortokrax
Cum Laude
Isabella Cate Korzenok
Magna Cum Laude

Mackenzie Kai Kouns
Emad Kousa
Cum Laude

Elizabeth Ann Kozak
Magna Cum Laude
Jason Edward Kozak
Emilika Liana Koziol
Cum Laude

Mia Caitlin Kraemer
Cum Laude
Molly Kathleen Krasniewski
Cum Laude
Drew Beth Krassow
Peter William Kratt

Julia Kraus
Magna Cum Laude
Bailey Anna Kreft
Natalie Paul Krekeler
Cum Laude
Grant Keith Kresina
Prithivi Geetha Krishnamoorthy
Emily Grace Krusinski
Summa Cum Laude
Joy Haehyun Ku
Summa Cum Laude
with Research Distinction in Sociology
Eric Matthew Kuchynsky
Cum Laude

Kyle Kuder
Olivia Marie Kuethe
Cum Laude
Chase Kuhl
Brooke Ryan Kuhn
Cum Laude
Jackson Douglas Kuhn
Jillian Cecilia Kumpf
Magna Cum Laude

Nidhi Kumpati
Breanne Eliya Kurtz
Magna Cum Laude
Isabella Rose Kurtz
Elan Quinn Kyser
Summa Cum Laude
with Research Distinction in Political Science

Chloe Rose LaBine
Summa Cum Laude
Katelyn Harper Lacor
Cum Laude

Sudipta Lahiri
Lillian Lam
Emma Grace Lambert
Alexandra Devon Lambrugo
Marie Kerns Landskroner
Sofia Grace Lanese
Jada Tanee Laney
Cum Laude
with Honors in the Arts and Sciences

Heather Allison Lang
Cum Laude
Aneesa Joann Langhals
Zoey Hannah Lansky
Summa Cum Laude

Morgan Ashley LaPaglia
Stella Catherine Lapinski
Magna Cum Laude
Aubrey Patricia Lapp
Summa Cum Laude

Jakob Andrew Lara-Woodburn
Katherine Larimer
Summa Cum Laude
Nejla Latic
Magna Cum Laude

Cameron Joseph LaTorre
Elena June Latshaw
Summa Cum Laude
Tahany Evelynne Laurin
Garett John Lautzenheiser
Kinley Vander Lavenstein
Aidan Flynn Lawler
Cum Laude

Margaret Lawler
Aaron Lawrence
Sohmer Pherebe Lawrence
Magna Cum Laude

Grace Delaney Lawson
Magna Cum Laude
Jordyn Alli Laxer
Magna Cum Laude

Zachary Raymond Leahy
Alyssa Joy Lecky
Cum Laude
Dante Donato Lee
Edison Lee
Magna Cum Laude
Seongkyeong Lee
Cum Laude

Hannah Rae Leedy
Emma Marie LeGault
Magna Cum Laude
Andrew Joseph Lehman
Summa Cum Laude
Juliana Beth Lehner
Madeline Mary Leichtenberg
Lena Simone Leland
Magna Cum Laude

Yujia Leng
Arysa Grace Lescallett
Jack Hobson Leverett III
Gabriel Nathan Levik
Cum Laude

Casey Daniel Levy
Magna Cum Laude
Austin J. Lewis
John Donnelly Lewis
Owen Joshua Lewis
Cum Laude

Titus Lewis
Cum Laude
Kira Ann Ley
Magna Cum Laude

Mingze Li
Magna Cum Laude
Qihuan Li
Summa Cum Laude
Taoran Li
Yijing Li
Magna Cum Laude

Yuchen Li
Zheng Liang
Cum Laude
Alexander Robert Lima
Danlei Lin
Hengle Lin
Zhe Lin
Cum Laude

Tania Jamieth Linares Escobar
with Research Distinction
Chloe Lindsey
Magna Cum Laude
Sophie Philomena Lipka
Isaiah Trey Lipsey III
Madison Lisi
Alayna Nicole Liskey
Crosbee Delaney Franz Lissner
Cum Laude

Breanna Nicole Little
Summa Cum Laude
Dingqi Liu
Magna Cum Laude
Fengning Liu
Magna Cum Laude
Hualin Liu
Magna Cum Laude

Lelin Liu
Xinrui Liu
Magna Cum Laude

Xueyi Liu <i>Magna Cum Laude</i>	Rahim Mammadkhanli <i>Cum Laude</i>	Abigail Jean McDonald <i>Magna Cum Laude</i>	Rylee Nicole Milat <i>Summa Cum Laude</i>	Morgan Guylee Moser <i>Summa Cum Laude</i>
Zimeng Liu	Mohamed Zakria Manaa <i>Magna Cum Laude</i>	Emma Morgan McDonald	Michael Samuel Mileti <i>Magna Cum Laude</i>	Talia Fayth Moses <i>Magna Cum Laude</i>
Sydney Elizabeth Livermore	with Honors in the Arts and Sciences	Regan Elise McElwee	Aaron Nathanael Miller	Sarah Motawi
Sioy Lloyd	Tyler Ryan Mandelkorn	Alison Cristina McGann <i>Magna Cum Laude</i>	Hannah Alexandra Miller	Isabelle Celeste Mroczkowski <i>Cum Laude</i>
Margaret Elva Lobley <i>Magna Cum Laude</i>	Salvatore Anthony Manente <i>Cum Laude</i>	Virginia Juana McHugh	Hannah Renae-Morgan Miller	Cassandra Blake Mrugacz <i>Summa Cum Laude</i>
Piper Jayne Lockwood <i>Cum Laude</i>	Ava Michelle Maniscalco <i>Summa Cum Laude</i>	Andrew Alex McIveen <i>Cum Laude</i>	Nathan Miller	Naraah Karera Mulenge <i>Summa Cum Laude</i>
Gabriela Sage Loconti	George Jack Manos	Tyler McIntosh	Rachel Ann Miller	Anika Anele Muloliis <i>Summa Cum Laude</i>
Aison Elizabeth Lohr <i>Cum Laude</i>	Jiahao Mao	Eric Scott McIntyre	Ryan Hunter Millikin	Kelsy Gloria Mullings <i>Magna Cum Laude</i>
Emme Claire Loon <i>Cum Laude</i>	Lucinda Ruth Maras <i>Summa Cum Laude</i>	Renee Denise McKnight	Abigail Rebecca Mills <i>Summa Cum Laude</i>	Mayson Ann Mullins <i>Summa Cum Laude</i>
Alayna Marie Lopez <i>Magna Cum Laude</i>	Olivia March <i>Cum Laude</i>	Julian Peter McLaughlin <i>Cum Laude</i>	with Honors in the Arts and Sciences	Matab Siddig Muneer <i>Magna Cum Laude</i>
Mattie Lorino <i>Summa Cum Laude</i>	Amelia Jade Margolis	Marcellas James McLellan	Evyng Mills	Yousuf Ahmed Munir <i>Summa Cum Laude</i>
with Honors in the Arts and Sciences	James A. Markley	Winston Phillip Prescott	Kaitlyn Elizabeth Mincey <i>Cum Laude</i>	Peyton Josephine Munn
Abigail Barbara Love <i>Cum Laude</i>	Esthela Michelle Marquez <i>Magna Cum Laude</i>	Lily Margaret McMahon <i>Cum Laude</i>	Madison Elizabeth Mindish <i>Magna Cum Laude</i>	Jenna Hope Muñoz <i>Cum Laude</i>
Nicholas Ralph Loveland <i>Cum Laude</i>	Mary Catherine Marron	Jadah Marie McMillen	Pheona Minkah	Molly Muthoni Murage <i>Cum Laude</i>
Manti Lu	Nicholas Kane Marrone <i>Summa Cum Laude</i>	Megan Grace McNally <i>Summa Cum Laude</i>	Michael Stephen Misita	Alister Murdock
William Shangyu Lu	Lily Isabella Marsco	Joseph McNamara <i>Summa Cum Laude</i>	Siraj Harar Mismar <i>Cum Laude</i>	Jomanna Iyad Murib II <i>Cum Laude</i>
Xi Lu <i>Magna Cum Laude</i>	Jacqueline Marshall <i>Summa Cum Laude</i>	Tian Troy McNeish	Devyng Mitchell	Edward Thomas Murphy <i>Magna Cum Laude</i>
Alicia Nicole Lucas <i>Magna Cum Laude</i>	with Honors in the Arts and Sciences	Damion Antonio McShepard	Lauren Elizabeth Mitchell <i>Cum Laude</i>	Kelly Murphy
Hanna Louise Lucas	Linguistics	Riana McVicker	Tahlil Jamarr Mitchell	Rory Eileen Murphy <i>Magna Cum Laude</i>
Lauren Catherine Lucas	Christopher D. Martin <i>Cum Laude</i>	Autumn Faith Meadows <i>Summa Cum Laude</i>	Trevor Bryce Mitiguy	Francesca Leigh Murra <i>Magna Cum Laude</i>
Rigo Nyelle Lucas-Jack	Laydan Elizabeth Martin <i>Magna Cum Laude</i>	Daniel Christopher Meadows	Analese Rae Moline <i>Magna Cum Laude</i>	Adeline Elizabeth Musser <i>Magna Cum Laude</i>
Nicholas Lorenzo Luciano	Victoria Ting Martin <i>Summa Cum Laude</i>	Alondra Anaiz Medina Torres	Taylor Marie Moats <i>Summa Cum Laude</i>	Brody Allen Muterspaw <i>Magna Cum Laude</i>
Josephine Luck <i>Summa Cum Laude</i>	Abril Martinez	Haley Marie Meheran	Zainab Ahmed Mohammed	Daria Myroniuk <i>Summa Cum Laude</i>
with Honors in the Arts and Sciences	Enya Sofia Martinez <i>Magna Cum Laude</i>	Lilian Shae Meienburg	Cameron Richard Molin <i>Cum Laude</i>	Carina Ann Napoleon
James Daniel Luftig	Madison Michelle Mason <i>Summa Cum Laude</i>	Ava Jayne Meiner	Isaac Alejandro Molina <i>Magna Cum Laude</i>	Savannah Mae Nash <i>Cum Laude</i>
Tucker Louis Lumbr	Anna Masood	Zixuan "Justin" Meng <i>Cum Laude</i>	Olivia Molina	Muebera Nasir <i>Magna Cum Laude</i>
Lincoln James Lundgren <i>Summa Cum Laude</i>	Athanasios Demos Masoutis	Kieara Star Mercado <i>Cum Laude</i>	Caitlyn Aralinn Moloney <i>Summa Cum Laude</i>	Diana Alexa Naticchio <i>Summa Cum Laude</i>
with Honors Research Distinction in	Emily Rose Matas <i>Magna Cum Laude</i>	with Research Distinction	with Honors in the Arts and Sciences	Elena Marie Navin <i>Magna Cum Laude</i>
Philosophy	Liam George Matejka <i>Cum Laude</i>	Natalie Kate Merryman	Matthew Philip Momburg	Kine Sarah Ndiaye <i>Cum Laude</i>
Weidi Luo <i>Cum Laude</i>	Jacob Mathew <i>Magna Cum Laude</i>	Anthony Paul Mershon <i>Summa Cum Laude</i>	Benjamin Garbow Monroe	Andrea Nedelcu <i>Cum Laude</i>
Makaila Shae Lurie <i>Magna Cum Laude</i>	Hannah Lee Mathias <i>Cum Laude</i>	with Honors in the Arts and Sciences	Porfiria Susy Montemayor	Olivia Anne Neely <i>Cum Laude</i>
Cameron Isaac Lute	with Honors in the Arts and Sciences	Mark Christopher Mestre <i>Magna Cum Laude</i>	Abbey Louise Montgomery <i>Magna Cum Laude</i>	Maryjayne Neff
John Victor Lynch	Political Science	Sophia Meszaros	William Pablo Moody <i>Magna Cum Laude</i>	Kameron Douglas Nelson <i>Cum Laude</i>
Serenity Marie Lyons	Jacob Stephen Mattingly	Gwenyth Rae Metz <i>Cum Laude</i>	Bella Rose Moore	Lillianah Marie Nelson
Xiangyan Liu	Makayla Mattox	Lauren Elizabeth Metzger <i>Summa Cum Laude</i>	Ethan Freemal Moore <i>Magna Cum Laude</i>	Amanda Rose Newberry <i>Summa Cum Laude</i>
Danning Ma	Nicholas Christian Mavrouleas <i>Magna Cum Laude</i>	Patrick Alexander Metzler	Kaia Naomi Moore	Sophia Kay Newhof <i>Summa Cum Laude</i>
Zejiu Ma	Rebeca Mayet-Velasco	Auburn Danae Meyer <i>Summa Cum Laude</i>	Macayla Lee Moore <i>Magna Cum Laude</i>	Jordyn Brooke Newman <i>Cum Laude</i>
Ziyan Ma	Yeva Mazur <i>Magna Cum Laude</i>	Evelyn Rose Meyer <i>Summa Cum Laude</i>	Sydney Margaret Moore <i>Summa Cum Laude</i>	Alexa Erika Nielsen <i>Cum Laude</i>
Jacob Andrew Macioch <i>Cum Laude</i>	Meghan Grace McCann	Iman Mezyan <i>Magna Cum Laude</i>	with Research Distinction in English	Micah Nielsen <i>Cum Laude</i>
Claire Elizabeth MacLaughlin <i>Cum Laude</i>	Adam McCarty	Madilyn Grace Michaelson <i>Magna Cum Laude</i>	Santiago Miguel Mora	Elizabeth Anne Nienaber <i>Summa Cum Laude</i>
Kyle Anthony Mahaffey	Casey P. McChrystal	August Gerald Middendorf <i>Summa Cum Laude</i>	Estephania Morales	Julia Marie Nofel
Emma FitzGerald Maher <i>Summa Cum Laude</i>	Elisa Ariana McClellan <i>Magna Cum Laude</i>	Amaree Nickeisha Middleton	Abigail Mae Moreland <i>Cum Laude</i>	Maria Rielly Northrop <i>Summa Cum Laude</i>
with Honors in the Arts and Sciences	Aidan McClure	Hayley Margaret Middleton <i>Cum Laude</i>	Yaraslava Sylvaine Moret <i>Summa Cum Laude</i>	
Geography	Amittai Andrew McConkey	Maxwell Dumont Middleton	Jackson Bradley Morgan	
Jenna Deanne Maher <i>Magna Cum Laude</i>	Ella Murray Thaler McCormick <i>Magna Cum Laude</i>	Jack Bryant Mikesell	Shelby Anne Morgan	
Amelia Rose Maibach <i>Magna Cum Laude</i>	with Honors in the Arts and Sciences	Alexander Mikulec	Dejanique Renee Morris	
Robert Wilson Main	Kelly Armine McCoy	Maggie Eve Milam <i>Cum Laude</i>	Victoria Renee Morrison	
Tara Maine			Monte Ronald Morrow <i>Cum Laude</i>	
Jennifer Malocha <i>Cum Laude</i>				

Zoey Denise Nott Katelyn Marie Nottke Evan Edward Novak <i>Summa Cum Laude</i>	Katherine Alexandra Parry <i>Summa Cum Laude</i>	Asia Portis Alex Sidell Potts <i>Cum Laude</i>	Elyse Lauren Reed <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i> <i>with Honors Research Distinction in English</i>	Hadley Grace Rose Christopher Ryan Roseman Samuel Isaac Roseman Connor Isaac Rosenberger <i>Cum Laude</i>
Brianne Allison Nutter <i>Magna Cum Laude</i>	Sadia Sachin Parulkar <i>Magna Cum Laude</i>	Olivia Grace Pound <i>Cum Laude</i>	Abigail Grace Reeder Hannah Brooke Rees <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Camryn Paige Rosenzweig <i>Summa Cum Laude</i>
Alexa Elizabeth Nye Samuel Nyoni Cameron Edward O'Dell Cait Dolores O'Donnell Maria Catherine O'Keeffe <i>Cum Laude</i>	Georgia Kathleen Pasha <i>Magna Cum Laude</i>	Drew David Velez Powell <i>Summa Cum Laude</i>	Keira Marie Rees Brant Paul Reeves Jarrett Ryan Reeves Imara Joan Rena Regis Benjamin Michael Reilly Jordan M. Reiner <i>Cum Laude</i>	Jacqueline Nicole Roshetski <i>Magna Cum Laude</i>
Grace O'Malley- Wils here Katherine Elizabeth O'Rourke <i>Magna Cum Laude</i>	Noor Pasha <i>Cum Laude</i>	June Ashley Powell <i>Magna Cum Laude</i> <i>with Research Distinction in Comparative Studies</i>	Mitchell Albert Reitz Naomi Pearl Reizes <i>Magna Cum Laude</i>	Angela Rosu Gus Nicholas Roth Kelsey Olivia Roth <i>Cum Laude</i>
Nathan William Oakley Paige Elizabeth Oatney <i>Magna Cum Laude</i>	Abby Megan Passarella <i>Magna Cum Laude</i>	Benanda Karim Prabowo Manasa Pragada <i>Magna Cum Laude</i>	Ryan Michael Repasky Kimberly Margarita Reyes <i>Cum Laude</i>	Emily Katherine Roush Hailey Kate Rubin <i>Magna Cum Laude</i>
Gabriella Rose Offredo <i>Summa Cum Laude</i>	Elizabeth Marie Passias Anami J. Patel Mira Patel <i>Magna Cum Laude</i>	Isabelle Elina Prebe Jordan Campbell Prentice Alexxa Jo Price <i>Magna Cum Laude</i>	Farris Steven Reynaga Nadia Simone Reynolds Thalia Christina Ricci <i>Summa Cum Laude</i>	Micah Gershon Rubinstein Brianna Pearl Rucker <i>Cum Laude</i>
Sarah Ogrin-Cotarlan <i>Summa Cum Laude</i>	Vaansh Patel Olivia Camille Patterson <i>with Research Distinction in Medical Anthropology</i> <i>with Research Distinction in Medical Anthropology and Women's, Gender and Sexuality Studies</i>	Danielle Pritikin <i>Magna Cum Laude</i>	Diatra E'lexus Richardson <i>Summa Cum Laude</i>	Molly Jane Rudduck <i>Magna Cum Laude</i> <i>with Research Distinction in Psychology</i>
Abrianna Kaliah Ohliger <i>Summa Cum Laude</i>	Andrea Marie Pelfrey <i>Cum Laude</i>	Benjamin Antonio Lee Prochaska <i>Cum Laude</i>	Lucia Elena Rieppi <i>Cum Laude</i>	Jayden Sue Ruiz <i>Summa Cum Laude</i>
Brady P. Oldham Maia Elizabeth Oliver <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Avery Kathleen Pelko George Minoru Penney <i>Magna Cum Laude</i>	Heather Jane Proffitt Michael Trey Purdon Jesse Adam Purtell <i>Cum Laude</i>	Abigayle Kathleen Rieser Jacie Isabella Riggins Marjie Divine Rivers Rachel Renee Rives <i>Summa Cum Laude</i>	Thomas Frank Ruma Kelly Morgan Russell <i>with Research Distinction in English</i>
Oluwapelumi Comfort Olowokere Carissa Oltman-Perez Ali Omar Omar <i>Magna Cum Laude</i>	Abigail Lauren Periaitt <i>Magna Cum Laude</i>	Olivia Lauren Puzon <i>Magna Cum Laude</i>	Dedra Robbins Annika Isabella Roberts <i>Cum Laude</i>	Emma Marie Ruskowski <i>Summa Cum Laude</i>
Sophia Adriana Omar <i>Cum Laude</i>	Alexandra Kathryn Periaitt <i>Magna Cum Laude</i>	Alexa Jia Pyun <i>Magna Cum Laude</i>	Carissa Marie Roberts Daisy Grace Roberts Abigail Margaret Robinson <i>Summa Cum Laude</i>	Emma Lyn Ryan <i>Magna Cum Laude</i>
Elia Rene Orozco-Trowbridge Katelyn Abigailay Ortiz Justin Oртuno-Martinez <i>Cum Laude</i>	Danielle Rose Perlowitz <i>Cum Laude</i>	Hadeel Qadri <i>Cum Laude</i>	Lillian Grace Robinson Riley Lynn Robinson Melodie Robitaille Jesse Omar Robles Isabelle Corin Roby Jack William Rockwood <i>Magna Cum Laude</i>	Nicholas Bernard Ryan <i>Magna Cum Laude</i>
Lucas Logan Osborne Krah Somuah Osei Jenna Cathleen Ouellette <i>Magna Cum Laude</i>	Zander Aron Perrigan <i>Magna Cum Laude</i>	Jinsheng Qi Ziwei Qiang <i>Summa Cum Laude</i>	James Julian Zamora Rodgers <i>Magna Cum Laude</i>	Hana Hossam Saad <i>Magna Cum Laude</i>
Charlotte Anne Oulanoff <i>Magna Cum Laude</i>	Mikayla Brooklyn Perry <i>Cum Laude</i> <i>with Research Distinction in Comparative Studies</i>	Haoming Qin Yike Qin Gabrielle Halia Quallich Yahir Tonatiuh Quezada Mary Elizabeth Quick Jawhara Qutiefan Jacob Allen Radcliffe <i>Summa Cum Laude</i>	Bailey Noelle Rodoski <i>Cum Laude</i>	Jared Ryan Sabban Marina Sadek Jacob Louis Sadler Hasna Nasser Said Hindo Suber Salad <i>Magna Cum Laude</i>
Zoe Anne Overbeck <i>Summa Cum Laude</i>	Micaelah Ariel Pessin <i>Cum Laude</i>	Andrea Marie Radinson Sofia Lynn Rahal <i>Cum Laude</i>	Daneirys Libeth Rodriguez Gavin Michael Roell <i>Summa Cum Laude</i>	Hillwa Mohammad Saleh Mary Grace Sophia Salvatierra <i>Magna Cum Laude</i>
Abigail Alene Overly <i>Summa Cum Laude</i>	Campbell Anne Peters Bailey LeShay Peterson <i>Magna Cum Laude</i>	Adam Rahl <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i> <i>with Honors Research Distinction in German</i>	Kelsey Lauren Rogers Lindsey Nicole Romano <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Sarina Kaur Samra Audrey Louise Sandberg <i>Magna Cum Laude</i>
Caroline Owens Jenna Nicole Owens Elizabeth Rosvitha Owusu-Antwi Adriana Sofia Oyola Addison Paden <i>Cum Laude</i>	Jack Thomas Petruzello Tyler Batiste Pettorini Lauren Marie Phillips Alyssa Lauren Piatak <i>Magna Cum Laude</i>	Chinmayee Ramaswamy <i>Summa Cum Laude</i>	Joshua Edward Romesburg <i>Summa Cum Laude</i>	Katelyn Ann Sandborn <i>Cum Laude</i>
Efthimia Irini Palassiss <i>Cum Laude</i>	Celeste Mariah Pierce Jillian Morgan Pierre <i>Summa Cum Laude</i>	Neil Dharan Ramdeen Mia Theresa Rankin <i>Cum Laude</i>	Benjamin John Romie <i>Cum Laude</i>	Oumyalsom Sane Nitin Sanga Thryambika Sankarraman Mackenzie Sarah Sapp <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>
Kyra Rae Pallotta <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>	Lydia Magdaline Pinkerton Allison Kay Pitstick Kaitlynn B. Plagenza <i>with Honors in the Arts and Sciences</i>	Jillian Dianne Rasmussen <i>Magna Cum Laude</i>	Alexander William Rose <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i> <i>with Honors Research Distinction in Spanish</i>	Jason Cole Sarachek <i>Magna Cum Laude</i> <i>with Honors in the Arts and Sciences</i>
Ta'Aliyah Daisy Palmer <i>Magna Cum Laude</i>	Kennedee Grace Plank <i>Magna Cum Laude</i>	Sydni Devyn Ratliff <i>Summa Cum Laude</i>		Michael Hamid Sarkis <i>Summa Cum Laude</i> <i>with Research Distinction in Political Science</i>
Kaimo Pamesa Tara Pamulapati Haonlian Pang Fabiola Juliet Theresia Pangkerego Robert Peter Parisi Joanne Seo Eun Park <i>Magna Cum Laude</i>	Enis Plavsic Luke Lofgren Al Pleiman Andrew Thomas Podolan Jadyn Lynn Poland <i>Summa Cum Laude</i>	Natalie Marie Rauf <i>Magna Cum Laude</i>		Samantha Jane Sauer <i>Summa Cum Laude</i> <i>with Honors in the Arts and Sciences</i>
Hannah Parker Michael Henry Parkman Kobie Landon Parrish <i>Cum Laude</i>	Olivia Andrea Polise Chris Charles Pond Lacey Faith Pook <i>Summa Cum Laude</i>	Justin Bradley Ray Thomas Joseph Ray Genevieve Grace Re <i>Magna Cum Laude</i>		Lily Jing Sayre <i>Cum Laude</i>
	Samantha Lorraine Porter-Aylor <i>Summa Cum Laude</i> <i>with Research Distinction in English</i>	Blaise Mitchell Reader III <i>Summa Cum Laude</i> <i>with Research Distinction in English</i>		Ellis Scanlon-Kimura Nicole Frances Schachtel Cameron Daniel Schaper Katherine Grace Scharner <i>Summa Cum Laude</i>

June 4 - August 20, 2025, Board of Trustees Meetings

Jacob Scheinblum
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
Anthropology

Olivia Rose Schenker

Kaie Anthony Scherger
Cum Laude

Clare Elizabeth Ann Schlegel
Cum Laude

Adam Elliot Schmidt
Cum Laude

Sarah Anne Schmidt
Magna Cum Laude
with Honors in the Arts and Sciences

Sophie Isabella Schmidt
Magna Cum Laude

Lily Rose Schmitt
Cum Laude

Cierra Marie Schneller
Magna Cum Laude

Joseph Schnipke

John Scholl
Magna Cum Laude

Mia Nicole Schoonover

Melissa Schrader

Jenna Rose Schraffenberger

Grace Maire Schroeck

Logan Haley Schwartzbeck

Caroline Elizabeth Scott

Emily Nicole Scott

Haley Elizabeth Scott
Summa Cum Laude

Maleah Grace Scott
Cum Laude

Isabella Faith Scully-Tenpenny
Cum Laude

Alison Catherine Sebenoler
Summa Cum Laude

Nathan Allen Sedlmeier
Cum Laude

Gabrielle Rubina Segura
Summa Cum Laude

Grace Ann Selimollari
Cum Laude

Natalia Roselee Selvaggio

Zackary Richard Sember
Summa Cum Laude

Jonathan Douglas Severance

Kiara Angelee Sikas
Summa Cum Laude
with Honors in the Arts and Sciences

Maxwell Lewis Shafran

Dunya Maryam Shamma
Summa Cum Laude

Ashley Paige Shannon

Tamar Noa Sharoni
Cum Laude

Mara Corin Sharp
Summa Cum Laude

Keegan Timothy Shaver

Erin Shaw
Magna Cum Laude

Madison Elizabeth Shaw
Magna Cum Laude

Shayna Jo Shaw

Paige Renee Shelstad

Anna Shenogina
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
Psychology

Carley Michelle Shepherd

Jane R. Shevkin
Summa Cum Laude

Alexander Shifman
Cum Laude

Natalie Renae Shirey

Danielle Grace Shoemaker
Magna Cum Laude
with Honors in the Arts and Sciences

Sarah Louise Short
Summa Cum Laude

Unni Meenakshi Shreram
Summa Cum Laude
with Honors in the Arts and Sciences

Ali Aamer Sial
Magna Cum Laude

Mackenzie Min Lang Sickinger
Summa Cum Laude

Benjamin Michael Sidorenko
Magna Cum Laude

Lauren Elizabeth Siktberg

Daniel Silva
Magna Cum Laude

Helen Cecil Simmons
Summa Cum Laude

Madalyn Sin

Bailey Adaline Slater

Briayia Monique Sledge

Darien Nicole Smaltz

Adalynn Mary Smith

Alexandra Elizabeth Smith

Amanda Julia Smith

Brooke Kaitlyn Smith

Cole Smith

Jade Ellen Smith
Cum Laude

Landon Jay Smith

Lillian Grace Smith
Summa Cum Laude

Matthew Smith

Natalie Smith
Summa Cum Laude

Noah Connor Smith

Nathan Andrew Snyder
Magna Cum Laude

Ryan James Snyder

Taylor Keane Snyder
Magna Cum Laude

Mason Thomas Sochor
Cum Laude

Summit Soeung

Domenic Sokoloski

Christina So Young Solmos
Summa Cum Laude

Comelia Soltanirad

Jared M. Somerick

Shuofeng Song
Summa Cum Laude

Riley Edward Oliver South

McCaylee Grace Southall
Summa Cum Laude

Jack Kent Southard

Tara Elise Spahr
Magna Cum Laude

BrieAnn Elisabeth Sparks

Conner Sparling

Mary Irene Spear

Taisha Alice Spears
Cum Laude

Sydney Matsuko-Lin Spence
Cum Laude

Sasha Liana-Claire Spencer
Magna Cum Laude

Audrey Grace Spielman

Francesco Martin Spilimbergo

Katelyn Ann Spinhirn
Magna Cum Laude

Dominic Spradlin
Cum Laude

Rina Frances Zi Stanghellini
Summa Cum Laude

Brooke Elizabeth Stanley

Kenea Kenisha Stanley

Riley John Stanton
Summa Cum Laude

Ashtin Quierra Milan Stargell

Parker Blake Staten

Ava Staudt
Summa Cum Laude

Elisha Dawn Stauffer

Molly Kathryn Stefan
Cum Laude

Hayden Andrew Stemple
Magna Cum Laude

Carter Richard Stephen
Cum Laude

Jakob Dean Stephens
Magna Cum Laude

Annabelle Lily Stephenson

Gabrielle Stewart

Lydia Marie Steyn

Madeline Grace Stimson

Amani Stivland

Alexa Jo Stoll

Marius Thomas Stoll

Gabriella Michelle Stolly
Magna Cum Laude

Jessica Stoneham

Harrison Henning Stoneking
Cum Laude

Myra Stormer
Magna Cum Laude

Isaiah Micah Stottlemeyer
Cum Laude

Mackena Stotz

Alayna Marie Stoudt
Magna Cum Laude

Trevor Justin Strahler

Gabrielle Ruby Strauss

Alexandra Katherine Strickland
Magna Cum Laude

Natalie Jean Strom
Magna Cum Laude

Sydney Nicole Stuckman

Cal Anthony Sudzina
Cum Laude

Wanxin Sui
Cum Laude

HanFei Sun
Cum Laude

Steven Xun Sun

Camden Allan Raymond

Sutherland

Brandon Gregory Swabby
Magna Cum Laude

Jaxen Gerard Swank
Cum Laude

Caleb David Swartz

John Benjamin Swartz
Summa Cum Laude
with Honors in the Arts and Sciences

Emily Faye Sweeney
Magna Cum Laude

Cadyn Elizabeth Sweitzer
Magna Cum Laude

Emily Virginia Swenson

Abby Nichole Sysak
Summa Cum Laude

Hillary Tabler
Magna Cum Laude

Kaleb Nathaniel Tackett

Yabesera Walelegne Tadesse

Nicolas Robert Taffini

Kira Blaine Talerico

Dieynaba Tabara Talla
Cum Laude

Mahmoud Tarabiya
Cum Laude

Calla Marie Tassinari
Cum Laude

Kayla Elizabeth Tavanello
Cum Laude

Cearra Jayne Taylor
Summa Cum Laude

Kendall Rae Taylor

Kyle Lawrence Tenkman
Cum Laude

Despina Terovolais

Ellen Olivia Terrell
Cum Laude

Jamari Levi Terrell

Richa Thakar
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
English

Abigail Thiery
Magna Cum Laude

Carly Mia Thomas

Haley Jordan Thomas

Lily Claire Thomas

Nicolas Michael Thomas

Zachary Jacob Thomas

Abigail Elizabeth Thompson

Emily Grace Thompson
Summa Cum Laude

Emma Kalyin Thompson

Joshua Alan Thompson

Landon Joseph Thompson

Lleyton Thompson
Cum Laude

Maya Thompson
Magna Cum Laude

Michael Robert Thompson
Cum Laude

Taylor Marie Thompson

Kayla Marie Thomson
Summa Cum Laude

Run Tian
Cum Laude

Linda Sarah Tiano
Magna Cum Laude

Emily Carolann Tibbals

Alexandra Elaine Tighe

Evan Till

Maci Allison Tinkel
Cum Laude

Devin Michael Tipton

Krista M. Tittle

Kathryn Elise Tolan

Elaina Julia Tong

Sophia Jane Toth
Summa Cum Laude

Fatou Zahara Toure
Cum Laude

Amanda Christina Townley

Justin Tran
Cum Laude

Connor Transky

Aiyah Nicole Treadwell

Breonna Renee Trombley-Espinoza

Mia Rose Troyan
Magna Cum Laude

Alexander Holden Lewis Tryon

Reanna Ariel Tsrilin
Cum Laude

Jaylahn Tuimolouau

Eric Ross Turner

Maggie Turos

Caroline Kelly Tyrrell

Evelyn Rose Uhrir
Cum Laude

Chijoke Chukwuemika Umezinne
Cum Laude

Anna Elisabeth Umphrey
Magna Cum Laude
with Honors in the Arts and Sciences

Sydney Elise Unverferth

Carli Lynn Urban
Summa Cum Laude

Ana Uriarte

Cristian Vallecillo
Magna Cum Laude

Michael Ruben Vallejo

Aidan Van Sickle

Nina Marie Van Tassel
Cum Laude

Sydney Michelle Vance
Summa Cum Laude

Luke Henry Vander Vort
Magna Cum Laude

Dhruvi Kalpesh Vapiwala
Cum Laude

Alaina Christine Varga
Summa Cum Laude

Kami Lynn Vargo

Grace Christine Varney
Magna Cum Laude

Olivia Paige Vasilatos
Cum Laude

Ellen Vasilkov
Cum Laude

Malaina Vatter

Addison Ann Vaughn

Cheri Vazquez
Magna Cum Laude

Marissa Miyuki Vecchia
Magna Cum Laude

Leah Marie Vendetti

Reina Lorene Verde-Mitchell

Anna Elizabeth Victor
Summa Cum Laude

Tommaso Villa

Corey Lawrence Virag
Summa Cum Laude

Lucy Vo
Magna Cum Laude
with Honors in the Arts and Sciences

Justin Joseph Volley

Sofia Alexandra Volpe

Evan James Voneman

Luke Joseph VonHolle
Magna Cum Laude

Donovan Henry Votypka
D'Nyah Deoncy Wade
Macy Joy Wade
Summa Cum Laude
with Honors in the Arts and Sciences

Jared Richard Wadsworth
Grace Anna Wagar
Elizabeth Grace Wagner
Magna Cum Laude

Braden James Walczak
Kenton David Waldroup
Walter John Waligura IV
Summa Cum Laude

Emily Grace Walker
Magna Cum Laude

Wesley Jaxon Walker
Libby Kyla Wallace
Summa Cum Laude

Evan Thomas Walsh
Magna Cum Laude
with Honors in the Arts and Sciences

Michael Walsh
Destiny Lynn Sue Walter
Ava Marie Walters
Hannah Michaela Walters
Sunny Nicole Walton
Magna Cum Laude

Judd Mukenya Musundi
Wandabwa
Boxuan Wang
Peiyuan Wang
Rou Shi Wang
Tianjun Wang
Summa Cum Laude
with Research Distinction in Sociology

Yingchi Wang
Magna Cum Laude

Yunuo Wang
Cum Laude

Zixiang Wang
Marieme War
Kylie Rae Ward
Summa Cum Laude

Tamera S. Ward
Cum Laude

Sando Ware
Cum Laude

Habon Warmahaye
Cole Isaac Warman
Ella Joan Warner
Magna Cum Laude
with Honors in the Arts and Sciences

Ethan R Warner
Jasmine Elisabeth-Nicole
Washburn
Madison Washburn
Cum Laude

Becca Sadie Wasserman
Summa Cum Laude

Phoebe Jane Wasserstrom
Summa Cum Laude
with Research Distinction in
Criminology and Criminal Justice
Studies

Ryann Nayana Watiker
Summa Cum Laude

Madelaine Marie Watson
Selena Raquel Weaver
Summa Cum Laude
with Honors in the Arts and Sciences

Chenxi Wei
Cum Laude

Caitlin Elizabeth Weiland
Summa Cum Laude

Elijah Job Weisblat
Magna Cum Laude

Isaac Hillel Weiss
Summa Cum Laude

Brooke Welsh
Hayley Marie Welsh
Mingru Weng
Summa Cum Laude

Dylon Francis Wenz
Summa Cum Laude

Andrew Jacob Wexler
Paige Alexis Wheeler
E Will Whinham
Alexandria Rose Ruth White
Magna Cum Laude

Dallas Lauran White
Summa Cum Laude
with Research Distinction in History

Elizabeth Yu White
Magna Cum Laude

Caroline Whitley
Nicholas Edward Whitner
Julia Theis Whitney
Magna Cum Laude
with Honors in the Arts and Sciences

Mia Whitsell
Cum Laude

Tanner Wical
Matthew James Wick
Logan Jacob Wiedenbein
Olivia Finnegan Wilke
Magna Cum Laude
with Honors in the Arts and Sciences

Kirk Michael Will
Christian Patrick Williams
Donovan Dejuan Williams
Isabella Maxime Williams
Kayla Ann Williams
Lillian Grace Williams
Cum Laude
with Research Distinction in
Communication

Se'Ray Aleise Williams
Landon Robert Willis
Cum Laude

Armon Damon Wilson
Brittney Wilson
Magna Cum Laude

Tyler Thomas Wilson
Shelby Danielle Wineburg
Summa Cum Laude

Lauren Olivia Winkhart
Cum Laude

Olivia Kate Winters
Cum Laude

Jerrin Wofford
Cum Laude

Emily Jiang Wojt
Ayala Itzel Wolak
Cum Laude

Chloe Jane Wolf
Emma Reese Wolf
Summa Cum Laude
with Honors in the Arts and Sciences

Zoe Irene Wolfe
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction

Sydney Taylor Womack
Magna Cum Laude

Benjamin James Wood
Daphne Wood
Sophia Kristine Wood
Magna Cum Laude

Kathryne Elizabeth Woollard
Summa Cum Laude

Morgan Rose Wordelmann
Cum Laude

Alan James Workman
Connor Mathew Wright
Emily Marie Wright
Noah James Wright
Cum Laude

Zhenghong Wu
Cum Laude

Joshua Daniel Wujnovich
Sydney Elyse Wyatt
Zhida Xie
Summa Cum Laude

Jiale Xu
Cum Laude

Ke Xu
Leqian Xu
Qixing Yan
Cum Laude

Xurui Yan
Milian Isbela Yanes
Aibing Yang
Bonnie Ru Xin Yang
Summa Cum Laude
with Honors in the Arts and Sciences

Liya Yared
Magna Cum Laude
with Honors in the Arts and Sciences

Sadie Lou Yarosh
Summa Cum Laude
with Honors in the Arts and Sciences

Songyu Ye
Cum Laude
with Honors in the Arts and Sciences

Shreya Yogesh
Magna Cum Laude

Haven L&RAE Young
Magna Cum Laude

Jonathan Alexander Young
Lillian Marie Young
Summa Cum Laude

Olivia Noel Young
with Research Distinction in English

Duowei Yu
Lingfeng Yu
Magna Cum Laude

Yihan Yuan
DongYang Yue
Cum Laude

Amanda Zadrira
Haylee Elizabeth Zavaski
Cum Laude

Grady Zeigler
Ethan McGuire Zeiser
Naomi Zemene
Olivia Mae Zettervall
Cum Laude

Aiyu Zhang
Chaoran Zhang
Han Zhang
Jack S. Zhang
Cum Laude

Junhao Zhang
Junjie Zhang
Shangyuan Zhang
Summa Cum Laude

Wuke Zhang

Xiao Zhang
Magna Cum Laude

Xiaojian (Catherine) Zhang
Magna Cum Laude

Xiaoxi Zhang
Summa Cum Laude

Xinyuan Zhang
Cum Laude

Xinyue Zhang
YiLin Zhang
Yumeng Zhang
Fanhua Zhao
Cum Laude

Ronghao Zhao
Cum Laude

Ziye Zheng
Magna Cum Laude

Li Zhou
Yanni Zhou
Cum Laude

Yingqi Zhou
Summa Cum Laude

Ruiwen Zhu
Cum Laude

Yihan Zhu
Magna Cum Laude

Zehao Zhu
Cum Laude

Ziang Zhu
Zihan Zhuang
Cum Laude

Zoie Anna Zielinski
Summa Cum Laude

Abigail Zolla
Alexa Noelle Zukowski
Magna Cum Laude

Bachelor of Arts in Journalism

Reilly Grace Ackermann
Jessica Sierra Barboza
Magna Cum Laude

Brianne Alysa Blevins
Magna Cum Laude

Zoe Victoria Botley
Avery Ann Caudill
Samuel Vincent Cipriani
Cum Laude

Astrid Immaculada Coste Peña
Dewey Cooper Dailey
Magna Cum Laude

Emma Brucker Dawson
Summa Cum Laude
with Honors in the Arts and Sciences

Frances Elizabeth Denman
Magna Cum Laude

Nicholas Alexander DeSantis
Cum Laude

Adam Eskender
Cum Laude

Nicole Lee Giannetta
Summa Cum Laude

Samantha Elise Harden
Cum Laude

Evan Ryan Hartmann
Tomas Michael Hudec
Cum Laude

Charlotte Rose Huot
Connor Edward Iimes
Sydney Kay Jones
Magna Cum Laude

Benjamin Thomas Latham
Gaurav Law
Cum Laude
with Honors in the Arts and Sciences

Lucy Carol Lawler
Magna Cum Laude

Katherine Junhee Lee
Garrison Michael McDaniel
Cameron Michael Moore
Jenna Hope Muñoz
Cum Laude

William Anthony Finn O'Malley
Magna Cum Laude

Kyle Patrick Quinlan
Magna Cum Laude

Raghav Visvom Raj
Magna Cum Laude

Olivia Grace Riley
Cum Laude

Connor Hartley Schuh
David Aaron Skovira
Magna Cum Laude

Nyah Elaina Snezek
Magna Cum Laude

Wilbert John Steigerwald IV
Brooke Elise Tacsar
Summa Cum Laude

Kyrie Faith Thomas
Eric Matthew Vah
Summa Cum Laude

Noah Shawn Weiskopf
Magna Cum Laude

Kourt Durell Williams II
Emma Grace Wozniak
Summa Cum Laude
with Honors in the Arts and Sciences

Bachelor of Art Education

Grace Elizabeth Chico
Magna Cum Laude

Grace Elizabeth Edgerton
Summa Cum Laude

Rachel Alexandra Benedum
Garcia
Magna Cum Laude

Ebony Melody Hernandez
Joseph Lee
Cum Laude

Sydney Brook Rex
Magna Cum Laude

Megan Reynolds
Cum Laude

Megan Leigh Spisak
Cum Laude

Kylee Inez Thompson

Bachelor of Fine Arts

Katrina Marie Abbott
Magna Cum Laude

Skylar Albright
Magna Cum Laude

Mariana Elizabeth Bais
Cum Laude

Darien Max Bateson
Magna Cum Laude

Mikhail Lawrence Blaine
Gabriela Lisvette Brito
Summa Cum Laude

Kristen Taryn Calderwood
Magna Cum Laude

Joshua Brahm Canare
Magna Cum Laude

Shenglin Chen
Magna Cum Laude

Sasha Maggie Chipper
Summa Cum Laude

Evelyn Isabella Couch
Naiya Dawson
Ella Diane Dipold
Magna Cum Laude

Savannah Starr Fields
Emma Marie Froehlich
Summa Cum Laude
with Honors in the Arts and Sciences

Nathan John Garthwaite
Meghan Clair Geraghty
Cum Laude

Lauren Elizabeth Gessel
Magna Cum Laude

Olivia Anne Gitters
Magna Cum Laude

Emilia Love Harned
Cum Laude
with Distinction in Studio Art

Sidney Rae Hopkins
Bryn Elizabeth Hornyak
Summa Cum Laude

Ayat Ibrahim
Magna Cum Laude

Aidan Kehati
Cum Laude

Kya Rayne Kopans
Magna Cum Laude

Valeria Julia Kozak
Magna Cum Laude
with Distinction in Dance

Danil Steven Lichtensteiger
Sydney Andrea Ligon
Bethany Jeannette Marple
Taylor Brooke McGoff
Chloe Rose McGreal
Magna Cum Laude

Kailey Renae Merriam
Summa Cum Laude

Andrés Miguel Mira
Barry Franklin Thomas Nickell, Jr.
Sophia Anne Pauline
Magna Cum Laude
with Distinction in Dance

Ananta Gopalakrishna Ponnada
Magna Cum Laude

Larissa Rojas Navarro
Hannah Kasmira Snyder
Summa Cum Laude

Latifat Teleola Sulaimon
with Distinction in Dance

Beatrice Carrie Sull
Magna Cum Laude

Xiaoxue Sun
Summa Cum Laude

Hannah Catherine Suver Slagell
Grant Robert Thatcher
Destiny Mae Thomas
Cum Laude
with Distinction in Dance

Eryn Gwen Kaitlyn Toppin
Summa Cum Laude
with Distinction in Dance

Ava McKenzie Wishnow
Sofia Eden Zwerdling

Bachelor of Music

Theresa Rose Deevers
Cum Laude

Anthony Joseph Frankowski
Summa Cum Laude

Sofia Geelhood
Summa Cum Laude

Matthew James Hanson
Cum Laude

Natalie Grace Mahalla
Summa Cum Laude

Mitchell Fallon Myers
Lucille Ann Reed
Magna Cum Laude

Lily Tropic
Magna Cum Laude

Bachelor of Music Education

Noah Alexander Brown
Cum Laude

Joel P. Caniff
Cum Laude

Coshel Alexander Caudill
Summa Cum Laude

Joseph Leander DeCillis
Summa Cum Laude

Andrew Wesley Haines
Adelaide Tsukiko Kawakami
Summa Cum Laude

Emma Grace Kelley
Summa Cum Laude

Rohit Anand Kolluri
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Music Education

Zachary Tyler Langbein
Magna Cum Laude

Katherine Elizabeth Lazuka
Crosbee Delaney Franz Lisser
Cum Laude

Samantha Grace Marcrum
Magna Cum Laude

Connor Matthew McMullen
Alessandro Nicholas Nocera
Zearatus DeV Vaughn Perry
Grace Frances Reven
Cum Laude

Samantha Marie Sayar
Summa Cum Laude
with Honors in the Arts and Sciences

Jordan James-Timothy
Updegrove
Cum Laude

Patrick Woo
Magna Cum Laude

Jared Dean Yoder
Cum Laude

Jiabao Zhao
Magna Cum Laude

Bachelor of Science in Design

Dedie Sam-Alfred Adissem
Raneem Abdullah Saud Alayami
Elise Victoria Aultman
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Industrial Design

Aaron Remone Beckhon
Emma Katherine Bergman
Magna Cum Laude

Mark Daniel Boyd
with Research Distinction in Industrial Design

Nikolas Brannon
Magna Cum Laude
with Research Distinction in Visual Communication Design

Delaney Brown
Magna Cum Laude

Morgan Amelia Brown
Magna Cum Laude
with Research Distinction in Industrial Design

Jorie Claire Capper
Cum Laude

Mark Thomas Celestina
Kayanaat Asif Chaudhry
Magna Cum Laude
with Research Distinction in Industrial Design

Ying Tsen Chen
with Research Distinction in Industrial Design

Alexandra Taylor Cieslinski
Summa Cum Laude
with Research Distinction in Visual Communication Design

Stephen Harrison Dodd
Summa Cum Laude
with Research Distinction in Industrial Design

Brett Esther Enders
Cum Laude

Dawson Jacob Estep
with Research Distinction in Visual Communication Design

Megan Rose Feeney
Magna Cum Laude

Danielle Jaymz Fink
Cum Laude
with Research Distinction in Visual Communication Design

Abigail Christine Fricke
Magna Cum Laude

Jude Diamond Gill
with Research Distinction in Industrial Design

Michkayla Olive Goins
Ellie Rebecca Gold
Summa Cum Laude

Angela Aimee Hinojosa
Marley Abigail Hosier
Cum Laude
with Research Distinction in Visual Communication Design

Courtney Nicole Jagers
Summa Cum Laude
with Research Distinction in Interior Design

Gage Olin Kime
Cum Laude
with Research Distinction in Industrial Design

John-Paul Joseph Kuepper
with Research Distinction in Industrial Design

Sharon Monica Longdong
with Research Distinction in Industrial Design

Peter Emil Maczuzak
Magna Cum Laude
with Research Distinction in Industrial Design

Maddison Claire McMaken
Magna Cum Laude
with Research Distinction in Interior Design

Juliet Victoria Pintos
Magna Cum Laude
with Research Distinction in Visual Communication Design

Kyleigh Jocelyn Pugh
Cum Laude

Emily Rose Ridinger
Summa Cum Laude
with Research Distinction in Interior Design

Megan Bren Schlabig
with Research Distinction in Visual Communication Design

Jackson Andrew Seal-Roth
Cum Laude
with Research Distinction in Visual Communication Design

Abigail Shaffer
Erin Shaw
Magna Cum Laude
with Research Distinction in Industrial Design

Elaine Elizabeth Smith
Magna Cum Laude
with Research Distinction in Visual Communication Design

Emily Straughn
Magna Cum Laude

Claire Elizabeth Sukert
Magna Cum Laude

Carter Elizabeth Teal
with Research Distinction in Visual Communication Design

Brianna Danel Thompson
Cum Laude
with Research Distinction in Interior Design

Lillian-Ann Mendoza Trahey
Cum Laude

Zoey Alexandra Twining
Magna Cum Laude

Athira Vasudevan
Magna Cum Laude
with Research Distinction in Visual Communication Design

Lucy Ellen Virgei
Magna Cum Laude

Beibel Wang
Cum Laude
with Research Distinction in Industrial Design

Georgia Katherine Weeden
Cum Laude

Brodie McIntosh Wolfe
Jiacheng Zhang

Bachelor of Science in Atmospheric Sciences

Tristan Elliott Bard
with Research Distinction in Atmospheric Sciences

Aleshly Castro
Cum Laude

Tyler R. Nutting
Virag S. Patel
Stephen Maguire-Thomas
Styranece
Cum Laude

Simon Tate
Summa Cum Laude

Rachel Elizabeth Webb
Gavin Alexander White
Magna Cum Laude
with Honors in the Arts and Sciences

Jessica Zhang
Cum Laude

Bachelor of Science in Geographic Information Sciences

Sharif Ahmad
Danielraj Arulnathan
Jonathan Duke Biscotti
Joshua Keller Chaney
Summa Cum Laude

Jackson Joseph Chinnici
Cum Laude

Faris Dahche
Reagan Robert Xin Kang Fagrell
Carter Hagen Faulkner
Quazi Samaul Islam
Cum Laude

Tyler Patrick Johnson
Cum Laude

Hemmat Kharzai
Bharath Korrapati
Xander James Kraemer
Timothy Layne
Wesley Andrew Lo
Asia Sue-Ellen McKenzie
Magna Cum Laude
with Honors in the Arts and Sciences

Molly Anne Molina
Magna Cum Laude

Jared Scott Place
Emmett Roberts
Diego Ivan Saavedra
Bret Sanders
Kavish Pragnesh Shah
Aidan Thomas Smith
Simon Tate
Summa Cum Laude

Owen Troy White
Summa Cum Laude

Bachelor of Science

Musa Darwish Abuhaidar

Magna Cum Laude

Yomna Abupakr

Kathleen Mary Adams

Magna Cum Laude

with Honors in the Arts and Sciences

Morgan Adams

Tatum Ann Adamson

Magna Cum Laude

Aaron James Adkins

Magna Cum Laude

Scott Richard Adkins

Magdalene N. Adotey

with Honors in the Arts and Sciences

Selma Adu-Gyamfi

Magna Cum Laude

Agyemang Afriyie

Cum Laude

Tracy Konama Afriyie

Anis Syazana Binti Ahmad Nadzri

Summa Cum Laude

Uzair Ahmed

Cum Laude

with Honors in the Arts and Sciences

Ilayda Akdeniz

Donia Omar Al-kashkish

Summa Cum Laude

Arvin Alam

Magna Cum Laude

Kassandra Alba

Cum Laude

with Honors in the Arts and Sciences

Brock Albert

Cum Laude

Conner Ryan Alder

Kaitlyn Rose Alexander

Summa Cum Laude

Dylan Joseph Alhadeef

Summa Cum Laude

Omolkar Osman Ali

Lindsey Margaret Allen

Magna Cum Laude

with Honors in the Arts and Sciences

Eisa Matar Muaded Sultan

Almheiri

Olivia Alphonso

Magna Cum Laude

with Honors in the Arts and Sciences

Abigail Altman

Cum Laude

Alexandria Lynn Amidon

Magna Cum Laude

Meera Kirankumar Amin

Kareem A. Amro

Summa Cum Laude

Brette Womanan An

Magna Cum Laude

James S. An

Kexin An

Cum Laude

Mary Shas anak Rowin Umpok

Agape Gloria Imani Anderson

Cum Laude

James Joseph Anderson III

Magna Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Neuroscience

Nicoleta Helena Andreias

Cum Laude

Rithika Annareddy

Alex Jay Antonic

Fikir Belay Arega

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Neuroscience

Camille Kathleen Armbruster

Magna Cum Laude

Chayse Morgan Arnhold

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Neuroscience

Alexandria Lourdes Asuan

Magna Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Medical Anthropology

Amir Usama Barsoum Attiah

Cum Laude

Vishnu Avanthasa

Magna Cum Laude

with Honors in the Arts and Sciences

Breanna Aves

Cum Laude

with Research Distinction

Samantha Nina Badertscher

Magna Cum Laude

with Honors in the Arts and Sciences

Mehmet Emre Baglam

Camilla Nicole Bahri

Magna Cum Laude

Jacob Bailey

Magna Cum Laude

Raissa Aydina Putri Bakari

Kylie Nicole Baker

Leah Stephanie Balasko

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction

Alexis Marie Ball

Magna Cum Laude

Mohamad Ali Bamdad

Magna Cum Laude

Cameron Richardson Barclay

with Honors in the Arts and Sciences

Anthony Wayne Barnes

Summa Cum Laude

Skylar Kacey Barnicle

Noor Baryoun

Summa Cum Laude

Sophia Max Bass

Hirak Basu

Magna Cum Laude

with Honors in the Arts and Sciences

Ishani Basuthakur

Jacob Aaron Baum

Ujin Bayarbadrakh

Magna Cum Laude

Jordan Nicole Beasley

with Honors in the Arts and Sciences

Reagan Everly Adira Beckett

Molly Ann Beetern

Michael Begines

Cum Laude

Kabir Sachin Belgikar

Magna Cum Laude

with Distinction in Mathematics

Emma Louise Bell

Melissa Helen Belouch

Anna Xin Grace Beluch

Magna Cum Laude

Iman Houria Benlemlih

Tate Michael Bennett

with Honors in the Arts and Sciences

Molly Elaine Benson

Summa Cum Laude

Hannah Marie Benvenuto

Magna Cum Laude

with Research Distinction in

Microbiology

Leah Solomon Beraki

Magna Cum Laude

with Research Distinction in Biology

Joseph Ilan Berkowitz

Summa Cum Laude

Elizabeth Ann Berry

Summa Cum Laude

Emma Berry

Zareen Rashed Bhuiya

Magna Cum Laude

Anna Mae Bieber

Cum Laude

Srijan Reddy Bijam

Lucas Joseph Billingsley

Jason John Biloti

Abdullah Azmi Bin Baharuddin

Jacob R. Bir

Summa Cum Laude

Abdulrahman Bishil

Jenna Nicole Bittner

Gabriel Alan Black

Summa Cum Laude

with Distinction in Mathematics

Victoria Ann Black

Summa Cum Laude

with Honors in the Arts and Sciences

Payton Riley Blackburn

Dominic Patrick Blackston

Summa Cum Laude

with Honors in the Arts and Sciences

Kinsey Blain

Cum Laude

Paige Elizabeth Blanchette

Mara Blanke

Hunter Josef Bliss

with Research Distinction

Karmyn Alyssa Blizzard

Summa Cum Laude

Stella Bockelman

Summa Cum Laude

Elijah Ferdinand Bohman

Taylor Joy Bombick

Cum Laude

Baptistine Louise Bonniol

Magna Cum Laude

Melvin Boontagarron

with Honors in the Arts and Sciences

Sophia Jo Borger

Caroline Amelia Borrillo

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Classics

Eleea Kathryn Bouic

Magna Cum Laude

Nora Ava Bounemany

Edward Vincent Bozic

Emily Regan Bradley

Enia Brahaj

Magna Cum Laude

with Honors in the Arts and Sciences

Caroline Frances Brancato

Magna Cum Laude

with Honors in the Arts and Sciences

Xavier Mason Branch

Karenpreet Kaur Brar

with Honors in the Arts and Sciences

with Honors Research Distinction in

Psychology

Danielle Jo Breen

Megan Elizabeth Breen

Summa Cum Laude

Eric Gregory Bridge

Magna Cum Laude

with Research Distinction in Psychology

Haylee Michelle Bridge

Eloise Shun Lin Brindle

Cum Laude

Justin Scott Bristow

Katlin Brobst

Ashton Michael Brown

Summa Cum Laude

Tyler Douglas Bruce

Cum Laude

Nicole Olivia Bryant

Matthew Bu

Magna Cum Laude

Seton Buehrer

Magna Cum Laude

Abigail Rose Burgraf

Connor Jacob Burke

Magna Cum Laude

Benjamin Isaac Burns

Summa Cum Laude

with Honors in the Arts and Sciences

with Honors Research Distinction in

Data Analytics

Gabrielle Elizabeth Burns

Caroline Marie Burrier

Magna Cum Laude

Erin Michelle Bush

Cum Laude

Caiden Butler

Owen Edward Butler

Summa Cum Laude

with Honors in the Arts and Sciences

Mitchell Lawrence Button

Summa Cum Laude

with Research Distinction in Chemistry

Olivia Margaret Cahn

Magna Cum Laude

Caroline Nicole Caldwell

Scott Jeffrey Caley

Magna Cum Laude

Griffin Charles Callow

Cum Laude

with Honors in the Arts and Sciences

Alison Paige Campbell

Dominic Joseph Camps

Cum Laude

Ella Catherine Canaday

Summa Cum Laude

with Honors in the Arts and Sciences

Jiaheng Cao

Dylann Charlotte Carey

Calissa Summer Carlisle

Summa Cum Laude

Spencer Maxwell Caron

Mason Alexander Carrington

Gabriella

June 4 - August 20, 2025, Board of Trustees Meetings

Rohana Rajkishan Chintakindi
Cum Laude

Natalie Therese Chmura
with Honors in the Arts and Sciences

Abigail Hee Won Cho
Cum Laude

Andrew Ross Choi
Hahn Suh Choi

Magna Cum Laude
Stephen Joo-Young Choi

Magna Cum Laude
Saliha Ahmed Choudhury

Magna Cum Laude
Madeline Paige Christmas

Cum Laude
Yihone Alexander Chu

Wan Xuan Chua
Magna Cum Laude

with Honors in the Arts and Sciences
Lena Frances Cistolo

Cum Laude
Ana Narzella Clapper

Magna Cum Laude
Colin Matthew Clark

Cum Laude
Olivia May Clark

Abigail Grace Clemens
Summa Cum Laude

Miranda Cline
Andrew Evan Coblentz

Summa Cum Laude
with Honors in the Arts and Sciences

Meredith Claire Coffield
Summa Cum Laude

Imani Gabriele Cogger
Magna Cum Laude

Lexie Beth Cohen
Magna Cum Laude

Lyra Miel Cohen-Denson
Magna Cum Laude

Addison Brianna Colclasure
Magna Cum Laude

Spencer Faith Colish-Patrick
Cum Laude

Lane Joseph Colton
Cum Laude

with Research Distinction in Earth Sciences
Samuel Joseph Colucci

Magna Cum Laude
Charles Gregory Colucy

Wilson Stone Combs
Ethan Atwood Conley

Magna Cum Laude
Andrew William Conover

Magna Cum Laude
Jackson Tate Cook

Magna Cum Laude
Emma Hope Corbett

Summa Cum Laude
with Research Distinction in Psychology

Ryan John Cordeiro
Summa Cum Laude

with Honors in the Arts and Sciences
Jack Champney Cornell III

Eric James Correa
Magna Cum Laude

Keila Taina Cortés
Magna Cum Laude

with Honors in the Arts and Sciences
John Benjamin Cottingham

Magna Cum Laude
Christopher James Cousino

Patrick Robert Cowie
Summa Cum Laude

with Honors in the Arts and Sciences
Braden Allen Cox

Summa Cum Laude
Benjamin Chase Cramer

Cum Laude
Bryan Austin Crase

Magna Cum Laude
with Research Distinction

Henry James Cregar
Cum Laude

Patrick Crimi
Dasha Crocker

Summa Cum Laude
with Honors in the Arts and Sciences

with Research Distinction in Astronomy and Astrophysics
Anastacia Kiki Cron

William Howard Cron
Cum Laude

Isabelle Renee Crum
Cum Laude

Hector Manuel Cruz III
Ryan Cullen

Hannah Lorraine Cumbow
Lucas Curran

Summa Cum Laude
Erica Elaine Curtis

Magna Cum Laude
Cooper Gordon Czech

Paige Elizabeth Dalrymple
Cum Laude

Ilda Dano
Vikrant Dave

Cum Laude
Nathaniel Alexander David

William Christopher Davidson
Kyle Brennan Davies

Summa Cum Laude
Andrea Caroline Davis

Magna Cum Laude
Brian Patrick Davis

Mitchell Aaron Davis
Cum Laude

Zachary William Davis
Cum Laude

with Honors in the Arts and Sciences
Nathan Mamo Dawit

Cum Laude
with Honors in the Arts and Sciences

Elliot Abram Dawson
Summa Cum Laude

with Honors in the Arts and Sciences
Stefan Carel De Jongh

Kevin De La Cruz Sanchez
Gianni Benito De Lucia

Magna Cum Laude
with Honors in the Arts and Sciences

Gavin Phillip Dean
Summa Cum Laude

Akhi Deavela
Summa Cum Laude

Peyton Christopher Debell
Summa Cum Laude

with Honors in the Arts and Sciences
Jack Patrick Matthew Dudas

Magna Cum Laude
with Honors Research Distinction in Biology

Reese Dehen
Cum Laude

Joseph Michael Delis
Xiangsheng Deng

Andrew Michael DeRosa
Magna Cum Laude

Shaan Desai
Magna Cum Laude

with Honors in the Arts and Sciences
Virang Umang Desai

Magna Cum Laude
Melody Violet Dezarn

Anahat Kaur Dhillon
Magna Cum Laude

with Honors in the Arts and Sciences
Alpha Saliou Diallo

Abril Alison Diaz Valdiviezo
Audrey Erin Dickens

Cum Laude
Sally Diep

John Paul DiFilippo
Magna Cum Laude

Colton Dante DiFranco
Summa Cum Laude

with Honors in the Arts and Sciences
Nicole Marie DiGiambattista

Huong Dinh
Cum Laude

Leah Grace DiRubio
Summa Cum Laude

with Honors in the Arts and Sciences
with Honors Research Distinction in Neuroscience

Isabella Rose Dobrski
Cum Laude

with Honors in the Arts and Sciences
Megan Adeline Dodson

Summa Cum Laude
Amy Kishore Dokiburra

Magna Cum Laude
with Honors in the Arts and Sciences

with Honors Research Distinction in Neuroscience
Melanie Annette Dolce

Cum Laude
Leann Marie Dolensky

with Honors in the Arts and Sciences
with Honors Research Distinction in Biochemistry

Kiley Jing Doll
Cameron David Dolson

Brooke Elizabeth Donaldson
Jiapeng Dong

Cum Laude
Isabella-Anne Zhengling Donnelly

Magna Cum Laude
with Honors in the Arts and Sciences

Giya Mitten Doshi
Cum Laude

Joseph Anton Doty
Magna Cum Laude

Adriana Elizabeth Dowell
Noah James Downing

Cum Laude
with Research Distinction in Astronomy and Astrophysics

Kezia Ama Duah
Cum Laude

Jack Patrick Matthew Dudas
Magna Cum Laude

Erin Amanda Duell
Cum Laude

with Honors in the Arts and Sciences
with Honors Research Distinction in Astronomy and Astrophysics

Calie Elizabeth Dunn
Magna Cum Laude

with Honors in the Arts and Sciences
Natalie Irene Duperre

Cum Laude
Anne Dwyer

Magna Cum Laude
with Honors in the Arts and Sciences

Bryce Addison Eagon
Cum Laude

Molly Korinn Easton
Cum Laude

Chaitanya sri Edupuganti
Hannah Evelyn Eggenschwiler

Kohl Eggleston
Sophia Helen Ehrman

Cum Laude
Ahmed Yehia Elkady

Abigail Grace Eileman
Summa Cum Laude

with Honors in the Arts and Sciences
Maneeth Prem Ellendula

Summa Cum Laude
with Honors in the Arts and Sciences

with Honors Research Distinction in Molecular Genetics
Grace Marie Ellerbrock

Cassidy Jae Elliott
Naveen Elliott

Magna Cum Laude
Nicole Xiao Yue Elliott

Courtney Marie Elmer
Magna Cum Laude

Ahmed Hesham Elsharkawy
Magna Cum Laude

Kane Ely
Summa Cum Laude

William Emrick
Magna Cum Laude

with Research Distinction
Connor Engel

Summa Cum Laude
Charlotte Esme Eninger

Aaron Erhardt
with Research Distinction in Chemistry

Ethan Alexander Erhardt
with Research Distinction in Chemistry

Sasan Esmalizadeh
Cum Laude

Sarah Grace Esterle
Cum Laude

Patrick Arthur Evans
Alyssa Ann Fairgrieve

Cum Laude
with Research Distinction

Ahmad Zafran Bin Faisal
Sarah Faisal

Sheroz Faisal
Amanda Fanale

Haosen Fang
Magna Cum Laude

Zihe Fang
Magna Cum Laude

Ciera Nicole Fankhauser
Summa Cum Laude

Madison Paige Fankhauser
Summa Cum Laude

with Research Distinction in Neuroscience
Noor Ashraf Farag

Magna Cum Laude
with Research Distinction

Sydney Farwick
Magna Cum Laude

Adrianna Marlee Fay
Magna Cum Laude

Nicholas Richard Fein
Lawrence Qixuan Feng

Summa Cum Laude
David Michael Ferguson II

Summa Cum Laude
Jaden Marc Fernandes

Cum Laude
Sarah Jeannette Ferritto

Emma Nicole Ficorilli
Magna Cum Laude

with Research Distinction in Evolution and Ecology
Madasyn Fields

Naomi Rose Fike
Alexander Mark Flonczuk

Magna Cum Laude
Laney Marie Finke

Summa Cum Laude
Crystal Amaryllis Finzer

Cum Laude
with Research Distinction in Molecular Genetics

James Christopher Fioritto
Summa Cum Laude

with Honors in the Arts and Sciences
Megan Alyse Fischer

Magna Cum Laude
Abigail Simmons Fisk

Summa Cum Laude
with Research Distinction in Chemistry

Shannon Flaherty
Cum Laude

Brooklyn Jean Flanagan
with Honors in the Arts and Sciences

Emma Grace Ann Fleenor
Jessica Nicole Fleming

with Honors in the Arts and Sciences
Laurel Virginia Fleszar

Magna Cum Laude
with Honors in the Arts and Sciences

with Honors Research Distinction in Molecular Genetics
Nicholas Lee Flinner

Magna Cum Laude
Isabella Floyd

Ava Forbes
Cum Laude

Anna Marie Forchione
Camryn Mackenzie Ford

Magna Cum Laude
Calvin Reyes Forsee

Magna Cum Laude
with Honors in the Arts and Sciences

Samuel Victor Fortney
Samarah Leslie Foster

Cum Laude
Brenden Scott Fowler

Cum Laude
Elijah Fox

Mitchell William Fragassi
Magna Cum Laude

Alexander Louis Frank
Maxwell David Frankel

Magna Cum Laude
Robert Sean Frazier

Megan Kathleen Frey
Cum Laude

Connor David Fricke <i>Summa Cum Laude</i> with Research Distinction in Physics	Kendall Griffin <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Idil Hersi Ireland Lacey Hester <i>Magna Cum Laude</i>	Zachary Hideyoshi Imamura <i>Magna Cum Laude</i>	Teagan Elise Jones <i>Summa Cum Laude</i>
John Cullen Fuchik Lily Aviva Fullenhull <i>Cum Laude</i>	Anna Griggs Joshua Ian Grismer <i>Magna Cum Laude</i>	Claire Finn Heverly James Gregory Hickey <i>Magna Cum Laude</i>	Katherine Elizabeth Indyk <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Katharine Yu Jong Eleonora Linette Julmy <i>Summa Cum Laude</i>
Emma Rose Furlan <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Emma Rose Grooms with Research Distinction in Chemistry	Kylie Adelaide Ru Mei Hicks <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Robert Michael Ison <i>Magna Cum Laude</i>	Solomon Nyakeh Jumu <i>Cum Laude</i>
Carter Alden Gaines with Honors in the Arts and Sciences with Honors Research Distinction in Molecular Genetics	Nicholas Paul Guilda <i>Summa Cum Laude</i>	Joshua James Higgins <i>Magna Cum Laude</i>	Denis Ivančić <i>Magna Cum Laude</i>	Madison Grace Justice <i>Magna Cum Laude</i> with Honors in the Arts and Sciences
Ethan Joseph Le Galbraith <i>Cum Laude</i> with Honors in the Arts and Sciences	Kendall Miyoko Gumby Oliver Jack Gwynn Sabeel Pierrette Haddad <i>Cum Laude</i> with Honors in the Arts and Sciences	Lauren Kelley Hilderbrand <i>Magna Cum Laude</i>	Aditi Iyengar Melwan Gabriel Izem <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Saraya Azzubair Jwayyed <i>Cum Laude</i> with Honors in the Arts and Sciences
Madison E. Gallagher <i>Cum Laude</i>	Haseeb Haddadeen <i>Cum Laude</i> with Honors in the Arts and Sciences	Rexford Jonathan Hill Daniel Nicolas Hirsch <i>Magna Cum Laude</i>	Lauren Elizabeth Jablonski <i>Magna Cum Laude</i>	Sahir Yusuf Kabir <i>Magna Cum Laude</i>
Emma Gallo <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Erika Lynn Hailey <i>Cum Laude</i>	Jacob Samuel Hochstein <i>Magna Cum Laude</i>	Mackenzie Taylor Jackson <i>Magna Cum Laude</i>	Allen Connor Kacenjar <i>Magna Cum Laude</i>
Coinne Gao <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Mackenzie Hall <i>Cum Laude</i>	Lauren Sydney Hoffman <i>Cum Laude</i>	Charles David Jacobson <i>Magna Cum Laude</i> with Honors in the Arts and Sciences with Honors Research Distinction	Donald Nishan Kahaian <i>Magna Cum Laude</i>
Katelyn Rose Garza Connor Matthew Geary <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Ryan Hamama Emily Elizabeth Hamilton <i>Cum Laude</i>	Elise Mae Hogan Leandra Hogrefe <i>Summa Cum Laude</i> with Research Distinction in Physics	Esha Jain <i>Summa Cum Laude</i>	Martin Solomon Kahn <i>Magna Cum Laude</i>
Jenna Nicole Gebhardt Ethan Jacob Geis <i>Magna Cum Laude</i>	Jonah Barker Hammond <i>Magna Cum Laude</i>	Nicholas Michael Holdcroft Katharine Ruf Hollington <i>Cum Laude</i>	James Uzochukwu Jama Kristian Janevski Peter D. Janos Claudia Leigh Jansen <i>Magna Cum Laude</i>	Audrey Clara Kaiser <i>Magna Cum Laude</i> with Honors in the Arts and Sciences
Emily Georgiadi <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Aws Hamza <i>Cum Laude</i>	Benjamin Gary Holm-Bertelsen <i>Cum Laude</i>	Bailey Javidi <i>Summa Cum Laude</i>	Bahtenur Kakiik Kamilia Binti Kamal Arifin Jalahan Baturie Kamara Rudra Veeraj Kamat <i>Magna Cum Laude</i> with Honors in the Arts and Sciences
Anna Christine Gerber Samantha Gabriella Giammo <i>Magna Cum Laude</i>	Qingze Han <i>Magna Cum Laude</i>	Quinton Robert Holmes Alexander Michael Holroyd Elizabeth M. Holt Nathan Andrew Holty Shoshanah Holub <i>Magna Cum Laude</i> with Honors in the Arts and Sciences with Honors Research Distinction in Biochemistry	Safwan Qazi Jaweed <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Zavier Michael Kamath <i>Summa Cum Laude</i>
Kyla Grace Gibson <i>Magna Cum Laude</i>	David James Hanson <i>Cum Laude</i>	Nathan Cole Honecker Dawon Hong Emily Grace Horace Abigail Maxine Householder <i>Magna Cum Laude</i>	Tyler Thomas Jenkins Jazmin Aaliyah Jennings Joshua Luke Jeyandran <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Jack Anthony Kammerer <i>Magna Cum Laude</i>
Madison Gibson Joanna Ann Giju <i>Cum Laude</i>	Janna Setia Harris <i>Cum Laude</i>	Aiden Johnny Howard <i>Magna Cum Laude</i>	Anmol Kang <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Yuxuan Kang Benjamin Dennis Kaniecki <i>Cum Laude</i>
Hannah Joy Gill <i>Magna Cum Laude</i>	Peyton Ryan Harris Zachary Joseph Hart Haroon Irshad Hasan Gavin Brian Hassel <i>Summa Cum Laude</i>	Ethan Hsu Baijun Hu Bo Hu Chenzhang Hu Zhengyi Hu <i>Cum Laude</i>	Xinyu Ji <i>Magna Cum Laude</i>	Hariharan Kannan <i>Cum Laude</i> with Honors in the Arts and Sciences with Honors Research Distinction
Alissa Rae Gilley <i>Cum Laude</i>	Abigail Elizabeth Hatfield Khayyam Hayat <i>Magna Cum Laude</i>	Yujian Huang <i>Summa Cum Laude</i>	Congyi Jiang <i>Cum Laude</i>	Salim Karimov <i>Summa Cum Laude</i>
Louisa Rose Girard <i>Cum Laude</i> with Research Distinction in Biochemistry	Tianyu He <i>Cum Laude</i>	Maxwell Lewis Huddleston <i>Magna Cum Laude</i>	Michelle Jiang <i>Magna Cum Laude</i>	Nandini Sairatna Kasam <i>Magna Cum Laude</i> with Honors in the Arts and Sciences
Heather Morgan Gladstone <i>Summa Cum Laude</i>	Ziyao He <i>Cum Laude</i>	Bennett James Hughes <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Bonian Jin Datong Jin <i>Magna Cum Laude</i>	Amitha Kasirajan <i>Summa Cum Laude</i>
Claire Glessner Kate Elizabeth Goertz <i>Cum Laude</i>	Parker Elaine Hearst <i>Summa Cum Laude</i> with Honors in the Arts and Sciences with Honors Research Distinction in Economics	Sadie Elizabeth Hunter <i>Cum Laude</i>	Mei Catherine Jira Hyunjoon Jo Anneliese Marie Johanni <i>Magna Cum Laude</i>	Jackson Andrew Kastelic Harshjot Kaur Erin Patricia Kauth <i>Magna Cum Laude</i>
Julia Justine Goldhardt Ryan Benjamin Goldie <i>Summa Cum Laude</i>	Madelyn Renee Heil <i>Magna Cum Laude</i>	Maxwell Lewis Huddleston <i>Magna Cum Laude</i>	Brayden Kristopher JOHantgen <i>Cum Laude</i> with Honors in the Arts and Sciences	Maura Jane Kelley <i>Magna Cum Laude</i> with Research Distinction in Physics
Jax Ryan Goldufsky <i>Magna Cum Laude</i>	Aaron Michael Heishman <i>Cum Laude</i>	Bennett James Hughes <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Grady Rurik Johnson Hayes Edward Johnson <i>Magna Cum Laude</i> with Honors in the Arts and Sciences	Matthew Ryan Kendig Emmaly Anka Kennelly <i>Summa Cum Laude</i> with Honors in the Arts and Sciences
Kevin Gonzalez Michael Anthony Gonzalez III <i>Cum Laude</i>	Karl Joseph Helmut <i>Summa Cum Laude</i> with Honors in the Arts and Sciences	Sadie Elizabeth Hunter <i>Cum Laude</i>	Makayla Anne Johnson Nathan Johnson Marissa Anne Johnston <i>Cum Laude</i> with Honors in the Arts and Sciences with Honors Research Distinction	Makayla Collett Kersten <i>Cum Laude</i>
Safwa Gopang <i>Summa Cum Laude</i>	Alexandria Ryun Henry <i>Magna Cum Laude</i>	Zhiying Huo <i>Magna Cum Laude</i>	Olivia Susan Johnston Mackenzie Johnstone <i>Cum Laude</i> with Honors in the Arts and Sciences	Sreya Kesarla with Research Distinction in Microbiology
Ava MacKenzie Gordon <i>Magna Cum Laude</i>	Natalie Marie Hensley <i>Cum Laude</i>	Jared Elias Husni Farzeen Shamila Hussain <i>Magna Cum Laude</i>	Maureen Ellen Jones <i>Magna Cum Laude</i>	Dominic J. Kestranek <i>Summa Cum Laude</i>
Joseph Dian Gospodinov <i>Cum Laude</i>	Raegan Renee Hepp with Research Distinction in Earth Sciences	Haanya Ijaz <i>Summa Cum Laude</i> with Honors in the Arts and Sciences		Nigel Dylan Keyser <i>Cum Laude</i>
Kristen Lyn Granger Isabelle Gray <i>Cum Laude</i>	Isabella Samantha Hernandez Eleanor Parker Herrlinger <i>Summa Cum Laude</i>			

Muhammed Nihal Khaja
Fizza Khalid
Magna Cum Laude
Arfah Khan
Laiba Khan
with Research Distinction in Microbiology
Maya Khelashvili
Magna Cum Laude
with Honors in the Arts and Sciences
Mark Andrew Kikta
Summa Cum Laude
Eunice Kim
Minsoo Kim
Cum Laude
Yuri Kim
Magna Cum Laude
with Honors in the Arts and Sciences
Lucy Katherine King
Magna Cum Laude
Kaylee Madison Kinnaird
Logan Paul Kinstle
Magna Cum Laude
Chloe Kirby
Alyssa Rose Kiss-Benke
Summa Cum Laude
Olivia Marie Kistler
Cum Laude
Lauren Klein
Samantha Clare Klekner
Aiden Scott Kline
Elena Kahl Kline
with Honors in the Arts and Sciences
Sarah Louise Klingerman
Magna Cum Laude
with Honors in the Arts and Sciences
Jenna Nicole Knapp
Luke Steven Knull
Summa Cum Laude
with Honors in the Arts and Sciences
Daniel W. Koch
with Honors in the Arts and Sciences
with Honors Research Distinction in Biology
Catherine Roze Kogan
Magna Cum Laude
with Honors in the Arts and Sciences
Aaryan Kohli
with Research Distinction
Pavlo Vasylovich Kokora
Rohan Konchada
Ian J. Kondalski
Magna Cum Laude
Yelin Kong
Manu Shree Devi Koppella
Hritika Santosh Kotian
Cum Laude
Alex Anthony Koulianos
Summa Cum Laude
Abigail Kovach
Morgan Melissa Kreimer
Cum Laude
with Honors in the Arts and Sciences
Reiley Kreiser
Cum Laude
Prithivi Geetha Krishnamoorthy
Madeline Elizabeth Kritzell
Kiersten Krogstad
Cum Laude
with Honors in the Arts and Sciences
David Kruzel
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Distinction in Mathematics

Juliana Teresa Kubicka
Magna Cum Laude
with Honors in the Arts and Sciences
Ruchi Prasad Kudalkar
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Biochemistry
Michael Henry Kudish
Cum Laude
Varun Kulkarni
Cum Laude
Rohini Kumar
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction
Abhiram Narasimha Kuram
Magna Cum Laude
Saachi Sachin Kuthe
Cum Laude
with Research Distinction
Nicholas Joseph Kutz
Summa Cum Laude
Keegan Victoria Kwiatt
Megan Kwik
Cum Laude
with Honors in the Arts and Sciences
Ryan Gregory LaCrosse
Cum Laude
with Honors in the Arts and Sciences
McKenna LaGanke
Magna Cum Laude
Alaina Alexandra Lah
Magna Cum Laude
with Honors in the Arts and Sciences
Khari Simone Christine Lamar
Anyia Lee Larabee
Magna Cum Laude
Isabelle Rose Lashley
Charles William Latkovic
Eric Lau
Tiffany Lau
Leah Elizabeth LaVerde
Summa Cum Laude
Gaurav Law
Cum Laude
with Honors in the Arts and Sciences
Brennan James Lawler
Ethan A. Leach
Summa Cum Laude
Alexis Grace Lednik
Cum Laude
Reina Lee
Spencer Hayes Lee
Summa Cum Laude
Emily Hallie Lefton
Summa Cum Laude
with Honors in the Arts and Sciences
Jordan Elizabeth Lehman
Cum Laude
Mason Scott Lenhart
Stephen Craig Lenker II
Ethan Michael Lenox
Summa Cum Laude
Kathryn Rebecca Lerfald
Magna Cum Laude
with Honors in the Arts and Sciences
Heather Nicole Lessick
Cum Laude
Madeline Christine Lessick

Mary Catherine Rose LeVan
Summa Cum Laude
John Francis Levering
Jonathan Levy
Cum Laude
Joshua Lewis
Kefei Li
Summa Cum Laude
Ningshan Li
Summa Cum Laude
Qiancong Li
Magna Cum Laude
Yonghui Li
Zhuoyang Li
Magna Cum Laude
Jennifer X. Liang
Joseph Michael Liang
Magna Cum Laude
Ying Liang
Cum Laude
Alexander John Liao
Summa Cum Laude
Ryan Joseph Lim
Magna Cum Laude
Chia Ying Lin
Magna Cum Laude
Debin Lin
Yicheng Lin
Magna Cum Laude
Erin Fletcher Little
Summa Cum Laude
Chunlin Liu
Delong Liu
Cum Laude
Shiyue Liu
Xuanting Liu
with Research Distinction
Yun Sheng Liu
Zhengyang Liu
Zixuan Liu
Summa Cum Laude
with Honors in the Arts and Sciences
Lucia Elizabeth LoBello
Magna Cum Laude
with Honors in the Arts and Sciences
Jordan Christine Loeffler
Cum Laude
Alexander John Loncar
Magna Cum Laude
with Research Distinction in Biology
Shelby Sophia Long
Magna Cum Laude
Alexander Lopez
Jonas Abraham Osvaldo Lopez
Wilfrido Martinez Lopez
Lauren Amy Loss
Cum Laude
Ava Marie Lovell
Timothy Andrew Lowery
Cum Laude
Guangqing Lu
Yonghao Lu
Cum Laude
Anne Lukich
Jack William Lulley
Jaden Alexis Rose Lumpkins
Qianrui Luo
Phuong Lam Luong
Jacquelyne Marie Lynch
Cum Laude
with Honors in the Arts and Sciences

Simon Thomas Lynn
Cum Laude
Buyi Lyu
Najwa Binti M Mizi
Emily Paige Macbeth
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Astronomy and Astrophysics
Morgan Olivia Mack
Cum Laude
Huda Yasin Mahad
Cum Laude
Rupal Mahajan
Magna Cum Laude
Samia Hussien Mahamed
Magna Cum Laude
Ayeman Mahbub
Nisha Makkar
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Biochemistry
Raihan Jurinario Malik
Cole Thomas Mamone
Neiko Antonio James Mancini
Cum Laude
Corinne Victoria Mancuso
Magna Cum Laude
Arshia Adarsh Mani
Summa Cum Laude
Gowrav Mannem
Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Mathematics
Mia Jeanne Marcellana
Summa Cum Laude
Blake Jamison Marcin
Cum Laude
Max Eli Margolis
Anna Chandler Marks
Magna Cum Laude
Kaiden Esteban Martin
Summa Cum Laude
Sai Marvin
Magna Cum Laude
Mason Thomas Maschke
Summa Cum Laude
Chris Tyler Mason
Christine Marie Massa
Magna Cum Laude
with Research Distinction
Halle Anne Massie
Sean Alec Matambo
Ricardo Andres Matos Luengo
Summa Cum Laude
Priya Matreja
Andrew Harland Maurer
Summa Cum Laude
Burke Scott Mayling
Magna Cum Laude
Jacob Francis Maziarz
Magna Cum Laude
with Research Distinction
Zachary Hunter McDonnell
Nia Marie McDonough
Emily Shiranne McGee
Grant Edward McGeehen
Lucky Day McGhee
Magna Cum Laude

Julia Catherine McGinley
Magna Cum Laude
Robert Francis McIntyre
Summa Cum Laude
Mitchell Bryant McKee
Cum Laude
Connor Matthew McKiernan
Emily Justine McNicol
Magna Cum Laude
Carson Henry McNulty
Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Biology
Andrew Michael McSteen
Collin Glenn Meek
Priyanka Mehta
Serena Mehta
Magna Cum Laude
with Honors in the Arts and Sciences
Gerrit Matthew Meine
Cum Laude
Afomiya Mitiku Mendaba
Cum Laude
Alejandra Nicole Mendez
Magna Cum Laude
Ryan Hirantha Mendries
Aditya Pradeep Menon
Carol Mensah-Bonsu
with Honors in the Arts and Sciences
Samantha Paige Mericle
Anthony Paul Mershon
Summa Cum Laude
with Honors in the Arts and Sciences
Emma Ann Meyer
Cum Laude
with Honors in the Arts and Sciences
Madyson Riley Meyer
Dominic Joel Miller
Cum Laude
Grace Nicole Miller
Magna Cum Laude
with Honors in the Arts and Sciences
Nijaun Jaren Milton
Cecelia Bryn Minard
Summa Cum Laude
with Honors in the Arts and Sciences
Maira Selena Miranda
Razan Mirghani
Magna Cum Laude
Weston Cash Misel
Cum Laude
with Honors in the Arts and Sciences
Pranali Mistry
Magna Cum Laude
Drishti Mittal
Corinna Renee Moesle
Magna Cum Laude
Erin Rebekah Moffitt
Summa Cum Laude
with Honors in the Arts and Sciences
Zainab Abdizizak Mohamed
Tawfiq Mohammed
Mariam Omar Mohamoud
Firzanah Binti Mohd Farid
Summa Cum Laude
Muhammad Safwan Bin Mohd Noor
Summa Cum Laude
Anthony Michael Molinari

Katherine Anne Molloy
Summa Cum Laude
with Honors in the Arts and Sciences

Kelli Marie Monaghan
Cum Laude

Sarah Suzanne Monahan
Yelena Montesinos
Gabrielle Andrea Morales
Katelyn Brooke Morgan
Cum Laude

Jonathan Mark Mosley
Magna Cum Laude

Ummehani Motiwala
Cum Laude

Mohammed Mubarak
Miles Douglass Murray
Max Irving Murtough
Magna Cum Laude
with Honors in the Arts and Sciences

Alison Elizabeth Myers
Summa Cum Laude
with Research Distinction in Neuroscience

Nives Myers
Cum Laude

Jack Henry Nageotte
Cum Laude

Yousteina M. Naguib
Cum Laude

Claire Ella Nagy
Magna Cum Laude

Arvind Salil Nair
Magna Cum Laude
with Research Distinction in
Anthropological Sciences

Kavita Marie Nanda
Magna Cum Laude

Vidhur Narayan
Magna Cum Laude

Ainsley Elizabeth Nasso
Cum Laude

Justin Thomas Nassif
Jordan Louira Neal
Cum Laude

Sunjit Vivek Neginhal
Magna Cum Laude

Stella Faith Nelson
Emilee Marie Neuman
Cum Laude

Lane Elizabeth Nevers
Magna Cum Laude

Daniel Newman
Heidi Ngo
Bao Tran Huynh Nguyen
with Research Distinction in Biology

Phihung Nguyen
Thuc Van Nguyen
Cum Laude

Maguette Niang
Sean Tyler Nicely
Magna Cum Laude

Seth Nichols
Margarita Sofia Nicolacakis
Magna Cum Laude

Lindsey Elizabeth Niemi
Magna Cum Laude

Solvej Hanna Nilsson
Natalie Elaine Noble
Summa Cum Laude

Kimberlyn Alexis Noggle
Cum Laude

Zachary Caleb Noh
Cum Laude

Nur Filzah Azuin Binti Nor Azman
Magna Cum Laude

Austin David Norris
Cum Laude

Julia Marie Norris
Kieran Julia Norton
Magna Cum Laude

Alyson Charlotte Mackenzie
Novick
Magna Cum Laude

Eleonore Anne O'Banion
Summa Cum Laude

Chloe Sinead O'Brien
Magna Cum Laude

Natalie Charlene O'Brien
Cum Laude

Rachel Shea O'Bryan
Cum Laude

Griffin Michael Obermyer
Summa Cum Laude
with Honors in the Arts and Sciences

Bryenne Marie Obringer
Magna Cum Laude

Hendriana Safoa Ofori
Amara Ann Okpalaoka
Summa Cum Laude

Alexandria Elizabeth Olzak
Cum Laude
with Honors in the Arts and Sciences

Henry Joseph Oman
Summa Cum Laude

Grace Ann Orians
Summa Cum Laude
with Research Distinction in Political
Science

Gavin VanThielen Orlet
Cum Laude

Kyle C. Orso
Avery Lauren Osborne
Jenya Ujwal Oswal
Summa Cum Laude

Jezreel Boatemaa Otchere
Kimball Todd Otteson
Ainsley Grace Owen
Magna Cum Laude

Dolores Refugio Pacheco Robles
Jnapika Palacharla
Cum Laude

Alyssa Marie Pallini
Summa Cum Laude

Louise Theresa Palmer
Cum Laude

Nimisha Cavale Panabakam
Kennedy Noelle Pannell
Pallav Pant
Summa Cum Laude
with Honors in the Arts and Sciences

Carmen Pape
Demetra Victoria Pappas
Summa Cum Laude

Ryan Parand
Sameer Pareba
Arya Sumit Parikh
with Honors in the Arts and Sciences

Krish Miness Parikh
Summa Cum Laude
with Honors in the Arts and Sciences

Eve Parsons
Magna Cum Laude

Riddhi Paruchuri
Cum Laude

Surabhi Pasupuleti
with Honors in the Arts and Sciences
with Honors Research Distinction

Brajkumar Panchu Patalsingh
Ana Shaileshkumer Patel
Magna Cum Laude

Dhilan-Om Dinesh Patel
Magna Cum Laude

Dhrumil Ashishbhai Patel
Keval Amit Patel
Nilima Patel
Summa Cum Laude
with Honors in the Arts and Sciences

Rutvi Patel
Shaan Patel
Magna Cum Laude

Swayam Shailesh Patel
Summa Cum Laude
with Honors in the Arts and Sciences

Swaraj Patnaik
Summa Cum Laude
with Honors in the Arts and Sciences

Nathan Alan Patton
Cum Laude

Adelaide Lee Pavkov
Amber Leigh Peeslee
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
Neuroscience

Sudiksha Pelluru
Summa Cum Laude
with Research Distinction in Neuroscience

Story Grace Pendleton
Yujie Peng
Magna Cum Laude

Emma Catherine Perez
Cum Laude

Taylor Perline
Cum Laude

Olivia Jesse Perotti
Cum Laude

Macon Slade Perrill
Ryan Mark Peters
Summa Cum Laude

Zoie Isabella Petitto
Summa Cum Laude
with Honors in the Arts and Sciences

Vivian T. Phan
Samuel Harrison Phillips
Cum Laude
with Honors in the Arts and Sciences

Bryce George Pickett
Morgan Grace Pickett
Cum Laude

Michael David Pickstone
Magna Cum Laude
with Honors in the Arts and Sciences

Dustin Cole Pigg
Magna Cum Laude

Oliver Toussaint Pittman
Emma Nicole Plummer
Magna Cum Laude

Joshua George Pohl
Mary Madeleine Polemeni-
McGovern
with Honors in the Arts and Sciences

Saveliy Poltyrev
Michael Popov
Riley Autumn Post
Steven Demetre Pouloupoulos
Cum Laude

Eden Rayne Powers
Magna Cum Laude

Vivek Manik Prasad
Summa Cum Laude
with Honors in the Arts and Sciences

John Hendrick Press
Magna Cum Laude
with Research Distinction in the Arts and Sciences

Isabella Price
Magna Cum Laude

Jessica Sue Price
Rachel Price
Cum Laude

Rafe Wyatt Proctor
Kaleb Michiel Putman
with Research Distinction in Earth
Sciences

Alexa Jia Pyun
Magna Cum Laude
with Honors in the Arts and Sciences

Ivy Qian
Edwin John Falconi Quang
Cum Laude

Shane Francis Quinn
Cum Laude

Adam Rahl
Summa Cum Laude
with Honors in the Arts and Sciences

Nora Jane Raicevich
Magna Cum Laude

Emily Nicole Raiff
Cum Laude

Vidya Venkat Rajagopal
Magna Cum Laude
with Honors in the Arts and Sciences

Mirinalini Rajeev
Summa Cum Laude
with Honors in the Arts and Sciences

Noora Summer Rajoub
Summa Cum Laude
with Honors in the Arts and Sciences

Emma Katherine Ralph
Cum Laude
with Research Distinction in Chemistry

Rebecca Ram
Miguel Angel Ramirez
Preksha Rajeev Rao
Prerana Rajeev Rao
Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction

Natalie Nicole Rarick
Cum Laude

Yusuf Ammar Rasheed
Summa Cum Laude

Vandita Rastogi
with Honors in the Arts and Sciences

Natalie Marie Rauf
Magna Cum Laude

Alexis Kira Raus
Sierra Stacey Reis
Magna Cum Laude
with Research Distinction

Jenna Katherine Rettig
Summa Cum Laude
with Honors in the Arts and Sciences

Montana Skye Reynolds
Summa Cum Laude
with Honors in the Arts and Sciences

David Matthew Ricci
Magna Cum Laude
with Honors in the Arts and Sciences

Harmond Becker Richardson V
Gabriel M. Richner
Randall David Rickel
Summa Cum Laude

William Kaden Riffe
Summa Cum Laude

Michael Anthony Rini IV
Erin Michelle Rioux
Magna Cum Laude

Molly Katherine Risner
Cum Laude

Grace Simone Rivera
Summa Cum Laude
with Honors in the Arts and Sciences

Liliana Jaime Rivera
Malachi David Roark
Adam Nathaniel Robejsek
Summa Cum Laude

Peter Owen Robie
Magna Cum Laude

Seven Rocks
Summa Cum Laude

Isabella Marie Zamora Rodgers
Cum Laude
with Honors in the Arts and Sciences

Jasmine Rogers
with Research Distinction

Sydney Quynh Rohl
Summa Cum Laude

Peter Daniel Rollins
Ana Roman
Summa Cum Laude
with Honors in the Arts and Sciences

Hayley Grace Romo
Magna Cum Laude

Josephine Grace Rose
Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
Physics

Julia Ann Rose
with Research Distinction in
Biochemistry

Nurul Farhanah Binti Rosli
Cum Laude

Michael Roth
Magna Cum Laude

Joseph Kevin Rottinghaus
Summa Cum Laude

Joseph Michael Round
Narayan Joseph Nath Roy
Morgan Grace Rudolph
Summa Cum Laude
with Honors in the Arts and Sciences

Christian Rukundo
Elayna Rusgo
Summa Cum Laude
with Honors in the Arts and Sciences

Colin George Rush
Summa Cum Laude

Audrey Erin Ryan
Rachel AnnaBelle Ryan
Magna Cum Laude
with Honors in the Arts and Sciences

George Michael Saad
 Natalie Marie Sage
Magna Cum Laude

Athena Saha
 Jonathan Anion Sahayaraj
 Ciena Sakamoto
Magna Cum Laude

Sreya Sakhamuru
Magna Cum Laude

Rocco Anthony Salajcik
 Ahmed Abdo Saleh
Cum Laude

Eve Birdie Saltzman
Summa Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Psychology

Madison Salyers
 Sean William Sammon
 Reid Russell Samson
 Vimbai Audette Samu
 Gabriella Santacesaria
 Dhriti Sanyasi
 Siddhant Nilesh Sathe
 with Honors in the Arts and Sciences

Michael McGowan Sauer
Summa Cum Laude

Isha Sawhney
Magna Cum Laude
 with Honors in the Arts and Sciences

Samuel Loughrey Sbrocco
 Alessandra Gabrielle Scalera
Cum Laude
 with Honors in the Arts and Sciences

Benjamin Matthew Schepps
Magna Cum Laude
 with Honors in the Arts and Sciences

Gavin Marshall Schimpf
 Christopher William Schmidt
Magna Cum Laude

Lillian Nicole Schneider
Summa Cum Laude
 with Research Distinction

Alexandra Lucia Schramm
Magna Cum Laude
 with Honors in the Arts and Sciences

Faith Elizabeth Schrock
Summa Cum Laude

Claire Isabelle Schulte
Cum Laude

Landin Marshal Schumacher
Cum Laude

Marcus Alexander Schuster
 Savanna Paige Schutte
Magna Cum Laude
 with Honors in the Arts and Sciences

Madison Claire Schwartz
Magna Cum Laude

Sean Finnegan Shanahan
 Scranton

Colette Rachael Seager
 Maxwell George Seeley
Magna Cum Laude

Rita Sarpong Sefa
 Michael Anthony Segreto
Cum Laude

Maria Carole Seith
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Chemistry

Hannah Deborah Seitz
 Charles Richard Selsner
 Dea Semaj
Magna Cum Laude

Zoe Lin Setzenfand
 Lucile Seutche Nguiepjop
 Veerpal Shah
Cum Laude

Sophia Rachel Shai
 Nur Aina Sabrina Binti Shamsul
 Bahri
Magna Cum Laude

Jessica Heather Shao
Summa Cum Laude

Sindhu Ramaprakash Sharma
Summa Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Microbiology

Hailey N. Shaver
 Jenna Shaw

Eva Elizabeth Shearer
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Psychology

Katelynn AnnMarie Sheely
Cum Laude

Molly Kristine Sheridan
Magna Cum Laude

Kate Veronica Sherlock
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Chemistry

Antony Tomas Shilo
Cum Laude

Kyu Thomas Shim
Summa Cum Laude
 with Honors in the Arts and Sciences

Pushkar Sanjeev Shirahatti
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Physics

Zoe Shive
Summa Cum Laude

William Heston Shoemaker
Summa Cum Laude
 with Honors in the Arts and Sciences

Amberly Alison Shouse
Magna Cum Laude

Unni Meenakshi Shriram
Summa Cum Laude
 with Honors in the Arts and Sciences

Anthony Angelo Shuman
Magna Cum Laude
 with Honors in the Arts and Sciences

Andrew John Simon
 Kobey Michael Simpson
 Lars Charles Sindeldecker
Magna Cum Laude

Maya Faye Singh
Cum Laude

Maanasa Lakshmi Sistla
 Sarah Ann Skaggs
Summa Cum Laude

Quinton Micheal Skelly
Cum Laude

Matthew Caleb Skweres
Magna Cum Laude

Victoria Pauline Slabe
 Avery Renee Sliwak
 Gabriella Hannah Sloane
 Tanasia Smallwood
 Abigail Christine Smith
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Earth Sciences

Carley Lanae Smith
 Meadow Antoinette Smith
Magna Cum Laude

Preston Elliott Smith
 Kate Smythe
Magna Cum Laude

Nathan Andrew Snyder
Magna Cum Laude

Sarah Hope Snyder
Magna Cum Laude

Armaan Sodhi
Magna Cum Laude

Misha Fatima Sohail
Magna Cum Laude
 with Honors in the Arts and Sciences

Verena M. Soliman
Magna Cum Laude

Yadnya Kiran Sonawane
Cum Laude

Jaekuk Song
Cum Laude

Nicholas Sowers
Magna Cum Laude

Andrew Wade Sparks
 Abigail Spencer
Summa Cum Laude
 with Honors in the Arts and Sciences

Nathan Charles Spencer
Summa Cum Laude
 with Honors in the Arts and Sciences

Jayde Aria Spiegel
Summa Cum Laude

Emma Spirolari
Summa Cum Laude
 with Honors in the Arts and Sciences

Manasa Sriram
 Emily Elizabeth Stanforth
Magna Cum Laude

Christopher Andrew Stanulet
Summa Cum Laude
 with Honors in the Arts and Sciences

Matthew Lawrence Stavenger
 Joel Kremer Steinbicker
 Evan Thomas Stephens
 Jack Patrick Stethem
Magna Cum Laude

Aidan C. Stevens
 Connor Ashford Stevens
Magna Cum Laude

Sophia Adelia Stokes
Summa Cum Laude

Hayden Bradley Storts
Summa Cum Laude

Natalie Dominique Stover
Magna Cum Laude
 with Honors in the Arts and Sciences

Cessna Stoy

Benjamin Strong
Cum Laude

Michaela Elizabeth Strunck
Magna Cum Laude
 with Honors in the Arts and Sciences

Audrey Jean Sturgeon
Magna Cum Laude
 with Honors in the Arts and Sciences

Anirudh Subramaniam
 Kuppam Chetty Subramanian
Summa Cum Laude

Manasa Subramanian
 Anabelle Rayne Sullivan
Summa Cum Laude
 with Honors in the Arts and Sciences

Darren William Sulzer
Magna Cum Laude

Shelby Lynn Summers
Magna Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Astronomy and Astrophysics

Junfeng Sun
Cum Laude

Lingcan Sun
 Sara Meiyun Sun
Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Neuroscience

Vigneshwaren P. Sundaresan
 Shreyas Sunder
Cum Laude

Abigail Darcy Susec
 Jacob D. Suter
Summa Cum Laude
 with Honors in the Arts and Sciences

Sierra Madison Sutton
Cum Laude

Camden Joe Swartz
 Ryan Jeffrey Sweder
Summa Cum Laude

Korina Marie Swiderski
 Owen Michael Swogger
Cum Laude

Connor Thomas Szymkowiak
 Delaney Bian Tabbert
Cum Laude

Abyssinia Abel Taddege
 Tejaswini Talluri
Magna Cum Laude
 with Honors in the Arts and Sciences

Kojin Hikosaka Tam
 Yingzi Tang
Cum Laude

Yumeng Tang
Summa Cum Laude

Shay Chetan Tanna
Cum Laude

Carisa Lynn Tanner
Magna Cum Laude
 with Honors in the Arts and Sciences

Ashley Paige Tarrant
Summa Cum Laude

Emma Rose Tasse
 Ainsley Renee Tatman
 Julianna M. Tawadrose
Magna Cum Laude

Brian Thomas Taylor
Summa Cum Laude

Ciara Taylor
Magna Cum Laude

Rain Taylor
 Abbigail Breanna Tekavec
 Noa Yosefa Tepper
Magna Cum Laude

Donovan Samrith Thach
Cum Laude

Tiffani Nicole Thalacker
 Razeen Thammachack
Cum Laude
 with Honors in the Arts and Sciences

Rory Micheal Thapthimdaeng
 Benjamin Gabriel Thayer
 Seneba Thiam
Cum Laude
 with Honors in the Arts and Sciences
 with Honors Research Distinction in
 Medical Anthropology

Steven Louis Thibodeaux
 Sovia Thind
 Isabella Anne Thirion
Cum Laude

Alison Tresa Thomas
Magna Cum Laude

Hannah Rose Thomas
 Jaden Christopher Thomas
Magna Cum Laude

Kathryn Grace Thompson
 Marielle Thor
 Channing Thornton
Magna Cum Laude

Qiming Tian
 Anna Marie Tiernan
Magna Cum Laude
 with Honors in the Arts and Sciences

Gage Hunter Tinlin
 Ella Todd
Summa Cum Laude
 with Honors in the Arts and Sciences

Bianca Jo Torch
 Anthony Richard Torma
 with Research Distinction in Earth
 Sciences

Andrew Thai Chau Tran
Magna Cum Laude
 with Honors in the Arts and Sciences

Justin Tran
Cum Laude

Frances Cecilia Trezza
Cum Laude
 with Honors in the Arts and Sciences

Juliana Tron
Cum Laude

Carter Patrick Tull
 Sarah Jude Tuzzolo
 JaNiya Shyann Ulysse
 Thomas Joseph Ungerland III
Magna Cum Laude

Braden Michael Urmson
Magna Cum Laude

Samuel Michael Ushats
Summa Cum Laude

Austin MacMillan Usher
 Muhammad Usman
Magna Cum Laude

Emily Rose Vais
Summa Cum Laude
 with Honors in the Arts and Sciences

Leah Kay Vanbeysterveldt
Cum Laude

David Xander Helin Vance

Maria Heloisa Vasconcelos Scanavini

Melvin Fernando Velazquez Medina

Anuha Vellanki

Paul Veltrup

Paige Marie Vergenes
Magna Cum Laude

Priyanka Brienne Verma
Summa Cum Laude

Nathan Daniel Vernon
Magna Cum Laude
with Honors in the Arts and Sciences

Randy Enrique Villanueva Herrera

Colin Michael Voorhis
Summa Cum Laude

Josef Jan Vytopi
Magna Cum Laude

Halle Grace Wade
Summa Cum Laude
with Honors in the Arts and Sciences

Taylor Alaina Walker
Magna Cum Laude

Katherine Mary Wallace

Maxwell Koji Wallace
Cum Laude

Joseph William Walsh
Magna Cum Laude

Megan J. Walters
Summa Cum Laude

Cheyenne Marie Walton

Michael Elijah Waltuch
Cum Laude

Boxuan Wang

Hongrong Wang

Michael Davis Wang

Xinran Wang

Yangyang Wang

Yufei Wang
Summa Cum Laude

Zichen Wang

Zihe Wang
Magna Cum Laude

Zuo Wang
Magna Cum Laude

Elsa Manzoor Wani
Summa Cum Laude

Lucas Rodger Wannemacher

Brooklyn Julianne Maria Watts

Averie Marie Webb
Summa Cum Laude
with Honors in the Arts and Sciences

Julie Beth Weinberg

Chase Brooks Wells

Chengxiang Wen
Summa Cum Laude

Alicia Western
Cum Laude

Clovis Parker Westlund
Summa Cum Laude

Kate Rose Whitbred
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Economics

Julia White

Conner Ethan Whitt

Julie Anne Wietholter

Olivia Wiley
Cum Laude

Ash Carlton Williams
Cum Laude

Madison Marie Williams
Magna Cum Laude

Victoria Emma Williams
Magna Cum Laude
with Research Distinction in Psychology

Jenna Nicole Wilson
Summa Cum Laude

Adison Mary Winar

John David Winbigler
Summa Cum Laude
with Honors in the Arts and Sciences

Stella Margaret Wineman
Magna Cum Laude

Joel Winner

Calvin Daniel Winter
Magna Cum Laude

Marissa Logan Wise
Magna Cum Laude

Brock David Wolfe

Jenna Christine Wolfe
Magna Cum Laude
with Honors in the Arts and Sciences

Brayden Michael Chan Wong
Magna Cum Laude

Meredith Leslie Wood
Magna Cum Laude

Alexandria Michelle Woodard
Summa Cum Laude
with Research Distinction in Psychology

Gwenyth Milone Woodbury
Magna Cum Laude
with Honors in the Arts and Sciences

Lauren Nicole Woodruff
Magna Cum Laude

Brezina Noel Wooten

John Wright
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Statistics
with Honors Distinction in Mathematics

Ellie Lauren Wrigley
Summa Cum Laude

Catherine Jiayi Wu
Cum Laude

Jamie G. Wu

Si-Ning Wu
Cum Laude
with Research Distinction

Wo Wu
Summa Cum Laude
with Distinction in Mathematics

Yuchen Wu
Magna Cum Laude

Zekun Wu

Nicholas Anthony Wunderlin

Wei Xie
Cum Laude

Yachen Xie
Magna Cum Laude
with Research Distinction in Psychology

Ruibo Xu

Xiner Xu
Summa Cum Laude

Xinyu Xu
Summa Cum Laude

Yue Xu
Magna Cum Laude

Geoffrey H. Xue
Summa Cum Laude
with Honors in the Arts and Sciences

Jinyi Xue
Cum Laude

Dominick Joseph Yacono
Magna Cum Laude

Makayla Diane Yake
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Psychology

Reece Steven Yakubov

Bing Yang

Jia Yi Yang

Xiaoye Yang

Shunyu Yao
Cum Laude
with Research Distinction in Astronomy and Astrophysics

Shakira Yin
Magna Cum Laude

Shiwon Yoo
Cum Laude

Kevin You
Summa Cum Laude
with Honors in the Arts and Sciences

Ethan Picard Young
Summa Cum Laude

Matthew Haim Young
with Research Distinction in Earth Sciences

Hanxiang Yue

Bridget Yusko
Magna Cum Laude
with Honors in the Arts and Sciences

Bo Yuwen
Cum Laude

Hallie Ann Zacatelco
Summa Cum Laude

Natalie Marie Zargari
Summa Cum Laude
with Honors in the Arts and Sciences

Alexa Zarjetskiy

Haylee Elizabeth Zavaski
Cum Laude

Natali Bella Zecchino

Caden David Zeigler

Alea Zelle

Jisheng Zeng
Cum Laude

Yang Zeng
Magna Cum Laude

Braden Michael Zeno
Cum Laude

Yimo Zhan

Allen Zhang
Magna Cum Laude

Catherine Zhang
Summa Cum Laude

Chenxi Zhang
Cum Laude

Hanjin Zhang
Magna Cum Laude

Jiahao Zhang

Jinjin Zhang
Cum Laude

Tianhao Zhang
Summa Cum Laude

Xiaolu Zhang
Magna Cum Laude

Xinwei Zhang
Magna Cum Laude

Yixin Zhang
Summa Cum Laude

Yufu Zhang
Cum Laude

Yulai Zhang

Zheng Zhang
Cum Laude

Ziheng Zhang

Megan Ran-ting Zhao
Magna Cum Laude
with Honors in the Arts and Sciences

Qingchuan Zhao
Magna Cum Laude

Hengkai Zheng

Lily Zheng

Wentao Zhong
Cum Laude

Weilun Zhou

Yitong Zhou
Cum Laude

Yuang Zhou

Chenchouyi Zhu

Sana Zia
with Research Distinction in Earth Sciences

Gabriel Christian Zifer
Cum Laude

Jerry Zou

Mingxue Zou

Alexander Paul Zumock
Magna Cum Laude
with Research Distinction in Chemistry

Kunsh Zutshi

Associate of Arts

Maya Samer Abubakr

Nicholas Phillip Acton

Courtney Marie Adam

Christian Adamah-Tassah

Vaskar Adhikari

Camryn Elizabeth Ahlers

Lexis Anna Albert

Aisha Mohamud Ali

Allison Denise Allen

Michelle Alvarado

Peter Anderson

Michael Paul Armstrong

Shannon Arthur

Anthony Arnette Ashford III

Madeline Claire Aurigemma

Abigail Marie Austin

Tania Bartell

Katherine Maggie Bartlett

Jennifer Lynn Bayham

Isabella Anne Beany

Jack Evan Beavers

Reagan Behne

Aliyah Nicole Bennett

Julie Adelaida Bentley

Marcus Antonio Berrios

Dickcha Bhandari

Cora Rose Bicknell
Magna Cum Laude

Dylan Thomas Blankenship

Ella Nicole Blanton

Nicholas Ryan Blubaugh

Kiera Michelle Bohn
Summa Cum Laude

Mia Francesca Bonanno

Savana Mary Bope
Magna Cum Laude

Jacob Gregory Borchers

Lucas Corsino Bouahom

Summer Brandon

Jackson Tanner Browning

Makayla Marie Brunson

Corrin Bush

Alexandra Louelle Buyer

Gabrielle Cachapero

Abbey Elizabeth Caldwell

Kameron Caminiti
Cum Laude

Kennedy Elizabeth Cantrell

Grace Esther Cardenas Gandara
Cum Laude

Luke Douglas Carter

Christabella Castillo

Alaric Daly Cavanaugh

Nicholas James Cech

Amanda Caroline Cheng

Bryant Matthew Christy

Ella Cindric

Madison Faith Coffman

Grace Colin

Paige GraceAnn Collene

Kenneth Alexander Scott Colley

Alexis Nicole Collins

Parker Lee Cook

Tiffany Lyndel Cooper

Xander Xain Cooper

Sydney Paige Cooperrider

Dreshon Correa

Tyler Cotugno

Atley Grace Crabaugh

Maeeve Eileen Craig

Tyler James Crane

Breeanna Creech

Owen M. Croak

Ainsley Renee Crock

Edgar Cruz

Noah Lee Cunningham
Cum Laude

Hussein Damire

Chelsea Coleen Daubenspeck

Alaina Elizabeth Davis

Sabrina Denise Dawson Medeiros
Cum Laude

Jacob Kuhlman Dicler

Jonathan Lee Downs
Cum Laude

Brooke M. Dutro
Magna Cum Laude

Gavin Marcus Eastep
Magna Cum Laude

Tyler Alison Edwards

Jade Elizabeth Elkins

Olivia Elston

Madison Nicole Elswick

Michael Dean Engle

Alivia Margaret Erbe

Ayden Carl Estep

Chloe Ann Etkorn

Jayden Evans

Toby Jason Evans

Kendal Isabella Fahl

Mafaz Mohamed Fazzari

Olivia Renee Fearon

Mari Denise Fernandez

Alexis Isabelle Filote

Jordyn Fogle

Tyler David Fortune

Alessa Marie Fraley

Carolyn Linda France
 Alivia Grace Fulton
Magna Cum Laude
 Clara Isabelle Funk
 Gabriel Armando Garcia
 Ciera Lee Gayman
 Elliot Bradley Geissman
Summa Cum Laude
 Amanda Ghorayeb
Cum Laude
 Tyler James Gilbert
 Jacqueline Marie Gisondo
 Samantha Gonzalez-Villa
 Emma Jade Gorenflo
 Kaitlyn Elizabeth Gorsuch
 Katherine Kelly Gostroe
 Logan Allen Greathouse
 Lindsay Mae Gregg
 Sharie Ann Guillems
 Samuel Andrew Gundelfinger
 Jesse Nickolas Gunsett
Magna Cum Laude
 Rylan Matthew Guthrie
 McKenna L. Hamilton
 Rudy Jamison Hartwig
 Victoria Julianna Harvey
 Syed Muhammed Hashmi
 Clara Suzanne Hecker
 Sarah Elizabeth Heldman
 Lilly Elizabeth Henney
 Hannah Marie Herring
 Alexis Paige Herrmann
Summa Cum Laude
 Ryne Andrew Higgins
Cum Laude
 Rachel Morgan Howard
Summa Cum Laude
 Huijun Huang
 Qiman Huang
 Alyson Huffman
 Isabella Luna Huth
 Lauren Elise Hymes
 Kedrick Ramplait Innocent
 Brandon Tyce Jackson
 Alexis Jeffers
 Ethan Daniel Johnson
 Connor Louis Joseph
 Stephanie Marie Kahle
 Casey James Kaylor
 Zoe Marie Kelly
 Catherine Marie Kern
 Allyson Jane Keyser
 Chloe Rose Kibler
 Caleb Dean Kirker
 Braden Knerr
 Nola Margaret Lairson
 Maira Lawson
 Lilli Anne Lepi
 Chloe Marie Lewis
 Gage Lewis
 Kathryn Nicole Lindenberger
 Kiersten Lippy
Summa Cum Laude
 Jolin Liu
 Rebecca Loayza

Walter Alexis Luna
 Benjamin Maxwell Lust
Cum Laude
 Lillian Kathleen Lynch
 Kylee Lynn Martino
 Julia Lynn Mayer
Summa Cum Laude
 Margaret Rose McCall
 Samantha Lynn McCathran
 Levi Keegan McCourt
 Renee Elizabeth McCreary
 Katelyn Jeanette McDonald
 Joshua Michael McNichols
 Kinzie Lenae Messmer
Summa Cum Laude
 Caylin Michelle Miller
 Zachary Stratton Miller
 Victoria Marie Mills
 Heather Ashley Mitchell
 Terrin Pei Mo
 Melany Nicole More Flores
 Shaylynn Nichole Morris-
 Montgomery
 Alister Murdoch
 Sumaya Mohamud Muse
 Carson Edward Neal
 Adam Henry Neides
 Matthew Curtis Nguyen
 Seth Andrew Nicholson
 Marina Eleni Nicolozakes
 Adam Javad Niktash
 Cassidy Kay Noble
 Maggie Elizabeth Novak
 Alexander I. Okoye
 Pierce Onesto
Cum Laude
 Scarlet Anne Gray Oudemans
 Dylan Japhy Oviyenko
 Jessica Ann Owens
 Eliana Christine Pardi
 Robert Ryan Parmer
 Isabella Lynn Parsons
 Vanshika S. Patel
 Samantha Jane Paul
 Zachary Walker Paulus
 Owen Perkins
 Lillian Pollack
 Trinity Marie Porter
 Prajuval Prakash
 Anna Kathryn Priedeman
 Toby Lee Pryor
 Faiz Muhammad Rabbani
 Cynthia Ramey
 Jazmyne Nicole Reime
 Isabella K. Rice
 Camden David Richey
Cum Laude
 Reagan O. Ricker
 Benjamin David Roebke
 Trinity Roush
Summa Cum Laude
 Sierra Brianne Roy
 Molly Jane Rudduck
Magna Cum Laude

Tyshondra Jahonna Alanee
 Russell
 Josephine Therese Ruther
 Andreja Ruzic
 Rachel Mae Ryan
Cum Laude
 Aaron Noni Kwame Sakwa
 Yanisa Patricia Sariwatta
 Jaylen Auburn Sautter
 Maci Shae Schockling
 Danielle Mikenna Schrienk
 Brittany Lynn Schriml
 Brandy Rae Sensabaugh
 Chance William Settles
 Brayden Alexander Edward
 Sexton
 Pratyaksha Sheel
 Eli Michael Sherwood
 Naimo Kaysa Shire
 Rachel Fitzgerald Siburian
 Leyna Siivka
 Lorelei Marie Smith
 Zachary Tyler Snyder
 Edmund Jr Sowah
 Ryan Andrew Stedman
 Simon Stefancin
 Cole Clayton Stephens
 Robert James Stephenson
 Clare Catherine Stevenson
 Maxwell James Stewart
 Alexis Mae Stiversen
 Latif Temidayo Sulaimon
 Bryce Alexander Summerville
 Siddharth Suresh
 Ben Szulewski
 Ashley Ann Tipton
 Benjamin H. Tong
 Kayline Sue Trent
 Madison K. Tumlinson
 Aidan James Turner
 Skylar Ann Turnwald
 Annamaria Ventura
 Lani Rochelle Wang
 Taylor Ward
 Parker James Weber
 Logan Matthew Wells
Magna Cum Laude
 Anna Wenig
 Macy Lee Wentling
 Kai Dever Whitacre
 Clay Matthew Whitaker
 Samuel White
 Tajanae Amari Whitlow
 Isabelle Wynelle Ann Wickline
 Arin Janice Rose Williams
Magna Cum Laude
 Isis Deltoria Williams
 Jacob Trevor Scott Woodard
 Lily Ann Woodford
 Elizabeth Grace Worley
 Madison Kay Yagodich
 Maddison Lyn Yaussy
 Olivia Yin
 Kira Ann Young
 Joey Zhao

The Max M. Fisher College of Business

Interim Dean: Trevor L. Brown

Bachelor of Science in Business Administration

Ruhamah Ababu
 Danny Aidan Abbass
Summa Cum Laude
 Benjamin William Abbott
Cum Laude
 Fardowsa Ibrahim Abdalla
 Ahlam Mohammedberhan
 Abdulkadir
 Khadija Raghe Abdullahi
 Karaline Elizabeth Abney
Cum Laude
with Honors in Business Administration
 Zachary Joseph Abramovitz
Cum Laude
 Connor James Acks
Cum Laude
 Ryan Michael Acosta
 Landon Shaw Adelstein
Summa Cum Laude
with Honors in Finance
 Lilly Sloan Adelstein
Summa Cum Laude
 Manisha Adhikari
 Grace Rose Adkins
Cum Laude
 Peyton Blair Adler
 Priyanka Agarwal
 Dhruv Agrawal
 Mustafa Ahmed
 Mohammad AlAjlouni
 Jacqueline Quinn Alberio
Magna Cum Laude
 Sydney Lynn Albin
Magna Cum Laude
 Hannah Renee Alfred
 Bayan Alhaj
 Tasnim Ali
 Jillian Nicole Algyre
 Sema Altawam
Magna Cum Laude
 Lauren James Altamare
Summa Cum Laude
 Kennedy Elizabeth Altizer
Magna Cum Laude
 Joshua Jacob Amit
Magna Cum Laude
 Christian Andreas Ammons
 Felix Ampaaber-Kyeremah
Cum Laude
 Nicholas James Anderson
 Gabriella Anthony
Cum Laude
 Danna Yaritzi Aparicio Martinez
 Victor Appell
Magna Cum Laude
 Amy Jessica Applegate
Magna Cum Laude
 Corinne I. Aquila
 Ryan Charles Smith Armstrong
Magna Cum Laude

Natalie Y. Aroesty
Summa Cum Laude
 Ryan Christopher Arp
Magna Cum Laude
 Jennifer Arroyo
Magna Cum Laude
 Ariel Andrew Asherian
 Patrick Albert Astrofski
Summa Cum Laude
 Ian Andrew Asuncion
Cum Laude
 Jonah David Atchison
 Troy James Atkinson
 Benjamin Joseph Auletta
Cum Laude
 Christian Alexander Avila
Cum Laude
 Emma Elizabeth Avila
 Andrew Max Axelrod
 Sameh Aly Ayoub
 Hailey Alexis Bach
 Eric Scott Bachman
Cum Laude
 Kayla Lynne Badyna-Carpenter
Cum Laude
 Tomas Baeza
 Jonathan Kade Bafford
 Allyson Paige Bailey
 Grace Marie Blair
 Darshita Bajoria
Summa Cum Laude
with Honors in Business Administration
 Adam Thomas Baker
 Gavin Robert Balak
 Joshua Douglas Balash
 Julia Elizabeth Banbury
Magna Cum Laude
with Honors in Business Administration
 Adiaratou Bangaly
 Katherine Anne Bangs
Magna Cum Laude
 Lauren Avery Banks
Cum Laude
 Zeke Bao
Cum Laude
 Kevin Douglas Barber
Magna Cum Laude
 Oscar Barchick
Magna Cum Laude
 Joseph Carl Hoecherl Barnes
Cum Laude
 Alexander Duane Barnhart
 Noa Baron
Summa Cum Laude
 Jacob Addison Barrett
 Kaci Karen Barrett
 Abriella Rose Bartzack
 Eesha Batra
 Justin William Bayse
Summa Cum Laude
 Zuhair Ammar Bdeir
 Kodi Taylor Beachy
 Lily Grace Bean
Cum Laude
 Gregory Jalen Beard
Cum Laude
 Adam Joseph Bechtel
 Noah Matthew Beck
Cum Laude
 Ephesson Gulelat Bekele
Cum Laude

Davis Daniel Belk
Cum Laude

Brooke Elisabeth Bell
Summa Cum Laude

Kylie Grace Bell
Summa Cum Laude

Mark Belozeroff
Summa Cum Laude

Ayoub Benaouinate
Summa Cum Laude

Jessica Benaharon
Summa Cum Laude

Avery Morgan Benner
Summa Cum Laude

Gabe Alan Bennett
Summa Cum Laude

John William Bennett
Summa Cum Laude

Shelly Bereznyak
Magna Cum Laude

Andrew Sunil Berkebile
Summa Cum Laude

Joshua Zachary Berkowitz
Magna Cum Laude

Danielle Nicole Berman
Cum Laude

Andrew Bernstein
Magna Cum Laude

Katherine Berryman
Summa Cum Laude

Jake Matthew Bertler
Summa Cum Laude

Frances Anne Besl
Cum Laude

Justin Paul Bessen
Summa Cum Laude
with Honors in Business Administration

Olivia Rose Bewie
Magna Cum Laude

Susmita Bhattarai
Summa Cum Laude

Chenzhang Bian
Summa Cum Laude

Katie Olivia Bice
Summa Cum Laude

Jake Anthony Bidwell
Summa Cum Laude

Sydney Marie Binner
Cum Laude

Andrew James Bishop
Summa Cum Laude

Kelsey Ann Bitner
Summa Cum Laude

Adelaide Grace Blachman
Summa Cum Laude

Connor Jordan Black
Magna Cum Laude

Sophia Kay Blackerby
Magna Cum Laude

David Douglas Blacksten
Summa Cum Laude

Henry Austin Blake
Summa Cum Laude

Chiemeka Timothy Blanchard
Summa Cum Laude

Meghan Elizabeth Blankemeyer
Cum Laude

Erin Delaney Blankenship
Summa Cum Laude

Alex Blass
Summa Cum Laude

Mario Blazevic
Summa Cum Laude

Michael Robert Blessing
Summa Cum Laude

Henry Blevins
Cum Laude

Brady Blue
Summa Cum Laude

Lauren Ainsley Blue
Summa Cum Laude

Eli Cabitt Blumenstein
Cum Laude

Madison Elena Ashanti Boakye
Summa Cum Laude
with Honors in Integrated Business and Engineering

Elena Kay Boger
Summa Cum Laude

Emma Dawn Boger
Summa Cum Laude

Anna Nathelie Bohnert
Summa Cum Laude

Andrew Joseph Bolek
Summa Cum Laude

Josephine Icy Boschert
Summa Cum Laude

Brooke Marie Boske
Summa Cum Laude

Samuel Jacob Bosworth
Summa Cum Laude

Evangelina Kyriaki Boutsikakis
Summa Cum Laude

Dante Isaiah Bowen
Summa Cum Laude

Rachel Michelle Boyle
Cum Laude

Ailbhe Elizabeth Brady
Magna Cum Laude

Alex Michael Brady
Cum Laude

Erin Rose Brady
Cum Laude

William Henry Brake
Magna Cum Laude

Emma Marie Brandt
Cum Laude

Kathryn Grace Ivan Branstool
Magna Cum Laude

Tyler Merz Brau
Summa Cum Laude

Ethan S. Braunfotel
Cum Laude

Graci May Brichford
Cum Laude

Lucas Paul Brill
Summa Cum Laude

Sydalee Brinkman
Cum Laude

Drew Michael Briones
Cum Laude
with Honors in Business Administration

Jensen Lee Britt
Magna Cum Laude

Ryan Michael Brodsky
Cum Laude

Nicole Diane Brom
Cum Laude

Allison Grace Brown
Magna Cum Laude

Drew Wallace Brown
Summa Cum Laude

Kyle Brandon Brown
Cum Laude

McKay Elizabeth Brown
Cum Laude

John Christopher Brulato
Magna Cum Laude

Paul Joseph Brunez
Summa Cum Laude

Michael Christian Bruzzese
Summa Cum Laude

Jaden Chad Bryant
Magna Cum Laude

Jackson Gregory Buchanan
Magna Cum Laude

Ryan Patrick Buckman
Summa Cum Laude

Morgan Elaine Budovsky
Summa Cum Laude

Daniel Jacob Buehrer
Summa Cum Laude

Andrew Bugajski
Summa Cum Laude

Claire Elizabeth Bulic
Magna Cum Laude

Meghan Grace Burba
Magna Cum Laude

William Trey Burger
Summa Cum Laude

Ella Cynthia Burgess
Magna Cum Laude

Ryan Joseph Burke
Summa Cum Laude

Jack Everest Lee Burns
Summa Cum Laude

Rachel Lynn Burt
Summa Cum Laude

Michal Burzawa
Cum Laude
with Honors in Accounting

Aidan Michael Bush
Summa Cum Laude

Sydney Ava Byck
Summa Cum Laude

Aiden James Byrne
Cum Laude

Tongyu Cai
Cum Laude
with Honors in Accounting

Sofia Elena Caine
Summa Cum Laude

Mercy Ziquem Cala Avila
Summa Cum Laude

Joseph Maxwell Caldiero
Cum Laude

Macie Lynn Louise Caldwell
Magna Cum Laude

Joseph Quirino Caligiuri
Cum Laude

Aiden Callahan
Summa Cum Laude

Grace Frances Caltabiano
Magna Cum Laude
with Honors in Finance

Alexa Camerino
Summa Cum Laude

Cody Jay Camp
Summa Cum Laude

Vincent Samuel Campagni
Cum Laude

Madelyn Bella Campana
Summa Cum Laude

Alexis Marie Campbell
Summa Cum Laude

Andrew David Campbell
Summa Cum Laude

Devin Patrick Campbell
Magna Cum Laude

Calista Grace Camper
Cum Laude

Shuai Cao
Magna Cum Laude

Yunchuan Cao
Summa Cum Laude

Thomas Ronald Capka
Cum Laude

Austin Capron
Summa Cum Laude

Gavin James Carey
Summa Cum Laude

Patrick Hutchison Carigan II
Magna Cum Laude

Jacob Grant Raphael Carlson
Summa Cum Laude

Helanea Mary Carney
Magna Cum Laude

Jenna Mackenzie Carr
Summa Cum Laude

Logan Mitchell Carrier
Summa Cum Laude

Abigail Mary Carroll
Cum Laude

Allison Elizabeth Carroll
Magna Cum Laude

Devlin Dominic Carroll
Magna Cum Laude

William Timothy Carroll
Cum Laude

Jamison Guerin Cart
Magna Cum Laude

Nicholas S. Carter
Magna Cum Laude

Maxwell Caruso
Summa Cum Laude

Owen Patrick Cassell
Cum Laude

Layna Mary Catlett
Summa Cum Laude

Rachel Ellen Cavote
Cum Laude
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Haley Rachelle Celestino
Magna Cum Laude
with Honors in Business Administration

En Chan
Summa Cum Laude

Roshni Chandawarkar
Summa Cum Laude
with Honors in Integrated Business and Engineering

Shannon Chang
Summa Cum Laude

John Stewart Charvat
Cum Laude

Gaoze Chen
Magna Cum Laude

Gong Chen
Cum Laude

Han Heng Chen
Cum Laude

Muxi Chen
Summa Cum Laude

Yanfei Chen
Magna Cum Laude

Zhiyu Chen
Cum Laude

Ivy Cheng
Cum Laude

Abigail Rose Chester
Cum Laude

Gianna Nicole Chiariello
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Aniruddh Kanakasai Chittabathini
Magna Cum Laude
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Summa Cum Laude

Brianna Sophia Chmil
Summa Cum Laude

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Magna Cum Laude

Stephen Joo-Young Choi
Magna Cum Laude

Yihuan Chou
Magna Cum Laude

Benjamin Chozainhoff
Summa Cum Laude

Ruihong Chou
Summa Cum Laude

Matthew Thomas Chusa
Summa Cum Laude

Anthony Joseph Cienciosa
Summa Cum Laude

Jonathan Michael Ciccerro
Summa Cum Laude

Garrett Alexander Clark
Cum Laude

Jillian Olivia Clark
Summa Cum Laude

Raymond Earl Clark
Summa Cum Laude

Cade Amo Clerico
Summa Cum Laude

Owen Scott Cline
Summa Cum Laude

Reagan Alexander Clymer
Summa Cum Laude

Maria Eduarda Russell Coelho
Summa Cum Laude

Michael Allen Cogossi
Summa Cum Laude

Daniel Joseph Cohen
Cum Laude

Connor Anthony Coile
Summa Cum Laude

David Lloyd Coleman
Summa Cum Laude

Patience Bella Donna Collazo
Summa Cum Laude

Madison Theresa Colston
Magna Cum Laude

Carter John Colt
Summa Cum Laude

Brian Andrew Comisar
Summa Cum Laude

Nicholas Daniel Conde-Silva
Summa Cum Laude

Delaney Conley
Cum Laude

Andrew William Conwell
Summa Cum Laude

Jonah Nicklas Cook
Summa Cum Laude

Sean Patrick Cook
Summa Cum Laude

Austin Williams Cooper
Summa Cum Laude

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Jacob Reid Corbett
Summa Cum Laude

James Christopher Corona
Summa Cum Laude

David Carl Cosper
Summa Cum Laude

Donato Joseph Costanzi
Summa Cum Laude

Mya Rose Costello
Summa Cum Laude

Elizabeth Grace Cottrell
Summa Cum Laude

Noah Matthew Cottrell
Cum Laude

Carson Richard Craig
Summa Cum Laude

Jillian Marie Crane
Summa Cum Laude

Viola Crandendonk
Cum Laude

Ava Elizabeth Crasi
Summa Cum Laude

Sean Wesley Crider
Summa Cum Laude

Caleb Daniel Croyenbaker
Summa Cum Laude

Alexander Lee Crowe
Summa Cum Laude

Yingdan Cui
Magna Cum Laude

Casey Joseph Cunningham
Cum Laude
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Jonah Patrick Cunningham
Summa Cum Laude

Kari Cunningham
Summa Cum Laude

John Hunter Cuoco
Summa Cum Laude

Noah Jacob Curbelo
Cum Laude

Casey Francis Curran
Summa Cum Laude

Anna Catherine Currin
Magna Cum Laude

Megan Leigh Cusick
Magna Cum Laude

Elizabeth Ellen Czulno
Cum Laude

Abigail Kae Dackin
Magna Cum Laude

Angelea Rose Danes
Summa Cum Laude

Nithin Noel Daniel
Summa Cum Laude

Ethan Michael Dannemiller
Cum Laude

Annalise Louise Dapirle
Summa Cum Laude

Beckett Dardia
Summa Cum Laude

Tyler Cullen Darling
Summa Cum Laude

Kameron I. Darner
Cum Laude

Luke Jordan Dawson
Summa Cum Laude

Karolina De Jesus Pastrana
Summa Cum Laude

Anthony Cruz De Leon
Cum Laude

Giovanna Rose De Lillo
Summa Cum Laude

Lily Anne De Young
Summa Cum Laude

Brendan Luke DeFilippo
Magna Cum Laude
with Honors in Business Administration

Reese Andrew Delahanty
Magna Cum Laude

Mallory Rose Delaney
Cum Laude

Cory Alan Delewski
Summa Cum Laude

Andrew David DelGarbino
Summa Cum Laude

Anthony John DeMarco
Summa Cum Laude

Miles Daniel Demko
Summa Cum Laude

Ethan R. DeNaeyer
Cum Laude

Emily Rose DeNero
Magna Cum Laude

William Robert Denis III
Magna Cum Laude

Kaitlyn Jo Dennis
Summa Cum Laude

Lily Christine DeOliveira
Cum Laude

Joseph DePinto
Cum Laude

Matthew Ryan Dersovitz
Cum Laude

Neelay Desai <i>Magna Cum Laude</i>	Evelyn Rose Dyson <i>Summa Cum Laude</i>	Michael Edward Fluhr <i>Summa Cum Laude</i>	Margaret Jane Gardner <i>Cum Laude</i>	Charles Henry Goldman <i>Cum Laude</i>
Shreya Desai <i>Magna Cum Laude</i>	Joshua Ryan Easterday	Ariana Janae Fluker	Lisa JoAnne Garizio <i>Magna Cum Laude</i>	Morgan Taylor Goodrich <i>Magna Cum Laude</i>
Yash Sanjay Desai <i>Cum Laude</i> <i>with Honors in Business Administration</i>	Zachary Clark Edwards <i>Summa Cum Laude</i>	Michael Patrick Flynn, Jr. Nicholas Dunne Flynn Taji Khalil Flynn <i>Magna Cum Laude</i>	Michael David Garrett Victoria Lynn Garwick <i>Cum Laude</i>	Mallory Hayes Goodwin <i>Magna Cum Laude</i>
Joseph Dylan DeSalvo <i>Cum Laude</i>	Emma Eggemeier Jack Michael Eggleston Grant Michael Ekstrom Richard Carroll Elam Abby Leighton Ellis Brody Gavin Ellis Alexander Joseph Emerine Evan Harrison Engel Cali Novak Erb Elyse Marie Ertel <i>Magna Cum Laude</i>	Ashton Forsberg Isabella Christine Forsyth James Foster Kiera Lyn Foster <i>Magna Cum Laude</i>	Nicole Gaspin Brooke Alexandra Gates Gretchen Elizabeth Gates <i>Magna Cum Laude</i>	Ethan Joel Gordon Kathleen Gorney Alivia Marie Gorre <i>Cum Laude</i>
Madisyn DeTray <i>Cum Laude</i>	Jeslyn Brielle Eskander <i>Summa Cum Laude</i>	Jacob A. Fout Celia Laine Fowler <i>Cum Laude</i>	Victoria Jean Gaughan <i>Cum Laude</i>	Manuel Adhemar Goyonaga-Zambrana <i>Magna Cum Laude</i> <i>with Honors in Business Administration</i>
Zachary Bryan DeWick <i>Magna Cum Laude</i>	Benjamin William Esser <i>Summa Cum Laude</i>	Kaeden Fox <i>Magna Cum Laude</i>	Lauren Marie Gause <i>Summa Cum Laude</i>	Katie Lynn Graham Sean Christopher Graney Shelby Granger <i>Summa Cum Laude</i>
Hanyu Diao <i>Magna Cum Laude</i>	Lana Marie Estok <i>Summa Cum Laude</i>	Nya Sholeh Fozouni <i>Magna Cum Laude</i>	James Jon Gauthier <i>Cum Laude</i>	Hunter Clive Grannum Austin Xavier Gray <i>Summa Cum Laude</i>
Matthew DiCesare <i>Cum Laude</i>	Luke Reza Ettefagh Emily Rosko Ettin <i>Summa Cum Laude</i>	Andrew Benjamin Francis <i>Magna Cum Laude</i>	Benjamin Richard Gegorski <i>Cum Laude</i>	Cael Joseph Gray Kierstin Emily Gray Anthony Joseph Graziano <i>Cum Laude</i>
Bennett C. Dickerson Richard Alexander Dickson <i>Magna Cum Laude</i>	Zachary Ettrich Kalen Andrew Etzler Alexander Evans Anthony Joseph Evans Bryce William Evans Jade Daichi Ewing Victoria Lee Eytchison <i>Magna Cum Laude</i>	Justin Jay Frank Samuel Thomas Franzen <i>Magna Cum Laude</i>	Mia Elizabeth Genders Qifeng Geng <i>Magna Cum Laude</i>	Elliott Charles Green Juliana Marie Green Wallace Chen Green <i>Cum Laude</i>
Connor Diehl William Andrew Dieter Matthew Dikansky Ava Nicole DiMaio <i>Magna Cum Laude</i>	Kyle Steven Ezell Sabrina Lin Fadel Colin Michael Fahy <i>Cum Laude</i>	Alexandra O. Fredrick Tyler Scott Freedman <i>Magna Cum Laude</i>	Abigail Geniuz Jennifer Marie George Zachary Lawrence George <i>Magna Cum Laude</i>	Darah Ashley Greenbaum <i>Magna Cum Laude</i>
David Daniel Dimattia <i>Magna Cum Laude</i>	Kendell Marie Faircloth Jiachen Fan <i>Cum Laude</i>	Charles Theodore Freeman <i>Summa Cum Laude</i>	Anthony John Gerace Caroline Madison Gerberry <i>Summa Cum Laude</i>	Hayes Gardner Greenberg Nathan William Greenberg <i>Cum Laude</i> <i>with Honors in Finance</i>
Jonathan Nicholas Dimos Suvan Neel Dinesh Davin Luke Dissell <i>Cum Laude</i>	Yuanheng Fang <i>Cum Laude</i>	Jordan Daniel Frei <i>Cum Laude</i>	Mikayla Erichsen Gibbons Sean Michael Gibbons Mitchell Scott Giegel <i>Summa Cum Laude</i> <i>with Honors in Finance</i>	Gavin Douglas Greene <i>Magna Cum Laude</i>
Alexander Thomas Ditchen Jorge Dix Abigail Christine DiYanni Thuy Thi Do Justin Truong Doan Ian Charles Donehoo Yuboyi Dong <i>Magna Cum Laude</i>	Yuheng Fang Jacob Farber Makayla Christina Farrell Phillip Graydon Farrell <i>Cum Laude</i>	Max D. Freifeld Benjamin Isaac Frey <i>Magna Cum Laude</i>	Carmen Grace Giess Gabriel Anthony Gilene <i>Magna Cum Laude</i>	Trent Patrick Greene Jared Justin Grieser <i>Cum Laude</i>
Elise Merrin Doty <i>Magna Cum Laude</i>	Jordan Alec Farron <i>Summa Cum Laude</i>	Max Jacob Friedman <i>Cum Laude</i>	Kate Leigh Gilfillan <i>Summa Cum Laude</i> <i>with Honors in Accounting</i>	Kristian Marko Grman Elizabeth Laura Groce <i>Magna Cum Laude</i>
Derek Dougherty Paige Nicole Dougherty Logan Alexander Downey <i>Cum Laude</i>	Isabella Devi Faudar Emma Catherine Feaster <i>Cum Laude</i>	Noah Michael Friedman <i>Magna Cum Laude</i>	Hannah Catherine Gilfoil Allison Marie Gilkey <i>Summa Cum Laude</i>	Eva Elizabeth Grohe Kyle Robert Grolle Tyler David Groomes <i>Cum Laude</i>
Matthew Richard Downing <i>Summa Cum Laude</i>	Joseph Alan Feinberg <i>Cum Laude</i>	Olivia Helen Fris <i>Magna Cum Laude</i> <i>with Honors in Business Administration</i>	Lauren Elizabeth Gillespie <i>Magna Cum Laude</i>	Matthew Michael Grossman <i>Summa Cum Laude</i> <i>with Honors in Accounting</i>
Sarah Marie Doyle <i>Magna Cum Laude</i>	Matthew Joseph Felenstein Caden Thomas Feller <i>Summa Cum Laude</i>	Daniel Vincent Frintdt Emily Mae Fritsch Noah Frix Lauren Elizabeth Fromhold Taylor Lynn Fry Nicholas Fuchs Ella Grace Fuller <i>Cum Laude</i>	Katherine Ann Gillette <i>Magna Cum Laude</i>	Maxwell Wagner Grube Xunting Gu Jian Guan Jack Benjamin Guenther Julio Manuel Guerra Christopher Michael Guest <i>Cum Laude</i>
Lauren Elizabeth Dresh Joshua Terrence Dudek <i>Magna Cum Laude</i>	Giuseppe Pasquale Ferrato <i>Cum Laude</i>	Ella Grace Fuller <i>Cum Laude</i>	Isabella Marie Gillingham Adam Robert Gilmore <i>Summa Cum Laude</i>	Saray Guevara <i>Cum Laude</i>
Jordyn Elizabeth Dumpit <i>Magna Cum Laude</i>	Ashley Isabel Feucht <i>Magna Cum Laude</i>	Michael Grant Fulmer <i>Cum Laude</i>	Brian Ginley Gracie Rae Gitzinger <i>Magna Cum Laude</i>	Michael John Gumino Isaiah Tintotenda Gundani <i>Cum Laude</i>
Alexander Michael Duncan Kyle Martin Neeley Duncan <i>Summa Cum Laude</i>	Servaes Hofmeyr Fick Reid Douglas Fidler <i>Summa Cum Laude</i>	Donald Ira Furniss <i>Cum Laude</i>	Christina Grace Giunco <i>Summa Cum Laude</i>	Chuanrong Guo Rohan Gupta Serina K Gurm <i>Magna Cum Laude</i>
John David Dunstan <i>Magna Cum Laude</i>	Jack William Fine William Finley <i>Magna Cum Laude</i>	Hannah Noa Futterman Megan Elizabeth Gafford <i>Cum Laude</i>	Kyle Gladem William Merriman Gasper <i>Cum Laude</i>	Hannah Marie Gustely <i>Cum Laude</i>
Rohan Duraipandian Ty David Durant Grace Lottie Durdle Nazrawi Getu Duressa Nicoleta Durlusteanu Sarath Chandra Durvasula Aya Dushnitsky <i>Magna Cum Laude</i> <i>with Honors in Business Administration</i>	Natalie Lynn Fisher Alyssa Joelle Fishkin Chloe Flack <i>Magna Cum Laude</i>	Karan Gaglani <i>Cum Laude</i> <i>with Honors in Business Administration</i>	Leila Fajine Glass Sam A. Glassman Rachel Elizabeth Glinsky Joseph William Glynn Marissa Renee Gobby <i>Summa Cum Laude</i>	Kyle Franklin Gutridge <i>Magna Cum Laude</i> <i>with Honors in Accounting</i>
Ethan Maccully Dwyer Grace Lynn Dyer <i>Cum Laude</i>	Lilian Maye Fleshour <i>Magna Cum Laude</i>	Kira Marie Gambila <i>Magna Cum Laude</i> <i>with Honors in Business Administration</i>	Ryan Joseph Goda Abigail Joy Goecke <i>Summa Cum Laude</i>	Brandon Cole Guttenberg Molly Paige Haas
		Grace Kimberly Gao Weijia Gao <i>Magna Cum Laude</i>	Terrence Timothy Goings <i>Cum Laude</i>	
		Abby Reese Garbut Matthew Regil Garcia	Ashley Nicole Goldberg <i>Summa Cum Laude</i> <i>with Honors in Business Administration</i>	

Omar Firas Habbal
Magna Cum Laude

Kylie Alise Hack
Summa Cum Laude

Lana Maria Haddad
Summa Cum Laude

Chloe Grace Haddon
Cum Laude

Kathleen Pascual Hagar
Cum Laude

Wyatt Case Hagedorn
Cum Laude

Tyler Ronald Hagy
Cum Laude

Zoe Tradae Halthcock
Safiy Aden Haji

Emma Catherine Hall
Evan D. Hall

Benjamin Daniel Hallis
Magna Cum Laude

Sarah Genevieve Halstead
Asher Max Hamilton
Cum Laude

Kendall Jamaal Hamilton
Cum Laude

Madison Marie Hammond
Magna Cum Laude

Haoxuan Han
Magna Cum Laude

Gabriel Lee Hardeman
Andrew Jacob Hardy
Cum Laude

Tatum Harner
Cum Laude

Noah Jacob Harriman
Cum Laude

Hudson James Harris
Erica Ann Harrison
Summa Cum Laude

Margaret O'Neil Harsh
Scott Emerson Hartline
Alexandra Claire Hartman
Magna Cum Laude

Anelise Marie Harvey
Cum Laude

Luke Leavitt Harvey
Colin Michael Hatfield
Magna Cum Laude

Emily Rae Hattey
Magna Cum Laude

Madison Leigh Hauser
Magna Cum Laude

Drew William Haver
Magna Cum Laude
with Honors in Accounting

Claire Marie Haverkamp
Anna Martha Hawkins
Magna Cum Laude

Benjamin Yang He
Summa Cum Laude

Qianwen He
Cum Laude

Mason Louis Hearty
Cum Laude

Grayson Lawrence Heath
Cum Laude

Connor Anderson Heekin
Brian Patrick Heffernan
Bridget Mary Heinhold
Magna Cum Laude

Eric Andre Heinzelmann
Magna Cum Laude

Majada Khaled Hejazin
Kaithyn Elisa Helal
Summa Cum Laude

Cade Alexander Helms
Cum Laude

Jesse Sean Henderson
Joseph Robert Hendrix
Magna Cum Laude

Paul Jacob Hensley
Kyle Andrew Heppler
Magna Cum Laude

Lanie Elizabeth Herl
Ryan Daniel Hernandez
Magna Cum Laude

Monseratt Hernandez Gonzalez
Lizaura Hernandez-Feliciano
Yoel Oswaldo Herrera
Olivia Camaris Herrington
Cum Laude

Genevieve Abigail Hertz
Olivia Christine Heus
Mason Anthony Hewko
Cum Laude

Grant David Hiatt
Kristin Campbell Hickey
Magna Cum Laude
with Honors in Business Administration

Zachary James Hickman
Sophia Casey Higgins
Laynee Hill
Jonathan Jakobi Hilliard
Cum Laude

Krishiv Hinduja
Cum Laude

Brian James Hitchcock
Cole Robert Hoekstra
Summa Cum Laude

Jacob M. Hofer
Katelyn Olivia Hoffman
Cum Laude

Lauren Sydney Hoffman
Cum Laude

Matthew Paul Hoke
Alexander John Holder
Tarun Holla
Magna Cum Laude

William Dietrich Holland
Timothy Paul Hollander
Carli Holscher
Jacob Eli Holtzman
James Andrew Homady
Magna Cum Laude

Braden August Homan
Yuan Hong
Magna Cum Laude
with Honors in Business Administration

Jade Alexa Hood
Magna Cum Laude

Joseph Michael Hoppenjans
Summa Cum Laude

Eva Kristine Horgan
Cum Laude

Nathan Edward Horn
Zachary Joel Horner
Cum Laude

Lydia Ruth-Ann Horstman
Andrew Wanamaker Hosbach
Summa Cum Laude

Emma Grace Hostetler
Emma Cecille Hovis
Cum Laude

Devin Jacob Howard
Summa Cum Laude

Samuel Lewis Howard
Lauren Elise Howell
Summa Cum Laude

Erin Yulun Huang
Summa Cum Laude

Qiliang Huang
Devin Alexander Thomas Huber
Jacob Klay Huddleston
Cum Laude

Wesley Holden Hudzik
Morgan Elizabeth Hughes
Magna Cum Laude
with Honors in Business Administration

Matthew Humphreys
Cum Laude

Catherine Anne Hunt
Summa Cum Laude

Elizabeth Catherine Hunt
Nathan Robert Hunter
Cum Laude

Jackson Scott Huntsman
Ningning Huo
Summa Cum Laude

Yanru Huo
Summa Cum Laude
with Honors in Business Administration

Aneesa F. Huq
Cum Laude

Alex Hurst
Ismahan Hussein
Andrew Lewis Hutchinson
Summa Cum Laude

Autumn Grace Hutchison
Sydney Laurelle Hyde
Parker Thomas Iacoboni-Renick
Cum Laude

Caroline Lisette Ide
Cum Laude

Nicolas Paul Ifju
Patricio Illuminati-Quintanilla
Luke James Imes
Summa Cum Laude

Matthew Irwin
Magna Cum Laude

Hamza Sameer Islam
Kymjana Queen Ismaila
Nikolai Patton Itonienskis
Isabella Anna Izquierdo
Garrett Jackler
Magna Cum Laude

Dylen Jacob
Magna Cum Laude
with Honors in Business Administration

Manav Jain
Muna Abdiraahim Jama
Mohammad Shahmir Jamal
Anna Hope Jannot
Cum Laude

Samantha Jay
Cum Laude

Karlee Elizabeth Jenkins
Magna Cum Laude

Quinton Foster Jenkins
William David Jenkins III
Cum Laude

Ameedah Omotoyosi Jenmi
Magna Cum Laude
with Honors in Business Administration

Carter Scott Jensen
Summa Cum Laude

Yash V. Jhalani
Kaiyan Ji
Zehao Ji
Magna Cum Laude

Chengzhi Jiang
Qingke Jiang

Ruicheng Jiang
Yujun Jing
Matthew Johnson
Cum Laude

Rachael Mei Johnson
Ryan William Johnson
Magna Cum Laude

Ethan Robert Jones
Cum Laude

Richard Alexander Jones
Cum Laude

Isabella Grace Jonke
Kurtavya Jignesh Joshi
Cum Laude
with Honors in Finance

Michael Juback
Magna Cum Laude

Bridget Delaney Judge
Summa Cum Laude

Megan Judy
Summa Cum Laude

Nathan William Jung
Byron Allen Justice
Ava Catherine Kachure
Caitlin Nicole Kachurik
Paige Henson Kadar
Summa Cum Laude

Anna eve Kadro
Molly Elizabeth Kaes
Chloe Elise Kagel
Nicholas Richard Kalady
Summa Cum Laude

Nataliya Kallergis
Julia Brittany Kandel
Louis Henry Kanter
Cum Laude

Molly Elizabeth Kappes
Magna Cum Laude

Kylie Jo Kapraun
Michaela Karon
Richard Jakob Karp
Braedon Michael Kaskey
Cum Laude

John Edward Kauffman
Thomas Serkan Kaya
Kevin Donald Keber
Ryan Charles Keefer
Cum Laude

Chloe Marie Keim
Cum Laude

Derek William Keiser
William Michael Kellenberger
Magna Cum Laude
with Honors in Accounting

Brooke Alayna Keller
Brayden Michael Kellner
Aidan James Kelly
Cum Laude

Mackensy Ann Kempton
Magna Cum Laude

Matthew Patrick Kennedy
Nathan Anthony Kerchenski
Jack Anthony Kerr
Magna Cum Laude

Clayton James Kessler
Magna Cum Laude

Hajar Kettani
Jonathan Maxwell Khatib
Cum Laude

Nikita Yakovlevich Khaykin
Summa Cum Laude
with Honors in Finance

Sophia Khorshidi

Caden Jeremiah Kilmartin
Summa Cum Laude

Hwanhui Kim
Cum Laude

Amani Elizabeth Kimball-
McKavish
Magna Cum Laude

Benjamin Kimelman
Joseph Patrick Kirby
Cum Laude

Claire Elizabeth Kirk
Cum Laude

Giovanna Rose Kistner
Magna Cum Laude

Jaclyn Rose Klayman
Cum Laude

Leo Samuel Kleban
Magna Cum Laude

Igor Klimtsov
Nicholas Charles Kline
Cum Laude

Ian Patrick Kling
Summa Cum Laude
with Honors in Accounting

Jack Henry Klingler
Magna Cum Laude

Jenna Nicole Knapp
Benjamin Abraham Knee
Spencer Knight
Lazar Knoll
Magna Cum Laude

Remy Sydney Knopping
Cassandra Marie Kobel
Magna Cum Laude

Kinsley Morgan Koch
Sri Tejas Kodi
Maxwell Anthony Koehne
Magna Cum Laude

Kendal McCall Kolba
Magna Cum Laude

Haritha Kollipara
Magna Cum Laude

Rohit Anand Kolluri
Summa Cum Laude

Vir Vivek Kolpe
Cum Laude
with Honors in Business Administration

Srikrishna Kondaveeti
Cum Laude

Mitchell Gunther Kopack
Jared Michael Koren
Magna Cum Laude

Steven Benjamin Korn
Brooke Angela Kortokrax
Cum Laude

Grace Elizabeth Kosior
Cum Laude

Carson Brad Kostka
Alita Kathleen Kovac
Cum Laude
with Honors in Accounting

Mackenzie Mae Kowalski
Anne Caroline Kozemski
Marta Agneta Kozy
Padric Carlson Krai
Simone Allyn Kramer
Magna Cum Laude

Gilad Chanan Krasner-Cohen
Cum Laude
with Honors in Finance

Kyle Bradley Krauss	Amiyah Lee	Ruijing Lin	Larsen Mart Maasikas	John Matis
Jovian Frederik Krey-Patel	Deborah Huey-Chu Lee	Cum Laude	Cum Laude	Louis Frank Matousek
Cum Laude	Magna Cum Laude			Summa Cum Laude
Aidan Krick	Jehlin N. Lee	Yao Lin	Yashwant Reddy Machapalli	Peter Michael Mattimore III
Ian Raymond Krider	Cum Laude	Trent Joseph Lindeman	Cum Laude	Cum Laude
Lydia Frances Krier	Kassidy Marie Lee	Cum Laude	Brooke Lauren Macina	with Honors in Finance
Magna Cum Laude	Summa Cum Laude	Max Warren Little	Mason Mack	Nathan Allan Mauk
Nicole Hwei Li Kuan	Sophie Lane Lee	Magna Cum Laude	Thomas Warren MacKinnon	Rachel Jordan Max
Summa Cum Laude	Tristan Wenjie Lee	with Honors in Business Administration	Cum Laude	Cum Laude
Joseph Richard Kubic	Wesley Lee	Amanda Liu	William Robert Madden	Lolah Rayn Maxey
Cum Laude	Lindsey Paige Lefkovitz	Magna Cum Laude	Cum Laude	Carter John McAber
Courtney Kaye Kubicki	Cum Laude	Feng Liu	Lucy Rose Maddrill	Magna Cum Laude
Cum Laude	Amie Lauren Lehman	Cum Laude	Magna Cum Laude	Evan Paul McAllister
Kay Emmanuela Kuhon	Cum Laude	Jeffrey Zhiqi Liu	Nicholas Anthony Madorno	McKenna Elizabeth McBride
Lindsay Morgan Kurak	Tara Ann Lehman	Summa Cum Laude	Nancy Elizabeth Maguire	Paige Kathleen McCabe
Rachel Sarah Kurkela	Samantha Leicht	with Honors in Integrated Business and Engineering	Aarav Mahajan	Summa Cum Laude
Cum Laude	Annaleza Marie Leichtnam		Cum Laude	with Honors in Business Administration
Nathaniel Sho Kurokawa	Jackson Gray Leininger	Yingzi Liu	Adam Mitchell Maibach	Eimear McCann
Summa Cum Laude	Cum Laude	Shane Lively	Mehul Manish Malik	Magna Cum Laude
with Honors in Accounting	with Honors in Business Administration	Magna Cum Laude	Magna Cum Laude	Tyler Daniel McCarthy
Isabella Emine Sasakura Kuru	Aidan Brian Lemity	Austin Lo	Aanya Mallick	Cum Laude
Adam Phillip Kwan	Kyle Lenhart	Cum Laude	Graham Fleet Mallory	Evan Richard McClain
Cum Laude	Cum Laude	with Honors in Finance	Magna Cum Laude	Mitchell Walker McClain
Halle Nichole Labishak	Griffin Lenke	Amruta Kirankumar Lokhande	Hannah Malmad	William James McClear
Cum Laude	Kyle Mark Levick	Magna Cum Laude	Cum Laude	Summa Cum Laude
Kara Lacey	Magna Cum Laude	Lauren Ashley Lombardo	Jake Robert Mamula	with Honors in Business Administration
Allison Rose Lachman	Alec David Levine	Summa Cum Laude	Laine Elizabeth Mandry	Keely Alannah McClure
Cum Laude	Jack David Levine	John Philip Long	Cum Laude	Magna Cum Laude
Anna Grace Lagergren	Cum Laude	Zhengyu Long	Joseph Victor Manfre	Jenna Nicole McConnell
Cum Laude	Madeline Julianna Levine	Magna Cum Laude	Declan Patrick Mangan	Magna Cum Laude
Luke Fox Laite	Sydney Faith Levine	Mario Michael Longo	Kaelan Rachael Manley	Emily Beth McCormick
Magna Cum Laude	Alex John Levy	James M. Lordi	Brandt Cullen Manns	Cum Laude
Nicholas Christian Lake	Magna Cum Laude	Alessia M. Loreti	Gracie Kaye Manns	Dalton C. McCuen
Matthew Richard Lalkowski	with Honors in Integrated Business and Engineering	Scott Lou	Dean Alexander Manos	Jonathan Richard McCullah
Daniela Marie Lamardo	Cum Laude	Tyler James Louth	Magna Cum Laude	Magna Cum Laude
Canon Thomas Lamberson	Cum Laude	Cum Laude	Michael Jake Marchese	Matthew James McCullough
Cum Laude	Claire Alexandra Lewis	Jonathan Robert Love	Cum Laude	Cum Laude
Jack Dylan Lambert	Summa Cum Laude	Summa Cum Laude	Hannah Rochelle Marcum	Cole Patrick McDermott
Cum Laude	Owen James Lewis	Korey Elizabeth Love	Alessandro Isidoro Marini	Kailynn Marie McAnnotette
Barry Bojian Lan	Savannah Lewis	Ian Lowe	Summa Cum Laude	McDonald
Leijing Lan	Cum Laude	Kobe Allen Lower	Alexander Marinier	Cum Laude
Magna Cum Laude	Caroline Rose Leyden	Lucy Lu	Cum Laude	Matthew Alexander McDonald
Rachel Brooke Lander	Jenna Yong Li	Magna Cum Laude	Jack Harding Marino	Cum Laude
Cum Laude	Na Li	with Honors in Finance	Josh David Marino	Catherine McDonough
Martin Elliot Lane	Magna Cum Laude	Shunshun Lu	with Honors in Integrated Business and Engineering	Cum Laude
Cum Laude	with Honors in Business Administration	Michael Isaac Lucas	Lucas Charles Mark	Mary Katherine McElwain
Ryan Christopher Lane	Na Li	Joseph Daniel Luckhaupt	Magna Cum Laude	Summa Cum Laude
Gregory Caesar Langermeier	Magna Cum Laude	Cum Laude	Joseph Charles Markovitz	Kelly Anne McGraw
Magna Cum Laude	Qingyang Li	Patrick Boyd Luckhaupt	Cum Laude	with Honors in Finance
Jamie Rose Lanuka	Magna Cum Laude	Zoe Lynn Ludington	Matthew John Markram	Liam Michael McGreevey
Cum Laude	Tianchen Li	Nathaniel Allen Luhring	Michael Nicholas Maropakis	Magna Cum Laude
Logan Larivee	Cum Laude	Carter Julian Luikart	Cum Laude	Jeremy Alon McIntire
Cum Laude	Sabrina Lian	Esmeralda Lujan	Lauren E. Marotte	Madison Nicole McKeough
John Kyungju Larkin	Che-Pin Steven Liao	Ching Man Luk	Cai Edward Marquez	Cum Laude
Dominic James Larson	Magna Cum Laude	Brian Enrico Lum	Cum Laude	Katherine Leigh McLaughlin
Cum Laude	Angelina Grace Laurino	with Honors in Business Administration	Mary Catherine Marron	Nathaniel Royal McMillian
Linnea Rose Larson	Magna Cum Laude	Alex Junbin Luo	Daniel Evan Marsh	Colleen Michaela McNamara
Max Benjamin Lasky	Jolie Fredrique Lieberman	Cum Laude	Cum Laude	Summa Cum Laude
Magna Cum Laude	Summa Cum Laude	Fan Luo	Jordyn Alexis Marsh	Matthew Daniel McPhee
Angelina Grace Laurino	Nicolette Liesen	Jason Glenn Lyday	Cum Laude	Cum Laude
Magna Cum Laude	Cum Laude	Anna Elise Lyday	Taylor Michele Marston	Trinity Lynn Meadows
with Honors in Business Administration	with Honors in Finance	Magna Cum Laude	Carmela Sun Martinez	Luke Daniel Mechley
Sean David Laverty	Jiaqi Lin	Jordan V. Marquis Lyles	Cum Laude	Allison Suzette Medina
Ava Rosemary Lawley	Cum Laude	Amanda Lyon	Emma Rosa Martuccio	Fernando L. Medina González
Cum Laude	Remsen Lin	Cum Laude	Immanuel Marzetta	Cum Laude
Lilly Nicole Lawson	Rita Lin	Heming Ma	Michael Gavin Matejka	Nicholas Kane Medley
Bryce Carl Layman	Magna Cum Laude	Cum Laude	Cum Laude	
Cum Laude		Ruiyi Ma		
Benjamin David Lazbin				
Cum Laude				
Gregory Joseph Lazzaro				
Zachary Adam Lechman				
Cum Laude				
Alina Lee				
Magna Cum Laude				

Patrick Joseph Medvin
Magna Cum Laude
 Maxwell Benton Megowen
 Manit Vivek Mehta
Summa Cum Laude
with Honors in Integrated Business and Engineering
 Lilian Shae Meienburg
Cum Laude
 Saiparin Mekapati
 Dawite Melesse
 Olivia Brooke Melhado
 Madison Storm Mellott
 Jake Mendelson
 Zhiheng Meng
 Sheeva Menon
Cum Laude
 Matthew William Mercer
 Michael Jonathan Mercure
Cum Laude
 Joseph Patrick Mercurio
Magna Cum Laude
with Honors in Accounting
 Reed Jonathon Merricle
 Jack Thomas Metz
Cum Laude
 Juliana Nicole Metz
Cum Laude
 Diana Rosalia Metzler
Magna Cum Laude
 Natalie Meyer
Cum Laude
 Robert Sullivan Meyer
 Katerina Mihalios
Cum Laude
 Samuel Holden Mikolich
 Nicholas John Mileham
Magna Cum Laude
 Calvin Daniel Miles
 Abigail James Miller
 Alicia Loren Miller
Cum Laude
 Bennett James Miller
Magna Cum Laude
 Deanna N. Miller
Magna Cum Laude
 Lauren Anne Miller
 Paige Madison Miller
Cum Laude
 Ryan Emerson Miller
 Savannah Mary Miller
 Zachary Grandis Miller
Summa Cum Laude
 Morgan Ryan Million
Magna Cum Laude
 Kenneth Patrick Mills
 Angela Min
Cum Laude
 Lalit Mishra
 Mario Vincent Misiiti
 Jacob Isaiah Mitchell
 William Joop Mitchell
Cum Laude
 Zion Mitchell
Cum Laude
 Michael Mitchko
 Iiana Madison Mitrey
Cum Laude
 Maci Ann Mitrey
Summa Cum Laude
 Mohamed Ismail Moallin
 Rebecca Annemarie Moen
 Abdikarim Mohamud

Nathan Molloy
Magna Cum Laude
 Therese Maria Molyneux
 Jack Christopher Montalto
 Ava Catherine Monteferrante
Cum Laude
 Luke James Monteleone
Magna Cum Laude
with Honors in Business Administration
 Maeve Mooney
Cum Laude
 Catherine Grace Moore
Magna Cum Laude
 Ethan Freemal Moore
Magna Cum Laude
 Konner Anderson Moore
 Sean Byron Moore
 Timothy James Moore
 Aaron Thomas Moraine
 Abigail Elizabeth Moran
Cum Laude
 Daniel Mordoch
 Katherine Gates Morena
 Alexander Matthew Morlock
Cum Laude
 Jessica Catherine Morris
Magna Cum Laude
 Nicole Megan Moscirella
Magna Cum Laude
with Honors in Business Administration
 Lin Mou
 Erika Taylor Mowery
Magna Cum Laude
with Honors in Business Administration
 Alina Mueez
Cum Laude
 Abby Lynn Muglia
Magna Cum Laude
with Honors in Business Administration
 Sophia Ayse Muhleman
Cum Laude
 Kalyn Nicole Mullens
 Brynn Marie Mulligan
Magna Cum Laude
with Honors in Business Administration
 Brendan Munda
 Alejandro Murakami
 Owen Lott Murphy
 Margaret Whaley Murray
Cum Laude
 Evan Muse
Cum Laude
 Jonathan Todd Musial
 Drew Patrick Mussman
 Sajal Emily Mutter
Magna Cum Laude
with Honors in Finance
 Austin Harvey Muttillio
 Alexander Paul Myers
Cum Laude
 Diana Mytrofanova
Cum Laude
 Aubree Marilyn Nagel
Magna Cum Laude
 Ashish Aravind Narayan
Magna Cum Laude
 Cole Joseph Nascone
Magna Cum Laude
 Zachariah Hosny Nassar
 Alexa Maria Nastoff
 Anushka Rahman Nath
Summa Cum Laude
with Honors in Business Administration
 Grace Catherine Nawrocki
 Jack Thomas Neiland

Andrew Thomas Neimeier
 Nickolas Maximilian Nelson
 Prinsha Neupane
 Daniel Neverov
Magna Cum Laude
 Charlie Adam Newman
 Nox Newman
 Jessica Chi Nguyen
Summa Cum Laude
 Tobemius Ashton Nguyen
 Daniel Ryan Nicholas
Cum Laude
 Corbin Joe Nichols
 Corbin Victor Nickoloff
 Emma Grace Nicola
 Yongxin Nie
Cum Laude
with Honors in Accounting
 Luke James Niederst
 Benjamin C. Niedzielski
 Whitney Tendonglor Nkweteyim
Magna Cum Laude
with Honors in Business Administration
 Hannah Clistie Nordin
Magna Cum Laude
 Taylor Patrick Norton
 Patrick John Notter
 Meghan Michelle Novak
 Thor Jack Novicelli
Magna Cum Laude
with Honors in Accounting
 Daniel Eduardo Novoa
 Mason Oliver James Nowlin
Cum Laude
 Lucy Beth Nusekabel
 John Patrick O'Brien
Cum Laude
 Killian Patrick O'Callahan
 Jack Michael O'Connor
 John Thomas O'Donnell
 Ava Josephine O'Hea
 Katherine Frances O'Rourke
Magna Cum Laude
 Gillian Tyler Oakes
Cum Laude
 John Obeto III
 John Michael Odle
Magna Cum Laude
 Simon Ofstein
Cum Laude
 Kevin Thomas Olah
 Grace Ann Oleksyk
Cum Laude
with Honors in Accounting
 Isabelle Michael Oliveri
 James Olson
 William Ryan Olson
 Pierce Douglas Ormond
Magna Cum Laude
 Lily Elaine Osborn
 Sean Robert Osborn
Magna Cum Laude
with Honors in Business Administration
with Honors Research Distinction in Human Resources
 Allison Rose Osborne
Cum Laude
 Nicholas Ronald Osiecki
Cum Laude
 Najma Hashim Osman
 Ethan Jacob Ostroff
Cum Laude
 Jack Theodore Owen

Sean Patrick Owen
Summa Cum Laude
 Kaseim Mytese Pace Morris
 Vishal Reddy Pagadala
Cum Laude
 Steven Thomas Pagonis
Cum Laude
 Kendall Mae Palatine
Magna Cum Laude
 Celia Marie Palmiere
 Annie Pan
 Om P. Pandya
 Elizabeth Ann Papania
 Chloe Rose Parker
 Daniel Thomas Parkison
Magna Cum Laude
 Jake Anthony Parrish
Magna Cum Laude
 Timothy Kamden Shane Partin II
Magna Cum Laude
 Julia Lillian Paslawski
Cum Laude
 Arpita Patel
Magna Cum Laude
with Honors in Integrated Business and Engineering
 Brinda Sanjay Patel
Cum Laude
 Kirtankumar Ruchirbhai Patel
 Neil Shailesh Patel
Magna Cum Laude
 Rhea Neeraj Patel
Cum Laude
 Shiv Patel
 Shivansh Mitun Patel
Cum Laude
 Matthew Benjamin Paul
Magna Cum Laude
 Paleologos Pavlidis
Cum Laude
 Adam Richard Pavliga
 Madeline Michaelle Pearson
Cum Laude
 Michael Francesco Pegoraro
 Evan Fox Pennington
 Daniel Pennybaker
 James Patrick Karberg Pentecost
 Anna Alexandrovna Peredrey
Summa Cum Laude
 Arad Peregoudov
Summa Cum Laude
with Honors in Integrated Business and Engineering
 Benjamin David Perelka
 Eleonore Camille Marine Perrier
Cum Laude
 Cole Meyer Petch
Magna Cum Laude
 John Patrick Peter
Cum Laude
 Laura Marie Peterson
 Cayden Thomas Pfundstein
 Madelyn Maurin Phillips
Cum Laude
 Charles Phillips
Summa Cum Laude
 Christian Allen Phillips
 Gabriele Claire Phillips
 Nicholas George Phillips
Cum Laude

Robert Michael Phillips
Magna Cum Laude
 Madison Danielle Phillis
 John Anthony Piehowicz III
Cum Laude
with Honors in Business Administration
 Audrey Lane Piero
Magna Cum Laude
 Jared David Pine
 Andrew David Pini
 Michael Joseph Pirrello
Magna Cum Laude
with Honors in Business Administration
 Caleb James Pitcock
Magna Cum Laude
 Aidan Flannery Pizzo
 Nell Cahill Plunkett
Magna Cum Laude
 Hailey Marie Pogorelec
 Lily Grace Poletto
Cum Laude
 Asher Polster
Cum Laude
 Tanushri Rao Ponneri Anand
 Claire B. Pophal
 Maria Isabel Porras
 Rachel Leigh Porter
Magna Cum Laude
 Sraavya Sai Potluri
Magna Cum Laude
with Honors in Integrated Business and Engineering
 Alec Jacob Powers
 Prateeksha Prabhakar
Cum Laude
 Gillian Carroll Prince
Magna Cum Laude
 Jayden Diana Prince
 Caroline Grace Printy
 Kevin Allen Prior
 Taylor McLean Proft
Summa Cum Laude
 Matthew Isaac Puckhaber
 Sophia R. Purdon
Cum Laude
 Camden Puscheck
 Nicholas Patrick Putz
Summa Cum Laude
 Austin Quinn Pyle
 Jerry Shanshu Qian
Magna Cum Laude
with Honors in Finance
 Yuehan Qian
Cum Laude
 Paul T. Queenan
 Arjaag Raghu
Cum Laude
 Michael Vincen Ragio
Cum Laude
 Juhi Rai
Summa Cum Laude
 Jordan Neil Raines
Magna Cum Laude
 Rishi Rathana Rajesh
Magna Cum Laude
 Lukas Gabriel Rakowsky
 Youssef Majdi Ramahi
 Cristina Isabel Ramos Rogers
 Megan Marie Rausch
Cum Laude
 Alec John Ray
 Michael Paul Raymer
 Sydney Jean Reau

June 4 - August 20, 2025, Board of Trustees Meetings

Joshua Patrick Rechner
Magna Cum Laude

Katelyn Marie Recker
Magna Cum Laude

Rhea Charukupally Reddy
Magna Cum Laude

Jaden Robert Reed
Magna Cum Laude

Matthew James Reed
Zachary Zeno Regas
Cum Laude

Jason Edward Reik
Megan Emily Reinke
Carson Courtney Reinwald
Magna Cum Laude

Jason Norman Reiter
Magna Cum Laude

Stephanie Reith
Erica Ren
Summa Cum Laude

Hanzhi Ren
Meghan Rebekah DaBin
Resweber
Magna Cum Laude

Anthony Lazaros Retzios
Brennan Jacob Reutter
Carson Alexander Rewiski
Julia Grace Reyes
Magna Cum Laude

Carson Avery Rhodes
Magna Cum Laude
with Honors in Accounting

Samuel Xavier Riccobono
Molly Elisabeth Rice
Magna Cum Laude
with Honors in Accounting

Sophia Rice
Zoe Elisabeth Rice
Cum Laude

Jacob Tyler Richards
Cum Laude

Abigail Mae Richardson
Magna Cum Laude

Donnie Lee Richardson
Cum Laude

Mark Richardson
Braden Joseph Riehl
Cum Laude

Goetz Rieker
Jason Avery Riemer
Yasmine Rifai
Faith Autumn Rife
Dean Conte Rigby
Calista Joyce Ring
Cum Laude

Tyler James Ringwald
Lauren Elizabeth Rish
Cum Laude

Emily Elizabeth Ritenour
Cum Laude

Jackson Valentine Rittman
Brock Curtis Ritzhaupt
John Michael Rivera
Cum Laude

Michael Patrick Roach
Magna Cum Laude

Mark Andrew Roarty
Michael Robertson
Rachael Ami Robinson
Summa Cum Laude

Whitney Suzanne Robinson
Magna Cum Laude

Zachary A. Rockfield
Cum Laude

Kaitlyn Marie Rockich
Tyler Rising Rockwood
Magna Cum Laude

Erin Jin Ling Rodgers
Magna Cum Laude
with Honors in Business Administration

Eric Rodriguez
Magna Cum Laude
with Honors in Business Administration

Audrey Roe
Cum Laude

Samuel Michael Rogers
Alexandra Sunny Rohloff
Magna Cum Laude
with Honors in Accounting

Samuel Richard Roll
Cum Laude

Jacob Alan Romero
Kyle L. Romero
Rowan Thomas Root
Magna Cum Laude

Jacob Max Rose
Summa Cum Laude
with Honors in Integrated Business and Engineering

Emily Nicole Rosebrook
Madeline Paige Rosenberg
Summa Cum Laude

Nikki Rosenblatt
Kennedy Reece Roshong
Max Thomas Rosinski
Cum Laude

Riley Rae Ross
Jake William Rossiello
Angela Rosu
Andrew Rozenshtaukh
Elana Michal Rubanenko
Magna Cum Laude
with Honors in Business Administration

Jonathan Max Rubin
Cum Laude

Maxwell Joshua Rubin
Cum Laude

Elizabeth Ann Rubino
Cum Laude

Henry Zorn Ruckel
Magna Cum Laude

Anthony Lucchesi Rudden
Cum Laude

Jack Patrick Ruffolo
Cum Laude

Colten D. Rujawitz
Magna Cum Laude
with Honors in Finance

Charles Todd Rumizen
Cum Laude

Nicholas Ray Runyon
Colin Thomas Russell
Summa Cum Laude

Nicholas Andrew Ruszala
Nicholas Bernard Ryan
Magna Cum Laude

Max Vincent Sahagian
Dylan Saini
Magna Cum Laude

Tamer Salama
Cum Laude

Luis Javier Salas
Summa Cum Laude

Jordan Andrew Saltzman
Magna Cum Laude

Jacob Daniel Salyer
Heather Nicole Sanborn
Magna Cum Laude

Isabella Margarita Sanchez
Lauren Elizabeth Sandrock
Layne Makimry Sanford
Celeste Jacqueline Sanfrey
Joshua Pierce Santangelo
Emily Vanessa Santos
Anna Katherine Sarmir
Cum Laude

Lucas Shannon Sarver
Tomosada Sato
Shakir Sayed
Nolan Scanlon
Summa Cum Laude
with Honors in Business Administration

Halle Nicole Scarpa
Cum Laude

Brandon Matthew Schacht
Cum Laude

George Alphonse Schaefer IV
Cum Laude

William Schaefer
Caroline Nicole Schaeffer
Ryan James Schaffer
Benjamin William Schepflin
Jake Schepps
Carly Schiffman
Magna Cum Laude

Sara Ashley Schlabach
Alanna Schlaeger
Luke Patrick Schlagheck
Magna Cum Laude

Andrew Michael Schlegel
Samuel Bakken Schmidt
Summa Cum Laude
with Honors in Finance

Julian Schmilinsky
Cum Laude

Morgan Casey Schneider
Cum Laude

Danielle Kovach Schoenly
Cum Laude

Isabelle Grace Schramm
Cum Laude

Christian Schreiber
Magna Cum Laude

Andrew Simon Schrembeck
Bryant Charles Schroeder
Summa Cum Laude

Christopher John Schueler
Summa Cum Laude
with Honors in Finance

Kayla Reese Schuemann
Summa Cum Laude

Nicholas Paul Schulz
Landon Marshal Schumacher
Cum Laude

Alex Jacob Schusterman
Cum Laude

Adam Henry Schutter
Cum Laude

Natalie Dee Schwantes
Cum Laude

Samuel William Schwartz
Theodore Parker Schwartz
William Lawrence Schwieterman
Summa Cum Laude

Brodie Roy Scott

Colin Michael Scott
Magna Cum Laude

Kyle Allen Scott
Andreas Christian Scutt
Magna Cum Laude

Joshua Mark Seaman
Magna Cum Laude

Lindsey Marie Seballos
Summa Cum Laude

Maxwell James Segal
Jordan Ryan Seligman
Colby John Sellitto
Kyle E. Sendelbach
Joshua Sessine
Nicola Renee Settle
Magna Cum Laude
with Honors in Finance

Lauren Elizabeth Sewell
Summa Cum Laude

Robert Logan Shaffer
Dhruv Shah
Riya Shah
Cum Laude

Dunya Maryam Shamma
Summa Cum Laude

Winnie Shang
Summa Cum Laude

Xuanji Shao
Magna Cum Laude

Edward Charles Shean
Magna Cum Laude

Maeve Elizabeth Sheehan
Fatima Shehadeh
Mason Mellitz Shein
Alexandra Jane Sherman
Magna Cum Laude

Jackson Douglas Sherman
Cum Laude

Yikai Shi
Cum Laude

Hyeonjun Shim
Cum Laude

Jack Michael Shisler
Jeanine Khaled Shkoukani
Andrew Ryan Shovelson
Oleksandr Shuliak
Brandon Carter Sichel
Cum Laude

Adam Haq Siddiqi
Magna Cum Laude

Allison Elise Silverstein
Magna Cum Laude

Kristina Marie Sim
Summa Cum Laude

Nina Christine Simonelli
Brandon Edward Michael Simpson
Warren Dean Singer
Cum Laude

Anshul Singh
Arvin W. Singh
Ashankh Singh
Karan Pal Singh
Magna Cum Laude

Roshan Kumar Singri
Magna Cum Laude
with Honors in Finance

Dhakshniy Sivakumaran
Emily Patricia Sivula
Cum Laude

William Brady Skladany

Colette Alivia Skruck
Cum Laude

Justin Patrick Slattery
Cameron Harmon Sloan
Emily Paige Slominsky
Cum Laude

Kaleb Matthew Slover
Cum Laude

Ryan Reese Slyh
Abigale Rae Smalley
Brett Russell Smith
Summa Cum Laude
with Honors in Accounting

Carson Grant Smith
Magna Cum Laude

Demetrius Darnell Smith, Jr.
Cum Laude
with Honors in Business Administration

Ethan James Smith
Magna Cum Laude

Jack Roland Smith
Jenna Kay Smith
Magna Cum Laude

Justin Tyler Smith
Kendall Smith
Leah Jeanne Smith
Matthew Scott Smith
Magna Cum Laude

Lora Snodgrass
Caitlyn Snyder
Cum Laude

Dylan Patrick Sofish
Magna Cum Laude

Thomas Andrew Sofish
Cum Laude
with Honors in Accounting

Shreya Solai
Magna Cum Laude

Evan Sommer
Kevin Daniel Sonby
Cum Laude

Jiaqi Song
Cum Laude

Molly McCarthy Sorba
Margareta Madison Southard
Cum Laude

Mackenzie Kathryn Soviak
Justin Robert Sparacino
Anna Grace Speeney
Andrew Dominic Speicher
Cum Laude

Jordan Owen Sperling
Summa Cum Laude
with Honors in Finance

Isabel Speropoulos
Annika Erika Spoor
Summa Cum Laude
with Honors in Business Administration

Nathan Jeffrey Sprague
Magna Cum Laude
with Honors in Accounting

Nathaniel K. Sprecher
Magna Cum Laude

Amanda Rose Srebnik
Magna Cum Laude

Visvam Kandadai Srinivasan
Magna Cum Laude
with Honors in Business Administration

Christian James Stacy
Keaghan Russell Stahler
Jaxon Edward Standaert
Cum Laude

June 4 - August 20, 2025, Board of Trustees Meetings

Haileigh Dolores Stanton

Abigail Kathryn Starrett

Cum Laude

Taylor Nicole Staten

John Robert Stearns

Magna Cum Laude

Aidan Liam Stec

Magna Cum Laude

Izaiah Alan Steenrod

Magna Cum Laude

David Stein

Cum Laude

Fiona Stephens

Summa Cum Laude

Michael Edward Stephens

Justin Parker Stern

Kristen Margaret Stern

Summa Cum Laude

Ella Stertmeyer

Jarrett Stevens

Nathan Alexander Stevenson

Magna Cum Laude

Owen Scott Stevenson

Cum Laude

Colin Stewart

Cum Laude

Ephraim Hunter Stewart

Matthew John Stickler

Magna Cum Laude

Julia Alexandra Stockton

Makenna Rae Straker

Robyn Catherine Strauss

Magna Cum Laude

Pierce Hawkins Streun

Magna Cum Laude

Grant Walter Strom

Grant Bernard Strong

Michael Charles Strulowitz

Ryan Allen Strunk

Claire Elizabeth Studenka

Magna Cum Laude

Jordan Elizabeth Stykemain

Raghav Subramanian

Siddheswar Subramanian

Magna Cum Laude

Stephen Michael Suetzer II

Jiwon Suh

Magna Cum Laude

John Clark Sukernek

Mohammed Jamal Sulaiman

Cum Laude

Sean Patrick Sullivan

Cum Laude

Yirui Sun

Cum Laude

William Laurence Guasco Swain

Eric Daniel Swim

Grant Swires

Sarah Jane Tackett

Nasser Jamal Tahat

Om Viraj Tailor

Magna Cum Laude

Gwen Tajgiszer

Magna Cum Laude

John Joseph Talion, Jr.

Nirav Tank

Exzandria Tanner

Runyu Tao

Jacob Tarkany

Cum Laude

Carson Paul Taylor

Madison Michelle Taylor

Magna Cum Laude

Rosie Christina Taylor

Sydney Marie Taylor

Joseph Robert Teodosio

Magna Cum Laude

Kyle John Teune

Magna Cum Laude

Steven Thai

Alex Ray Theuerkauf

Ashlynn Michele Thevenot

Summa Cum Laude

Claudia Ann Thomas

Cum Laude

Jackson Jeffrey Thomas

Jordyn Isabella Thomas

Cum Laude

Neil Joseph Thomas

Sarah Catherine Thomas

Zachary Patrick Thomas

Cum Laude

Erika Gabriela Thomas Torres

Benjamin Alan Thompson

Paden Thompson

Cum Laude

Luke David Thornton

Magna Cum Laude

with Honors in Business Administration

Jiazheng Tian

Songyuan Tian

Yue Tian

Laci Tinter

Aryan Ruth Tischler

Joel Philip Tobler

Summa Cum Laude

Noian Robert Todys

Sophie Rae Toman

Magna Cum Laude

Allison Lauren Tomaszewski

Magna Cum Laude

Lars Gregory Tombragel

Cum Laude

Avery Tomicic

Caleb Daniel Tomlin

Grace Torre

Cum Laude

Sarah Ellen Torres

Abigail Edy Tosatti

Magna Cum Laude

Austin You-Ren Towle

Summa Cum Laude

with Honors in Integrated Business and

Engineering

Andrew Colin Towne

Magna Cum Laude

Nolan Trask

Summa Cum Laude

Sadie Tratt

Magna Cum Laude

Olivia Carol Tregoning

David Andrew Tretter

Andrew Trexler

Cum Laude

with Honors in Business Administration

Alexander Michael Trifelos

Daniel Steven Truckenmiller

Miranda Tumbleson

Cum Laude

Corrin Elizabeth Turner

Karlle Marie Turner

Magna Cum Laude

Aidan Michael Twiss

Cum Laude

Semir M. Tzada Abdulkadir

Kaden Ullom

Magna Cum Laude

Joshua Marcus Henry Underhill

Cum Laude

Makayla Joann Updike

Cum Laude

Praladh Upreti

Andrew Urquiola

Prudhvi Vaddineni

Sanjey Vaithyanathan

Cum Laude

Ellen Ann Vallery

Magna Cum Laude

Makena Lee Van Bourgondien

Magna Cum Laude

Jacob Scott Vanatsky

Joshua Christopher Vance II

Magna Cum Laude

Alexandra Lea Vanderhorst

Colin Patrick Varga

Isamu Ismael Vargas

Jagger E. Vargas

Shia Lenore Vargo

Summa Cum Laude

with Honors in Finance

Luko James Varnish

Magna Cum Laude

Dhruv Velineni

Seth John Andrew Velker

Zachary Venec

Cum Laude

Aden Ty Verdun

Cum Laude

Sidhanth Verma

Magna Cum Laude

Calvin Scott Vermilya

Hanne Vermoesen

Cum Laude

with Honors in Business Administration

Samantha Christine Villari

Magna Cum Laude

William David Vincent

Cum Laude

Alicia Viola Prioli

Summa Cum Laude

with Honors in Business Administration

Jason James Vocaire

Johnathan Vonderhaar

Christopher Cole Vonnahme

Summa Cum Laude

Karna Vora

Cum Laude

with Honors in Finance

Brenna Maureen Voyer

Magna Cum Laude

Kiran Bindu Vrishabhendra

Cum Laude

Jack Martin Vrsansky

Thulasi Lakshmi Vuligadla

Andrew James Wagner

Magna Cum Laude

Freya Mallory Wagner

Hunter Wagner

Nolan Dixon Wagner

Cum Laude

Pierson Joseph Wagner

Cum Laude

Hannah Laine Wagoner

Magna Cum Laude

with Honors in Business Administration

Jenna Grace Wagoner

Summa Cum Laude

with Honors in Business Administration

Rachael Shen Wagoner

Cum Laude

Erin Elizabeth Wahlers

Jade Walker

Robert Michael Walkley II

Hanna Elizabeth Wallace

Summa Cum Laude

Dillon George Walsh

Magna Cum Laude

Olivia Nicole Walsh

Jacob Christopher Walter

Summa Cum Laude

Landon James Walter

Miles Walter

Cum Laude

Bryan Michael Walther

John Robert Wambaugh

Baoxuan Wang

Cum Laude

Beini Wang

Christopher Wang

Jiahua Wang

Cum Laude

Jiayi Wang

Jingjing Wang

Cum Laude

Qihao Wang

Siqi Wang

Cum Laude

Tianqin Wang

Cum Laude

Yibo Wang

Zijiefu Wang

Cum Laude

Ziyang Wang

Ziuyan Wang

Magna Cum Laude

Juliana Janina Wantuch

Reese Karlen Wappner

Cum Laude

Robert Francis Ware III

Magna Cum Laude

with Honors in Business Administration

Kennedy Jo Warnecke

Cassidy Julia Wasco

Jonathan Dylan Wasserman

Cassandra Katherine Wead

Cum Laude

Sydney Kathryn Webb

Magna Cum Laude

Devon Tyler Webber

Magna Cum Laude

Keith Christopher Webber

Cum Laude

Aidan Henry Weber

Heather Leigh Weber

Cum Laude

Lincoln Weber

Summa Cum Laude

Ryan Samson Weckstein

Magna Cum Laude

Trent J. Weigel

Magna Cum Laude

David Philip Weinstein

Samuel Cole Weintraub

Cum Laude

Cole Nicholas Weisheimer

Magna Cum Laude

Talia Lillian Weiss

William Benjamin Welewer II

Max Wellens

Zachary Kyle Wells

Yunfei Yang <i>Magna Cum Laude</i>	Reagan Nicole Ziemer Carter Zimmerman <i>Magna Cum Laude</i>	Nathaniel Emerson Bretz B.S. (The Ohio State University)	Elizabeth Erin Frazier B.S. (The Ohio State University) <i>Cum Laude</i>	Hoda Ahmed Khamis B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Cum Laude</i>
Qizhen Ye <i>Magna Cum Laude</i>	Charlie Simon Zkiab Lily Margaret Zukowski Clinton Ross Zupanc <i>Cum Laude</i>	Sarah-Nhi Bui B.S. (The Ohio State University)	Tyler Thomas Gairing B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Magna Cum Laude</i>	Mohammad Zain Khokhar B.S. (The Ohio State University)
Iliya Yefymenko <i>Cum Laude</i>	Justin Nicholas Zurawlow <i>Cum Laude</i>	Sabrina Jack-Lyn Case B.S. (Cleveland State University)	Ajeet Singh Gill B.S., M.P.H. (The Ohio State University)	Phillip Krayterman B.A. (Miami University) <i>Cum Laude</i>
Sanem Yenibahar <i>Magna Cum Laude</i> <i>with Honors in Finance</i>	Anya-Lynn Elizabeth Zurawski <i>Cum Laude</i>	Fiona Clare Chambers B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Cum Laude</i>	Joseph Daniel Gorman B.S. (University of Notre Dame) <i>Magna Cum Laude</i>	Katelin Kreinbrink B.S.Educ. (The Ohio State University) <i>Cum Laude</i>
James Logan York Bing Yu Erica Yu <i>Magna Cum Laude</i> <i>with Honors in Accounting</i>		Andrew John Cheline B.S. (University of Illinois at Urbana-Champaign) <i>Cum Laude</i>	Audrey Elise Grammel B.S. (Davidson College)	Jacob Lalonde B.S. (University of Cincinnati)
Haitong Yu <i>Cum Laude</i>	Dean: Carroll Ann Trotman	Allison Cheng B.S.Pharm.Sci. (The Ohio State University)	Filip Grdic B.S. (The Ohio State University)	Ngan Dinh Hue Le B.S. (Cleveland State University) <i>Cum Laude</i>
Bing Yuan Shelby Lake Zamensky Marie Anne Zantopolos <i>Cum Laude</i>	Doctor of Dental Surgery	Callihan Anne Clayton B.A. (Miami University) <i>Magna Cum Laude</i>	Carter Gray Hagy B.S. (Walsh University)	Ethan Mok Lim B.S. (The Ohio State University)
Riley Love Zelina <i>Summa Cum Laude</i>	Eanas Kamel Abutaha B.S. (University of Toledo)	Michael Athanasios Daskalakis B.S.Pub.Hlth. (The Ohio State University)	Sydney Katherine Hamilton B.S. (University of Cincinnati) <i>Cum Laude</i>	Ted Robert Loper B.S.Nutrition (The Ohio State University)
Ethan Xian-Yang Zeng <i>Magna Cum Laude</i> <i>with Honors in Business Administration</i>	Mohamed Saed Belal Alodat B.S. (Cleveland State University)	Ante-Tonci Dejanovic B.S. (The Ohio State University) <i>Magna Cum Laude</i>	Sara Nicole Haren B.S. (The Ohio State University) <i>Magna Cum Laude</i>	Hayden Frederick Lyons B.S. (Ball State University)
Leah Katherine Zenk Charles Walter Zepp <i>Cum Laude</i>	Heath Jacob Altier B.S. (The Ohio State University) <i>Cum Laude</i>	Emma Louise Dixon B.S. (University of North Florida) <i>Summa Cum Laude</i>	Dominic Joseph Hesmondhalgh B.A. (Miami University) <i>Cum Laude</i>	Vinh Viet Mai B.A., B.S. (University of South Florida)
Konner Zerrusen Alexander Thomas Zestermann <i>Cum Laude</i>	Prety Amom B.S.Pharm.Sci. (The Ohio State University)	Benjamin R. Dunlap B.A. (DePauw University)	Andrew Kyle Hibinger B.S. (Bowling Green State University)	Eva Michelle Mandybur B.S. (The Ohio State University) <i>Magna Cum Laude</i>
Boyuu Zhang <i>Cum Laude</i>	Maya Riad Arbaji B.S. (John Carroll University)	Majd Z. El-Alami B.S. (Indiana State University)	Gelila Kassahun Hines B.S. (Youngstown State University) <i>Magna Cum Laude</i>	Jacob Allan Mangum B.A. (Miami University)
Irene Zhang Kaichen Zhang Tingwei Zhang Wenzhuo Zhang <i>Cum Laude</i>	Maureen Marie Baldzicki B.S. (The Ohio State University) <i>Magna Cum Laude</i>	Rania Otman Elkon B.S. (The Ohio State University)	Mathea Marie Host B.S. (University of Akron)	Rachel Ann Martin B.Bus.Adm. (Belmont University) <i>Summa Cum Laude</i>
Xueqing Zhang Yu Zhang <i>Cum Laude</i>	Jessica Banjany B.S.Hlth.Reh.Sci. (The Ohio State University)	Verena Farid B.A. (Case Western Reserve University) <i>Magna Cum Laude</i>	Catherine Mary Howard B.S.Honors (University of Alabama)	Kayla Patricia McNamara
Yuhao Zhang Zhen Zhang <i>Magna Cum Laude</i>	George Robert Bauer B.A. (The Ohio State University) <i>Magna Cum Laude</i>	Timothy Michael Feeney B.A. (The Ohio State University)	Camille Diane Jackson B.S. (Bowling Green State University)	Benjamin Wesley Meade
Feisi Zhao Junjie Zhao <i>Magna Cum Laude</i>	Emma Elizabeth Bergman B.S. (Ohio Dominican University) <i>Cum Laude</i>	Megan Christine Fernandez B.A., B.S. (The Ohio State University) <i>Summa Cum Laude</i>	Nicholas Rees Jones B.S. (Brigham Young University) <i>Summa Cum Laude</i>	Maikel Metyas B.S.Hlth.Reh.Sci. (The Ohio State University)
Xuan Zhao Julie Yanxin Zheng <i>Cum Laude</i>	Rebecca Marie Berning B.S.Bus.Adm. (The Ohio State University)	Daniel Thomas Fleming B.A. (College of Wooster) <i>Magna Cum Laude</i>	Lyndsey Nicole Miller B.S. (University of Toledo) <i>Cum Laude</i>	Anika Moffitt B.S. (University of Florida) <i>Summa Cum Laude</i>
Ryan Zheng <i>Summa Cum Laude</i> <i>with Honors in Business Administration</i>	Emma Lou Margaret Bihlman B.S. (University of Akron) <i>Magna Cum Laude</i>	Matthew Thomas Fogarty B.S.Bus.Adm. (The Ohio State University) <i>Summa Cum Laude</i>	An Bach Thien Nguyen B.S. (George Mason University) <i>Magna Cum Laude</i>	Khiem Nguyen Bachelor's (University of Cincinnati)
Shujun Zheng <i>Cum Laude</i>	Madeline Marie Birong B.S. (Franciscan University of Steubenville)			
Yifan Zheng Yintang Zhong <i>Magna Cum Laude</i>	Lucas James Bowen B.S. (Ohio University) M.P.H. (The Ohio State University)			
Kaihang Zhou <i>Magna Cum Laude</i>	David William Brandon B.A. (Hope College) <i>Cum Laude</i>			
Marvel Zhou <i>Cum Laude</i>				
Yingqiang Zhou <i>Magna Cum Laude</i>				
Songyue Zhu Daniel Alexander Zicherman <i>Magna Cum Laude</i>				
Kinsey Ann Zielinski <i>Summa Cum Laude</i>				
Zackary Alan Zielinski				

Sydney Nicole Oswald
B.A. (Miami University)

Marissa Rani Pannett
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Jumee Park
B.A. (University of California, Irvine)
B.S. (University of Cincinnati)

Erin Kimberley Paulhardt
B.A. (The Ohio State University)
Summa Cum Laude

Megan Michelle Peepers
B.S. (The Ohio State University)

Ellen Peters
B.S. (Miami University)
Cum Laude

Lauren Ann Place
B.S.Hlth.Reh.Sci. (The Ohio State University)
Cum Laude

Jaret William Reimer
Bachelor's (University of Florida)

Tia Renko
B.A. (The Ohio State University)
Cum Laude

Bishoy Sadek
B.S. (University of Cincinnati)
M.A. (Midwestern University)

Quinn Nicholas Saluan
B.S. (Case Western Reserve University)
Magna Cum Laude

Ian Edward Scott
B.S. (The Ohio State University)

Toshihiro Shoji
B.A. (Vanderbilt University)

Brendan Thomas Siefker
B.S. (The Ohio State University)
Summa Cum Laude

Macey Marie Siegel
B.S. (University of Florida)
Magna Cum Laude

Ravjot Singh
Bachelor's (Wittenberg University)

Rebekah Jordan Slagle
B.S. (University of the Cumberland)

Martin McKay Smith
B.S. (Utah State University)
Summa Cum Laude

Benjamin Logan Snavley
B.S. (The Ohio State University)
Cum Laude

Ivanna Maria Soto
B.S.Dent.Hygn. (The Ohio State University)

Sarah Jane Spires
B.S. (Taylor University)
Cum Laude

Christian Owen Stepp
B.S. (The Ohio State University)

Paxton Nicholas Stern
B.S.Pub.Hlth. (The Ohio State University)
Summa Cum Laude

Vanessa Paige Stitzlein
B.S.Hlth.Reh.Sci. (The Ohio State University)

Jared Logan Strausser
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Darby Ann Szmania
B.S. (Wittenberg University)

Mahmmoud Tabbaa
B.S., M.B.A. (Ohio University)
M.S. (Rutgers University)

Lance Allen Talmage III
B.S.Hlth.Reh.Sci. (The Ohio State University)
Magna Cum Laude

Michelle Elizabeth Tokman
B.A. (The Ohio State University)

Lauren Tran
B.S. (University of Dayton)
Cum Laude

Ynhu Tran
B.S. (University of South Florida)
Magna Cum Laude

Shivani Reddy Tumukuntala
B.S. (University of Cincinnati)

Beoline Uwampamo
B.A. (Case Western Reserve University)

Elaina Grace Walcutt
B.S. (The Ohio State University)
Summa Cum Laude

Joanna Mercy Wang
B.S. (The Ohio State University)
Magna Cum Laude

Kendall Rae Watson
B.S.Biomed.Sci. (Florida Gulf Coast University)

Grant Weaver
B.S.Educ., M.S. (The Ohio State University)
Cum Laude

Mitchell Patrick Weisgarber
B.S.Educ. (The Ohio State University)
Magna Cum Laude

Danielle M. Welsch
B.S. (University of Dayton)
Magna Cum Laude

Alexandria Taylor Wenig
B.S. (The Ohio State University)

Madeleine Camela Westmeyer
B.A. (Miami University)
Magna Cum Laude

Danielle Whittaker
B.S. (Miami University)
Cum Laude

Spencer Christopher Wilcox

Payne Schilling Wissler
B.S. (Waynesburg University)

Alaina Kay Wright
B.S. (Mount Vernon Nazarene University)

Alec Joseph Yoder
B.S. (Mount Vernon Nazarene University)
Cum Laude

Arij Yousef
B.S.C.R.P., M.C.R.P. (The Ohio State University)
Cum Laude

Valerie Ann Zaino
B.S. (The Ohio State University)
Summa Cum Laude

Bachelor of Science

Hasanain Al-Safi
Summa Cum Laude
Laxmi Regmi
Catherine Michelle Woodring

Bachelor of Science in Dental Hygiene

Taimaa Mohammad Al Tibawi
Rachel Kathleen Albertson
Cum Laude

Aisha Ashirow
Magna Cum Laude
Kierstyn Michelle Lea Bays
Hannah Noel Billy
Autumn Elizabeth Burk
Ella Katherine Curcio
Cum Laude

Elyse Christine Donahue
Summa Cum Laude

Grace Elliott
Magna Cum Laude

Kira Nicole Geis
Cum Laude

Katelyn Rose Growdon
Dima Hamad
Cum Laude

Brooke Corin Hannam

Grace Elizabeth Hofstetter
Cum Laude

Taylor Ann Howard
Cum Laude

Joseph Truman Jakubczak
Kenyara Leslie
Evan Lin
Summa Cum Laude

Ayah Musaitif
Magna Cum Laude

Hibba N. Nasser
Hannah Mae Pekarick
Gracie Weile Pfeiffer
Summa Cum Laude

Paige Lindon Race
Cum Laude

Claire Alison Rohrs
Cum Laude

Delaney Eileen Ryan
Magna Cum Laude

Alexis Aisha Schooley
Summa Cum Laude

Meghan Eileen Shay
Arika Lyric Siket
Kylea Marie Spencer
Salamatya Sy

Jeffrey Julian Thomas
Indigo Turner
Yolanda Vicente Mendoza
Cum Laude

Liyang Wang
Summa Cum Laude

College of Education and Human Ecology

Dean: Donald B. Pope-Davis

Bachelor of Science in Health Promotion, Nutrition, and Exercise Science

Andrea Cervantes
Caitlee Nichole Hill
Cum Laude

Jacob Riley Karst
Kylie Morgan Kirkpatrick
Magna Cum Laude

Antonio Caleb Muñoz
Magna Cum Laude

Vu Son Nguyen
Mary Elizabeth Schoenly
Sam Soufi
Magna Cum Laude

Zoe Abigail Waller
Magna Cum Laude

Bachelor of Science in Human Development and Family Science

Ayan Mustafa Abdi
Kathleen Mary Adams
Magna Cum Laude
Mavis Aidoo

Maria de Jesus Ayer
Cum Laude

Faith Stephanie Bender
Natalie Lenee Buchman
Rachel Lynn Burns
Tara Capers
Cum Laude

Samantha Noelle Chaffin
Magna Cum Laude

Wan Xuan Chua
Magna Cum Laude
with Research Distinction

Lindsay Victoria Cianfarani
Emily Marie Cline
Magna Cum Laude

Maya Jade Croce
Summa Cum Laude

Kira Marie Deerman
Cum Laude

Timothy P. Douds
Summa Cum Laude

Kaitlyn Lee Farley
Ayva Nicole Frierhood
Colleen Elizabeth Greve
Jordan Hancock
Anna May Harden
Magna Cum Laude

Emma Santos Hochstetler
Mackenzie Rose Humphreys
Fatima Ibrahim
with Research Distinction

All Geelle Isse
Rylie Anne Ives
Wadeeah Jabbar
Cum Laude

Nazzio Fernando John
Cum Laude

Rachel Morgan Kaplan
Cum Laude

Nathan Thomas Karaffa
Kennedy Nichole Kay
Kiersten Alexa King
Grace Marie Klima
Cum Laude

Monica Anne Kloepper
Stephie Lyn Krugel
Aniah Nicole Lester
Summa Cum Laude

Paige Elizabeth Levin
Samara Liebmann
Brian Quinlan Lordan
Abigail Claire Louis
Samantha Mack
Cum Laude

Tristyn Aaron McCabe
Magna Cum Laude

Mercedes Ida Molek
Cum Laude

Kaleigh-Ann Nigrelli
Anna Marie Pangalangan
Magna Cum Laude

Delaney Marie Phillips
Magna Cum Laude

Olivia Tyne Raynor
Summa Cum Laude

Julia Reardon
Bailee M. Reeves
Isabella Rizzo
Magna Cum Laude

Amalia Cristine Rodriguez-Giusti
Ellen Marie Scherer
Magna Cum Laude

Amya Elizabeth Scott
Cum Laude

Lexington Elizabeth Secret0

Magna Cum Laude

Kristin Marie Swartz

Zijing Wang

Miyun Williams

D'Jihnea Laylia NiaSean Williams-

McCormick

Kieran Brianna Wilson

Carson Thomas Wright

Xinyu Zhang

Cum Laude

**Bachelor of Science in
Human Ecology**

NoorAlexandria Ziad Abukaram

Sandra Adamah-Tassah

Connor Allomong

Jermel A. Anderson

Gavin Lee Bell

Avani Maria Bhalla

Magna Cum Laude

Presun Bhujel

Hannah Faith Boggs

Ana Rita Borges Tobe

Magna Cum Laude

Jacob Bryce Brewer

Braden Ray Brown

Sophia Cahalane

Magna Cum Laude

Maria Nicole Cappello

Ashley Marie Cavadas

Magna Cum Laude

Katie May Chisholm

Zachary Cicero

Robert Michael Crawford

Rachael Marie Crewe

Cum Laude

Jaden Kyle Deskins

Benjamin Patrick Felsenfeld

Gregory Alexander Flerlage

Sophia Rose Forniti

John Michael Fout, Jr.

Leylah Monet Fox

Nicolas Michael Giamarusti

Cum Laude

Evan Ross Greenblatt

Jack Thomas Griffin

Chelsea Lucinda Gross

Cum Laude

Marcus Richard Grube

Talia Lindsey Halem

Vivian Marie Hall

Magna Cum Laude

Michael Ying Hang

Abbagayle Leigh Heironimus

Bryce Alexander Hepner

Yvette D. Higgenbotham

Dylan Michael Himmel

Margaret Anne Jantz

Cum Laude

Brent Ryan Johnson

Kirstin Jean Kemp

Colin Kimberly

Maya Alison Kleinberg

Cum Laude

Kahleb Michael Lang

Taylor Mackenzie Love

Jamie Elizabeth May

Marta McFadden

Magna Cum Laude

Jaden Grant McMullen

Magna Cum Laude

Sahil Mehrotra

Taylor Leigh-Ann Miracle

Abigail Renee Mosher

Cum Laude

Dylan Truong Nguyen

Justin Maxwell Nicklow

Prema Kelly Nnadi

Magna Cum Laude

Joseph Dominic Perfette

Aubrey Reagan Porter

Ethan Hudson Porter

Magna Cum Laude

Aliza Ysabelle Rayfield

Magna Cum Laude

Nicholas L Rhinehart

Malick Sall

Scotiana MKenya Sampson

Eduardo Sanchez

Libby Morgan Schottenstein

Cum Laude

Aswad Sheikh

William Matthew Skerbertz III

Ashley Nicole Stewart

Lorenzo Pierce Styles

Magna Cum Laude

Alyse Constance Sylvester

Steven Andrew Szasz

Magna Cum Laude

Chris Taylor

Cum Laude

Summer Grace Vargo

Thomas Dominic Wesolowski

Asia M. Williams

Carlotta Isabella Alessia Christel

Woff

Cum Laude

Gabriela Riley Wood

Magna Cum Laude

Fiona Jane York

Kloe Madeline Zink

Cum Laude

**Bachelor of Science in
Hospitality Management**

James Christopher Acocella

Magna Cum Laude

Fares Naser S Allahyani

Michael DeSciscio

Cum Laude

Sarah Elizabeth Genn

Magna Cum Laude

Madison Leigh Ginsberg

Summa Cum Laude

Amanda Gothier

Madeline Nicole Hurt

Cum Laude

Taylor Brynn Kullman

Safiya Lapkes

Summa Cum Laude

Preston Tucker Leach

Assanatu Mansaray

Cum Laude

John S. Mascitelli

Jenna Elizabeth McNicol

Cum Laude

Xiang Meng

Angela Montecalvo

Magna Cum Laude

Marisha Chizoba Nnadi

Cum Laude

Taylor Austin Nunez

Bhakti Mineshbhai Patel

Iain Prentice

Vincente Joseph Provenzano

Julia Christine Riebel

Magna Cum Laude

Billie-Marie Stacey Ross

Magna Cum Laude

Ben Patrick Schmeling

Braeden Mitchell Seaholm

Abigail Hope Stevenson

Magna Cum Laude

Rileigh Joy Tocknell

Sophia Grace Troutman

Magna Cum Laude

Damaris Pantoja da Silva Vanecko

Brianna Jane Ware

Summa Cum Laude

Nathan Cole Wehrlein

Cum Laude

Xiaoshen Wei

Cum Laude

Aissatou Wone

**Bachelor of Science in
Nutrition**

Ayatt Zaher Abdelmajid

Nirutta Bhattarai

Allison Rose Blaut

Sydney Browning

Cum Laude

Max Colin Colizzo

Cum Laude

Gabrielle Correia

Cum Laude

Madilyn Gayle Cramer

Kelsey Elizabeth Dockman

Cum Laude

Lucinda Catharine Ruth Eckman

Alyssa Ryan Focht

Cum Laude

Vincenzo Egeo Frissora

Emma Vanessa Goorland

Cum Laude

Alexis Marie Grubbs

Holly Elizabeth Harendza

Allison Nicole Heemer

Cum Laude

Natalie Lynn Hermiller

Cum Laude

Anoushka Herrala

Cum Laude

Leah Kathleen Hunt

Gabrielle Paige Hutchinson

Magna Cum Laude

Marisa Renee Jacobs

Riley Sophia Jones

Magna Cum Laude

Dina Kanaan

Magna Cum Laude

Liesel Madeline Kehrl

Kylie Michelle Kuck

Magna Cum Laude

Morgan Alexis Loudon

Magna Cum Laude

Margaret Ann Maxey

Kyra Grace Mchugh

Magna Cum Laude

Hanmeng Niu

Magna Cum Laude

Elizabeth Anne Norgren

Cum Laude

Mary Proctor

Summa Cum Laude

Brianna Marie Quigley

Cum Laude

Grace Marie Rahill

Lauren Nicole Raley

Julia Marie Reichert

Emily Helen Richmond

Magna Cum Laude

Rahaf Jubril Shalash

Magna Cum Laude

Serena Bassem Slim

Summa Cum Laude

Vivian Emmons Smith

Cum Laude

Megan Margaret Stotz

Summa Cum Laude

Lindsay Katherine Stull

Summa Cum Laude

Kyle Matthew Susz

Cum Laude

Isabella Bors Tugaoen Trouten

Magna Cum Laude

**Bachelor of Science in
Education**

Madison Elizabeth Abt

Cum Laude

Kylie Jean Acheson

Cum Laude

Sumeyo Hassan Adam

Cum Laude

Arina Akopdzhanova

Summa Cum Laude

Conner Joseph Albers

Blair Elynn Andrews

Magna Cum Laude

Christopher Andrew Arevalo

Magna Cum Laude

Karina Rae Argento

Cum Laude

Maniis Armstead

Matthew James Armstrong

Olivia Isabella Afia Asare

Magna Cum Laude

Emma Monet Atwell

Magna Cum Laude

Claire Katherine Audia

Alexander Sunil Bakshi

Summa Cum Laude

Cecelia Abigail Rose Baldasare

Emily Elaine Baldwin

Magna Cum Laude

Chloe Noele Ballesteros

Summa Cum Laude

Lise Valentine Banek

Cum Laude

William Frank Bansberg

Samuel Joseph Barbato

Reagan Avery Barlow

Summa Cum Laude

Avery Lauren Bautsch

Magna Cum Laude

Michael Franks Beck

Ashley Brooke Bell

Cum Laude

Maureen Bender

Cum Laude

Diego Fernando Benitez

Iman Houria Benemilhi

Magna Cum Laude

Lydia Elaine Benz

Summa Cum Laude

Katherine Anne Bergeron

Summa Cum Laude

Andrew William Bernhard

Magna Cum Laude

David Charles Bettan

Morgan Faith Billmaier

Magna Cum Laude

Jared Birkhimer

Summa Cum Laude

Sawyer William Bix

Zoey Jean Black

Magna Cum Laude

Ryan Dean Blackburn

Macie Victoria Blacklidge

Summa Cum Laude

Christopher Antoine Blueitt

Emily Nicole Boehlein

Cum Laude

Nathan Thomas Boggs

Jacob Anthony Bonacci

Adrian Bowsner

Cum Laude

Cole Allister Brannan

Magna Cum Laude

Arthur Brennick

Summa Cum Laude

Crissie Grace Brigle

Cum Laude

Kwanisha Ladon Broomfield

Kaylee Ann Brown

Magna Cum Laude

Emma Bucher

Magna Cum Laude

Alyssa Victoria Buettner

Yenubenant Fiifi Bukari

Hannah Elizabeth Bunder

Summa Cum Laude

Kelsey Elizabeth Burdoff

Conor Michael Burwell

Ashley Nicole Bush

Megan Elizabeth Clements

Summa Cum Laude

Haley Diana Clinton

Emma Louise Clum

Elianah Vivian Cohen

Summa Cum Laude

Eli Miller Colen

Cum Laude

Taylor Grace Conaway

Summa Cum Laude

JaeQuin Thomas Constanty

Abigail Kay Corbin

Magna Cum Laude

Macayla Marie Core

Magna Cum Laude

Madelyn Jean Corona

Magna Cum Laude

Tarina R. Cosgriff

Summa Cum Laude

Jason Cotenoff

Alexander Michael Couch

Darian Elizabeth Crews

Magna Cum Laude

Alyssa Laurel Crider

Magna Cum Laude

Ashley Jo Crites

Magna Cum Laude

John David Crum

Austin Ross Crume

Summa Cum Laude

Dominique Priscila Cruz

Zachary Jeremiah Cummings

Summa Cum Laude

Charlotte Michelle Cupp

Magna Cum Laude

Abigail Dadich

Magna Cum Laude

Helen Faith Dahlquist

Summa Cum Laude

Audrey Dala

Patrick Daugherty

Brianna Adelaide De Brito

Summa Cum Laude

Gannon Deal

Ainsley Campbell Dean

Summa Cum Laude

Eliana Dean

Magna Cum Laude

Natalie Eryn Decuir

Summa Cum Laude

Julia Renee DeLuca

Cum Laude

Elizabeth Anjel Demecs

Mia Alexandra DeSciscio

Magna Cum Laude

Amara Deyo-Flagg

Cum Laude

Patrick Edward Diehl

Cum Laude

Brianna Elyse DiFabio

Summa Cum Laude

Cassidy Grace Dillon

Anthony Michael Dodds

Summa Cum Laude

Callie Dorsey

Alexa Kae Dulle

Magna Cum Laude

Noah Matthew Dzierwa

Magna Cum Laude

Haley Victoria Edwards

Cum Laude

Trent Robert Eitel

Garrett Matthew Elam

Magna Cum Laude

Nicole Eltzholtz

Magna Cum Laude

Ethan Michael Encarnacion

Lilian Carolin Engel

Magna Cum Laude

Ariel Mackenzie Estep

Cum Laude

Sydney Amelia Eyerly

Magna Cum Laude

Daniel Robert Fabian

Grace Carolyn Fairchild

Summa Cum Laude

Brandon Tallman Feldman

Allison Paige Fenska

Magna Cum Laude

Cor'Tasia Tanae Fitzgerald

Cum Laude

Ashley Nicole Fleck

Summa Cum Laude

Abryella Marie Fletcher

Cum Laude

Nathan Wyatt Fliger

Desiree Christeen Fogt

Magna Cum Laude

Allison Grace Foreman

Cum Laude

Anna Marie Foster

Alysa Frcka

Alivia Grace Fulton

Magna Cum Laude

Brandon Samuel Furlong

Benjamin Cowan Gabriel

Lul J. Jagow

Summa Cum Laude

Padraic Conal Gallagher

Thomas Michael Galluccio

Magna Cum Laude

Katelyn Hope Garigal

Magna Cum Laude

Julia Christina Gasiorowski

Summa Cum Laude

Rachel Diana Gatz

Magna Cum Laude

Dominic Gentile

Magna Cum Laude

Levi Asher George

Sophia Helena Georgious

Summa Cum Laude

Gracy Gialamas

Cum Laude

Melanie Shea Giffin

Summa Cum Laude

Megan Gifford

Magna Cum Laude

Jonah A. Gilbert

Magna Cum Laude

Ronald James Gill

Summa Cum Laude

Dylan Jacob Goff

Andre Joseph Gonzales

Joshua Armstrong Gordon

Hallie Anne Gottfried

Cum Laude

Shelby Granger

Summa Cum Laude

Caitlin Hope Green

Summa Cum Laude

Aidan Tyler Greenberg

Magna Cum Laude

Kaitlyn Rose Grimes

Summa Cum Laude

Tyler David Grimm

Summa Cum Laude

Kathryn Gumina

Magna Cum Laude

Leah Danelle Gundrum

Cum Laude

Trinity Zyr Air Gurley

Summa Cum Laude

Dominic Josph Guzzardi

Tamya Halison

Magna Cum Laude

Kenzie Ann Halloy

Sarah Ann Hammill

Magna Cum Laude

Aliou Hane, Jr.

Christian Haney

Antoinette Katherine Hargraves

Cum Laude

Megan Elizabeth Harper

Summa Cum Laude

A'shiah Marie Harris

Libby Pauline Hauser

Summa Cum Laude

Adrian Jo Headings

Cum Laude

Taylor Lynn Heffner

Rhylan Marileigh Held

Magna Cum Laude

Olivia Mae Hellingner

Summa Cum Laude

Lindsey Nichole Heminger

Magna Cum Laude

Emily Elizabeth Henn

Magna Cum Laude

Alyssa Lynn Henzel

Zak Edward Herbstreit

Lulu Macantrim Herman

Zachary Scott Hersey

Rileigh Paige Highland

Sydney Ann Hill

Cum Laude

Lillian Elizabeth Hills

Magna Cum Laude

Joshua Hines

Carson Hinzman

Cum Laude

Jenna Nicole Hlavach

Summa Cum Laude

Mikayla Elizabeth Hoelter

Lily Lin Hoepfner

Summa Cum Laude

Molly Jean Hoffman

Summa Cum Laude

Danielle Hohlbein

Summa Cum Laude

Bridget Nicole Holahan

Summa Cum Laude

Kathryn Elizabeth Holmes

Magna Cum Laude

Molly Marie Holzinger

Cum Laude

Avery Carlyse Hooser

Summa Cum Laude

Claudia Grace Hopkins

Summa Cum Laude

Lena Elizabeth Hopple

Magna Cum Laude

Peter Anthony Hrelec

Xiyuan Huang

Magna Cum Laude

Edward Frank Hudzinski

Isaac Thomas Humphreys

Faith Maya Hunter

Asha Geelle Isse

Magna Cum Laude

Luke Edward Jacklin

Magna Cum Laude

Kennedy Lynn Jesenovec

Summa Cum Laude

Andres Roberto Jimenez

Mikaia Shay Jimenez

Summa Cum Laude

Margaret Ann Johnson

Cum Laude

Tyler Benjamin Johnson

Anne Kathryn Jones

Magna Cum Laude

Jaylen Deshaun Jones

Summa Cum Laude

Marcyana Jones

Magna Cum Laude

Tanner Michael Juarez

Audrey Madelyn Jurich

Hannah Elizabeth Kaczmarek

Cum Laude

Ani Kahaian

Summa Cum Laude

Caroline Ann Kamerer

Magna Cum Laude

Alex Ryan Kapusta

Cum Laude

Argyro Katsandoni

Summa Cum Laude

Christian Kauffman

Magna Cum Laude

Matthias Kaylor

Magna Cum Laude

Brooks D. Kelly

Madison Rose Kelly

Cum Laude

Anna Kennedy

Summa Cum Laude

Isabella Clare Kennedy

Magna Cum Laude

Audrey Michele Kickbusch

Cameron Dionys Kilpatrick

Magna Cum Laude

Quinten Maurice Kimble

Victoria Heigel Kinsey

Magna Cum Laude

Owen Matthew Kitzmiller

Summa Cum Laude

Kacy Nicole Kizlik

Cum Laude

Jaclyn Rose Klayman

Cum Laude

Anna Joy Klemanski

Summa Cum Laude

Brady Jay Klingshirm

Kellie Nicole Koch

Magna Cum Laude

Melanie Christine Koenig

Cum Laude

Casey Koller

Summa Cum Laude

Anthony James Kontsis

Lillian Eleanor Kosar

Cum Laude

Averi Elise Krouse

Summa Cum Laude

Annetta Kyridou

Abigail Grace Lairson

Magna Cum Laude

Mingrui Lang

Ian Robert Larson

Haley Nicole LaTorre

Magna Cum Laude

Brennen Ray Lavery

Magna Cum Laude

Autumn Renee LeFevre

Cum Laude

Mason M. Leopold

Cum Laude

Jeremy Reid Levine

Sara Kate Lewis

Cum Laude

Che-Pin Steven Liao

Cum Laude

Caroline Sue Liber

Summa Cum Laude

John Michael Librizzi

Magna Cum Laude

Zoe Katherine Lightcap

Summa Cum Laude

Kristen Laurel Lillemoen

Marie Limon

Andrew John Lipowski

Cum Laude

Haiqi Liu

Magna Cum Laude

Emma Claire Logan

Summa Cum Laude

Shania Joy McIntosh
Cum Laude

Blake McKay
Cum Laude

Kali Inez McIn
Cum Laude

Abigail Mehr
Cum Laude

Makeda Mesfin Mekonnen
Cum Laude

Juliana Melendez
Cum Laude

Isabella Marie Mercurio
Cum Laude

Michael Gene Messer
Cum Laude

Lynzee Madison Meyer
Cum Laude

Hannah Marie Miller
Cum Laude

Morissa Modafferi
Cum Laude

Lydia Grace Kathleen Moell
Cum Laude

Ifu Mohammednajib Mohammed
Cum Laude

Asma Mohamoud
Cum Laude

Paige Renee Mooney
Cum Laude

Ava Marie Mooradian
Cum Laude

Kelsey Ann Moore
Cum Laude

Nicklaus Earl Moore
Cum Laude

Rebecca Paige Morgan
Cum Laude

Mayu Mori
Cum Laude

Julia Nicole Muldowney
Cum Laude

Lauren Elizabeth Murray
Cum Laude

Zamesha Curiteasha Esausha Myle
Cum Laude

Maryann Raegan Nelson
Cum Laude

Elizabeth Anna Newland
Cum Laude

Kaylee Grace Nicholas
Cum Laude

Jacqueline Marie Nichols
Cum Laude

Kate Nieberding
Cum Laude

Edwin Winnasong Nsaam
Cum Laude

Aliya Rae Obenour
Cum Laude

Eric Richard Oberholtzer
Cum Laude

Abrianna Kaliah Ohliger
Cum Laude

Chloe Elizabeth Orr
Cum Laude

Holden William Osbeck
Cum Laude

Ashleigh Rae Owens
Cum Laude

Jalen Mekhi Pace
Cum Laude

Isabel Carmen Paff
Cum Laude

Marissa Jade Palko
Cum Laude

Yasmin Arianna Palmer
Cum Laude

Gavin Lee Patrick
Cum Laude

Emma Adele Patterson
Cum Laude

Sophia Patton
Cum Laude

Josie Maria Pedoto
Cum Laude

Caroline Ruth Peet
Cum Laude

Abigail Ann Pena
Cum Laude

Austyn Paige Penwell
Cum Laude

Isabelle Marie Petell
Cum Laude

Griffen McKenzie Peters
Cum Laude

Kyle Edward Peters
Cum Laude

Daniel Patrick Philip
Cum Laude

Rachel Phillips
Cum Laude

Madeline Drew Pike
Cum Laude

Kaylee Jane Pollock
Cum Laude

Jaden R. Poole
Cum Laude

Isabella Rae Price
Cum Laude

Grace Elizabeth Pruchnicki
Cum Laude

Zihao Qing
Cum Laude

Michael Scott Rader, Jr.
Cum Laude

Jordan Neil Raines
Cum Laude

Jayden Ramella-Anderson
Cum Laude

Riana Nicole Rathburn
Cum Laude

Nathanael James Rausch
Cum Laude

Sienna Reedus
Cum Laude

Christopher Linn Richendollar
Cum Laude

Christian Michael Riley
Cum Laude

Daisy Marie Robinette
Cum Laude

Lillian Marie Roby
Cum Laude

Laisha Melanie Rodriguez-
Rodriguez
Cum Laude

Kaitlyn Breann Roe
Cum Laude

Thomas John Rogers
Cum Laude

Hannah Louise Rohr
Cum Laude

Benjamin John Romie
Cum Laude

James Rose
Cum Laude

Kaylee Anne Rose
Cum Laude

Cameron David Ross
Cum Laude

Eric Joshua Rossiter
Cum Laude

Riley Jones Rottkamp
Cum Laude

Shaina Alexis Rowe
Cum Laude

Luke Marcus Rush
Cum Laude

Regan Renee Russell
Cum Laude

Olivia Ann Ryan
Cum Laude

Alexandria Patricia Sage
Cum Laude

Jayda Sands
Cum Laude

Kelsy Santana
Cum Laude

Alla Vitallina Saucedo
Cum Laude

Ryan Sauline
Cum Laude

Samantha Cecilia Savage
Cum Laude

Sean Ryan Scadlock

Jordyn Schill
Cum Laude

Olivia Michelle Schlauch
Cum Laude

Sarah Margaret Schrantz
Cum Laude

Andrew William Schulze
Cum Laude

Ethan Harris Schweitzman
Cum Laude

Julianne Scott
Cum Laude

Sophie Ann Scuterud
Cum Laude

Callie Lynn Seedorf
Cum Laude

Audrey Marie Seguin
Cum Laude

Sarah Maren Selby
Cum Laude

Mckendry Loron Semer
Cum Laude

Lilli Anne Sherman
Cum Laude

Nicole Elizabeth Shomaker
Cum Laude

Kathryn Siebeneck
Cum Laude

Lexi Devin Simon
Cum Laude

Joseph C. Slabchuck
Cum Laude

Atom Dush Slaughter
Cum Laude

Paige McKenzie Slusser
Cum Laude

Abigail Michelle Smith
Cum Laude

Chloe Nicole Smith
Cum Laude

Jessica Anne Smith
Cum Laude

Myranda Smith
Cum Laude

Allison Anne Snyder
Cum Laude

Austin Jordan Snyder
Cum Laude

Taylor Mari Snyder
Cum Laude

Kiersten Brooke Souders
Cum Laude

Ian Richard Speck
Cum Laude

Tyler Aaron Spitz
Cum Laude

Cauy Christopher Sprankle
Cum Laude

Adyson Marie Stahler
Cum Laude

Mia Renee Stallard
Cum Laude

Holli Marie Stalter
Cum Laude

Chloe Madison Stefan-Adams
Cum Laude

Reis Stocksdale
Cum Laude

Robert Benjamin Strianese
Cum Laude

Darby Ashley-Anne Studer
Cum Laude

Lorenzo Cavelle Styles
Cum Laude

Cherry Louise Lado Sumagaysay
Cum Laude

Ava Marie Surovey
Cum Laude

Jayna Lynn Elizabeth Svoboda
Cum Laude

Lauren Elizabeth Sweeney
Cum Laude

Samuel George Swift
Cum Laude

Cody David Tabler
Cum Laude

Nicholas Talbott
Cum Laude

Abigail Jane Taylor
Cum Laude

Rachel Louise Teets
Cum Laude

Andrew Ryan Telpner
Cum Laude

Ella Rose Terry
Cum Laude

Lauren McKenzie Thomas
Cum Laude

Tia Lynn Thomas
Cum Laude

Kaycee Annika Thompson
Cum Laude

Brooke Evelyn Tibbits
Cum Laude

Ashley Ann Tipton
Cum Laude

Gabrielle Delores Tobias
Cum Laude

Abigail Marie Tocash
Cum Laude

Sophia Jane Toth
Cum Laude

with Honors in Education and Human
Ecology
Cum Laude

Jocelyn Rose Trout
Cum Laude

Emily Elisabeth Troyer
Cum Laude

Cassidy Nicole Turner
Cum Laude

Spencer Jason Tyo
Cum Laude

Allison Underwood
Cum Laude

Renee Villamor Umland
Cum Laude

Taylor Rae Urbina
Cum Laude

Maya Ann Ursem
Cum Laude

Sophie Ann Ury
Cum Laude

Madeline Rose Valentiane
Cum Laude

Gabriella Angelina Valentino
Cum Laude

Robert Benjamin Van Buren
Cum Laude

Amber Elane Van Hoose
Cum Laude

Malerie Vandyne
Cum Laude

Jayla Lee Vanhorn
Cum Laude

Olivia Riley Vanoverbeke
Cum Laude

Ashley Marie Vaughn
Cum Laude

Veydthant Venkitakrishnan
Cum Laude

Ayla Marie Wachowski
Cum Laude

Lance Wagenbrenner
Cum Laude

Liam Christopher Glenn Walters
Cum Laude

Landon Micah Ward
Cum Laude

Abigail Kathleen Watkins
Cum Laude

Bryanna Kay Watts
Cum Laude

Chase Brooks Wells
Cum Laude

Steven Brian Wenner
Cum Laude

Elijah Paul Werder
Cum Laude

Skylee Werner
Cum Laude

Lucy Kathryn Whittemore
Cum Laude

Michaela Elizabeth Widmer
Cum Laude

Dylan Noel Wierville
Cum Laude

Audrey Grace Wilkens
Cum Laude

Carver John Williams

Kelly Ryan Williams
Cum Laude

Deric Anthony Williamson
Cum Laude

Amanda Lynn Willis
Cum Laude

Mara Ecaterina Winbigler
Cum Laude

Jacob Michael Winslow
Cum Laude

Brian Eugene Wiseman
Cum Laude

Sydney Marie Woonish
Cum Laude

Sophia Margaret Wolf
Cum Laude

Anna Mary Woods
Cum Laude

Miuka Yamauchi
Cum Laude

Yongyi Yang
Cum Laude

Azhaar Mahdi Yasin
Cum Laude

Hannah Jane Yochem
Cum Laude

Cole Matthew Young
Cum Laude

Noor Yunis
Cum Laude

Laura Jane Zalewski
Cum Laude

Sheng Zhang
Cum Laude

Nan Zhou
Cum Laude

Tianli Zhu
Cum Laude

Katrina Kiyoko Zimmerman
Cum Laude

College of Engineering

Dean: Ayanna Howard

Bachelor of Science in Aerospace Engineering

Ngosong Achambeng
Cum Laude

Yahye Ahmed
Cum Laude

Cesar John Aoun
Cum Laude

Braden Warren Atchison
Cum Laude

Joshua Louis Baker
Cum Laude

Kaleb Michael Baker
Cum Laude

Jack Thomas Barnoski
Cum Laude

Raymond Dennis Bertke
Cum Laude

Hayden Wayne Brown
Cum Laude

with Honors in Engineering
Cum Laude

Robert Frank Bruns
Cum Laude

Spencer William Cannon
Cum Laude

Collin Nicholas Carroll
Cum Laude

*Rylie Harman Collins
Cum Laude

Logan Joseph Daubenspeck
Cum Laude

with Honors in Engineering
Cum Laude

with Honors Research Distinction in
Aerospace Engineering
Cum Laude

Aaron Dauer

*awarded posthumously

Dominick Michael Delpico

Summa Cum Laude

Tao Kaizen Dodeja

Tyler Ryan Dominak

Jake Curtis Ferris

William Walter Fink

Cum Laude

Michael Joseph Gallagher

Matthew David Geiger

Cum Laude

Nicholas Stephen Gomori

Cum Laude

Jordan Max Grossman

Ryan Thomas Halloran

Cum Laude

Zain Ahmed Hamid

Magna Cum Laude

Tsubasa Gene Harada

Summa Cum Laude

Ian Michael Harris

Magna Cum Laude

with Honors Research Distinction in

Aerospace Engineering

Alexander Orion Hartsough

Magna Cum Laude

Maxwell Christopher Heil

Cum Laude

with Honors Research Distinction in

Aerospace Engineering

Matthew Bradley Heinzman

Magna Cum Laude

Cameron Kidd Holmes

Cum Laude

Luke Alexander Horne

Magna Cum Laude

Waleed Jamshaid

Tyler Thomas Jensen

Magna Cum Laude

Matthew Jason Kogler

Cum Laude

Cole Joseph Kowatch

Cum Laude

Nisha Vinod Kumar

Cum Laude

Thomas Lykins

John Wesley Main

Summa Cum Laude

John Russell Manuel

Cum Laude

Joshua Robert Mason

Lillian Doris McClure

Mason George Mitchell

Summa Cum Laude

Kiran Nahush Mokadam

Cum Laude

with Honors in Engineering

Michael Joseph Montanile

Cum Laude

Lincoln Montunnas

Magna Cum Laude

Jakub Grzegorz Moroz

Magna Cum Laude

Dustin Jacob Mostoller

Arefa Motiwala

Molly Margaret Nerici

Cum Laude

Victor Luis Ortiz II

Magna Cum Laude

Jace Park

Nathan Alexander Parsons

Cum Laude

Prachi Patel

Cum Laude

Christopher Luke Paxton

Magna Cum Laude

Abigail Ann Pollauf

Svitlana Prymachuk

Annamalai Rajarethinam

Vabithadevi

Summa Cum Laude

Julio Alejandro Ramirez Gonzalez

Cum Laude

Madison Grace Reents

Harrison James Rieck

Phillip Anthony Rundo

Advaith Saraff

with Honors in Engineering

Nathan Edward Savino

Summa Cum Laude

Arushi Sharma

Summa Cum Laude

John Sichel

Jessica Jane Sillus

Summa Cum Laude

with Honors Research Distinction in

Aerospace Engineering

Maya Nicole Sivakumaran

Cum Laude

with Honors Research Distinction in

Aerospace Engineering

Luc Sloan

Stephanie Marie Small

Magna Cum Laude

Brandon Lowell Snedeker

Cum Laude

Matthew Joseph Stark

Colby Edgar Swager

Summa Cum Laude

Eshan Swaminathan

Grant Christopher Switzer

with Research Distinction in Mechanical

Engineering

Angelina My-Huyen To

Siddharth Vaghiasa

Magna Cum Laude

Cooper David VanCamp

Magna Cum Laude

Jillian Susann Weita

Hannah Nichole Wetklow

Pierce Michael Will

Magna Cum Laude

Jordan Tyler Williams

Brady Mitchell Wilson

Magna Cum Laude

Benjamin Kyle Workman

Summa Cum Laude

Hefei Xu

Magna Cum Laude

Huangcheng Yu

Magna Cum Laude

Annabelle Jane Zerby

**Bachelor of Science in
Architecture**

***(Austin E. Knowlton School of
Architecture)***

Jose Eduardo Alvarado-Barillas

Cum Laude

Sasha Vladimirovna Anoshenko

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Terrence Shomari Bailey, Jr.

Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Reagan Ellen Baran

Magna Cum Laude

Janavi Bhatt

Magna Cum Laude

Ana Sofia Bretscher

Magna Cum Laude

Pe   Michael Carney

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Justin Allen Cederbloom

Summa Cum Laude

Yousef Dakhil

Theresa Cathleen DeCesare

Magna Cum Laude

Rory Rianne Eikleberry

Magna Cum Laude

Cecilia Natali Fausey

Magna Cum Laude

Tina Marie DeSousa Filipe

Magna Cum Laude

with Honors Research Distinction in

Architecture

Shelby Faith Fisher

Magna Cum Laude

Julianna Galo

Magna Cum Laude

Joseph Nicholas Gargasz

Magna Cum Laude

with Honors Research Distinction in

Architecture

Henry Somerville Gleeson

Magna Cum Laude

with Honors Research Distinction in

Architecture

Deon Lamont Goins

Arianna Marie Gonzalez

Rodr  guez

Antoine Gray

Cum Laude

Sameeksha Guddanti

Magna Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Alaina Grace Havrilla

Magna Cum Laude

Sasmi Dulansa Heellage

Zofia Jagerova

Magna Cum Laude

with Honors in Architecture

Akilah Monet Jones

Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Navjot Kaur

Samuel Andrew Kazmaier

Magna Cum Laude

Grace Elizabeth Koenig

Magna Cum Laude

Geephas Lawm

Magna Cum Laude

Natalie Anne Leszcz

Magna Cum Laude

Kristin Heidi Leuzinger

Summa Cum Laude

Arantxa Nicole Lituma Hernandez

Caroline Rose Long

Emma Rose Lutz

Magna Cum Laude

Praharshini Krishna Manne

Cum Laude

with Research Distinction in

Architecture

Nathaniel Mark William Masters

Magna Cum Laude

Avery Elizabeth Mays

Magna Cum Laude

Daevon Daniel McDowell

Cum Laude

Lauren Taylor Metcalf

Magna Cum Laude

with Honors in Architecture

Aiden Joon Mischley

Magna Cum Laude

Yonna Y. Mohamed

Magna Cum Laude

Molly Jeanne Mullahy

Shayla Nguyen

Cum Laude

Chetan Sai Pabboju

Diya Patel

Magna Cum Laude

Nolan Don Payne

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Madalyn Grace Phillips

Magna Cum Laude

Jordan Dominic Calaycay Piskach

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Ian Milan Rader

Magna Cum Laude

Sydney Michele Ralofsky

Cum Laude

Clara Renee Reed

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Kasi SumYin Reed

Summa Cum Laude

with Honors in Architecture

Anne Regrut

Magna Cum Laude

with Honors Research Distinction in

Architecture

Lauren Reynolds

Magna Cum Laude

Rachael Ann Ricketts

Magna Cum Laude

Madison Elizabeth Rutter

Magna Cum Laude

Corey Lee Sands

Summa Cum Laude

Gabrielle Solange Santalis

Cum Laude

Karan Sanyasi

Joseph Lee Schauer

Magna Cum Laude

Bryce Charles Seward

Magna Cum Laude

Aastha Shankar

Gina Catherine Silvestri

Cum Laude

Sydney Eileen Stuermer

Magna Cum Laude

Anna Tsirambidis

Magna Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Quanyi Wang

Summa Cum Laude

David Wade Whittington

Cum Laude

Taylor Noelle Wilkins

Summa Cum Laude

Aidan Robert Williams

Summa Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

Morgan Elizabeth Winters

Magna Cum Laude

Liliana Hope Yocum

with Research Distinction in Architecture

Luke A. Zeleznik

Cum Laude

Ian Walter Zitney

Magna Cum Laude

with Honors in Architecture

with Honors Research Distinction in

Architecture

**Bachelor of Science in
Aviation**

Alexander Banks

Cum Laude

Blake Charles Bratz

**Bachelor of Science in
Biomedical Engineering**

Emilio Andres Alvalle
Cum Laude

Shannon Grace Appel
Cum Laude

Mohamed Junaid Ashraf
Rohan Banerjee
Magna Cum Laude

Jacob Robert Barnes
Magna Cum Laude

Grant Windsor Barringer
Summa Cum Laude

Adithya Bharathan
Cum Laude

Mitchell Thomas Boggs
Magna Cum Laude

Derek A. Borsody
Magna Cum Laude

Madison Abigail Briggs
Austin John Kenner Carlin
Summa Cum Laude

Grant Yates Carter
Summa Cum Laude

Mariana Isabel Correia
Magna Cum Laude

Matthew Shroyer Crump
Magna Cum Laude

Ervin Young Cui
Magna Cum Laude

Abhishek Reddy Damughatla
Cum Laude

Vedshree Suresh Deshmukh
Magna Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Malicki Diallo
*with Honors Research Distinction in
Biomedical Engineering*

Samuel Patrick Duckworth
Magna Cum Laude

Ryan Michael Eldridge
Cum Laude

Daelyn Laurel Eppers
Summa Cum Laude

Andrew Theodore Foster
Summa Cum Laude

JianXiang Gao
Magna Cum Laude

Isabel Victoria Garcia
Cum Laude

Daniel Gaudiano Del Bosque
Magna Cum Laude

Michael James Glinatsis
Cum Laude

James S. Gooding III
Summa Cum Laude
with Honors in Engineering

Spencer W. Green
Summa Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Emma Madison Grimm
Cum Laude

Akina Gunawan
Summa Cum Laude

Emily Anne Hayward
Cum Laude

Kate Elizabeth Herr
Magna Cum Laude

Molly Sarah Hubert
Magna Cum Laude

Kennedy Danielle Hughes
Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Aidan Gene Isler
Summa Cum Laude

Jacob Darren Johnson
Cum Laude

Mihir Pandey Joshi
Magna Cum Laude
with Honors in Engineering
*with Honors Research Distinction in
Biomedical Engineering*

Logan Alexander Kaising
Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Emmanuelle Kim
Summa Cum Laude

Jinju Kim
Cum Laude

Joellen Elisabeth Kneple
Cum Laude

Gabriel Mark Krieger
Emma Krondorfer
Luke Edward Lagando
Summa Cum Laude

Zachary Bryan Lambert
Cum Laude

Philip Viet Le
Michael Lee
Joseph Yiu-Jo Li
Cum Laude

Sheryl Li
Cum Laude

Kasey E. Lichtner
Summa Cum Laude

Elliot Patrick Limpach
Magna Cum Laude

Simon Thomas Lococo
Magna Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

William Wallace MacLeod
Summa Cum Laude

Apurva Makote
Cum Laude

Lauren Ashley Manton
Magna Cum Laude

Joel George Mathew
Summa Cum Laude

Nolan Z. Meister
Cum Laude
with Honors in Engineering

Abby Meyer
Magna Cum Laude

Aisha Rafiek Milhem
Cum Laude

Alexander Robert Mohr
Christopher Robert Mueller
Magna Cum Laude

Naomi Uma Mukka
Summa Cum Laude
with Honors in Engineering

Ryan Jeffrey Neher
Cum Laude

Samuel Vincent Nori
Dilyn Nicole Parker
Aniline Paudel
Jacob Eitan Peri
Cum Laude

Jenna Hayden Pirrello
Magna Cum Laude

Alexander Chin Poh
Nadia Maria Pokrajac
Magna Cum Laude

Jenna Lee Popko
Cum Laude

Dhairini Prasad Sudha
Cum Laude

Luca Ruzene Pretti
Cum Laude

Chanuth Theekshana Ranathunga
Magna Cum Laude

Eliana Grace Rider
Magna Cum Laude

Logan David Schneider
Summa Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Rylee Mason Slisher
Cum Laude

Alexyss Elizabeth Smith
Cum Laude

Robert Anderson Smith
Magna Cum Laude

William Stark
Cum Laude

Matthew Orin Starkey
Summa Cum Laude

Colin Randall Stewart
Cum Laude

Jack Donato Sweet
Summa Cum Laude

Neil Nitesh Thakkar
Magna Cum Laude

Mary Christine Tokar
Yue Wang
Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Arani Sachithma Wanigasekara
Elizabeth Sue Wrasman
Magna Cum Laude

Benjamin Henry Wyrick
Joanne Zhenzhen Xu
Magna Cum Laude
with Honors in Engineering

David James Young
Summa Cum Laude

Andrew Michael Zagorski
Magna Cum Laude

Ali Zafari
Cum Laude

Yiting Zhang
Cum Laude
*with Honors Research Distinction in
Biomedical Engineering*

Meiwei Zhu
Magna Cum Laude

**Bachelor of Science in
Chemical Engineering**

Ubaid Abdullahi
Maxwell Diego Parollina Arenas
with Honors in Engineering

Cameron Michael Baird
Brock Anthony Baldrige
Alton Tyler Ball
Grace Emily Barton
Aditya Bhargava
Magna Cum Laude

Quincy Elizabeth Bizjak
*with Research Distinction in Chemical
Engineering*

Isaiah Alexander Bowman
Holden Daniel Clark
Sarah Katherine Clymer
Clayton Reid Connelly
Magna Cum Laude

Haley Anne Coso
Kylie Elizabeth Cox
Magna Cum Laude

Trevor Allen Cramer
Nathan Bryan D'Agostino
Magna Cum Laude

Anna Caroline DeBastiani
Jack Raymond Deptola
Cum Laude

Francis Joseph DiNinno
Ethan James Feisthamel
Brandon V. Fernandez Castro
Antonio Scott Fitzsimmons
Johnathan Gregory Gaudio
Magna Cum Laude

Ashley Marie George
Summa Cum Laude

Arnaldo Gonzalez Calero
Luke Thomas Fallon Good
Nondyce Claire Gulick
Mason Curtis Heithaus
Cum Laude

Joshua Dean Hoak
Magna Cum Laude

Jason Jiazheng Hu
Luke Jeffrey Jackson
Spencer Michael Jankowski
Summa Cum Laude
with Honors in Engineering

Himadri Khatiwada
Cum Laude

Kangwon Kim
Brady Allen Kinsman
Matt Kubinski
Darlen Petro Kulchitsky
Raymond Joseph LaRosa
Magna Cum Laude

Hanna Lee
Benjamin Alfred Lerner
Magna Cum Laude

James Yiu-Chung Li
Maria Helena Lindberg
Kevin Scott Lindstrom
Cum Laude

Nicole Elizabeth Lippucci
Magna Cum Laude

Andrew Stefan Lisowsky
Jordan Christine Loeffler
Cum Laude
*with Honors Research Distinction in
Chemical Engineering*

Elijah Bernhard Lothrop
*with Research Distinction in Chemical
Engineering*

Abigail Grace Malino
Cum Laude

Isabella Miette Marcelo
Andrew Jacob Marmer
Cum Laude

Nicholas Stanley Marszal
Brooke Lauren Merced
Brennen Michael Meyer
Ethan Miller
Nur Amirah Binti Muhamad Faizul
Magna Cum Laude

Chinonso James Ndife
Matthew Ng
Summa Cum Laude
with Honors in Engineering

Jonathan Dush Post
Summa Cum Laude
with Honors in Engineering

Ethan Leonard Potoczak
Cum Laude

Aiden Christian Read
Emily Grace Riddle
Cum Laude

Nolan Kirk Robeson
Magna Cum Laude

Deidra Kristine Runkle
Cum Laude
with Honors in Engineering

Caleb Daniel Mark Russell
Marin Ruth Sandefur
Cum Laude

Caleb Jay Schimming
Heather Schwab
Haley Elizabeth Scott
Summa Cum Laude

Evan Douglas Shaw
Summa Cum Laude

John Michael Slye II
Adam Smith
Connor Ryan Smith
Magna Cum Laude

Carter Anthony Stevens
Jessica Lynne Stout
Kotaku Hikosaka Tam
Cum Laude

Jarod Garland Vance
Alexander Michael Williams
Gabriel Tianyi Yin
Chae-hwa Yoo
Cum Laude

Eian Gregory Zachmann
Summa Cum Laude

Kevin Zhang
Cum Laude

Anthony Hanchuan Zhu
Summa Cum Laude

**Bachelor of Science in City
and Regional Planning
(Austin E. Knowlton School of
Architecture)**

Cecelia Ann Arko
Summa Cum Laude

Bakhri Alizhanovich Bakhriyev
Cum Laude

Rut Bansal
Magna Cum Laude

Simon Nathanael Bell
Magna Cum Laude

Victoria Lynn Brubaker
Magna Cum Laude

Cameron Das
Summa Cum Laude

Isaac Emanuel Edwards
Summa Cum Laude
*with Honors in City and Regional
Planning*

Michaela Karin Evans
Erin Paige Flanagan
Summa Cum Laude

Ethan Bradley Koch
Cum Laude

Brandon Andrew Kopkas
Magna Cum Laude
*with Honors in City and Regional
Planning*

with Honors Research Distinction in City
and Regional Planning

Gabriel Kalani Kovach

Magna Cum Laude

Devon Elyse Kuchta

Magna Cum Laude

with Honors in City and Regional

Planning

Junmin Lee

Magna Cum Laude

with Honors in City and Regional

Planning

Bobby Arthur McAlpine

Sophia Helena Swisher Morales

Magna Cum Laude

with Honors in City and Regional

Planning

Kathryn Lee Oberlin

Summa Cum Laude

with Honors in City and Regional

Planning

Alexis Ann Pasanen

Magna Cum Laude

Griffin Xavier Roberts

Magna Cum Laude

Mackenzie Leigh Rounds

Cum Laude

Jessie Andrew Sampson

Summa Cum Laude

Yashi Shah

Madison River Strauss

Summa Cum Laude

with Honors in City and Regional

Planning

Ridwan Kolade Umar

Beckham Hart Watson

Jamil DaCosta Wright

Bachelor of Science in Civil Engineering

Muhammad Imran Asyraf Abd

Aziz

Summa Cum Laude

Mohammed A M A Alanbaee

Tristen Jeremy Alkire

Cum Laude

Bassim James Atassi

Magna Cum Laude

Kaleb Edward Bauman

Alec Tyler Berkowitz

Jalen Alexander Bethel

Zachary Alan Bilzing

Magna Cum Laude

Claire Elizabeth Birkhold

Aidan Anthony Bonitz

Magna Cum Laude

Jack Crawford Calesaric

Abigail Rosalie Casavant

Magna Cum Laude

Ratan Chinta

Szymon Jozef Chryczyk

Charlie Captain Collins

Matthew Ian Conroy

Magna Cum Laude

Alyson Cotton

Summa Cum Laude

Jackson August Crane

Dalton Jeremy Daugherty

Awa Diarra Diakhate

Brennan Brian Murphy Doran

Rocco Fiore

Ezra Christopher Fleeman

Thomas Mitchell Fletcher

David McLaughlin Gardner

Nicholas A. Gioia

Luke Samuel Goins

William D. Goldsmith

Trent David Graham

Cole A. Haggard

Zachary Thomas Hamberg

Kirsten Elizabeth Hartke

Magna Cum Laude

Ryan Alexander Hess

Alexander McManus Hettick

Lindsey Sue Hjelte

Magna Cum Laude

Will Donovan Hoefke

Cum Laude

Thomas Horner

Emma Grace Hunter

Charles Laurello Huth

Andrew Dale Jones, Jr.

Ryan Foltin Kemer

Brendan Jacob Khazzam

George Fisher Laidig

Parker Alason Lamb

Andrew Daniel Layton

Tyler David Ligan

Magna Cum Laude

Thomas John Loftus

Cameron Donald Mailer

Nicholas Edward Maione

James Peter Marielli IV

Andrew Connor Massey

Shane Robert May

Vance Thomas McClanahan

Sean McLaughlin

Braydon Spencer Miller

Cum Laude

Sophia Rose Miller

Bahaa Hesham Mohamed

Zachary Pierce Moller

Christian James Moreland

Jay Anthony Muhlenkamp

Magna Cum Laude

Jared Alza Muñoz

Jack William Norris

Pietro Pozzi

Cum Laude

Colin Thomas Price

Salman Gadeer

Ian Radanovich

Jia Johanna-Jean Radloff

Cum Laude

Maxwell Walcott Remick

Cum Laude

Matthew Ronald Richards

Cum Laude

Joel Stuart Richendollar

Michael Anthony Rizzo

Jesus Rodriguez

Helena Rose Ronnebaum

Cum Laude

Nathaniel Charles Salata

Magna Cum Laude

Eric Matthew Schmidt

Joseph Douglas Schockman

Magna Cum Laude

Ryan Edwin Shafer

Braden Robert Shoaf

Magna Cum Laude

Jacob Anthony Sinitic

Rothanthi Konstantina Souris

Magna Cum Laude

Benjamin Paul Stall

Mason Francis Stams

Noah Strassel

Gabrielle Szymczak

Summa Cum Laude

Samuel Garrison Till

Michael Trippier

Magna Cum Laude

Jared James Weiss

Ethan Edward Wells

Nicholas Kenton Wells

Brenneke Canyon Wilcoxon

Summa Cum Laude

Brian Thomas Wilkerson

Anthony Joseph Wright

Jiazhe Xu

Bachelor of Science in Computer Science and Engineering

Abdullah Abdeldayem

Summa Cum Laude

Sahra Abdunur Abukar

Sammy Kareem Aidja

Magna Cum Laude

Saif Mohamed Yousif Mohamed

Alzaabi

Cum Laude

Jisan Ferdaus Amin

Cum Laude

Reid Grantland Ammer

Cum Laude

Theodore Steven Anzevino

Cum Laude

Sirojiddin Aripov

Alexander Dalton Arnone

Mohamed Asmali

Abigail Faith Atchley

Cum Laude

Briana Marie Basile

Winston Haskell Basso-Schricker

Jerry Mikkel Cristoffer Solis

Baterina

Summa Cum Laude

Nicholas Michael Carr Bateson

Jay Warren Baum

Summa Cum Laude

Landon David Beckley

Summa Cum Laude

William Taylor Begley

Sebastian Brian Bell

Magna Cum Laude

John Paul Belli

Ryder Ian Berry

Muhammad Haikal Bin Rozaidi

Summa Cum Laude

Seth Mason Blankenship

Haley Marie Bonidie

Magna Cum Laude

Daniel Robert Brace

Steven Alexander Broaddus

Summa Cum Laude

Andrew James Braun

Steven Alexander Broaddus

with Honors in Engineering

Mathias Bustamante

Cum Laude

Cade Campbell

Joel Campofiori

Nicholas Elliot Carrino

Jonathan Andrew Castellanos

Cum Laude

Austin Chan

Cum Laude

Adithya Chandrashekar

Magna Cum Laude

Noah Daniel Charlton

Summa Cum Laude

Pranav Chati

Magna Cum Laude

with Honors in Integrated Business and

Engineering

Jayaditya Chawla

Cum Laude

Pengyu Chen

Cum Laude

Scott Chen

Cum Laude

Luke Stephen Chesney

Cum Laude

Aditya Chowdhury

Ethan Chung

Ian Jeffrey Claggett

Andy Clemens

Magna Cum Laude

Samuel Joseph Colston

Cum Laude

William Robert Comer

Summa Cum Laude

with Honors in Engineering

Benjamin Andrew Rand Crouch

Magna Cum Laude

Robert Anthony Curren

Nicholas Andrew Cyranek

Cum Laude

Jessica Jane Czerski

Magna Cum Laude

Matthew Aidan D'ippolito

Cum Laude

Sailesh Surya Darbha

Allison Sue Das

Vyom Dave

Summa Cum Laude

with Honors in Engineering

Shawn Anthony Davidson

Summa Cum Laude

Alex William Dean

Kai August Delventhal

Magna Cum Laude

Henry William Gabriel Denniston

Anushka Mandar Dewoolkar

Yuanlong Larry Di

Gabriel Michael DiFiore

Maitreya Dixit

Cum Laude

Avery Zhi-Qing Doctor

Summa Cum Laude

with Honors in Engineering

Brian Dong

Summa Cum Laude

Alexander John White Doom

Magna Cum Laude

with Honors in Engineering

Klinton Driscoll

Kyle Adrian Duff

Adam Benaissa Elyamani

Cum Laude

with Honors in Engineering

Mohamed Elzubeir

Brett Guy Emory

Michael Isaac Erickson

Cum Laude

Robert Paul Espinosa

Nicholas Stewart Evans

Magna Cum Laude

Victor Ademwumi Fawole

Cum Laude

Xining Feng

Zhenyang Feng

Summa Cum Laude

Braden Ferris

Summa Cum Laude

Preston Lewis Hines <i>Cum Laude</i>	Rithvik Narayan Kilaparthi <i>Magna Cum Laude</i>	Charles Finnigan McEwen <i>Cum Laude</i>	Akhilesh Reddy <i>Magna Cum Laude</i>	Saahith Talasila <i>Cum Laude</i>
Ann Marie Hoffman	Joe Kimeu	Jacob John McLachlan <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Puvvanrao Rhamarao <i>Cum Laude</i>	Tushara Talasila <i>Magna Cum Laude</i>
Ben Joseph Horstman <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Benjamin Kirchhoff	Ryan McQuone <i>Magna Cum Laude</i>	Leonardo Federico Ricotti <i>Cum Laude</i>	Brian Tan
Nathan Daniel Howe <i>Summa Cum Laude</i>	Alexandra Mae Kopelcheck <i>Magna Cum Laude</i>	Rahul Medicharla <i>Magna Cum Laude</i> <i>with Honors Research Distinction in Civil Engineering</i>	Daniel Rihm <i>Magna Cum Laude</i>	Jack Michael Taylor <i>Cum Laude</i>
Jackson Hoyt <i>Magna Cum Laude</i>	Nikko Patrick Kowalow	Dengchen Mei <i>Cum Laude</i>	Rory William Rodriguez <i>Summa Cum Laude</i>	Mehul Kirit Thakkar <i>Cum Laude</i>
Matthew Kentaro Hsieh	Aerin Elizabeth Krebs <i>Cum Laude</i> <i>with Honors in Engineering</i>	Ephratah Meskel <i>Cum Laude</i>	Jonathon Heath Ross <i>Magna Cum Laude</i>	Jasmyne Diana Thomas
Hanlin Hu <i>Cum Laude</i>	Iryna Kryvyak	Andrew Martin Migot <i>Summa Cum Laude</i>	Victor Ruan	Luke Yevgeny Thompson
Hao Huang <i>Cum Laude</i>	Ella Noel Langenderfer <i>Cum Laude</i>	Isaac Ezra Miller	Colin George Rush <i>Summa Cum Laude</i>	Paris Jada Thompson
Ayham Abayad Huq <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Dylan Charles Langenkamp	Brodie Matthew Milliken <i>Magna Cum Laude</i>	Sai Vishal Varma Sagi	Zachary Steele Thompson
Alexandra Lyn Hurt <i>Cum Laude</i>	MengQi Lei <i>Cum Laude</i>	Calvin Alexander Milush <i>Magna Cum Laude</i> <i>Computer Science and Engineering</i>	Sriram Sai Ganesh <i>Magna Cum Laude</i> <i>with Honors Research Distinction in Computer Science and Engineering</i>	Tommy Tong <i>Cum Laude</i>
Spencer Michael Hurt <i>Magna Cum Laude</i>	Kevin Daniel Lewis <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Tyler Benjamin Milush <i>Cum Laude</i>	Akshat Sai Saladi	Matthew Travers <i>Cum Laude</i>
Nesochim Iheanyi-Igwe	Frank Li <i>Summa Cum Laude</i>	Zia Ali Mirza	Edgar Daniel Sanchez <i>Summa Cum Laude</i>	Luke Douglas Trenaman <i>Summa Cum Laude</i>
Aishwarya Rukmani Ilangovan	Haozhe Li <i>Cum Laude</i>	Jessica Lauren Molitor <i>Cum Laude</i>	Krish Kalpesh Sanghvi <i>Cum Laude</i> <i>with Honors in Engineering</i>	Benjamin Alan Turner <i>Magna Cum Laude</i>
Lia Kathryn Jacobs <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Tyler Li <i>Magna Cum Laude</i>	Andrew Hudson Moore <i>Cum Laude</i>	Guilherme Saraiva Barbosa De Oliveira	Kaleb Nicholas Turner <i>Summa Cum Laude</i>
Sakshi Jagalur Shashiraj <i>Cum Laude</i>	Yensong Ted Li	Mhgoub Elsheikh Mustafa	Shagnik Sarkar	Aryan Tyagi
Jaden Adelaide Jaros	Allen Liang	Justin Daniel Myers <i>Cum Laude</i>	John Paul Scali, Jr.	Jacob Alexander Uligian
Advait Jayadevan Nair <i>Cum Laude</i>	Donovan Liao <i>Cum Laude</i>	Rahul Nalam	Jack Thomas Scherner	Elbek Umarov
Kaushik Ram Jegath	Rory Isaac Liao <i>Summa Cum Laude</i>	Donovin Miguel Natividad <i>Cum Laude</i>	Ava Rose Scherocman <i>Cum Laude</i>	Nathaniel Douglas VanSickle <i>Magna Cum Laude</i>
Zubin Jha	Jordyn Elizabeth Liegl <i>Cum Laude</i>	Brenden Scott Naumovski <i>Cum Laude</i>	Henry Edward Schneider <i>Summa Cum Laude</i>	Alexander John Varchetti <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>
Grace Du Jiang <i>Magna Cum Laude</i> <i>with Honors in Engineering</i>	Joseph Allen Liette	Divya Negi	Bret Montgomery Shaffer <i>Magna Cum Laude</i>	Nicholas Luka Varga <i>Summa Cum Laude</i>
Richard Jiang <i>Magna Cum Laude</i>	Kayla Liggett	Erik Michael Nilsson	Aadit Shah <i>Magna Cum Laude</i>	Max Marquez Vargas <i>Cum Laude</i>
Kaicheng Jin	Tina Lin <i>Magna Cum Laude</i>	Muhammad Nabil Aqeeb Bin Norazilan <i>Magna Cum Laude</i>	Vraj Shah <i>Magna Cum Laude</i>	James Tony Vendetti
Kevin Jin	Christopher Linne <i>Magna Cum Laude</i>	Chimereze Osaze Nwaru	Yusuf Ali Shahzad <i>Magna Cum Laude</i>	Dhruv Venkataraman <i>Magna Cum Laude</i> <i>with Honors in Integrated Business and Engineering</i>
Akshar Sunil Jinandra <i>Magna Cum Laude</i>	Yen Chen Tony Liou <i>Cum Laude</i>	Declan James O'Brien <i>Magna Cum Laude</i>	Ian William Shemo <i>Magna Cum Laude</i>	Jack Charles Veverka
Aidan Thomas Johnson <i>Magna Cum Laude</i>	Ye Liu <i>Magna Cum Laude</i> <i>with Honors Research Distinction in Computer Science and Engineering</i>	Benjamin Yirenkyi Ofori	Joong Soo Shin <i>Magna Cum Laude</i>	Owen Henry Vogelpohl <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>
Caleb Kyusun Joo <i>Cum Laude</i>	Isabella Grace London <i>Magna Cum Laude</i>	Aidan Nii Okai Okantey <i>Summa Cum Laude</i>	Krutin Riddhish Shukla	Justin Kai Vogler
Carlin Simon Joseph <i>Summa Cum Laude</i>	Christian James Lorence <i>Summa Cum Laude</i> <i>with Honors in Integrated Business and Engineering</i>	Dhruvkrishna Palakkal	Tobias Edward Simpson <i>Magna Cum Laude</i>	Yash Wani
Madoka Kamishima	Wei Luo <i>Magna Cum Laude</i>	Meha Mehul Pandya <i>Cum Laude</i> <i>with Honors in Engineering</i>	Jay Adam Skrab	Nicholas Adam Webber <i>Cum Laude</i>
Danny Kan <i>Cum Laude</i>	Devin Maxwell Lust <i>Summa Cum Laude</i>	Darien Jabri Parker <i>Cum Laude</i>	Hayden Alexander Smith	Eden Robert Wertz
Alexandra Sara Kashani Motlagh	William Ma	Khushi Piyush Patel	Summer Mei Snell	Brandon Keith Wiedl <i>Magna Cum Laude</i>
Laxman Katneni	Victor Marc Alberic Madelaire <i>Cum Laude</i>	Mohisha Patel	Colin Somerville	Kiran T. Wijesooriya
Sarah Marina Keck <i>Cum Laude</i>	Varun Kumar Mangla <i>Magna Cum Laude</i>	Prithviraj Vijaybhai Patel	Nikhita Srikanth <i>Cum Laude</i>	Preston Avery Wilder
Anthony Justin Keller <i>Magna Cum Laude</i>	Kieran Bradford Mansfield	Jacob Edgardo Peña	Nandha Srivenkateswaran <i>Magna Cum Laude</i>	Ryan Gordon Winn
Sean Michael Kelley <i>Cum Laude</i>	Muhammad Adnan Maolood <i>Summa Cum Laude</i>	Daniel Louis Perry	Benjamin Robert Starrett <i>Summa Cum Laude</i>	Jerrin Wofford <i>Cum Laude</i>
Jack Damon Kern <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Olivia Rose Maynard	Robert Pham <i>Magna Cum Laude</i>	Skylar Ryan Stephens	Peter Wu <i>Cum Laude</i>
Shristi Keshri	Connor Richard McCabe	Abhinay Reddy Putta <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Zachary Kyle Stevens	Ricky Ruoxu Wu <i>Magna Cum Laude</i>
Samhith Reddy Kethireddy <i>Summa Cum Laude</i> <i>with Honors in Engineering</i>	Matthew John McCallister	Luke Michael Rako <i>Cum Laude</i>	Jonathan Talbot Strunk <i>Cum Laude</i>	Qiao Xiao <i>Summa Cum Laude</i>
Emmanuel Jordan Key	Kyler Howard McElroy	Suraj P. Rao	Raagul Sundaralingam <i>Magna Cum Laude</i>	Bill Yang <i>Magna Cum Laude</i>
Pranav Sanjay Kheny	Landon Matthew McElroy	Shriram Ravishankar <i>Summa Cum Laude</i>	Rhea Supekar <i>Summa Cum Laude</i> <i>with Honors Research Distinction in Biomedical Engineering</i>	Cheng Han Yang <i>Cum Laude</i>
Jonathan Jeffrey Kiener <i>Summa Cum Laude</i> <i>with Honors Research Distinction in Computer Science and Engineering</i>		Kyle Kenneth Reckamp <i>Cum Laude</i>		Wonyoung Yang <i>Summa Cum Laude</i>
		Henry Brandon Redder <i>Summa Cum Laude</i>		Matthew Kubena Yatsko
				Pranav Sutej Yenugu <i>Cum Laude</i> <i>with Honors in Integrated Business and Engineering</i>

Bojing Yu
Hani Nasuha Binti Yusof

Cum Laude

Eric Zachariah
Nathan Samuel Zarif

Cum Laude

Riley Teagan Zelazny
Aaron Fulin Zhang

Summa Cum Laude

Alex Zhang
Leonald Zhang

Summa Cum Laude

Sam Zhicheng Zhang

Magna Cum Laude

Allen Zheng

Magna Cum Laude

Ryan Zheng

Cum Laude

Selena Zheng

Cum Laude

Curtis Jinghao Zhi

HaoLing Zhou

Cum Laude

Deakon Ziegler

Magna Cum Laude

Bachelor of Science in Electrical and Computer Engineering

Matthew Robert Ackerman

Magna Cum Laude

Kevin Samuel Agnew

Summa Cum Laude

Cameron Joseph Ailes

Summa Cum Laude

David Matthew Allen

Om Amin

Cum Laude

Christopher Ryan Andrus

Cum Laude

Latera Anshu

Farha Bahisht

Nathan Joseph Ballay

Arnold Batata Bangudi

Atharva Bapat

Saeed Majed S Bashammakh

Claire Elizabeth Beineke

Amit Bharathan

Jacob Andrew Blanchard

John Francis Blank

Magna Cum Laude

Nicholas Andrew Bly

Cum Laude

Liam Porter Borling

Robert Thomas Bottomley

Devin Breed

Nathan Brunner

Logan William Burrell

Cum Laude

David Andrew Carpenter

Magna Cum Laude

Raina Reddy Chada

Jacob James Lee Ming Chang

Summa Cum Laude

Apoorv Chauhan

Junbo Chen

Yida Chen

Magna Cum Laude

Benjamin Patrick Combs

Cum Laude

Mikayla Ann Conforto

Jacob Cooley

Summa Cum Laude

Aidan Michael Cooper

Magna Cum Laude

Nicholas Andrew Coughlin

Nathaniel Crutchfield

Aditya Devnani

Tej Dungarani

Owen Dziak

Hayden John Elzey

Charles Gage Farmer

Faris Rahman Firoz

James Reid Fitzsimons

Dan Simon Flores

Peyton Michael Ford

Jason Forrester

Cum Laude

Connor Foster

Ziggy Mana Freeman

Keegan James Freyhof

Cum Laude

Seth Lee Fullenkamp

Sean William Galsterer

Noe Garcia

Patrick James Garrett

Summa Cum Laude

Tsion Gebreegziabher

Gebremichael

Sevonne Green, Jr.

Jacob Alexander Grow

Aden Walker Grube

Obo G. Gudeta

Cameron Gump

Justin Ha

Magna Cum Laude

Mohamed Ahmed Hambouta

Magna Cum Laude

Evan C. Hammerschmidt

Cum Laude

Madison Lee Harr

Cum Laude

Yishu He

Cum Laude

Kolbe Samuel Heeralal

Kacee Elizabeth Hemby

Aidan Michael Hemmert

Summa Cum Laude

Brett Dawson Hinkle

Andrew Charles Holton

Abdullah Ibrahim

Ali Ahmed-Nassir Ibrahim

Magna Cum Laude

Caleb Robert Irwin

Jacob Andrew Isaman

Evan Jiang

Summa Cum Laude

Timothy Ayomide Jimoh

Magna Cum Laude

Wyatt Edward Judson

Mallory Dawn Justus

Tatenda Kanyongo

Jacob Karg

Sergej Leon Kavs

Summa Cum Laude

Nickolas Ray Keener

Ashton Kenneth Keller

Summa Cum Laude

Ryan Kelsey

Woojae Kim

Brach Knutson

Jaimesh Kothari

Nolan Everett Larison

Magna Cum Laude

Philip Taiwo Lawal

Jacob Jon Lemley

Summa Cum Laude

Zebang Li

Ye Lin

Brandon William Linane

Ethan David Lorince

Maria Danielle Lovell

Alex Robert Lucas

Andrew Luckett

Marcus Alexander Macesich

Srikar Maduposu

Camden Majors

Krithik Maran

Cum Laude

Steven Vitus Masionis

Bethany Ciara Massenburg-

Jackson

Liam Ross Mazur

Megan Linn McCabe

Cum Laude

Conor Martin McKenna

Raevin Noel McQueen

Charles Milton Meadows III

Arman Ryan Mehzad

Magna Cum Laude

Shahil Snehray Merchant

Summa Cum Laude

Jonah Glen Mkesell

Marc Hayato Miracco

Ibrahim Mohamed

Siti Nur Yasmin Mohd Yusof

Cum Laude

Clayton Lee Mohler

Mikhail Alejandro Montes Ramalli

Summa Cum Laude

Zachary B. Mosher

Bona A. Muleta

Mary Grace Murray

Garrett William Nagelhout

Cum Laude

Divyaa Natarajan

Andrew Thomas Neate

Magna Cum Laude

Nathan Meyer Newman

Alexander Nguyen

Thang Huu Nguyen

Cum Laude

Joseph Allan Nitirahardjo

Summa Cum Laude

Aiden Thomas Novotny

Lily Emma Obert

Vraj S. Patel

Harry Dai Pham

Nipun Chowdary Ponugupati

Amro Emad Ramadan

Alexander Houshang Rassek

Magna Cum Laude

Vikas K. Reddy

Braden Grant Redick

Summa Cum Laude

Austin Michael Richie

Magna Cum Laude

Brett Thomas Rininger

Magna Cum Laude

Michael Edmond Roark

Cum Laude

Eizzul Eizmie Bin Rozaireen

Suneal Armaan Saini

Sergine Mouhamadou Samb

Nicolas Emmanuel Sanchez

Cum Laude

Shreya Sandurkar

Tyler Michael Schock

Samuel Thomas Schroeder

*with Honors Research Distinction in Food,
Agricultural, and Biological Engineering*

Luke Alfonso Serraglio

Tareq Khaled Shkoukani

Luke David Snelling

Anutam Kandadai Srinivasan

Summa Cum Laude

Nicholas Randall Stassen

Jackson P. Steiner

Magna Cum Laude

Marit Elizabeth Tainer

Summa Cum Laude

Ananth Sai Tamarapoo

Eric Tang

Magna Cum Laude

Tengku Luqman Hakim Tengku

Kamarul Bahri

Benjamin Cherian Thomas

Linghao Tian

Cum Laude

Christopher Jin Tong

Jaden Alexander Tri-Leanza

Ming Hsueh Tsai

Cum Laude

Elliott James Tyninski

Cum Laude

Vika Vorona

Kyle Joseph Walker

Lai Wei

Cum Laude

Isaac Christopher Wesner

Ian Matthew White

Cum Laude

Clyde Stanley Willis III

Summa Cum Laude

Deontae Lamar Wright

Deontre Troy Wright

Chen Yan

Magna Cum Laude

Xiaoxiang Yan

Seth Corey Yu

Cum Laude

Dingming Zhong

Summa Cum Laude

Cong Zou

Bachelor of Science in Engineering Physics

Lucas Gabriel Bruno

Braden Hunter Chapnick

Cum Laude

Joseph Dominic Criniti

Justin Thomas Donohoe

Evan Thomas Frisbie

Kyle H. Frith

Cum Laude

Nickolas Robert Hutchison

Brian Mccoy Kelley

Cum Laude

Nigel Dylan Keyser

Cum Laude

Hannah Grace Lyons

Magna Cum Laude

Varun Sripada

Patrick Sullivan

Darren Kenji Takaoka

Corey Eugene Thompson

Tal Yankevich

Magna Cum Laude

Bachelor of Science in Engineering Technology

Christopher Verano Arzanan

Cody Matthew Boebel

Edward Anthony Kill

Lauren Elizabeth Mason

Timothy McGuire

Cum Laude

Gage Matthew Myers

Cum Laude

Joshua Michael Niekamp

Magna Cum Laude

Samuel George Ratvasky

Michael Anthony Brindisi
Thielman
Magna Cum Laude
with Honors Research Distinction in Food,
Agricultural, and Biological Engineering

Jack Boston Thompson-Graves
Cum Laude

Mei Yan Elizabeth Thornton
Gea Aleyna Torres
Mia Lois Wang
Magna Cum Laude
with Honors Research Distinction in
Environmental Engineering

Katherine Jane Wittman
Magna Cum Laude

Bachelor of Science in Food, Agricultural, and Biological Engineering

Lydia Fern Alliman
Kyle Alan Anders
Alexander Babinski
Magna Cum Laude

Abubakar S. Bangura
Hannah Bernstein
with Research Distinction in
Microbiology

Hannah Marjorie Cahill
Ryan Michael Cary
Nolan Michael Dwenger
Magna Cum Laude

John Richard Eisenmann
Magna Cum Laude

Mia Rose Huber
Stavros Demetrios Humphrey
Nikolas Kankia
Jacob Matthew Krauss
Kelly Yangxu Labant
Delaney Raine Lee
Emily Ann Leninsky
Mason Ryan Lurie
Cum Laude

Charlie Michael Martin
Emma Nadine Masters
Magna Cum Laude

Maxwell Nanda
Nina Sofia Nebesh
Cum Laude

Elizabeth Victoria Nogueira Meza
Connor Michael Nuding
Magna Cum Laude

Rose Mae Peltan
Cum Laude

Benjamin Antonio Lee Prochaska
Cum Laude
with Honors in Engineering

Jonah T. Reeves
Cum Laude

Adam Clayton Rike
Magna Cum Laude

Jonathan A. Rucker
Weston Paul Ruffer
Cum Laude
with Honors Research Distinction in Food,
Agricultural, and Biological Engineering

Bryce Aaron Schott
Magna Cum Laude

Elizabeth Grace Schroer
Cum Laude

Parker Alan Smith
Ellie Renee Spiewak
Cum Laude

Olivia Claire Sullivan
Jordan Tenandar
Michel Wilcox, Jr.

Bachelor of Science in Industrial and Systems Engineering

Ryan Anderson
Nicholas J. Baldi
Nicholas Todd Beamster
Kayli Rebecca Bell
Summa Cum Laude
with Honors in Engineering

Joaquin Alberto Bello Thomas
Avery Antonette Bish
Cum Laude

Andrew James Boden
Summa Cum Laude

Alexander B. Carruthers
Allen Chen
Summa Cum Laude

Thomas William Clark-Phelps
Cassidy Hope DeJesus
Lathania Escobar Soto
Summa Cum Laude
with Honors in Engineering

Allison Margaret Facemyer
Cum Laude

Khadim Fall
Joseph Clark Fediaczko
Samuel Grant Fess
Matthew David Flick
Michael Sean Galvin
Susan Rebecca George
Keiran Nicholas Gorospe
Xander Finn Hake
Summa Cum Laude

Kaitlyn Elspeth Hay
Samuel Warren Heintz
Jack Thomas Henderson
Magna Cum Laude

Colin Joseph Hess
Rory William Hession
Muheeb Hijazeen
Summa Cum Laude

Michael Frederick Hofstetter
Krysten Marie Holmes
William Joseph Hook
Logan Lee Hoon
Cum Laude

Ian Thompson Hughes
Cum Laude

Emily L. Hunt
Connor Huss
Magna Cum Laude

Rey Henry Jean
Chad Micheal Johnson
Jonathan Tamunotonye Johnson
Michael Harris Kalina
Sujit Kalva
Brayden Dale Karr
Summa Cum Laude

Arielle Sarah Keselman
Magna Cum Laude

Lauren Donnae King
Rohan Madan
Cum Laude

Sebastian Ronald Marker
Magna Cum Laude

Caleb Martus
Cum Laude

Marie Frances Mayo
Connor McAndrew
Summa Cum Laude

Isabella Amalia Medici
Jenna Elizabeth Messmore
Grace Elizabeth Mirande
Summa Cum Laude

Sarah Ann Mrzena
Magna Cum Laude

James Gower Muha
Ryan Patrick Murphy
Magna Cum Laude

Govind Nadathur
Summa Cum Laude

Olek Naveh
Garrett Joseph Nerone
Cum Laude

Valencia Nguyen
Cum Laude

Jack Thomas O'Brien
Cum Laude

John Michael Olenik
Magna Cum Laude

Sahiti Paluri
Sydney Tate Pursuit
Grace Elisabeth Pfaffenbichler
Cum Laude

Samantha Marie Piffler
Anthony Jerome Pittinger
Magna Cum Laude

Keegan Robert Quigley
Parnish Rai
Sneh Rai
Vedha Rastogi
Summa Cum Laude
with Honors in Integrated Business and
Engineering

Daniel Franklin Ronis-Tobin
Advaidd Santosh
Alexia Vittoria Scavelli
Cooper Edward Schenk
Koel Roger Edward Odell Shaw
Maggan Sheikh
Allyson Spellacy
Graham David Stephenson
Summa Cum Laude

Patrick Stergar
Elyse Ellen Stieby
Cum Laude

David Straveler
James Earl Stukenborg
Magna Cum Laude

Molly Ellen Sullivan
Cum Laude

Colin Matthew Swincicki
Cum Laude

Soliana Tadesse
Ajay Gregory Tandon
Lianna Katherine Marie Tiber
Cum Laude

Daniel Christopher Tocco
Chenzhuo Tong
Cum Laude

Christian Vallone
Magna Cum Laude

Domenico Antonio Vitale
Magna Cum Laude

Andrew Jeffrey Volschow
Alyssa Marie Weigman
Magna Cum Laude

Jake Andrew Weiser

Bachelor of Science in Landscape Architecture (Austin E. Knowlton School of Architecture)

Sarah Ann AbuDakar
Magna Cum Laude

Providence Antrim
Magna Cum Laude

Robin Barth
Magna Cum Laude

Pavel Belyanskiy
Ella Ksenia Chaffee
Summa Cum Laude

Maggie Olivia Chafin
Summa Cum Laude

Blake Howard Chapman
Jiangliyu Dai
Dante Cruz DiBenedetto
Cum Laude

Courtney Patricia Dittman
Magna Cum Laude

Antanasia D. Dunson
Cum Laude

Sydrah Glasgo
Samantha Grant
Summa Cum Laude

Jamil Hallak
Cum Laude

Kara Renée Herman
Summa Cum Laude
with Honors in Landscape Architecture

Aditi Kapoor
Magna Cum Laude
with Honors in Landscape Architecture

Alison Hyuna Kim
Magna Cum Laude
with Honors in Landscape Architecture

Alexandra Lynne King
Norah Ruoyi Li
Summa Cum Laude
with Honors in Landscape Architecture

Edgar Lopez
Jenna Leigh Marsh
Magna Cum Laude

Daniel Patrick O'Brien
Malia Leslie Kalmar Pace
Connor John Pedrazzi
Magna Cum Laude

Jack Andrew Schilens
Dylan Jacob Sales Schneider
Ross Tyler Sherrock
Bryce Tyler Stewart
Magna Cum Laude

Madeleine Lynn Timmerman
Magna Cum Laude

Khadija Toure
Mario Aaron Trillo
Alizaya Arie Wilburn
Quinn Eileen Williams
Magna Cum Laude

Bryce Julian Worstell
Magna Cum Laude

Bachelor of Science in Materials Science and Engineering

Andrew Jordan Dalke
Magna Cum Laude

David Michael Davis
Jacob Samuel Eltschlager
Aidan Wallace Ferguson
John Foliano
Jack Tristan Gatten
Cum Laude

Nicola Daisy Glanville
Summa Cum Laude

Justin Robert Hayes
Genevieve Lewis
River Lichen
with Honors Research Distinction in
Materials Science and Engineering

Jennifer Lin
Aaliyah Jade Litman
Olivia Frances Barnard Macleod
Caroline Min
Nur Anis Binti Mohd Razuan
Megan Renae Moore
Landon Jo Muhlenkamp
Yifan Pang
Cum Laude

Krish R. Patel
Amanda Pizon
Olivia Rae Schmid
Annabel Marie Shim
Theodore Asher Feliciano
Solomon
Michael D. Topich
Elena Vance
Max Anthony Westrick
Henry Aaron Wiggins II
Meg Williams

Bachelor of Science in Mechanical Engineering

Nicholas Abbott
Ahmed Bassam Abdulatif
Pranav Aggarwal
Magna Cum Laude

Aiman Haikal Bin Ahmad Rizal
Cum Laude

Mario Joseph Alberino
Olivier Noe Alcantara-Bonilla
Summa Cum Laude

Camden Carter Allen
Magna Cum Laude

Oliver Lucas Allen
Cum Laude

Alex Christopher Altier
Magna Cum Laude

Connor McKinley Anderson
Samuel Thomas Arigo
Magna Cum Laude
with Honors in Engineering
with Honors Research Distinction in
Mechanical Engineering

Sarah Ashley Arp
Summa Cum Laude

Nicholas James Athans
Magna Cum Laude

Jonah Dean Bailey
Avi Balakirsky
Summa Cum Laude

Rexford Bammerlin
James Ethan Bates
Summa Cum Laude
with Honors Research Distinction in Mechanical Engineering

Jack Dooley Behling
Cum Laude

Andrew Joseph Beinhardt
Cum Laude

Alex Berman
Cory Thomas Blankenship
Magna Cum Laude

Andrew Ronald Bonfiglio
Sean Patrick Bowyer
Magna Cum Laude
with Honors Research Distinction in Aerospace Engineering

Bennett Sorensen Brabrand
Summa Cum Laude
with Honors in Engineering

William Brabrand
Summa Cum Laude
with Honors in Engineering

Owen McCord Brandon
Cum Laude

Miranda Ann Broehl
Alexander Gerald Brown
Ryan Jack Browne
John Peter Buckley
Cum Laude

Eliana Faith Bujwalo-Nowak
Cum Laude

Sophie Elizabeth Campbell
Cum Laude

Tarek Syed Chowdhury
Colton James Christie
Logan James Collene
Anna Cook
Cum Laude

Christine Renee Cook
Jonathan Rush Cooper
Summa Cum Laude
with Honors in Engineering

Tyler Allen Cordell
Cum Laude

Andrew W. Crandall
Cum Laude

Brian James Cuppett
Kennan Roger Davis
Magna Cum Laude

Sophie Mae Davis
Cum Laude

John James DeSanto
Magna Cum Laude

Matisse Daniel Jean-Claude
Despres
Magna Cum Laude

Edward Allen Dominek
Magna Cum Laude

Jessica Makayla Drake
Magna Cum Laude

Ryan Seiki Duffy
Magna Cum Laude

Thomas Allen Duval
Magna Cum Laude

Antoine Emil
Magna Cum Laude

Jacob Michael English
Cum Laude

Collin Michael Etters
Connor Douglas Ferguson
Joshua Fitzpatrick
Nicholas Jakob Fraser
Marco Friio
Cum Laude

Riley Sophia Fry
Cum Laude

Jeremy Alex Galin
Stephen Edward Gallagher
Summa Cum Laude

Noah Christian Girard
Magna Cum Laude
with Honors in Engineering

Brennan Crawford Gray
Cum Laude

Oliver Haik
Magna Cum Laude

Marcus Jujuane Hairston
George Ziad Hajjar
Summa Cum Laude
with Honors in Integrated Business and Engineering

Ryan Andrew Hammerschmidt
William Henry Harrington
Magna Cum Laude

Matt James Hartle
Magna Cum Laude

Jameson Matthew Hartnett
Summa Cum Laude

Jacob Michael Haubert
Joshua Havrilla
Deborah Mei Hodson
Magna Cum Laude

Shane Hohman
Luke Michael Hren
Magna Cum Laude

Donglin Huang
Cum Laude

Brandon Michael Hudock
Charles John Hunter
Ethan Jacob Hunter
Anish Varma Indukuri
Bhavanishankar Kalavakolanu
Brian Patrick Keefe
John Paul Keelan
Cum Laude

Christopher Alan Kight
Christian Lanz Kirchmann
Benjamin Mark Klaehn
Daniel Jason Kolb
Summa Cum Laude

Richard Fredrick Kolb
Colin Leland Ladegaard
Magna Cum Laude

Aubrie Lambert
Magna Cum Laude

David Edward Lampman
Lauren Steele Law
Parker Ross Lawson
Cody Allen Leasure
Cum Laude

Justin Thomas Lewinski
Summa Cum Laude

Andy Lin
Magna Cum Laude

William Lin
Magna Cum Laude

Erika Kelsey Linton
Cum Laude

Victor Owen Livesay
Matthew Kenneth Loffing
Sanjay Singh Luckwitz
Summa Cum Laude

Drew Thomas Malafa
Alexander Jin Mantle
Summa Cum Laude

Stephanie Marsh
Kaleb Amani Martin
Summa Cum Laude

Edward Fritz Marxen
Magna Cum Laude

Hayden Rodney Miller
Gavin J. Moffitt
Magna Cum Laude

Akmal Arif Bin Mohd Khairudin
Cum Laude

Benjamin Matthew Morris
Magna Cum Laude

John Michael Murray III
Vita Abigail Nagy
Magna Cum Laude

Jimmy Dang Nguyen
Magna Cum Laude

Trenton Hoover Niese
Summa Cum Laude

Kyle Daniel Nitzsche
Magna Cum Laude

Gianni Dominic Nocera
Summa Cum Laude

Muhammad Mirza Bin Noor
Affandie
Cum Laude

Leah Rose Norton
Nathan Michael Nowicki
Cum Laude

Mitchell James Onionen
Summa Cum Laude

Samuel Joseph Olack
Magna Cum Laude

Stefan Christian Olsen
Cum Laude

Joshua Daniel Orlett
Cum Laude

Karpagam Devi Palaniappan
Travis Heaven Papesh
Cum Laude

Isabella Rose Pappano
Cum Laude

Jake Robert Petro
Cum Laude

Alexa Plotkin
Summa Cum Laude
with Honors Research Distinction in Mechanical Engineering

Kyle Raymond Provonsil
Cum Laude

Spencer Boyd Pulte
Summa Cum Laude
with Honors in Engineering

Anthony Van Quach
Cum Laude

Muhammad Irfan Adam Bin
Rasmadi
Matthew Samuel Raver
Spencer Michael Reardon
Summa Cum Laude

Matthew Thomas Rechten
Michael William Recker
Joseph Marold Richmond
Magna Cum Laude
with Honors Research Distinction in Mechanical Engineering

Jonah Bolinas Robles
Joshua Michael Rorstad
Katherine Ann Rosengarten
Cum Laude

Dustin Ryan
Jeremiah Thomas Sablak
Summa Cum Laude
with Honors Research Distinction in Mechanical Engineering

Neil Brijen Sawant

Joshua Robert Schaffner
Summa Cum Laude

Hollis Alexander Schuler
Summa Cum Laude
with Honors in Engineering

Aaron Ellis Schusterman
Magna Cum Laude

James Robert Scotford
Magna Cum Laude

Jack Michael Seifert
Devon James Sever
Magna Cum Laude

Benjamin J. Shiffer
Kevin Yolee Shih
Brannon Alair Simerla
Sulina Ann Sisouphanh
Dillan Thomas Smith
Wenqin Song
Summa Cum Laude

Adam Richard Sophocleous
Cum Laude

Noah Benjamin Stafford
Benjamin D'Ercole Stauffer
Summa Cum Laude
with Honors in Engineering

Bradley Eric Steinbauer
Courtney Renee Suchan
Ryan Dallas Swiger
Kenny Isamu Tanaka
Magna Cum Laude

Luke Robert Tangeman
Cum Laude

Zachary Mark Tarvin
Liam Patrick Thesing
Brandon Matthew Thome
Cum Laude

Landon Harris Tipsword
Magna Cum Laude

Yun Tse Tseng
Benjamin Edward Tursky
Cum Laude

William Theodore Van Fossen
Cum Laude

Yi Tzu Wang
Summa Cum Laude

Kaleb Nathaniel Washington
Magna Cum Laude

Amanda Brooke Weiskind
Summa Cum Laude
with Honors in Engineering

Bennett Fahlgren Wettengel
Cum Laude

Sabina Sky Williams
Jonathon Connor Willis
Cum Laude

Caden Ryan Wilson
Matthew Adam Winecki
Summa Cum Laude

Nicolas Edward Zatezalo
Magna Cum Laude

Haiyang Zheng
Cum Laude

Audrey Margaret Zorman
Magna Cum Laude
with Honors in Engineering

Avery Grace Zwyayer
Summa Cum Laude
with Honors in Engineering

Bachelor of Science in Welding Engineering

Garrett Steven Anders
Henderson Thomas Bishop
Dominic Vincent Butto
Luke King Campbell
Cory Matthew Lange
Aaron Lee May, Jr.
Trenton Douglass McCann
Sean Patrick McGinnis
Cum Laude

Nicholas McIntyre
Nicholas Alexander Perkoski
Nathan Shin Robertson
Jacob Scott Roof
Benjamin James Streicher

College of Food, Agricultural, and Environmental Sciences

Dean: Cathann A. Kress

Bachelor of Science in Agriculture

Tanner Henry Adair
Dasianique Adams
Matthew Adkins
Sulaiman Alghothani
Annika Alper
Magna Cum Laude

Annika Martin Anderson
Carly Elizabeth Anderson
Cum Laude

Corbyn Lane Antrim
Cum Laude
with Honors Research Distinction in Animal Sciences

Alma Desiree Anzalone
Cum Laude
with Research Distinction in Animal Sciences

Riley Trent Ardrey
Annalisa Rose Arostegui
Summa Cum Laude

Rosemary Anne Ball
Magna Cum Laude

Jacqueline Reid Ben-Ezra
Blake Robert Benson
Faith Ann Bergeron
Garrett Bosse
Cum Laude

Natalie L. Braun
Cum Laude

Audrey Violet Brill
Cum Laude

Jacqueline Anabel Bush
Cum Laude

Matthew Graham Carson
Cum Laude

John Peter Cassanos
Summa Cum Laude

Alicia Beth Cave

Darian Reese Chandarjit
Haillie L. Cherry
Nicholas Donald Cline
Cum Laude
Daniel Cohen
Sekani Omari Cole
Magna Cum Laude
with Honors Research Distinction in Animal Sciences
Malyn Michael Conley
Adam Dale Cook
Molly Elizabeth Cordonnier
Magna Cum Laude
with Research Distinction in Animal Sciences
Alix Lindsay Cotterman
Abigail Rose DeShazo
Christopher William Doig
Kathleen Ann Duffala
Cum Laude
Reece Robert Duncan
Cum Laude
Jared Mathew Dunn
Grace Ryley England
Elizabeth Marilyn Fannin
Summa Cum Laude
Collin David Fedderke
Magna Cum Laude
Darian Ann Elizabeth Feltz
Faith Ann Ferencik
Emma Fischer
Cum Laude
Alexander Charles Fletcher
Fuanyj Ajongako Fobellah
Pablo Franco Mesa
Kalleigh Nicole Fry
Magna Cum Laude
Faith Marie Galavich
Megan Elizabeth Garrison
Samantha Goldstein
Samantha Jo Graber
Magna Cum Laude
La'el Kaylin Gray
Sage Greeby
Scott Green
Cum Laude
Mazzy Scott Grisak
Cum Laude
Kathryn Suzanne Gross
Libby Julia Grossniklaus
Lincoln Ward Grubb
Magna Cum Laude
Margaret Elizabeth Harper
Kylie Elisabeth Harrison
Magna Cum Laude
Morgan Elizabeth Hefner
Cum Laude
Logan Andrew Heitzman
Alexis Herbert
Summa Cum Laude
with Honors Research Distinction in Sustainable Plant Systems
Von Adam Herron
Magna Cum Laude
with Honors Research Distinction in Agricultural Systems Management
Gabriella Karen Higgins
Cum Laude
with Research Distinction in Animal Sciences
Haven Molly Mildred Marie
Hileman
Summa Cum Laude

Mary Jo Holley
Cum Laude
Landon Reed Hollopetter
Emma Louise Homan
Irina Humberston
Aaron Thomas Jackson
Brady Whitman Jacobs
Rely Catharine Jacobs Bell
Chloe Paige Johnsman
Hayden Lowell Johnson
Morgan Conner Johnson
Katherine Lyn Jones
Cum Laude
with Honors Research Distinction in Animal Sciences
Shelby Quinn Jones
Summa Cum Laude
Olivia Maria Kalczynski
Magna Cum Laude
with Honors Research Distinction in Animal Sciences
Kyle Brandon Kelley
Maxwell Eugene Kimpel
Grace Kathleen Kimpton
Magna Cum Laude
Jeffrey Aric King
Savannah J. Kinley
Kearlee Riann Knapke
Magna Cum Laude
Rebekah Lorraine Koehl
Magna Cum Laude
John Joseph Kohler
Magna Cum Laude
with Research Distinction in Sustainable Plant Systems
Mackenzie Paige Koverman
Cum Laude
Matthew Cole Koverman
Ansley Terese Kozarec
Haley Grace Kruest
Cum Laude
Hailey Rose Kwikoski
Magna Cum Laude
Destiny LaFever
Mina Elizabeth LaFrance
Jackson Steven Lammert
Mykenzie Marie Lance
Jacob Louis Lansing
Magna Cum Laude
with Honors Research Distinction in Animal Sciences
Jessica May Lau
Magna Cum Laude
Taylor Alta Mae Lawhorn
Ngan Truc Le
Magna Cum Laude
Morgan Ruth Leffel
Magna Cum Laude
Mary Francis Rose LeVan
Cum Laude
Brittany Anne Lewis
Michaela Rose Liptak
Gavin David Lochard
Magna Cum Laude
Eden Lynn Loche
Cidny Raylice Long
Olivia Josephine Looker
Evan Ma
Magna Cum Laude
with Honors Research Distinction in Animal Sciences
Baylee Marie March
Emma Martin
Myranda Louise McDaniel

Nathan Andrew McFadden
Laura Kathryn McIntyre
Jessica Lynne McPoyle
Tian Hali Meinen
Magna Cum Laude
Megan Brooks Mertes
Logan Steven Meyers
Cum Laude
Ryan Austin Michael
Bayleigh Ann Miller
Brian Edward Miller
Jake Miller
Summa Cum Laude
Grace Isabella Morrell
Magna Cum Laude
Madison Nicole Morrow
Aubrey Paige Moser
Anna Elizabeth Mulrooney
Cum Laude
Lane Aaron Nuding
Cum Laude
Ella Grace Orians
Stephen Charles Parthemore
Rishi Hitesh Patel
Austin Thomas Paulus
Luke Edwards Peart
Magna Cum Laude
with Honors Research Distinction in Agribusiness and Applied Economics
Skylar Jo Plank
Cole James Pond
Cum Laude
Erin Michelle Pope
Chelsie Nicole Porter
John Prociuchiani
Tiffany Cheyenne Reasoner
Douglas William Reer
Cum Laude
Benton Jacob Reid
Magna Cum Laude
Bradi Raye Rex
Landon Richard Rhodes
Liam Patrick Richards
Cum Laude
Adam Paul Rischar
Magna Cum Laude
Haley Elise Roberts
Thaddeus Zane Robison
Magna Cum Laude
Skyelar Janae Rock
Caterina Rose Rockey
Dominic Sabo
Cum Laude
Matthew J. Savoy
Laura Rebecca Grace Scholl
Cum Laude
Sheriden Noelle Schuerman
Summa Cum Laude
with Research Distinction in Sustainable Plant Systems
Jaeger Randall Zadra Schwab
Alyssa Marie Scott
Samantha Daniella Serrano
Tyler Keith Shaw
Wanghao Shen
Magna Cum Laude
Caroline Tracy Shinn
Magna Cum Laude
Aiden Johnston Shugert
Beau G. Simms
with Research Distinction in Animal Sciences
Kacie Ann Sizer
Garrett Michael Smail

Julia Elizabeth Smith
Cum Laude
Conner Charles Smock
Summa Cum Laude
Alex Linn Snyder
Alexandra Solum
Claire Elizabeth Sorrell
Haley St. Clair
Kelsey Starr
Magna Cum Laude
with Research Distinction in Plant Pathology
Aubrianna Nichole Stewart
Brianna Elizabeth Stewart-Rouhier
Olivia Kay Stone
Mason Ray Straker
Riley Stull
Abigail Christine Subler
Lauren Meredith Sweitzer
Cum Laude
Ashley Rae Tate
Magna Cum Laude
Makenna Lynne Taylor
Cum Laude
Joseph Paul Thatcher
Courtney Marie Thomas
Cum Laude
Kristopher Michael Thornton
Landon Owen Tisch
Noah James Trainer
Koren Danielle Truance
Magna Cum Laude
Landon Scott Tull
Lolita Constance Cornelia Vandevoorde
Cum Laude
with Research Distinction in Animal Sciences
Burke Robert Villeneuve
Lillian Rose Wagner
Summa Cum Laude
Faith Welliver Watson
Cum Laude
Renee Sara Watson
Summa Cum Laude
Alison Elaine West
Ethan Wayne Westenfelder
Magna Cum Laude
Abigail Eileen Whitsel
Cum Laude
Zhuorui Wu
Hannah Yakovac
Kathryn Elizabeth Young
Magna Cum Laude
Jack William Zenz

Jacob Daniel Goldsmith
Joseph Handorf
Brendan Joel Hutchins
Pendleton Rainer Jones
Bernard John Karam III
Summa Cum Laude
Edward Phillip Keeton IV
Cameron Kittle
Cum Laude
Peter Edward Joseph LaPointe
Summa Cum Laude
Skylar Ryan Lawson
Caleb Leohr
Cum Laude
Ethan Jeffrey McNair
Erin Marie Michaels
Magna Cum Laude
Michael Mann Minarik
Kenneth Michael Minges
Enrique Jose Morales-Ayala
Joseph Ryan Nieman
Connor Haveron O'Neill
Magna Cum Laude
Timothy Francis Plageman III
Evan Porter
Drew Alexander Reed
Cum Laude
Isabel Rose Reed
Magna Cum Laude
Michael David Roach
Summa Cum Laude
Jackson Robert Ryan
Drew Allen Salinas
Connor Evan Skiles
Andrew Joseph Small
Rochelle Pearl Stapp
Ethan Benjamin Trainer
Liam Connor Whelan
Vadym Yarulin
Cum Laude
Will Malone Young

Bachelor of Science in Environment and Natural Resources (School of Environment and Natural Resources)

Lucia Pauline Adams
Cum Laude
Christine Alexandria Andreeva
Summa Cum Laude
Hifsa Rukhsana Ayub
Summa Cum Laude
Camden Bade
Caillín Baker
Michaela Leonie Joy Barnett
Magna Cum Laude
Oneli Disara Basnagala
Collin James Bauerbach
Franceska Marguerite Beasley
Javen Anthony Bell
Cum Laude
Hayden Belleville
Magna Cum Laude
Jack Albert Bentley
Magna Cum Laude
Katie Ann Bilotas
Cum Laude

Bachelor of Science in Construction Systems Management

Anton Bakunin
Magna Cum Laude
Brock Allen Barbey
Cum Laude
Michael William Blaine
Joseph Paul Bunnenberg
Paul Conway
Jason Matthew Day, Jr.
Magna Cum Laude
Vincent Hayes DiRuzza
Caden Patrick Fryman

Nicholas James Bruggeman

Magna Cum Laude

Katelyn Patricia Bruns

Magna Cum Laude

Benjamin Lee Campion

Magna Cum Laude

Alexa Marie Capka

Magna Cum Laude

Audrey Irene Cash

Cum Laude

Pamela Lynn Casner

Adam Cathell

Marnie Ann Chapic

Maximillian Anthony Cipriani

Austin Chandler Clark

Rachel Tatiana Cohen

Kimber Ann Colahan

Cum Laude

Victoria Grace Colliton

Cum Laude

Samuel Joseph Colston

Cum Laude

Alexa Gabrielle Correnti

Cum Laude

Samuel Todd Cox

Summa Cum Laude

Piper Anne Crotty

Joshua Paul Davidson

Magna Cum Laude

*with Honors Research Distinction in
Forestry, Fisheries, and Wildlife*

Chloe Jean Dawson

Summa Cum Laude

*with Honors Research Distinction in
Environmental Science*

Isabell Marie Dettling

Summa Cum Laude

Reagan Grace Dewey

Magna Cum Laude

Hope Elizabeth Diaz

Cum Laude

Sarah Anne Dietrick

Summa Cum Laude

Olivia Sarah DiGiovine

Summa Cum Laude

*with Research Distinction in
Environmental Policy and Decision
Making*

McKenzie Ruth Cooper Dorrell

Rebecca Anne Dye

Amanda Lynne Fetter

Michael Alex Figueroa

Erin Elizabeth Flanagan

Chad Alan Florence, Jr.

Maria Helene Frattianne

Magna Cum Laude

Eva Julianna Freeman

Magna Cum Laude

Klaine Jorryn Friend

Summa Cum Laude

Jessica Lynn Gantz

Magna Cum Laude

Jacob Glidden

Cum Laude

Emily Marie Lian Gonda

Skyler Goody

Magna Cum Laude

*with Honors Research Distinction in
Environmental Policy and Decision
Making*

Annika Grace Green

Cum Laude

Trent Christian Gregory

Magna Cum Laude

Grace Anne Grosel

Cum Laude

Andrea Lauren Groves

Cum Laude

Christina Noelle Guillard

Kade Hunter Hambel

Martha Haney

Summa Cum Laude

Natalie Faith Harper

Magna Cum Laude

Sarah Elizabeth Hartman

Summa Cum Laude

Mary Francis Heilman

Magna Cum Laude

Sarah Koharu Herndon

Kaitlyn Higginbotham

Magna Cum Laude

Madeline Louise Holdcraft

Summa Cum Laude

*with Honors in Environment and
Natural Resources*

Justin Hollick

Summa Cum Laude

Molly Hoskin

Mallory Rose Hricovec

Aidan Michael Johnson

Casey Johnson

Cum Laude

Sarah Siyan Judson

Cum Laude

Kylie Jean Karagiozis

Magna Cum Laude

Annalise Elizabeth Khandelwal

Magna Cum Laude

Sam Jo Kochan

Magna Cum Laude

Caitlyn Elizabeth Kowalski

Emily Ann Kruse

Autumn Rose Kurtz

Brett Thomas LaBuhn

Allison Laws

Magna Cum Laude

Lucas James Leasure

Magna Cum Laude

Karlee Marie Lewicki

Emily Ann Loede

Lindsay Elaine Logue

Megan Irene Maghes

Magna Cum Laude

Olivia Anne Marrero

Summa Cum Laude

*with Honors Research Distinction in
Environmental Science*

Emma Elizabeth Martin

Austin Andrew Mascia

Summa Cum Laude

Clare Elizabeth Matthews

Magna Cum Laude

Ryan Thomas McBee

Luke Anthony McConville

Jacob Stanley McCullah

Magna Cum Laude

Bailey Kathleen Metzger

Joseph Hamza Mian

Tasnim Haydar Miar

Tucker Mills

Karissa Mitchell

Summa Cum Laude

Aaron Joseph Moehrman

Elijah John Monnin

Magna Cum Laude

Shelby Maize Muntz

Summa Cum Laude

Samantha Jo Murray

Joshua Kevin Nelson

Riley Patricia O'Hagan

Summa Cum Laude

*with Honors Research Distinction in
Environment, Economy, Development
and Sustainability*

Drew Hunter Owens

Dakota Kayla Owens-Bostic

Sophia Rose Pajak

Summa Cum Laude

*with Research Distinction in
Environmental Science*

Leah René Palechka

Summa Cum Laude

Christopher George Paris

Aaren Franklin Patton

Cum Laude

Noah Patrick Pence

Caleb Joshua Pendola

Michael John Penka

Summa Cum Laude

*with Honors Research Distinction in
Environmental Science*

Grayson Oliver Penland

Magna Cum Laude

John Jeffrey Perkins, Jr.

Emma Pietrewicz

Summa Cum Laude

Trinity Beth Raber

Cum Laude

Alexandra Senja Rosenberg

Emily Katrinka Sandahl

Magna Cum Laude

Sarah Jane Sandstrom

Megha Saravanan

Cum Laude

Jackson Blase Settecasse

Meryan LeeAnn Sheets

Molly Katherine Sheridan

Magna Cum Laude

*with Honors Research Distinction in
Environmental Science*

Makayla Lee Shuey

Summa Cum Laude

Shefali Sinha

Rachel Darina Sinyuk

Cum Laude

Alexandra Kay Sloat

Summa Cum Laude

Alexis Lenore Howlett Smith

Magna Cum Laude

Jane Emily Sovinski

Cum Laude

Hollee Hannah Stegeman

Cum Laude

Julia Marguerite Steiner

Gavriel Shalom Steinman

Summa Cum Laude

*with Honors in Environment and
Natural Resources*

Liwen Tang

Cum Laude

Chantrea Kay Thip

Emma Mei Timmons

Aubrey Anna Tomochek

Cum Laude

Abha Sujit Upadhye

Cum Laude

Ayden James Van Fossen

Cum Laude

Aspen Lee Vatke

Lily Jane Waldhauer

Magna Cum Laude

Ethan James Watson

Madeline Elyse Watson

Magna Cum Laude

Nicole Elizabeth Wehrle

Cum Laude

Miles Justice Weiss

Braden Alan Werner

Chloe Anna Wicks

Summa Cum Laude

*with Honors in Environment and
Natural Resources*

Blair M. Willse

Magna Cum Laude

Dylan Wilson

Cum Laude

Eden Fulu Wolfenden

Lauren Elizabeth Wolfkiel

Abigail Charlene Wysong

Asher Lev Zack

Cum Laude

Bachelor of Science in Food Science

Rachel Berk

Arianna Elizabeth Borton

Zack Burton

Hazel Shane Burlat Calis

Magna Cum Laude

*with Research Distinction in Food
Science and Technology*

Megan Sydney Chludzinski

Magna Cum Laude

Christopher Andrew Dible

Kritika Gaur

*with Research Distinction in Food
Science and Technology*

Isabelle Kocz

Magna Cum Laude

*with Honors Research Distinction in
Food Science and Technology*

James Kwon

Malachi Brian List

Connor Charles McGowan

Mackenzie Margaret Milka

Kylie Elizabeth Mullins

Gage Ryan Norris

Cum Laude

Kavya Nuthulapaty

*with Research Distinction in Food
Science and Technology*

Jack Nathaniel Pettit

Natalie Delora Rash

Joshua Paul Reape

Amelea Eleanor Sese

Magna Cum Laude

Madelin Elise Shaver

Mira Elizabeth Smith

Magna Cum Laude

Sophia Lynn Thompson

Cum Laude

Mirabella Amelie Louise Valle

Cum Laude

Associate in Applied Science (Agricultural Technical Institute – Wooster)

Sarah Lyn Bailey

Alena Laurelle Bauman

Summa Cum Laude

Zachary J. Beier

Tyler Andrew Bowen

Lillian Joelle Bowers

Trey Reed Carman

Magna Cum Laude

Carly Joy Csapo

Laura Lynn Cutlip

Andrew Todd Etgen

Madison Reyna Faulk

Magna Cum Laude

Wyatt Wayne Friedrich

Aidan Charles Hackney

Kelsey Dawn Hartzler

Cum Laude

Kaitlyn Mae Heflin

Lauren Marie Homan

Myles Andrew Jordan

Eliot Layman

Christian Paul Martig

June 4 - August 20, 2025, Board of Trustees Meetings

Chloe Breann Heidlebaugh
Alyssa Marie Heldman
Cum Laude

MaKenna LeAnn Helmke
Daniel Joseph Hinojosa
Tuff Levi Hutchins
Kalliope Ivari
Cum Laude

Beau Alan Johnson
Magna Cum Laude
Jadi Raquel Kelly
Madison Laine Kloepper
Cammie Ireland Lake
Julianne Littin
Summa Cum Laude

Emma Frances Lowe
Summa Cum Laude
William Raymond Luli
Carson Lee Lyden
Zoe Madison McElrath
Adrianna Elizabeth Meyer
Summa Cum Laude

Bradley Patrick Moses
Briar Owen Muller
Leah Nicol
Natalie Ann Osswald
Hollie Ann Oswalt
Claire Ann Phillip
Jacob William Poulin
Cum Laude

Ellie Kay Powell
Heather Marie Reiningner
Cum Laude
Isabella Nicole Rinz
Lainey Chevelle Roberts
Anita Betsy Ruggles
Summa Cum Laude

Kaleigh Anne Rukavina
Logan Ray Scarberry
Ellie Lynn Shafer
Ginaveve Robyn Sheets
Andrew Joseph Small
Madelyn Marie Smith
Makayla Nicole Spoerr
Summa Cum Laude

Gracie Mae Sprague
Magna Cum Laude
Aidan William Steiner
Brooke Elizabeth Stottsberry
Cum Laude

Emma Layne Talbott
Emma Cheyenne Thornton
Lexi Nichole Troyer
Cum Laude

Marcus Richard VanVorhis
Liliana Jolene Weikart
Jacob Andrew Yenser

Michael E. Moritz College of Law

Dean: Kent H. Barnett

Juris Doctor

Ryan Ingram Ackerman
B.S. (The Ohio State University)
Cum Laude

Michael Adamo
B.A. (The Ohio State University)

Kristen Leigh Adams
B.A. (The Ohio State University)

Colin Adler
B.A. (The Ohio State University)

Jenna Culman Adler
B.A. (The Ohio State University)
Cum Laude

Mahni Alizadeh
B.A. (The Ohio State University)

John P. Anzevino
B.S.Bus.Adm. (Youngstown State
University)

Luke P. Parcy
B.A. (George Washington
University)
Cum Laude

Nicole Maia Beckman
B.A. (The Ohio State University)
Cum Laude

Nicholas Lawrence Belofsky
B.A. (Washington & Jefferson
College)

Ian Richard Bigalk
B.S. (University of Wisconsin -
Madison)

Lilianna J. Biswas
B.A. (University of Dayton)

Kallie Boren
B.S. Educ. (The Ohio State
University)
Cum Laude

William P. Brailer
B.S.Env.Nat.Res. (The Ohio State
University)

Scarlet K. Bringard
B.A. (Eastern Michigan University)

Ashlin K. Bruce
B.A. (Indiana University)

Collin Patrick Cahill
B.S. (Butler University)
Summa Cum Laude

Isabella M. Carone
B.S. (University of Kentucky)
Cum Laude

Sophie Chang
B.S.Env.Nat.Res. (The Ohio State
University)

Ryan F. Cleary
B.A. (Cornell University)
Summa Cum Laude

Jackson Duane Coates
B.S. (Northern Kentucky
University)

Isabel R. Cohen
B.A. (University of Michigan)

Stephen Alexander Collier
B.A., M.S. (The Ohio State
University)

Andrew Robert Cornelison
B.A. (Ohio University)

Brandon Andrew Coss
B.S.Bus.Adm. (The Ohio State
University)

Emily Elizabeth Coyle
B.S. (The Ohio State University)
Summa Cum Laude

Deborah A. Curran
B.A. (Cedarville University)
Cum Laude

Katherine Joyce Cuscaden
B.A. (The Ohio State University)

Nicholas M. D'Ercole
B.S. (University of North Carolina
Wilmington)

Gabriella Juliet Dachtler
B.A. (The Ohio State University)

George Bernard Dailey
B.S. (United States Military
Academy)

Mickaela Davis
B.S. (Emmanuel College)

Nathan Bradley Davis
B.A. (Hope College)
Cum Laude

Faith Deever
B.A. (Miami University)
Cum Laude

Domenic R. DiPietro
B.S.Bus.Adm. (The Ohio State
University)
Magna Cum Laude

Lara do Valle Pereira Esteves
B.Laws (Faculdade CESUSC
(Complexo de Ensino Superior
de Santa Catarina))
B.History (Universidade do Estado
de Santa Catarina)

Abigail Dop
B.S.Hlth.Reh.Sci. (The Ohio State
University)

Abigail Catherine Downs
B.A. (The Ohio State University)

Nicole Alyse Brashear Cordero
Drake
B.S. (Liberty University)

Samuel G. Edwards
B.A. (Centre College)

Evan D. Ernst
B.S. (Ohio Dominican University)
Cum Laude

Michael J. Factor
B.A. (Youngstown State
University)
Summa Cum Laude

Farah M. Farah
B.A. (Denison University)

Heba A. Fathala
B.A. (Capital University)

Sarah Ann Faust
B.A. (University of Missouri -
Columbia)

Darian Grace Fautz
B.A. (Miami University)

Collin Michael Finn
B.A., M.A. (Miami University)

Peregrine Luke Finnegan
B.A. (The Ohio State University)

Jessica Marie Frank
B.A. (Xavier University)
Magna Cum Laude

Zarah Jessica Fulay
B.S. (The Ohio State University)

Santiago Garcia-Mata
B.A. (The Ohio State University)

Ethan Scott Garvin
B.A. (Morehead State University)
Summa Cum Laude

Kevin R. Gibbons
B.A. (The Ohio State University)

Matthew Gibson
B.S. (Otterbein University)

Madison Marie Gillotte
B.A. (The Ohio State University)

Jacquelyn Olivia Goodenough
B.Bus.Adm. (Marshall University)

Karlie Gorall
B.A. (Wilkes University)

Hunter Addison Graffice
B.A. (Ohio University)

Sumac Ian Gray
B.S. (The Ohio State University)
Cum Laude

Erich Michael Guenther
B.A. (University of Alabama)

Laila M. Guled
B.A. (The Ohio State University)

Winnie Sie Man Ha
B.A. (University British Columbia)

Natalie Beth Haddad
B.A. (John Carroll University)

Alea Rae Harris
B.A. (Wofford College)

Andrea Lynne Harris
B.S. (Michigan State University)

Kyle L. Hazard
B.A. (Kent State University)

Abraham Richardson Hill
B.S. (University of Wisconsin)

Olivia Simone Hiltbrand
B.S. (Cornell University)
M.S. (Syracuse University)
Summa Cum Laude

Caroline A. Hoover
B.S. (Purdue University)
Magna Cum Laude

Mikayla Alexis Howard
B.A. (Pennsylvania State
University)

Reagan Elizabeth Hoyt
B.S.Bus.Adm. (The Ohio State
University)

Ladan Homafar Jaballas
B.A. (New York University)

Elyse Dianne Jackson
B.A. (Brandeis University)

Alexander G. Janakievski
B.A. (University of Dayton)

Hannah E. Jankunis
B.A. (University of Michigan)

Adava Omie Jefferson
B.A. (The Ohio State University)

Georgina K. Jolivet
B.A. (George Washington
University)
Summa Cum Laude

Ian Thomas Jones
B.A. (The Ohio State University)
Cum Laude

Marie-Victoria A. Kaplan
B.A. (Kent State University)

Colin M. Keoghan
B.A. (Coastal Carolina University)

Christal Khy
B.S. (The Ohio State University)

Ty Kiathatikom
B.A. (Knox College)

Laurel Knapp
B.A. (University of Georgia)

Mackenzie Kneiss
B.A. (Case Western Reserve
University)
Magna Cum Laude

Michael Mills Kohler
B.S. (The Ohio State University)

Adriana M. Kranyecz
B.A. (Pennsylvania State
University)

Christiana Noell Lafferty
B.S. (Southeastern University)
Magna Cum Laude

Kwase L. Lane
B.S.Journalism (Ohio University)

Jonathan M. Lee
B.S. (Ball State University)

Robert J. Lee
B.S. (George Washington
University)

Nicola Roberts Lewis B.A. (University of California - Berkeley)	Kathryn Susan Osterback B.A. (Western Washington University)	Mehek S. Sheikh B.S. (The Ohio State University)	Master of Laws	Omar Alnemer B.S. (The Ohio State University) <i>Magna Cum Laude</i>
Emily Lois Lowes B.A. (The Ohio State University)	Clay M. Owens B.A. (The Ohio State University) <i>Magna Cum Laude</i>	Alan Michael Shvartsman B.A. (The Ohio State University)	Tarek Abu-Amr B.Laws (Brunel University of London)	Sabrina Ali Amin B.S.Biomed.Sci. (The Ohio State University)
Jacob M. Majure B.S. (University of Alabama)	Christina Marie Parchem B.A. (Columbia College) <i>Cum Laude</i>	Ioanna Skubas B.A., M.A. (Case Western Reserve University)	Richard Dwamena Boampong LL.B. (University of Ghana)	Samuel Alexander Ammerman B.S. (Northern Kentucky University) <i>Magna Cum Laude</i>
Hudda Ali Malik B.A. (University of South Florida)	Sarah Anne Paul B.A. (The Ohio State University)	Abigail Leann Smeltzer B.S. (The Ohio State University)	Diana Camila De Los Santos Torres B.Laws (Universidad Iberoamericana)	Chloe Harriet Amsterdam B.A. (Cornell University) <i>Cum Laude</i>
Rahul S. Mansukhani B.S.Bus.Adm. (The Ohio State University)	Connor Paulshock B.S. (Pennsylvania State University) <i>Cum Laude</i>	Nicholas L. Snider B.A. (Northern Kentucky University)	M.Laws (Pontificia Universidad Catolica Madre y Maestra)	Bryan Wonjun An B.S. (The Ohio State University)
Meredith Catherine Marshall B.A. (Otterbein University)	Rachel A. Peterson B.A. (University of Pittsburgh)	Natalia Spanos B.Laws (Universidad de La Sabana)	Oscar Alfredo Fernandez B.Laws (National Autonomous University of Honduras)	Fatima Nadeem Anwar B.A. (Washington University in St. Louis)
Isabelle Elizabeth McCale B.A. (The Ohio State University)	Ian Thomas Pitt B.S. (University of Louisville) <i>Magna Cum Laude</i>	John Matthew Strasser B.A. (Miami University)	Claudia Flores Hernandez B.Laws (Centro Hidalguense de Estudios Superiores, S.C)	Andrew Mckay Atoa B.S. (Brigham Young University)
Georgia Elisabeth Mulvehill B.S.Env.Nat.Res. (The Ohio State University) <i>Cum Laude</i>	Morgan Jane Preston B.A. (Angelo State University) <i>Cum Laude</i>	John Mayhall Stukenberg B.A. (DePaul University) <i>Magna Cum Laude</i>	Benchen Hu B.Laws (East China University of Political Science and Law)	Zaynah Ibrahim Awethe B.S. (University of Toledo) <i>Cum Laude</i>
Joshua P. Menden B.S. (Bowling Green State University)	Riley Nicole Loveranes Reese B.A. (The Ohio State University) <i>Cum Laude</i>	Saeema Suman Syed B.S. (The Ohio State University)	Kyu Hyun Kim B.S (Seoul National University)	Christopher Anthony Ayoub Ph.D. (The Ohio State University)
Andrew Jaden Miller B.S. (Wofford College)	Hallie Jacqueline Renda B.S.Bus.Adm. (Youngstown State University) <i>Cum Laude</i>	Celia C. Syvintri B.A. (Austin College)	J.D. (Chungbuk National University)	Lovette Emenyikeng Azap B.A. (The Ohio State University)
Tericka Nashae Miller B.A. (The Ohio State University)	Keith Cameron Richards B.A. (University of Texas at Austin) M.A.(Ball State University) <i>Magna Cum Laude</i>	Greyson Edwards Teague B.A. (University of Arkansas) M.A., Ph.D. (The Ohio State University)	Bruno Leonardo Pires Régis de Carvalho B.Laws (Centro de Estudos Superiores Barros Melo)	Sofia Margarita Baena B.S. (The Ohio State University)
Tristan Monteith B.A. (The Ohio State University)	Michael T. Rienzo B.S. (Saint Lawrence University)	Jake Tickner B.S. (Florida State University)	Shayra Glendha Salustiano Dos Santos LL.B. (Faculdades Cathedral de Ensino Superior)	Mara Bahri B.S. (Portland State University)
Chandler William Mote B.A. (University of Dayton)	Aliah Richter B.A. (University of Michigan)	Joshua Caleb Trawick B.S. (University of Dayton) <i>Cum Laude</i>	Vineetha Sharma Srirambhatla B.A. LL.B. (Hons.) (Alliance University Bengaluru)	Nojan Naghibzadeh Bajestani B.S. (The Ohio State University)
Colin P. Murphy B.S. (Fordham University)	Ian Malcolm Robertson B.A. (Kenyon College) <i>Cum Laude</i>	Alasdair M. Turnbull B.A. (Wright State University)	Kai Yu Yao B.Laws (National Chenghi University)	Suzu Bangudi B.S. (The Ohio State University)
Deryn Elizabeth Murphy B.A. (Miami University)	Katherine Crane Ross B.S.Env.Nat.Res. (The Ohio State University)	Brennan Jordan Uribe B.Sport.Mgt. (Ohio University)	John Carl Barba II B.S. (Muskingum University) M.P.H. (The Ohio State University) <i>Summa Cum Laude</i>	Zoe Barricklow B.S.Pub.Hlth. (The Ohio State University) <i>Cum Laude</i>
Jade W. Musa B.A. (The Ohio State University) <i>Cum Laude</i>	Jacob Rossi B.S.Bus.Adm. (The Ohio State University)	Dominic Roncone Velasquez B.A. (The Ohio State University)	College of Medicine	Brett Nicholas Bentkowski B.A. (Hiram College)
Durya Nadeem-Khan B.A., B.S. (The Ohio State University)	Jamie R. Salazar B.A. (Bowling Green State University)	Sarvani Vemuri B.A. (University of Cincinnati)	Dean: Carol R. Bradford	Alisha Anand Bhagwat B.S. (The Ohio State University)
Kevin A. Nickel B.S.Bus.Adm. (The Ohio State University)	Chloe E. Schelhaas B.Bus.Adm. (Davenport University)	Rachel M. Veneman B.A. (University of Dayton) <i>Cum Laude</i>	Eliana Mae Abraham B.S. (Southern Methodist University)	Ladan Bigdeli B.S. (University of California, Irvine)
Elliott J. O'Malley B.A. (Otterbein University)	Ayrisa Breayel Schmidt B.S. (Miami University)	Amanda C. Wallin B.S. (Indiana University)	Jessica Yetunde Aduwo B.A. (Smith College)	Koral Marie Blunt B.A. (The College of Wooster) <i>Summa Cum Laude</i>
James Patrick O'Neal B.S.Bus.Adm. (The Ohio State University)	Jane Ann Sensibaugh B.A. (University of Cincinnati) <i>Cum Laude</i>	Nickolas Frederick Wead B.S.Bus.Adm. (The Ohio State University)	Hajera Afreen B.S. (University of Illinois at Urbana-Champaign)	Sarah Grace Board B.S. (Sewanee: The University of the South)
Nicolino Andre Orengo B.A. (State University of New York at University at Buffalo)		Connor White B.A. (Butler University)	Hiba Ahmad B.S. (Western Michigan University)	
Favour Oluwafisayo Oluwabukola Osa Oni B.Laws (University of Ibadan)		Zimo Zhang B.A. (The University of Arizona)	Farah Yasmine Almhana B.A. (Case Western Reserve University)	

June 4 - August 20, 2025, Board of Trustees Meetings

Joseph Francis Bonanno B.S.Hlth.Reh.Sci. (The Ohio State University)	Ivana Marie DeVengencie B.S. (The Ohio State University) <i>Magna Cum Laude</i>	Aysenur Gunacar B.S. (University of Cincinnati)	Austin Michael Keller B.S.Biomed.Sci., M.S. (The Ohio State University) <i>Magna Cum Laude</i>	Jasmine Amour McMillan B.S. (Furman University)
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Megan June Broughton B.S. (The Ohio State University)	Morgan Elizabeth Doty B.A. (Xavier University) <i>Magna Cum Laude</i>	Alina Hague B.Bus.Adm. (University of Michigan)	Mackenzie Kristen King B.S. (The Ohio State University) <i>Summa Cum Laude</i>	Jordan Tyler Mizell B.S. (University of Michigan)
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Galo Christopher Bustamante B.S. (Oregon State University) <i>Cum Laude</i>	Olivia Amarachi Duru B.S. (Michigan State University)	Megan Nicole Harty B.A. (Wake Forest University) <i>Summa Cum Laude</i>	Kara Marie Klinebiel B.A. (California University of Pennsylvania)	Erin Renee Niederkohr B.S. (The Ohio State University)
Drayson Bradley Campbell B.S. (Emory University) <i>Summa Cum Laude</i>	Bryce Dzubara B.S. (University of Notre Dame) <i>Summa Cum Laude</i>	Maryam Siyad Hassan B.S. (Virginia Polytechnic Institute and State University)	Jonathan Reinhold Kluczynski B.S. in Foreign Service, (Georgetown University) <i>Magna Cum Laude</i>	Gabe Nicholas O'Hara B.S. (Morehead State University)
Shelby Joseph Cash IV B.S. (The Ohio State University)	Chloe Anna Evering B.S. (State University of New York at University at Albany) <i>Magna Cum Laude</i>	Nicole Kathleen Hoeflinger B.S.Biomed.Sci. (The Ohio State University)	Anthony Christian Ko B.S. (Cornell University)	Leah Catherine O'Toole B.A. (Dartmouth College) <i>Summa Cum Laude</i>
Sydney Lindsay Castellanos B.S. (Indiana University) <i>Cum Laude</i>	Simon Anthony Fernandez B.S.Biomed.Sci. (The Ohio State University)	Sahana Ananthkumar Holla B.S. (University of Kentucky)	Onaopepo Oladipo Kola-Kehinde B.S. (Colorado State University)	Stephanie Paras B.S. (University of Pittsburgh)
Jin Young Chang B.A. (Northwestern University-Evanston) <i>Cum Laude</i>	Sydney Fobare B.A. (Hendrix College) Ph.D. (The Ohio State University) <i>Magna Cum Laude</i>	Amanda Huang B.A. (Vanderbilt University)	Sanjana Kothari B.S.Biomed.Sci. (The Ohio State University)	Cassandra Lynn Pasady B.A. (Harvard University)
David Michael Chesko B.S.Biomed.Sci. (The Ohio State University)	Jordan Fry B.S. (The Ohio State University)	Ahmed Ali Hussein B.S. (The Ohio State University)	Lily Anne Kreber B.S. (The Ohio State University) <i>Magna Cum Laude</i>	Akshar Vipul Patel B.S. (Emory University)
Kenneth Wang Chian B.S. (Emory University)	Madeline Rachel Fuller B.A., B.S. (University of Delaware)	Mary Cecelia Hyland B.S. (Walsh University) <i>Cum Laude</i>	Shannon Lynn Lavender B.S. (University of Pittsburgh)	Pragi Paresch Patel B.S. (The Ohio State University) <i>Cum Laude</i>
Jacob Elias Christofi B.S., M.Appl.Neurosci. (The Ohio State University)	Jessica Ann Fulton B.S. (The Ohio State University)	Nicholas Andrew Iovino B.S. (University of Notre Dame)	Thuy Kim Le B.A. (Dartmouth College)	Basya Shandel Pearlmuter B.S. (Boston University)
Kenneth Morris Clark B.A. (Washington and Jefferson College)	Valeria Gamarra B.S. (University of South Florida)	Kayley Grace Irwin B.S. (Michigan State University) <i>Cum Laude</i>	Anna Elizabeth Leone B.S. (The Pennsylvania State University) <i>Magna Cum Laude</i>	Ayush Venkat Peddireddi B.A., B.S.Biomed.Sci. (The Ohio State University)
Nicole Marie Clark B.S. (University of Toledo)	Bhageerathi Ganesan B.S.Biomed.Sci. (The Ohio State University) <i>Magna Cum Laude</i>	Connor Christopher Jacob B.S., M.S. (The Ohio State University) <i>Magna Cum Laude</i>	Thomas Michael Leuschner B.S. (Indiana Wesleyan University)	Andrew Richard Phillips B.A. (Pomona College)
Emily Eileen Coffey-Noriega B.S. (Duke University)	Samantha Therese Gawrys B.A. (Miami University)	Daniela Mercedes Jimenez-Harrison B.S. (State University of New York at Binghamton) M.S., Ph.D. (The Ohio State University)	Bradley Dean Loomis B.S. (University of Oregon) <i>Magna Cum Laude</i>	Megan Giannina Pino B.S. (Johns Hopkins University) M.S., Ph.D. (The Ohio State University)
Dania Dallal B.S. (The Ohio State University)	Andrew Thomas George B.S. (Duquesne University) <i>Cum Laude</i>	Dana Marie Jolley B.S. (Ohio University) <i>Magna Cum Laude</i>	Mark Robert Loper, Jr. B.S. (Miami University)	Emily Frances Plumage Boyd B.S. (The University of Utah)
Kiana Dash B.S. (Hampton University)	Jessica Mary Ghobrial B.S. (Duquesne University)	Apurva Jolepalem B.A. (Vanderbilt University)	Matthew Robert Lordo B.S.Hlth.Reh.Sci., Ph.D. (The Ohio State University)	Shahena Michelle Polynice B.S. (Brown University)
Brielle Kaitlyn Davidson B.S. (The Ohio State University)	Sydney Alexa Gilkey B.S. (Dickinson College)	Denis Kaili B.S. (The Ohio State University)	Srividhya Sai Madireddy B.A., B.S. (University of Pittsburgh)	Amy Lyn Powell B.S.Hlth.Reh.Sci. (The Ohio State University)
Benjamin Davies B.S. (University of Cincinnati)	Volha A. Golubeva B.A. (University of South Florida) Ph.D. (The Ohio State University) <i>Cum Laude</i>	Alexander E. Keister B.S. (The Ohio State University)	Amirmohammad Mafi B.S. (Kent State University)	Jesse Chen Pullen B.A. (Vanderbilt University)
Jad Hamed Daw B.A. (Case Western Reserve University)	Emily Ann Goodwin B.S.Pharm.Sci. (The Ohio State University) <i>Magna Cum Laude</i>		Elias Robert Maloof B.S. (Miami University) <i>Cum Laude</i>	
Mina Dawod B.S. (Florida Atlantic University)			Raveena Mata B.A., B.S. (Wayne State University)	
Alejandro Andres de la Cova B.S. (University of Florida)				

Emma Quintero
B.S. (University of Florida)

Dashaun Anthony Ragland
B.S. (Grand Valley State University)

Adrian Rajab
B.S. (The Ohio State University)

Vighnesh Ramesh
B.S. (University of Cincinnati)

Kavita Ramnath
B.S. (Carnegie Mellon University)

Jack Charles Redick
B.A. (The College of Wooster)
Cum Laude

Carson Elizabeth Isola Rogge
B.S. (Northwestern University)

Lucy Catherine Rose
B.S.Educ. (University of Virginia)

Elizabeth G. Rotenberg
B.S. (The Ohio State University)

Claire Lillian Ruben
B.S. (University of Rochester)

Sachit Rustagi
B.S. (University of Cincinnati)
Magna Cum Laude

David James Ryskamp
B.A. (Butler University)

Nathalie Nana Dokuah Sackey
B.S. (University of Cincinnati)

Safa Saleem
B.A. (Harvard University)

Paige Whitaker Santee
B.S. (Emory University)

Divyaam Satija
B.S.Biomed.Eng. (The Ohio State University)

Garrett Schilling
B.A. (Miami University)
Summa Cum Laude

Kateri Lynn Schoettlinger
B.S. (Radford University)

Karlee Bay Schultz
B.S. (John Carroll University)

Austin Jacob Secor
B.S. (University of Toledo)

Anamika Shah
B.S. (Dartmouth University)

Divya Shankar
B.S.Biomed.Sci. (The Ohio State University)

Shuchi Sharma
B.S.Cptr.Sci.Eng. (Arizona State University)

Alexandra Nicole Sheldon
B.S. (The Ohio State University)
Cum Laude

Hannah Elizabeth Shenton
B.S. (University of Michigan)

Ada Cleary Sher
B.S. (Denison University)

Steven Andrew Sher
B.S. (Arizona State University)
Ph.D. (The Ohio State University)

Harleen Shergill
B.S. (University of Michigan)

Lauren Shingler
B.S.Biomed.Eng., M.S. (The Ohio State University)

Josue Daniel Sion
B.S. (Brigham Young University)

Zachary Thomas Smotzer
B.S. (The Ohio State University)

Abigail Paige Steinbrunner
B.S. (Miami University)

Andrew Jon Stevens
B.S. (Brigham Young University)
Cum Laude

Katelynn Alexis Stone
B.A. (Miami University)

Lysuand Ransanz Swanstrom
B.S. (Oregon State University)

Noah Riley Takacs
B.A. (Miami University)
Cum Laude

Ian Andrew Tarnovsky
B.S. (Oregon Institute of Technology)
Magna Cum Laude

Ronald Douglas Thompson
B.S. (Oregon State University)

Brianna Nicole VanNoy
B.S.Pub.Hlth. (The Ohio State University)

Neha Vazzalwar
B.S. (University of Michigan)

Vamsee Krishna Vemulapalli
B.S. (Drexel University)

Selina Svutchka Vickery
B.S. (The Ohio State University)
Cum Laude

Joshua Evander Vignolles-Jeong
B.A. (University of California, Berkeley)

Matthew David Viveiros
B.S. (Brigham Young University)
Cum Laude

Anthony Wang
B.S. (Johns Hopkins University)

Jack Wang
B.S. (The Ohio State University)

Tina Xie Wang
B.S. (University of California, Riverside)

Wesley Wang
B.S. (University of Washington)
M.S., Ph.D. (The Ohio State University)

Jacob Y. Wareti
B.S.Hlth.Reh.Sci. (The Ohio State University)

Alexander Machiel Weiss
B.S.Biomed.Sci. (The Ohio State University)

Bailey Anne Williamson
B.A. (The Ohio State University)

Amday Wolde
B.S. (University of Maryland, Baltimore County)

Megan Nicole Wong
B.S. (Denison University)
Magna Cum Laude

Alice Wu
B.A. (Vanderbilt University)
Magna Cum Laude

Zachary Alexander Wykoff
B.S. (The Ohio State University)

Allison Peterson Yan
B.A. (Harvard University)

Matthew Lowell Yoder
B.S. (University of Notre Dame)

Jane Yu
B.S.Biomed.Eng. (The Ohio State University)
Cum Laude

Jacob Ryan Zimmerman
B.S. (University of Kentucky)

Bachelor of Science in Biomedical Science

Sara Omran Abul-Khoudoud
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Colin Brame
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Oumoukhairy Oumy Camara
Magna Cum Laude
with Honors in Medicine

James Wallace Carpenter
Summa Cum Laude
with Honors in Medicine

Allen Junseo Choi
Summa Cum Laude
with Honors in Medicine

Nicholas Andrew DeGroof
Summa Cum Laude
with Honors in Medicine

Ryan Aziz Elaud
Magna Cum Laude
with Honors in Medicine

Sydney Maureen Fuller
Andrew Nicholas Gereia
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Adrienne Grace Heyrosa
Magna Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Amogh Iyanna
Summa Cum Laude
with Honors in Medicine

Jonathan Hyun Jang
Magna Cum Laude
with Honors in Medicine

Dhishan Kashyap
Summa Cum Laude
with Honors in Medicine

Anushree Majumdar
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Idara Ntukidem
Cum Laude
with Honors in Medicine

Allyson Eve Okonak
Cum Laude
with Honors in Medicine

Meera Rajeev
Summa Cum Laude
with Honors in Medicine

Julieta Paola Ramirez
Magna Cum Laude
with Honors in Medicine

Kruthika Sharma
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Anitvir Singh Taunque
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Hannah Kathryn Thomas
Summa Cum Laude
with Honors in Medicine

Matthew Paul Wilson
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Simon George Yacoub
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

Asmaa Yousif
Summa Cum Laude
with Honors in Medicine
with Honors Research Distinction in Biomedical Science

School of Health and Rehabilitation Sciences

Bachelor of Science in Athletic Training

Alliyah Jo'nae Allen
Gracie Leigh Barney
Eric Michael Carpenter
Carra Rose Croucher
Delilah Judith Folk
Magna Cum Laude

McKenzie Taylor Gibson
Alexa Rachel Glovin
Kennedy Alice Graves
Cum Laude

with Honors in Health and Rehabilitation Sciences

Danielle Taylor Jacobson
Cum Laude

Carlson Lorraine Lopez
Shilo Lottes
Magna Cum Laude

Jailyn Rose Lucas
Madison Olivia McNamara
Gabriela Alejandra Medina Lima
Summa Cum Laude

Oryan Faith Murphy
Faith Amanda Nixon
Lauren Elizabeth Rizzardi
Magna Cum Laude

Alyssa Marie Spencer
Cum Laude
Nicholas Randolph Trostel
Magna Cum Laude

Justin Christopher Tullos
Sarah Diane Weiss
Cum Laude

Blake Louis Wood

Bachelor of Science in Health and Rehabilitation Sciences

Hasan Akram Abaza
Summa Cum Laude
with Research Distinction in Medical Laboratory Science

Asha Mohamed Abdallah
Cum Laude
Faiza Ibrahim Abdi
Cheyenne Marie Adkins
Sabreen Hakeem Ahmad
Magna Cum Laude

Saher Anna Ahmad
Cum Laude

Ryan Joseph Ahrens
Magna Cum Laude

Saja Hayder Al Juboori
Saif Al-Abed
Magna Cum Laude
Cum Laude

Jenna Almomar
Cum Laude

Fikere Abebe Amare
Julia Ann Ambrosio
Cum Laude

Brynn Leigh Ammerman
Magna Cum Laude

Cameron Anness
Cum Laude

Haley Grace Ambrecht
Magna Cum Laude

Meron Aschalew	Mackenzie Marie Cascaden	Sandra Dingey	Cameryn Ally Forgash	Charlie Hamann
Katie Elizabeth Ashline	Summa Cum Laude	Sophie Rae Dinerger	Quinn Robert Foster	Magna Cum Laude
Syed Ashraf	Reagan Ann Cash	Carmella Capri DiRocco	Andrea Revay Frank	Madeline Grace Hamilton
Summa Cum Laude	Magna Cum Laude	Magna Cum Laude	Cum Laude	Kristen Elizabeth Hammond
Reyann Ashraf Askar	Julia Marie Cashwell	Carter John Doman	Eva Marie Frazzetta	Cum Laude
Brenna Carroll Aspery	Cum Laude	Magna Cum Laude	Cum Laude	Duncan William Harlan
Magna Cum Laude	Emma Josefina Castronova	Samantha Helen Dominic	Anna Grace Freeman	Emily Claire Harrell
with Honors in Health and	Magna Cum Laude	Summa Cum Laude	Tara Nicole Gairing	Cum Laude
Rehabilitation Sciences	Marian Grace Catahan	Reena Donofe	Magna Cum Laude	Nichole Hartley
Atreyee Atarhi	Perry Roland Catanese	Molly Elizabeth Donohue	Aubrey Elizabeth Galbraith	Elise Lynae Hartzler
Magna Cum Laude	Cum Laude	Kiera Elizabeth Doran	Magna Cum Laude	Summa Cum Laude
with Honors in Health and	Gabriella Jaqueline Cesa	Magna Cum Laude	Addison Grace Galernik	Natalie Ludmila Harvey
Rehabilitation Sciences	Tailyn Cestaro	Anna Catherine Dorenkott	Magna Cum Laude	Magna Cum Laude
Elizabeth Grace Baca	Summa Cum Laude	Magna Cum Laude	Kimberly Garcia Mora	Tallulah Marie Haskett
Cum Laude	Megan Alexis Chance	Cum Laude	Cum Laude	Anna Terese Hatgas
Lauren Marie Bailey	Magna Cum Laude	Kylie Nicole Downey	Kylie Marie Garsky	Cum Laude
Ethan James Baiocchi	Victoria Angel Chavez	Magna Cum Laude	Summa Cum Laude	Taylor Madison Hays
Justine Baladac	Faiza Masud Cheema	Gabriella Dumbiauskas	Rawah Yousef Gasiea	Magna Cum Laude
Cum Laude	Cum Laude	Abigail Elizabeth Dumm	Summa Cum Laude	Gavin Matthew Hedrick
Zachary Evan Baldwin	Julia Marie Cheney	Summa Cum Laude	Claire Gbur	Magna Cum Laude
Magna Cum Laude	Nora Elizabeth Chernosky	with Honors in Health and	Madeline Beatrice Gelly	Lucas Jennings Henderson
Jasmine Lucero Banos	Cassidy Lynn Christian	Rehabilitation Sciences	Cum Laude	Summa Cum Laude
Alyssa Bartley	Faith Elaine Christy	with Research Distinction in Health	Alyssa Genin	Katelynn Henry
Evan James Daniel Barton	Cum Laude	Sciences	Mary Ghiotti	Nadia Gisella Hermida
Magna Cum Laude	Clare Elizabeth Chufar	Erica Lynn Duquet	Cum Laude	Magna Cum Laude
Sophie Rebecca Bartram	Summa Cum Laude	Cum Laude	Daniela Rose Giarmita	Heather Christine Higgins
Magna Cum Laude	Gabriella Nicole Cicerini	Evelyn Rose Durkin	Reiley Morgan Gies	Magna Cum Laude
Hannah Renee Bates	Cum Laude	Magna Cum Laude	Magna Cum Laude	Yasmine Hannah Higgins
Magna Cum Laude	Alena Elizabeth Travis Clark	Carissa Lynn Edwards	Hannah Elizabeth Gilley	Magna Cum Laude
Brooklyn Kay Bauer	Magna Cum Laude	John Dahlem Egnaczyk	Summa Cum Laude	Piper Louise Highmiller
Allison Marie Bauman	Grace Elizabeth Clark	Chinenye Precious Ekeocha	Cecilia Glancy	Magna Cum Laude
Cum Laude	Cum Laude	Khaled Ibrahim Elbatawi	Magna Cum Laude	Stacey Jeanne Hinrichs
Isabella Malyn Beck	Carrington M. Coats	Cum Laude	with Research Distinction in Health	Stephanie Cecelia Hirsch
Abigail Caroline Beidelschies	Katherine Lynn Cobel	Leena A. Etilib	Sciences	Magna Cum Laude
Magna Cum Laude	Cum Laude	Magna Cum Laude	Dylan Pierce Goldstein	Thuy Thanh Hoang
Abigail Leona Berezansky	Alexis Morgan Cochran	Adeline Claire Engel	Cum Laude	Summa Cum Laude
Cum Laude	Sarah Ilene Coleman	Meredith Marie Engelke	Emma Marie Golsch	Emma Rose Holocker
Lola Kathleen Berk	Summa Cum Laude	Cum Laude	Cum Laude	Cum Laude
Cum Laude	Sadie Miller Colvin	Marla Erickson	Alexis Rose Gonda	Madison Rose Hopkins
Leah Makini Bertrand	Cum Laude	Christopher Wallace Ernst	Joshua Ryan Gontkovic	Cum Laude
Zachary Thomas Bierman	Celeste Terese Conley	Uma Frances Emma Farrow-	Cum Laude	Anna Damei Horabik
Sydney Elizabeth Blake	Claire Margaret Conley	Harris	Selena Good	Corder Lee Houk
Magna Cum Laude	Carl Allen Copley	Cum Laude	Juliet Jean Goodelle	Cum Laude
Natalie Bott	Magna Cum Laude	Sadaf Farsi	Taylor Madison Gordon	Parker Elise Hughley
Cum Laude	Melina Cortez	Summa Cum Laude	Magna Cum Laude	Cum Laude
Torre Jon Bower	MaKenna Olivia Cosby	with Research Distinction in Health	Aishwarya Gosangi	Emily Louise Hull
Alexandria Marie Branch	Summa Cum Laude	Sciences	Summa Cum Laude	Magna Cum Laude
Cum Laude	Paige Cox	Alicia Michelle Feinstein	Jessica Taylor Gotti	Riham Hussein
Judson Carlton Brandenburg	Amelia Rae Creech	Magna Cum Laude	Summa Cum Laude	Cum Laude
Abby Rose Brogan	Magna Cum Laude	Kelly Lynne Felix	Kamala Grace Graham	Sadie Grace Hutsenpiller
Hallie Abbott Brost	Brice Allen Cross	Summa Cum Laude	Nicole Grace Grandinetti	Amran Ibrahim
Andy Lauren Buhl	Sallee D'Albora	Cum Laude	Cum Laude	Cum Laude
Emme Catherine Burdellik	Cum Laude	Tucker Montgomery Fewell	Seth Walter Gray	Madison Pearl Intrater
Jacqueline Vida Burr	Grace Kathryn Daniels	Cum Laude	Cum Laude	Cum Laude
Cum Laude	Summa Cum Laude	Alyssa Makayla Fields	Alexander Louis Graybill	Leila Mohamed Issa
Andrea L. Burt	Kyra Rose Darnell	Cum Laude	Magna Cum Laude	Teresa Ivan
Kaylee Marie Byerly	Kareen Randa Darwich	Morgan Brooke Fijalkowski	Grant William Gribben	Summa Cum Laude
Summa Cum Laude	Chandler Nicole Deaton	Silvia Anna Fioravanti	Cum Laude	Matthew Robert Iwaniec
Reilly Payton Cahill	Magna Cum Laude	Madeline Elizabeth Fiorucci	Molly Katherine Grice	George Oliver Jacob
Cum Laude	McKenzie Lane Decker	Magna Cum Laude	Magna Cum Laude	Summa Cum Laude
Sydney Nicole Cain	Michael Angelo DeDad	Elizabeth Kathleen Fitch	Emma Rebecca Griffith	Jillian Elizabeth Jacobs
Summa Cum Laude	Anthony William DeFefice	Summa Cum Laude	Magna Cum Laude	Magna Cum Laude
Chloe Elyse Callahan	Cum Laude	Kristin Leslie Fitz	Sophie Ann Griffith	Serene Jahshan
Cum Laude	Grace Kathryn Delaney	Emma Nancy Flaherty	Hanna Elizabeth Grover	Jami L. Jasper
Lauren Michelle Callahan	Magna Cum Laude	Megan Rae Flanagan	Summa Cum Laude	Magna Cum Laude
Gianna Cannell	Lillian Rose DeZarn	Magna Cum Laude	Madeline Maria Gumino	Rajiv reddy Jeenigiri
Aiden Parker Cannon	Cum Laude	Grace Marie Fletcher	Magna Cum Laude	Summa Cum Laude
Ashleigh Elizabeth Cantrell	Khagi Dhitai	Cum Laude	Catherine Summer Gursal	Taeun Jeon
Elle Elizabeth Carlsen	Mamadou M'Bello Diallo	Lily Marie Floyd	Magna Cum Laude	Erin Nicole Johnson
Summa Cum Laude	Mariyama Monika Diallo	Laney Elizabeth Folk	Elvis Kwabena Gyabeng	Joseph Owakomate Johnson
Nicole Carmona	Jevon Ibrahim Diawara	Michael Joseph Folkman	Regina Marie Habedank	Cum Laude
Olivia Rose Carson	Faith Marie Dickson	Elizabeth Marie Ford	Cum Laude	Carly Brooke Jokovich
Mia Hope Carver	Cum Laude	Summa Cum Laude	Nadine Haboul	Ramsey Tyler Jones
Cum Laude				Cum Laude

Victoria Lynn Jones Cum Laude	Dyson Zeh Leffler Deanna Joli Leong Summa Cum Laude	Alyssa Paige Moran Magna Cum Laude	Jordyn Marie Pez Cindy Pham Summa Cum Laude	Alexa Riley Schroeder Magna Cum Laude
Makenzie Leigh Joseph Magna Cum Laude	Brianna Simone Lester Magna Cum Laude	Brandon Moran Magna Cum Laude	Tiffany Vy Pham Delaney Nicole Phillips Lauren Nicole Pittinsky	Chloe Sharon Schroeder Magna Cum Laude
Anasari Juarez-Santiago Meghan Faith Kadlubowski Cum Laude	Taylor Jordyn Levine Sean Tony Levonaitis Serenity Marie Liebchen Cum Laude	Grace Rayann Morris Cum Laude	Aileen Plascencia Rodriguez Alexis Marie Popp Summa Cum Laude	Rachael Marie Schutte Summa Cum Laude
Chelsea Farisayi Kalonga Cum Laude	John Hamilton Liles Arden Colette Lindberg Cum Laude	Sophia Morris Dena Sherif Mossad Magna Cum Laude	Gabrielle Anne Porter Cum Laude	Molly Kathleen Schutter Magna Cum Laude
Cassidy Elizabeth Karakis Magna Cum Laude	Nicholas Joseph Lotito Kaylie M. Lott Magna Cum Laude	with Honors in Health and Rehabilitation Sciences with Research Distinction in Health Sciences	Madison Taylor Posner Magna Cum Laude	Michael Richard Scott Regan Faith Scott Cum Laude
Nastaha Mohamed Kassim Alyson Clayre Kelly Summa Cum Laude	Breanna Lynn Luca Mary Katherine Lux Cum Laude	Abigail Sarah Mouse Emily Ginsberg Movshin Cum Laude	with Research Distinction in Health Sciences	Lakyn Jade Secrest Logan Michael Seitz Magna Cum Laude
Megan Kelly Magna Cum Laude	Jasmine Rae Alexandra Magda Summa Cum Laude	Audrey Olivia Munda Summa Cum Laude	Emma Blayne Pratt Cum Laude	Brooke Halle Sendik Summa Cum Laude
Mia Margaret Kelly Cum Laude	Sneha Magesh Cum Laude	Ashley Clara-Mae Janae Murray Summa Cum Laude	Alexandra Grace Prunzik Maura Kathryn Pudoka Magna Cum Laude	Kristin Grace Sfero Ramalakshmy Shankarganesh Summa Cum Laude
Danial Khan Cum Laude	Ava Jae Maillard Tina Theresa Maly Summa Cum Laude	Angela Musai Magna Cum Laude	Naomi Adia Purdie Shefeera Anike Raji-Khalid Summa Cum Laude	Vidya Sharma Sydney Nicole Sharron Magna Cum Laude
Haniya Khan Cum Laude	Kelsey Michelle Mangold Magna Cum Laude	Kaitlyn Elizabeth Nash Noah Ndyajunwoha Cum Laude	Shereefa Abike Raji-Khalid Summa Cum Laude	Victoria Sue Shaw Allison Renee Shoup Magna Cum Laude
Mariam Khan Cum Laude	Sophia Christine Mangold Magna Cum Laude	Tristen Mikael Ness Hailey Mai Nguyen Cum Laude	Zainab A. Ramoni Rachel Anne Ramsey Magna Cum Laude	Kayla Marie Shroyer Rachel Ann Slisher Jadelyn Anne Smerczynski Cum Laude
Skyy Phetmannie Khounborin Aaron K. Kim Cum Laude	Leah Martin Julia Rose Marusic Cum Laude	Jaclyne Nguyen Magna Cum Laude	Alexis Mackenzie Rapp Magna Cum Laude	Brenna Rose Smith Cum Laude
Cing Sian Kim Claudia Dayae Kim Cum Laude	Elle Margaret Mason Magna Cum Laude	Emma Nicole Niehaus Magna Cum Laude	Caroline Anne Rarick Jenna Rasul Karsyn Nicole Reader Cum Laude	Emma Janae Smith Summa Cum Laude
Hope Michaela Kiraly Summa Cum Laude	Zane Grant Massouh Magdaly Michelle Materni Alexis Rose Mauriello Summa Cum Laude	Olivia Nigro Aidan Noble Cum Laude	Megumi Reategui Samuel James Reitz Olivia Noelle Repasky Summa Cum Laude	Sophia Rose Snyder Fiona Violet Sondrini Magna Cum Laude
Qiani Obediaba Kissi Cum Laude	Mary Beth McBride Summa Cum Laude	Dylan Robert Nowinski Magna Cum Laude	Rebekah Anne Reynolds Magna Cum Laude	Gabriella Michelle Sophocleous Summa Cum Laude
with Honors in Health and Rehabilitation Sciences	Telijah Kyree McCollum Cum Laude	Katelyn Marie Nowinski Grace Pearl Nusall Summa Cum Laude	Justice Richardson Tyra Joy Riddle Olivia Cole Righi Magna Cum Laude	Whitney Southward Cum Laude
Kalie Nicole Kitchen Kanaan Khattab Kittaneh Cum Laude	Chloe McCoy Magna Cum Laude	Mairin Rea O'Brien Magna Cum Laude	Andrea Michelle Rigbsby Kelly Renee Robertson Magna Cum Laude	Sarah Elizabeth Spatz Cum Laude
Elise Marie Kleinhenz Summa Cum Laude	Abigail Jones McCurdy Magna Cum Laude	Caley Moran O'Connor Summa Cum Laude	Kaelyn Ann Rodrigues Cum Laude	Madeline Rae Sperling Magna Cum Laude
Nicholas Daniel Klisovic Cum Laude	Abigail Rebecca McGraw Magna Cum Laude	Victoria Okoh Okai Magna Cum Laude	Valeria Sofia Rodriguez Diaz Ryleigh Addison Ross Magna Cum Laude	Madison Elizabeth Stalfort Magna Cum Laude
Courtney Lynn Kneisley Cum Laude	Molly Marie McGrew Elizabeth Therese McGuire Magna Cum Laude	Alexa Fernanda Orduna Mellisa Otoo Nicole Renee Ouellette Summa Cum Laude	Sabrina Rounds Cum Laude	Taylor Marie Stark Cum Laude
Sravani Venkata Konakalla Magna Cum Laude	Ella Keegan McWherter Summa Cum Laude	Olexa Ann Owens Summa Cum Laude	Madelyn Nicole Rudd Magna Cum Laude	Sophia Kathleen Steele Cum Laude
Katie Elizabeth Kostelny Cum Laude	Mariam Mehmood Cum Laude	Andrea Kristen Page Cum Laude	Justin Matthew Ruegsegger Cum Laude	Madalyn Rachelle Stein Cum Laude
Natalie Rachel Kramer Magna Cum Laude	Klarisa Meka Abigail Ann Merchant Cum Laude	Micayla Helene Paglia Ava Rain Parise Summa Cum Laude	Makenzie Lynn Runyon Magna Cum Laude	Paige Elizabeth Stevenson Magna Cum Laude
Emma Paige Krantz Summa Cum Laude	Elizabeth Anne Merchant Dedar Mustafa Mergaye Summa Cum Laude	Luca Nahuel Parker Andrew Paul Parkowski Magna Cum Laude	Jaquelyn Saldana Magna Cum Laude	Ryan Gabrielle Stewart Ava Catherine Stover Magna Cum Laude
with Honors in Health and Rehabilitation Sciences	Cecily Makenna Merrick Caroline Elizabeth Meyer Summa Cum Laude	Bhavik Patel Jay Rajendra Patel Summa Cum Laude	Seynabou Sall Magna Cum Laude	Cassie Ann Strawman Annika Krishna Surya Cum Laude
with Research Distinction in Health Sciences	Alyssa Jaclyn Miller Magna Cum Laude	with Research Distinction in Health Sciences	with Research Distinction in Health Sciences	Abigail Michelle Swanson Magna Cum Laude
Emma Kay Kretchmar Cum Laude	Amanda S. Miller Hallie Tina Mitchell Cum Laude	Mia Isabella Patel Magna Cum Laude	Ella Lind Scarbrough Emily Schaefer Cum Laude	Lilli E. Swanson Cum Laude
Ilona Kushnirchuk Antonella Tiana Laera Cum Laude	Najma Mohamed Mohamud Elena Elizabeth Monnin Cum Laude	Haley Rose Patrick Natalie Elizabeth Peak Andrew Richard Pelok Magna Cum Laude	Claire Madison Schanne Magna Cum Laude	Adeline Jean Syglowski Summa Cum Laude
Jordyn Nicole Lambert Jordyn Elizabeth Lange Summa Cum Laude	Jenna Marie Monnin Cum Laude	Audrey Ruthanne Pennington Cum Laude	Maia Korrin Scharff Summa Cum Laude	Nancy Nhi Ta Cum Laude
Sidney Laufer Cum Laude	Olivia Marie Mora	Samantha Elizabeth Peters		Rhea Taneja Summa Cum Laude
Spencer Steele Law Donna Victoria Lawhorn Kelsey Elizabeth Leamy Magna Cum Laude				Lydia Anne Tanner Cum Laude
Emily Nicole Lee Cum Laude				Kaitlynn Teng Summa Cum Laude
Grace Anne Leedy Magna Cum Laude				

Stefanie Brianne Thiel
Johnathan Morrow Thiele
Emma Kathleen Thompson
Alexis Lauren Tomko
Magna Cum Laude
Haley Marie Tonne
Cum Laude
Julia Thuy-Duong Tran
Tammy Tran
Cum Laude
Paul-Hy Khang Truong
Cum Laude
Melody Jiashun Tsai
Summa Cum Laude
*with Honors in Health and
Rehabilitation Sciences*
Yesenia Vargas
Evelyn Marie Verplatse
Tory Layne Vetter
Magna Cum Laude
Malena M. Vitantonio
Cum Laude
Alexandra Theresa Vombergar
Magna Cum Laude
Ava Jennifer Warren
Magna Cum Laude
Lindsey Warwick
Mallory Grace Washington
Taina Anjelica Washington
Magna Cum Laude
Nicholas Marvin Watkins
Aniston McKenna Watts
Cum Laude
Maya Grace Weber
Cum Laude
Stephanie Marie Wendling
Ava Morgan Werner
Magna Cum Laude
Emily Wertz
Magna Cum Laude
Abigail Claire Williams
Arin Janice Rose Williams
Magna Cum Laude
Darrior Jeffrey Williams
Bryan Joseph Winget
Cum Laude
Mason Robert Wise
Madison Leeann Wolford
Cum Laude
Anna Rose Wollet
Magna Cum Laude
Rachel Anne Wright
Magna Cum Laude
Grace Elizabeth Wyszynski
Magna Cum Laude
Theodosia Ama Mawusey Yamanó
Cum Laude
Yang Yang
Matthew James Yoon
Cum Laude
*with Research Distinction in Health
Information Management and Systems*
Abigail Elaine Young
Cum Laude
Vivian Yu
Magna Cum Laude
Nicole Dayna Zappin
Magna Cum Laude
Hannah Danae Zeigler
Magna Cum Laude
Simret Haileab Zerayesus
Cum Laude

Lizaveta Zhukavets
Summa Cum Laude
Ariela Zonenashvili
Jiekai Zou

College of Nursing

Dean: Karen M. Rose

Bachelor of Science in
Health and Wellness

Ashley Asare Bediako
Cum Laude
Taran Concetta Ferry
Magna Cum Laude

Bachelor of Science in
Nursing

Caisha Sharif Abdirahman
Magna Cum Laude
Elizabeth Adkins
Haley Adkins
Summa Cum Laude
Fardoso Salah Ahmed
Taneya Alexander-Woods
Cum Laude
Wren Elizabeth Allegra
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Rebecca Antwi
Cynthia T. Appiah
Cum Laude
Brooke Elaine Armstrong
Magna Cum Laude
with Distinction in Nursing
Emma Meredith Atkins
Summa Cum Laude
Anuoluwapo Awofeso
Cum Laude
Aissata Ba
Magna Cum Laude
Victoria Elizabeth Barrington
Lily Grace Bartel
Cum Laude
Lauren Bissell
Adwoa Poku Boateng
Bailey Mae Brant
Magna Cum Laude
*with Honors Research Distinction in
Nursing*
Julia Claire Brenner
Cum Laude
Cylee Brooks
Summa Cum Laude
Brittany Nicole Brown
Cum Laude
Jessica May Brunner
Summa Cum Laude
David R. Buchan
Samantha Cain
Summa Cum Laude
Brianna Nicole Capps
Summa Cum Laude

Ashley Marleni Ramos Carmona
Magna Cum Laude
Cade William Chalmers
Magna Cum Laude
Abby Clark
Magna Cum Laude
Margaret Liv Cliber
Summa Cum Laude
Nicholas Alan Cline
Cum Laude
Abigail Elizabeth Clouse
Magna Cum Laude
Benjamin Madison Collins
Caroline Elizabeth Conaway
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Christopher Ryan Cooper
Stephanie Rae Cousins
Cum Laude
Lovelis Danso
Cum Laude
Andee J. Davis
Sabrina Denise Dawson Medeiros
Cum Laude
Jacob Carl DeFebo
Angelina Marie Dennerl
Summa Cum Laude
Megan Evelyn Derr
Summa Cum Laude
Babita Dhungel
Abigail Marie Diel
Cum Laude
Kira Jaye DiPaolo
Magna Cum Laude
*with Honors Research Distinction in
Nursing*
Maria Frances Dosen
Summa Cum Laude
Mary Elizabeth Drozda
Matthew Scott Eifert
Summa Cum Laude
Andrea Christine Elsbrock
Sarah Essel
Valerie Irene Feller
Magna Cum Laude
Kara Nancy Fendrich
Magna Cum Laude
Ashlyn Nicole Fink
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Julia Ann Fishbaugh
Magna Cum Laude
Brianna Lynn Fortin
Magna Cum Laude
Kaitlyn Fout
Zachary Allan Galbreath
Genevieve Noelle Gay
Summa Cum Laude
Emily Gee
Summa Cum Laude
Victoria Jean Glarner
Magna Cum Laude
Briana Marie Gordon
Magna Cum Laude
Benjamin Forrest Grai
Cum Laude
Allison Kaylee Gray
Magna Cum Laude
Holly Ann Greco

Jennifer Lynn Grubenhoff
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Caroline Joy Harrington
Magna Cum Laude
Tayzia Jo Havill
Cum Laude
Katherine Rose Hays
Summa Cum Laude
Brooke Elizabeth Hellman
Magna Cum Laude
Riley Bernadine Henning
Magna Cum Laude
Hannah Lynn Henry
Summa Cum Laude
Katelyn Marie Henry
Serenity Marcella Herdes
Summa Cum Laude
Jenna Jolan Hill
Magna Cum Laude
Kayleigh Allison Hill
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Noah James Histed
Ashley Marie Hitchcock
Summa Cum Laude
Julia Marie Hoehn
Stephanie Danielle Hulsman
Rahma A. Hussein
Magna Cum Laude
Safia Jenan Hussein
Magna Cum Laude
Maria Lynay Ioanilli
Magna Cum Laude
Rwan Tarek Ismail
Nya Reign Jackson
Cum Laude
Gaeun Jang
Magna Cum Laude
Kennedy Elizabeth Jarvis
with Distinction in Nursing
Audrey Lynn Jicha
Summa Cum Laude
Jolene Elizabeth Jirousek
Summa Cum Laude
Madison Elizabeth Jors
Summa Cum Laude
Jamie Lynn Keller
Emily Louise Kessler
Summa Cum Laude
Shannon N. Kirkey
Morgan Frances Kittle
Summa Cum Laude
Antonette Claudine Lackey
Summa Cum Laude
Mary Mabel Lake
Summa Cum Laude
Jacob Owen Langkiet
Cum Laude
with Distinction in Nursing
Trinity Marie Langley
Cum Laude
Brittany Lynn Leach
Cum Laude
Viki Lin
Summa Cum Laude
Julia Carolyn Liptak
Magna Cum Laude

Lindsey Ann Luchsinger
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Brooks Murray Lutes
Amaris Cassidy Madding
Cum Laude
Madison Elizabeth Mahoney
Summa Cum Laude
Kelsey Major
Cum Laude
Trudy Michael Marszalek
Magna Cum Laude
Courtney Ellen Martin
Olivia Kathryn Maschke
Magna Cum Laude
*with Honors Research Distinction in
Nursing*
Claire Alexis Maxwell
Cum Laude
Evelyn Mary McClure
Magna Cum Laude
Amy Morgan McKenzie
Kelly Angela McMahon
Ashley Lauren Means
Taylor Marie Mehl
Summa Cum Laude
Ashley Paige Mickey
Cum Laude
Caitlyn Grace Mikes
Summa Cum Laude
Hannah Miller
Cum Laude
Sophie Grace Miller
Cum Laude
Bandana Mishra
Magna Cum Laude
Delaney Mae Moore
Kendall Monet Morgan
Cum Laude
Jenna Elizabeth Mulderig
Magna Cum Laude
Hala James Museitiff
Magna Cum Laude
Takko Ndiaye
Cum Laude
Trevor Matthew Newell
Magna Cum Laude
Thy Quynh Nguyen
Cum Laude
Bradley C. Noble
Nafisa Noor
Magna Cum Laude
Faith Christine Oboab
Summa Cum Laude
Jamad Osman
Claire Packer
Summa Cum Laude
*with Honors Research Distinction in
Nursing*
Angelina Isabelle Palmucci
Summa Cum Laude
Janki Mehul Patel
Magna Cum Laude
Hope Perry
Magna Cum Laude
Sydney Amelia Perry
Magna Cum Laude
Marcella Maire Pfaff
Magna Cum Laude
Alinh Chau Phan
Magna Cum Laude

Anya Ann Piazza
Summa Cum Laude

Mason Rose Pohl
Summa Cum Laude

Fiona Power
Magna Cum Laude

Olivia Pugsley
Summa Cum Laude

Ella Elizabeth Pursel
Summa Cum Laude

Kenna Kitt Rasmussen Royce
Summa Cum Laude

Taylor McKenzie Reer
Ava Marie Reese
Cum Laude

Jan Reichert
Monika Reier
Jeonghyeon Rhee
Magna Cum Laude

Bailey Christine Richards
Magna Cum Laude

Abigail Emily Richardson
Magna Cum Laude
with Honors Research Distinction in
Nursing

Kiba Dee Richardson
Courtney Rider
Eleanor Catherine Robson
Cum Laude

Alexandria Leigh Rodgers
Magna Cum Laude

Jenny Roes

Austin Thomas Rogers
Madison Elaine Rucker
Magna Cum Laude

Jenna Nicole Ruiz
Cum Laude

Ashley Elisabeth Rullo
Magna Cum Laude

Kaylie Salinas
Magna Cum Laude

Summer Flair Sands
Magna Cum Laude

Kelsey Marie Schloemer
Cum Laude

Calvin Andrew Schuellerman
Magna Cum Laude

Sarah Elizabeth Scott
Elijah Johanan Senior
Anna Olivia Shaffer
Summa Cum Laude

Kindall Renee Shaw
Magna Cum Laude

Nathan Michael Sheridan
Riley Martha Sheridan
Summa Cum Laude

Ava Jean Shook
Kaitlin Elizabeth Short
Magna Cum Laude

Grace Kelly Sievers
John Brevin Michael Sizemore
Magna Cum Laude

Lauren Paige Skelly
Magna Cum Laude

Ciara Marie Slater
Magna Cum Laude

Brianna Laine Small
Magna Cum Laude

Graham Jeffrey Smith
Magna Cum Laude

Lucy Smith
Mila Soroka
Shayla Elisabeth Sowell
Magna Cum Laude

Angel Fernanda Stacklin
Magna Cum Laude

Paige Sterchele
Summa Cum Laude

Cole Douglas Sullivan
Cum Laude

Andrea Claire Sumida
Summa Cum Laude

Jessica Katherine Swaney
Summa Cum Laude

Katherine Marie Swords
Magna Cum Laude

Liya H. Tadesse
Magna Cum Laude

Valerie Kay Taskay
Samuel Thomas Taylor
Magna Cum Laude

Tihtiina Dagnachew Tefere
George Townley
Magna Cum Laude

Ella Katharine Urosevich
Summa Cum Laude

Claire Ava van Rheenen
Cum Laude

Lauren Elizabeth Visci
Summa Cum Laude

Lynn Tram Vu
Summa Cum Laude

Jane Alexis Vulic
Summa Cum Laude

Caroline Ellen Wagner
Summa Cum Laude

Kian Joseph Wagner
Summa Cum Laude

Christopher E. Walker
Emily Washack
Summa Cum Laude

Bela Louise Wetterauer
Summa Cum Laude

Bailee Nicole Williams
Cum Laude

Emily Kay Williams
Cum Laude

Amber Bethany Wilson
Laura Ashley Wilson
Magna Cum Laude

Claire Elizabeth Winkhart
Magna Cum Laude
with Honors Research Distinction in
Nursing

Grace Christine Wojnar
Magna Cum Laude

Kimmaria Joi Yarbrough
Akwasi Yeboah
Magna Cum Laude

Rachel Ebuon Yengo
Summa Cum Laude

Grace Elizabeth Young
Magna Cum Laude

Abbi Rose Zahn
Summa Cum Laude

Mary Elizabeth Zerrien
Summa Cum Laude

Nina Zhu
Magna Cum Laude

College of Optometry

Acting Dean: Jeffrey J. Walline

Doctor of Optometry

McKenna Kathleen Albers
B.S. (Butler University)
Magna Cum Laude

Logan Thomas Anway
B.S. (The Ohio State University)

Alexandra Batista
B.S. (Stephen F. Austin State
University)

Ian Daniel Lee Binns
B.S. (The Ohio State University)
Summa Cum Laude

Dalton Hunter Bittinger
B.S. (The Ohio State University)
Summa Cum Laude

Zachary Matthew Bogosian
B.S. (State University of New York
at Fredonia)

Elaina Chapnell Burnelis
B.S. (Westminster College)
Magna Cum Laude

Holly Grace Carlson
B.S.Hlth.Reh.Sci. (The Ohio State
University)
Cum Laude

Tyler Shane Carter
B.S. (The Ohio State University)
Magna Cum Laude

Dwight Chen
B.S.Chem.Eng. (The Ohio State
University)

Brenda Cheung
B.S. (Michigan State University)

Mackenzie Lane Coyne
B.A., B.S. (The Ohio State
University)
Summa Cum Laude

Meghan Brigid Donovan
B.S.Biomed.Eng. (Michigan State
University)
Summa Cum Laude

Maggie Mae Dunn
B.S. (The Ohio State University)
Magna Cum Laude

Rose Edmondson
B.S. (Southern Methodist
University)
Magna Cum Laude

Kayla Leigh Eshbaugh
B.S. (Pennsylvania State
University Erie, The Behrend
College)

Dalton Lyle Faler
B.S. (Miami University)
Summa Cum Laude

Maddison Marie Fortman
B.S. (Bowling Green State
University)
M.S. (The Ohio State University)
Summa Cum Laude

Maya Nicole Georgallis
B.A. (The Ohio State University)
Summa Cum Laude

Jose Germain
B.S. (University of Texas at San
Antonio)

Christina Gluch
B.S. (Seton Hall University)

Aidan Go
B.A. (Bard College at Simon's
Rock)

William Criddle Halling
B.S. (Brigham Young University)

Kylie Shea Hess
Summa Cum Laude

Abigail Hilvers
B.S. (The Ohio State University)

Danielle Alisa Ito
B.A. (University of Washington)
Summa Cum Laude

Sajini Nisammika Jayakody
B.S. (University of Michigan)
M.S. (The Ohio State University)

Halea Alexis Kohl
B.A. (Washington & Jefferson
College)
Cum Laude

Emily Kozickowski
B.S. (University of Portland)
M.S. (The Ohio State University)
Magna Cum Laude

Tallon Chance Kramer
Summa Cum Laude

Joyce Kuo
B.S. (The Ohio State University)

Andrea Marie Macke
B.A. (University of Louisville)
Magna Cum Laude

Morgan Elise Marquez
B.S.Pharm.Sci. (The Ohio State
University)
Cum Laude

David Charles Marsh
B.S. (The Ohio State University)

Kaylin Marie Maxwell
B.S. (University of Pittsburgh
Johnstown)
Summa Cum Laude

Juliana Mazzotta
B.S. (University of Miami)
Summa Cum Laude

Kelsey Jordan Miller
B.S. (University of Kentucky)

Tyson Arthur Montgomery
B.S., M.S. (The Ohio State
University)
Summa Cum Laude

Sarah Foor Muha
B.S.Pub.Hlth. (The Ohio State
University)
Summa Cum Laude

Allison Nicole Noe
B.S. (University of Dayton)
M.S. (The Ohio State University)
Magna Cum Laude

Rebecca O'Brien
B.S.Hlth.Reh.Sci. (The Ohio State
University)
Cum Laude

Sarah Elizabeth Olen-Thomas
B.S. (Hope College)
M.S. (The Ohio State University)
Summa Cum Laude

Brooke Elizabeth Peterson
B.S. (University of Nebraska-
Lincoln)
Magna Cum Laude

Joshua James Pfister
B.S. (University of Minnesota)
Magna Cum Laude

Blake Pittser
B.S.Biomed.Eng. (Wright State
University)
Magna Cum Laude

Paige Rene Pline
B.S. (Michigan State University)
Magna Cum Laude

Kaitlyn Rayne Rexroad
B.S. (West Virginia University)

Kelly Rebecca Rowe
B.S. (The Ohio State University)
Cum Laude

Alexander David Ryan
B.S. (Grand Valley State
University)

Ana Jacqueline Schroeder
B.S. (Otterbein University)
Cum Laude

Brian Edward Slattery Hart
Bachelor's (Bowling Green State
University)

Samantha Paige Southard
B.S. (Seton Hall University)
Cum Laude

June 4 - August 20, 2025, Board of Trustees Meetings

Kennedy Lauren Stakely
B.S.Hlth.Reh.Sci. (The Ohio State University)
Cum Laude

Michael Walter Staron
B.S. (University of Illinois at Urbana-Champaign)
Cum Laude

Joshua Jordan Stefan
B.S.Biomed.Sci. (University of Akron)
Magna Cum Laude

Nathan Kyle Stefan
B.S.Biomed.Sci. (University of Akron)
Magna Cum Laude

Ramsey Jean Struble
B.S. (Pennsylvania State University)
Magna Cum Laude

Jeffrey To
B.S. (The Ohio State University)
Summa Cum Laude

Gabriela Alexis Vasilakis
B.S. (State University of New York at Geneseo)

Tik Sing Wong
Bachelor's (Ohio University)
Magna Cum Laude

College of Pharmacy

Dean: Deanna L. Kroetz

Doctor of Pharmacy

Samira Yussuf Abdi
B.S.Pharm.Sci. (The Ohio State University)

Halle Christine Adair
B.S. (The Ohio State University)
Summa Cum Laude

Kabita Adhikari
B.S. (Denison University)

Kristina Ann Adolphe
B.A. (State University of New York at Buffalo)

Czes Rane Labastida Agaton
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Amaal Ahmed
B.S. (The Ohio State University)

Rushda Ahmed
B.S.Pharm.Sci. (The Ohio State University)

Hanin Hatem Ali
Bachelor's (University of Cincinnati)

Alexandria K. Alpy
B.S. (The Ohio State University)

Andre Anderson
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Christina Clare Bais
B.S.Pharm.Sci. (The Ohio State University)

John Baus
B.S. (The Ohio State University)
Cum Laude

Manahil Nabi Behlum
B.S.Pharm.Sci. (The Ohio State University)

Sydney Nicole Bellack
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Laura Elaine Brady
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Nathan Robert Branstein
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Carrie Brunken
B.S.Agr. (The Ohio State University)

Olivia Caroline Calcote
B.S.Pharm.Sci. (The Ohio State University)

Lindsey Elizabeth Clemmons
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Taylor Rose Close
B.S. (The Ohio State University)
Summa Cum Laude

Carli Conard
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Abigail Lynn Corbett
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Elias James Coulas
B.S. (Miami University)

Rachel del Rosario Cox
B.S. (Saint Lawrence University)

Caroline Anna Cyranek
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Anthony Louis DeLuca
B.S.Pharm.Sci. (The Ohio State University)

Jalyn Nicole Dickens
B.S. (Howard University)
Summa Cum Laude

Isabel Lee Dingledein
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Justin Dowell
B.S. (Ashland University)
M.S. (The Ohio State University)
Summa Cum Laude

Steven Edward Drue
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Salma Adel El-Barrad
B.S. (The Ohio State University)
Magna Cum Laude

Adam S. Falls
B.S. (University of Bridgeport)

Kevin Edward Farmer
B.S. (The Ohio State University)
Magna Cum Laude

Ryan Robert Fisher
B.S.Pharm.Sci. (The Ohio State University)

Bintou Fofana
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Taryn Nikole Fullom
B.S.Pharm.Sci., M.S. (The Ohio State University)

Emily Anna Gaidos
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Jax Andrew Gibson
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Rachel Goldsborough
B.S. (Boston College)
Summa Cum Laude

Shelby Noelle Grendel
B.S., M.S. (The Ohio State University)
Cum Laude

Cristian Ruben Guzman
B.A. (University of South Florida)

Mira Haddad
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Summer Lutfi Hamad
B.A. (Capital University)

Alyssa Marie Harlach
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Colleen Marie Harriman
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Alexa Jade Harshbarger
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Rewan B. Hassanain
B.S. (University of Akron)

Kelvin Grande Houston
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Christian Hu
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Jack Jixiang Huang
B.S. (University of Cincinnati)

Sangeen Jaf
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Leah Nicole Jones
B.S.Pharm.Sci. (The Ohio State University)

Derek Adam Justus
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Madison Michelle Kearns
B.A. (Miami University)
Summa Cum Laude

Sadie Lou Keener
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Sierra Paige Kirk
B.S. (Wright State University)
Summa Cum Laude

Deborah Kisbedo
B.S. (The Ohio State University)

Sabnam Koirala
B.S. (Portland State University)

Kaitlyn Ann Kuntz
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Nikita Lad
B.S.Pharm.Sci. (Columbus State Community College)
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Justin Ladegaard
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Brandin Lang
B.S., B.S.Comm. (Ohio University)

Alexander Lee Leaman
B.S. (The Ohio State University)
Summa Cum Laude

Kyndal Louise Lemelin
B.A. (University of North Carolina)
Magna Cum Laude

Olivia Li
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Ashley Elizabeth Light
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Hannah Lynn Lacey Lingren
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

William Muyie Ma
B.S.Biomed.Sci. (The Ohio State University)
Cum Laude

Emily Anne Malloy
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Tatiana Marie Matos Gasco
B.S. (University of Puerto Rico)

Michael Patrick McCafferty
B.S. (Cleveland State University)

Kelsey Ann McMillan
B.S., M.S. (The Ohio State University)

Xiaolei Meng
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Amenah Mohammad
B.S. (The Ohio State University)

Samantha Alexis Moore
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Madison Carter Morrison
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Hellen Mwangi
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Lan Nguyen
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Rafael Yomar Nieves-Beltran
B.S. (Inter American University PR)

Meredith Theresa Nyborg
B.S.Pharm.Sci. (The Ohio State University)

Caleb Patrick O'Donnell
Bachelor's (Ohio University)
Magna Cum Laude

Sarah Kelechí Okeafor
B.S.Hlth.Reh.Sci. (The Ohio State University)
Summa Cum Laude

Erin L. Panizza
B.S. (Otterbein University)
Cum Laude

Dylanna Taylor Parris
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Diya Paresh Patel
B.S. (Michigan State University)

Rahul S. Patel
Bachelor's (University of Tennessee-Knoxville)

Shanee Kirtesh Patel
B.S.Pharm.Sci. (The Ohio State University)

Shivam P. Patel
B.S.Pharm.Sci. (The Ohio State University)

Sara McKenna Peacock
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Whitney Phillips
B.S.Pharm.Sci. (The Ohio State University)
Cum Laude

Arika Quinones
B.S. (John Carroll University)

Farida Rezk
B.S. (The Ohio State University)

Kelly Laura Richley
B.S. (The Ohio State University)
Summa Cum Laude

Tara Rikabi
B.S.Pharm.Sci. (The Ohio State University)

Mikayla Marie Rizzo
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Jasmine Saa
B.S.Pharm.Sci. (The Ohio State University)

Sayuj Saha
Bachelor's (University of Cincinnati)
Cum Laude

Samuel Schooley
B.A. (Capital University)
Cum Laude

Bren E. Sedmak
B.S. (The Ohio State University)
Summa Cum Laude

Zachary Ryan Sheehan
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Daniel Emerson Smith
B.S.Pharm.Sci. (The Ohio State University)

I Cheng Sung
B.S. (Tajen University)
M.S. (National Yang Ming University)
Magna Cum Laude

Alice Tan
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Robert Lee Thompson
B.S.H.P.N.E.S. (The Ohio State University)

Rachel Marie Thurman
B.S.Pharm.Sci. (The Ohio State University)

Madison Kay Watt
B.A. (Capital University)
Cum Laude

Grant Halsey Wendel
B.S.Pharm.Sci. (The Ohio State University)
Magna Cum Laude

Sydney Ilene White
B.S.Pharm.Sci. (The Ohio State University)

Hope Susanne Wilhelm
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Catherine Wise
B.A. (Miami University)

Stella Marie Wood
B.S.Pharm.Sci. (The Ohio State University)
Summa Cum Laude

Katelyn Marie Zakrajsek
B.S.Pharm.Sci. (The Ohio State University)

Gabriella Rose Zerbini
B.S. (Ashland University)
Cum Laude

Bachelor of Science in Pharmaceutical Sciences

Sunny Worku Abraha
Kesewa Ama Akyeamong
Cum Laude

Daniel James Alford

Cum Laude
Colton Jiu Anderson
Samantha Apple
Magna Cum Laude
with Honors in Pharmaceutical Sciences

Gabriella Nicole Ascherl
Joshua Pierce Baek
Magna Cum Laude

Anirudh Rao Banda
Elena Barber
Magna Cum Laude

Charles Patrick Bogan
Ronald Antonio Brookes
Alexis Cierra Brown
Magna Cum Laude

Alexander Nicholas Casper
Magna Cum Laude
with Distinction and Honors in Pharmaceutical Sciences

Parker L. Casto
Surya Thirumal Chandrasekaran
Magna Cum Laude

Irene Soohyun Cho
Magna Cum Laude
with Distinction and Honors in Pharmaceutical Sciences

Camille Ashley Clark
Hayley Rose Conaway
Jake Taylor Cook
Summa Cum Laude

Magna Cum Laude
with Distinction and Honors in Pharmaceutical Sciences

Stefania Marie Cosentino
Cum Laude

Stephen Thomas Cowan
Cum Laude

Bridget Elizabeth Coyle
Magna Cum Laude

Kayla Marie Crandall
Skylar Marie Darnall
Elizabeth Davis
Chloe Ann Delnicki
Summa Cum Laude

with Distinction and Honors in Pharmaceutical Sciences

Isaac Richard Dickess
Summa Cum Laude
with Distinction and Honors in Pharmaceutical Sciences

Jacob Edward Downes
Sara Rose Drake
Allison Marie Fellman
Briana Lyn Fitzgerald
Gabrielle Nicole Gearhart
Cum Laude

Josie Ann Gill
Magna Cum Laude

Tiffany Glasford
Hawa Gueye
Margaret Elaine Haap
Seema Hamed
Cum Laude

Cecilia Han
Magna Cum Laude

Allison Chansocheat Heng
Magna Cum Laude

Hannah Xiao Ge Aria Hoffmann
Summa Cum Laude
with Distinction and Honors in Pharmaceutical Sciences

Kalle Madison Huff
David Evan Hurt
Cum Laude

Hannah Elizabeth Innes
Alexa Angelica Jabboure
Summa Cum Laude

Charlotte Lassiter Jackson-Sears
Cum Laude

Anushree Makarand Jakate
Summa Cum Laude

Christine Jiang
Summa Cum Laude

Samantha Paige Jones
Daniel Joseph Kieta
Daniella Kirabo-Mafigiri
Katherine Ann Krismanth
Rebecca Anne Laux
Magna Cum Laude

Bri'Ann Chanelle Leche Little
Erin Jo Loftus

Marissa Jordan Lovett
Cum Laude

Tea Reed Macy
Jacob Edward Mantin
Cum Laude

Caroline Ruth Marshall
Summa Cum Laude

Makenna Noelle Matriano
Magna Cum Laude

Lena Ali McFarland
Alicia Wai Mei
Xingyue Ming
Magna Cum Laude

Marissa Jade Mitchell
Cum Laude

Brenda Nayelli Morales
Rosemary Mullaghy
Magna Cum Laude

with Honors in Pharmaceutical Sciences

Marisa Mulye
Magna Cum Laude

Vasini Ramana Mungamuru
Anitha Natarajan

Audrey Nicole Odier
with Distinction in Pharmaceutical Sciences

Hunter Garrett Pflanz
Cum Laude

Zachary Kyle Prouty
Lauren Alyssa Rock
Cum Laude

Maya Rubano
Cum Laude

Ahmed Hasan Said
Cum Laude

Madeline Marie Sciuolo
Cum Laude

Lucas Anthony Sexton
Magna Cum Laude

Luke Shan
Magna Cum Laude

Erica Siu
Cum Laude

Olivia Katherine Skalicki
Magna Cum Laude

Makayla J. Spruill
Victoria Stanislawek
Cum Laude

Haley Marie Starkey
Magna Cum Laude

Caroline Steele
Cum Laude

Levi Alan Steenrod
Magna Cum Laude
with Distinction in Pharmaceutical Sciences

Dustin Stone
Ranean Maher Sulebi
Cum Laude

Hadiyah Tayeb
Randy Tran
Magna Cum Laude

Steliana Tsvetkova
Lakshmi Vaidyanathan
Grace Annalise Vulic
Summa Cum Laude
with Honors in Pharmaceutical Sciences

Meng Wang
Caroline Elizabeth Wittman
Cum Laude

Braonna Wright
Madison Ann Yuzwa
Cum Laude

Lorenzo Isaiah Zamora
Maggie Zheng
Jessie Zheng
Cum Laude

John Glenn College of Public Affairs

Dean: Trevor L. Brown

Bachelor of Arts

Kenneth Ryan Adams
Ana Jarrah Y Alsulaim
Magna Cum Laude

Sarah Ameiche
Alexis Loren Barnett
Summa Cum Laude

Jamiya Shantell Barnett

Summa Cum Laude

Riley Rebecca Bellner

Summa Cum Laude

Maceda Hirut Berhanu

Magna Cum Laude

Tseyon Debebe Beyene

Luke David Bornhorst

Summa Cum Laude

Madison Elizabeth Zhen Brown

Summa Cum Laude

Ava Diana Chappell

Jayne Kathleen Dimitri

Summa Cum Laude

Danel Augusto Fernandez

Magna Cum Laude

Lauren Tristen González

Nigel Lavelle Gore

Asha Haddox-Rossiter

Magna Cum Laude

Noora Talal Hajjar

Dehao Han

Magna Cum Laude

Kendal Avery Harris

Magna Cum Laude

Joshua Hathaway Hickman

Summa Cum Laude

Griffin Charles Hughes

Summa Cum Laude

Alexandra Jean Isham

Brady Scott Kocica Leggett

Magna Cum Laude

Tyler James Littlejohn

Summa Cum Laude

Benjamin Alberto Martinez

Summa Cum Laude

Zoe Hanna Matsuzaki

Cum Laude

Megan Grace McNally

Summa Cum Laude

with Honors in Public Affairs

Haley Marie Meheran

Summa Cum Laude

Megan Elizabeth O'Connor

Magna Cum Laude

Mae Estelle O'Neil

Summa Cum Laude

Christopher John Oswalt

Kobie Landon Parrish

Cum Laude

Sutton Elaine Propst

Summa Cum Laude

with Honors in Public Affairs

Emily Christine Quallen

Magna Cum Laude

Julia Kathleen Ramsey

Cum Laude

Emma Maria Robinson

Magna Cum Laude

Gianna Lucia Rodriguez

Magna Cum Laude

Cody Marc Roush

Charles Samuel Schneider

Yazan Waleed A Shams

Cum Laude

Jason Tyler Smart

Cum Laude

Michael Anthony Smith

Taylor Catherine Stanton

Cum Laude

John Philip Sullivan

Ciara Taylor

Magna Cum Laude

Daniel Téllez Calderón

Summa Cum Laude

Clovis Parker Westlund

Summa Cum Laude

with Honors Research Distinction in

Public Affairs

Eli John Wooten

Cum Laude

Rawan Esam Zamzami

Magna Cum Laude

Bachelor of Science

Erin Colleen Eckman

Summa Cum Laude

Lauren Erickson

Summa Cum Laude

Sarah Rose Frankel

Summa Cum Laude

Annalise Christine Johnson

Cum Laude

with Honors in Public Affairs

Alan John Mathew

Summa Cum Laude

with Research Distinction in Public

Affairs

Zaneta On

Cum Laude

Charles Richard Schindler III

Summa Cum Laude

with Honors in Public Affairs

Jackson Thomas Sturtevant

Cum Laude

with Research Distinction in Public

Affairs

Brian Andrew Thomas

Abigail Elizabeth Thompson

Sebastian Vanegas

Alexander Westley-Sherman

Elizabeth Christine Yirava

Magna Cum Laude

with Research Distinction in Public

Affairs

Marvel Zhou

Cum Laude

College of Public Health

Interim Dean: Karla Zadnik

Bachelor of Science in Public Health

Hakimo Hassan Abdikadir

Cum Laude

Sahra Abdullahi

Alexandra Grace Adaway

Magna Cum Laude

Ryleigh Lane Adkins

Magna Cum Laude

Lauren J. Albrecht

Lucky Adam Asker

Magna Cum Laude

Caili Nicole Baumann

Cum Laude

Agyenim Owusu Boateng

Sara Grace Cassidy

Rachel Hyunji Chong

Summa Cum Laude

Victoria Renee Cooksey

Magna Cum Laude

Kate Mary Devlin

Cum Laude

Mason Galen Dickson

Cum Laude

Atta Kane Diop

Magna Cum Laude

Rachel Ann Durham

Olivia Grace Filhart

Joshua David Ghosh-Groen

Ahamed Mohamed Hamid

Adelyn Elizabeth Hankins

Summa Cum Laude

Kacy Rochelle Harsh

Cum Laude

Nikita Jindal

Magna Cum Laude

Romha Tafese Kahassai

Nathaniel Willen Kho

Haben Belay Kidanemariam

Ella Durboraw Kiener

Summa Cum Laude

Sering Limbu

Cum Laude

Lindsey Guo Long

Magna Cum Laude

Juliette Alexandra Louer

Magna Cum Laude

Tanion Misawa Yee

Summa Cum Laude

Nora Ayman Mohamed

Summa Cum Laude

Thalia Arianna Monticue

Magna Cum Laude

Noon Mukhtar

Cum Laude

Macda Mulugeta

Najma Abdirahman Mursal

Danica V. Nelson

Magna Cum Laude

Claire Cathleen Oatney

Magna Cum Laude

Dana Sa Rang Oehme

Magna Cum Laude

Norah Owusu

Misra Elaina Ozoglu

Magna Cum Laude

Danielle Parran

Magna Cum Laude

with Research Distinction in Public

Health

Laura Ann Powers

Summa Cum Laude

with Honors in Public Health

Snehl Subrahmanya Pulluri

Summa Cum Laude

with Honors in Public Health

with Honors Research Distinction in

Public Health

Oshin Samuel

Magna Cum Laude

with Honors in Public Health

Nisha Chandini Saranant

Sadie Ryan Schaeffer

Cum Laude

Bhargavi Sriram

Magna Cum Laude

with Honors in Public Health

Emanuel Hintsu Tewolde

Cum Laude

with Research Distinction in Public

Health

Anna Russ Turner

Magna Cum Laude

Esha Wankhade

Magna Cum Laude

with Research Distinction in Public

Health

Hatim Wasanwala

Summa Cum Laude

Sarah Katherine Weglarz

Magna Cum Laude

with Honors in Public Health

with Honors Research Distinction in

Public Health

Hannah Michelle Welch

Magna Cum Laude

Samantha Kiaya Wigfall

Magna Cum Laude

with Research Distinction in Public

Health

Owen Hunt Wohlers

Magna Cum Laude

Maraki Wondwossen

College of Social Work

Dean: David A. Jenkins

Bachelor of Science in Social Work

Nour Wael Abdallah

Amina Abdi

Cum Laude

Marley Paige Adams

Cum Laude

Macy Elisabeth Allison

Cum Laude

Jaiden Kristeen Alloy

Summa Cum Laude

Chelssy Cristina Alvarez

Bola Folashade Ayodele

Summa Cum Laude

Julian Eugene Baker

Cum Laude

Claudia Mary Elizabeth Banke

Summa Cum Laude

with Honors Research Distinction in

Social Work

Jordan Elizabeth Barrrell

Cum Laude

Isaiah Robert Baughman

Summa Cum Laude

Tory Michelle Bennett

Maria Elizabeth Berning

Summa Cum Laude

Sofia Bischoff

Summa Cum Laude

Aubrie Brandon

Summa Cum Laude

Gabrielle Crystal Broom

Joyce Elaine Bryan

Isabel Ann Bryer

Summa Cum Laude

Alyson Lori Buck

Magna Cum Laude

Joanna Campbell

Brianna Marie Cardinal

Hashim Rehan Chawdry

Amy Choulat

Michelle Renee Cleveland

Jolie Michelle Cohen

Magna Cum Laude

Malachi Mackenzie Combs

Rena M. Costello

Magna Cum Laude

Jamie Lynn Craig

Anna Cunningham

Summa Cum Laude

Tiyanna Camille Davis

Gianna Renee Deanley

Cum Laude

Maggie DeLap

Magna Cum Laude

Damanpreet Kaur Dhillon

Cum Laude

Annelise Ryan DiClemente

Magna Cum Laude

Cheyenne Cierra Dodge

Cum Laude

Rodney Donald, Jr.

Jenna Drew Fagan

Cum Laude

Eva Marie Feasel

Magna Cum Laude

Ciera Jane Feucht

Magna Cum Laude

with Honors Research Distinction in

Social Work

Kaitlyn Jaymarie Fink

Tyler Jacob Foy

Magna Cum Laude

Leza Noel Frazee

Megan Nichole Fougett

Magna Cum Laude

Erika Funfgeld

Carlyn Patricia Geraghty

Summa Cum Laude

Elaina Claire Glauer

Summa Cum Laude

Jeffrey Alan Gossett II

Lillian Jane Hoyt
 Connor Paul Johnson
Cum Laude
 Kaleea Denese Johnson
 Destiny Page Jordan
Summa Cum Laude
 Sunny Dain Jourg
Cum Laude
 Emma Karst
 Candice Keener
 Ila Diane Kerchenski
Summa Cum Laude
 Kyira Landyn Knous
Magna Cum Laude
 Tabatha Jasmine Knous
Cum Laude
 Hawa Korera
 Allie Lilith Kriile
Cum Laude
 Ashton Kennedy Krotzer
Summa Cum Laude
 Madisen Renee Kussmaul
Summa Cum Laude
 Kassidy Brianna Kyle
Cum Laude
 Melanna Renee Langston
Cum Laude
 Christine Marie Lawrence
Magna Cum Laude
 Anna Levy
Summa Cum Laude
 LaShanta Lewis
 Hannah Light
Cum Laude
 Patience Marie Livemore
Summa Cum Laude
 Orazia Eden Loeb sack
Magna Cum Laude
with Honors Research Distinction in Social Work
 Zixin Luo
Magna Cum Laude
 Jasmine Lyons
 Taylor Nicole Maddox
Magna Cum Laude
 Emily Grace Marks
Summa Cum Laude
 Derek Andrae Martin, Jr.
Magna Cum Laude
 Jenny Martinez
 Rennyiah Kacie-Janae Mason
Cum Laude
 Emma Anne Mayabb
 Elexus Marie Mayle
 Jordan Marie McCort
Summa Cum Laude
 Aisha Louise McCreary
 Laura Mae McCreary
 Eleanor Justine McDaniel
Cum Laude
 Sydney Elaine McMillion
 Emily Anne Meidl
 Brooke Lauren Miller
 Amina Mohamed
 DeAsia Danielle-Lynn Moore
Magna Cum Laude
 Mariah Elizabeth Moore
Cum Laude
 Grace Elizabeth Bennett Morgan
 Jack Michael Mucher
Cum Laude

Macey Julie Nelson
Summa Cum Laude
 Mickayla Erinmarie Nelson
Magna Cum Laude
 Mackenzie Dianne Neville
 Madison Noguera-Cervantes
Cum Laude
 Alexis Mae Ohm
Magna Cum Laude
 William M. Perry
Magna Cum Laude
 Nataly Anessa-Elise Pham
Summa Cum Laude
 Aliscia Emily Phillips
Cum Laude
 Garrett Dustin Ratliff
Magna Cum Laude
 Caitlynn Noelle Ray
 Carleigh Grace Reed
Summa Cum Laude
 Brie Denique Lee Robinson
 Zoey Rodeffer
Summa Cum Laude
 Rachael Lillian Rose
Summa Cum Laude
 Allison R. Ross
 Andrew Thomas Scherley
Summa Cum Laude
 Abby Michaela Schneider
Summa Cum Laude
with Honors Research Distinction in Social Work
 Skyler Rae Schopp
 Sophia Elizabeth Shaneyfelt
 Makayla Maria Shaw
Magna Cum Laude
 Maleah Andrea Sherman
 Bryanna Kay Simpson
 Izabella Grayce Smith
Cum Laude
 Sierra Smith
 Evan Shawn Spangler
 Sophie Katherine Steinman
 Micah Adrian Stotts
Cum Laude
 Katelynn Takacs
Magna Cum Laude
 Kayley L. Toth
 Marcaja Nicole Turner
 Katelyn Elizabeth Vazquez
 Mya Angelina Wade
 Heather Lynn Walsh
 Brianna Jermese Warren
Summa Cum Laude
 Benjamin Miles Weillbacher
 Kari A. Welch
 Kari West
Magna Cum Laude
 Hailey Eileen Westberry
 Sydney Lynn Whipkey
 Rebecca Anne Whittington
 Magdarena Grace Wiedie
Summa Cum Laude
with Honors in Social Work
 Emily Wilburn
Magna Cum Laude
 Haley R. Wilkes
 Maddison Lyn Yaussey
 Halimo Ibrahim Yusuf
Cum Laude

College of Veterinary Medicine

Dean: Rustin M. Moore

Doctor of Veterinary Medicine

Haley Ann Acree
 B.S. (California Polytechnic State University)
 Kennedy Hope Adams
 B.S. (Marian University)
 Cynthia Nicole Angulo
 B.S. (Cornell University)
 Emily Baldrige
 B.S. (North Carolina State University)
 M.P.H. (University of North Carolina at Charlotte)
 Celine Bartish
 B.S. (The University of Findlay)
 Virginia Angelica Behmer Porter
 B.A. (Case Western Reserve University)
 Nina Loren Biundo
 B.S. (Michigan State University)
Summa Cum Laude
 Gabrielle Nicole Blackford
 B.S. (Cleveland State University)
 Mikaela Johanna Bledsoe
 Bachelor's (University of Idaho)
 Alexa Taylor Bockelman
 B.S.Agr. (The Ohio State University)
 Justin Robert Bolin
 B.S. (University of Kentucky)
 Bo Donald John Bolinger
 B.A. (Indiana University)
 Rachel Ann Bonacci
 B.S. (Bowling Green State University)
 Dennis Bradenton Booth
 B.S.Agr. (The Ohio State University)
 Reille Brooke Breitigam
 B.S. (The University of Findlay)
 Andrew Mark Brower
 B.S.Agr. (The Ohio State University)
 Ellen Bryant
 B.A. (Ohio University)
 Levi Richard Cade
 B.S.Agr. (The Ohio State University)
 Christina Therese Luna Camson
 B.S. (Iowa State University)

Mercedes Alexus Cantu
 B.S. (The Ohio State University)
 Trishauna Chevonie Champagnie
 B.S. (State University of New York at Buffalo)
 Jayda Rose-marie Chandool
 B.S. (Pennsylvania State University)
 Emily Chiuzzi
 B.S. (California State University, Los Angeles)
 Rachel Lynn Christian
 B.S. (Murray State University)
 Stephanie Christine Cipa
 B.A. (Hiram College)
 Davis Parker Collins
 B.S. (University of Kentucky)
 Kyrstin Brooke Cramer
 B.A., M.P.H. (The Ohio State University)
 Leandra Minnette Hess Cramer
 B.S. (The University of Findlay)
 Nicole Veronica Cusick
 B.S.Agr. (The Ohio State University)
Summa Cum Laude
 Sarah Anne Dalzell
 B.A. (Case Western Reserve University)
 Shannon Keirsten De Leon
 B.S.Agr., M.S. (The Ohio State University)
 Bailey Amanda DeGroat
 B.S. (Iowa State University)
 Sarah Ann DeRosier
 B.S. (State University of New York at Geneseo)
 Jordan Anthony Diaz
 B.S. (Florida International University)
 Matthew Carroll Doyle
 B.S. (Michigan State University)
 Noah Alexander Dupont
 B.S. (Northern Kentucky University)
 Briana Leigh Fanaff
 B.S. (Auburn University)
 Daniel Nathan Feinbloom
 B.A. (Colgate University)
 Gabriela Fernandez Gutierrez
 B.S. (Saint Thomas University)
 Ariana Vanessa Figueroa
 B.S. (University of California, Irvine)
 Christian Taylor Frazier
 B.S. (University of Arizona)

Taylor Lauren French
 B.S. (Florida Atlantic University)
 Hannah Fritts-Davis
 B.S. (North Carolina State University)
 Caitlyn Gaddis
 B.S. (The University of Findlay)
 Jessica Karina Ganay
 B.A. (State University of New York at Binghamton)
 M.S. (Pace University)
 Nicole Gay
 B.S. (Ohio University)
 Zachary Mathew George
 B.S. (Miami University)
Summa Cum Laude
 Annie Rose Gerding
 B.S. (The Ohio State University)
 Emily Mae Gerraughty
 B.S. (University of New Hampshire)
 Sarah Ann Gibney
 B.S. (Michigan State University)
 Nina Alexandra Gierbolini
 B.S. (North Carolina State University)
 Lydia Regina Ann Giesige
 B.S. (Ohio University)
 Sarah Marie Gigandet
 B.S.Agr. (Wilmington College)
 Matia Marie Gingras
 B.S. (Florida Atlantic University)
 Brittany Marie Gorrell
 B.S. (Kent State University)
 Natalie Maria Gracia
 B.S. (University of California, Davis)
 Brittney Marie Graham
 B.A. (Miami University)
 M.S. (University of Illinois at Urbana-Champaign)
Summa Cum Laude
 Shehani Wijewickrema
 Gunawardena
 B.S. (University of Illinois Urbana-Champaign)
 Angello Martin Gutierrez
 B.A. (University of South Florida)
 Abbey E. Hamann
 B.S. (Otterbein University)
 Kalei Elizabeth Hash
 B.S. (Purdue University)
 Yfke Johanna Nicolette Havinga
 B.S. (State University of New York at Binghamton)

June 4 - August 20, 2025, Board of Trustees Meetings

Shridula Subraya Hegde B.S. (University of Nebraska-Lincoln)	Payton Elizabeth Kelly B.S. (Otterbein University)	Amanda Carmyn Nall B.S.Agr. (The Ohio State University)	Samuel Aaron Richter B.S. (University of Puerto Rico - Ponce)	Matthew B. Stanga B.S. (Pennsylvania State University)
Makayla Lynne Heil B.S.Agr. (The Ohio State University)	Morgan Tyler Kessler B.S.Agr. (The Ohio State University)	Megan Ann Neumeier B.A. (The Ohio State University)	Mary Emma Riley B.S. (Grand Valley State University)	John David Sterbens B.S. (Elizabethtown College)
Jessica Hemmelgarn B.S. (Ohio University)	Katie Sung-Joo Kim Bachelor's (Michigan State University)	Quang Thien Nguyen Bachelor's (University of Virginia) <i>Summa Cum Laude</i>	Karlamariele Rivera Albertorio B.S. (University of Puerto Rico - Ponce)	Audrey Jaye Stevenson B.S. (West Virginia University)
Kianelys Ivette Heredia B.A. (University of Florida)	Rachel Marie Lambdin B.S. (The Ohio State University) <i>Summa Cum Laude</i>	Kelsey Marie Nickel B.S. (Central Michigan University)	Melanie Romina Roca B.S. (Pennsylvania State University)	Samara Hoshi Takahashi B.S. (San Diego State University)
Brielle Katherine Hermstedt B.S. (Colorado State University) M.S. (Georgetown University)	Hailey Nicole Lenis B.S. (Texas A&M University)	Violeta Nino B.S. (Miami Dade College)	Tamoha Saha B.S. (Northeastern University)	Mika Tamura B.S. (University of Massachusetts Amherst)
Juan Francisco Hernandez B.S. (University of Puerto Rico) M.P.H. (Ponce Health Sciences University)	Morgan L. Loomis B.S. (Wilmington College)	Juliette Estelle Nye B.A., B.S. (University of Illinois at Urbana-Champaign)	Maya Louise Samuelson B.S. (University of Vermont)	Alayna Marie Teiga B.A. (The Ohio State University)
Bradley Thomas Hogshead B.S.Agr., M.S. (The Ohio State University)	Mia Ahn Lynch B.S. (University of Maryland) Pharm.D. (University of Maryland, Baltimore)	Lauren Lynne Obermeyer B.S. (The University of Findlay)	Mariaelena Linville Sanjuan <i>Summa Cum Laude</i>	Miranda Rose Teleha-Sharpe B.S. (Kent State University)
Amelia Marie Hughey B.S. (Indiana University South Bend)	Hailey Magenheim B.S., M.S. (The Ohio State University) <i>Summa Cum Laude</i>	Masako Odaka B.A. (San Jose State University)	Faith Madelyn Satern B.S. (Drake University)	Kelly Tsun B.S. (Pennsylvania State University)
Cameron Lucas Hupp B.S.Agr. (The Ohio State University)	Frank Charles Marrone, Jr. B.A. (Boston College)	Dhruvi Patel B.S. (California State University, Northridge)	Isabelle Davis Schlachter B.S.Agr. (The Ohio State University) <i>Summa Cum Laude</i>	Alexandria Brianne Valdez B.S. (University of California, San Diego) <i>Summa Cum Laude</i>
Jae Yoon Hwang B.S. (University of Minnesota) M.S. (Seoul National University)	Clarissa Helena Martinez-Blat B.S. (University of Florida)	Tatum Elizabeth Pencek B.S. (Purdue University)	Molly Schmiede B.Bus.Adm. (University of Notre Dame) J.D. (University of Illinois at Chicago)	Morgan Elizabeth Van Dyk B.S. (Ithaca College)
Jessika Rose Jaime B.S. (Siena College)	Marissa Joan Matarazzo B.S. (University of Connecticut)	Nicolas David Perez B.A. (University of Florida)	Anna Dolores Wagner B.S. (Purdue University)	Lynsey Marie Wallace B.S.Agr. (The Ohio State University)
Michael James Javurek Diploma (Ashworth College) B.A. (The Ohio State University)	Daniel Andrew Matter B.S. (University of Cincinnati)	Kimberly Estill Phelps B.S. (Centre College) M.S. (University of Kentucky)	Amanda Kathryn Schmitmeyer B.S.Agr. (The Ohio State University)	Wenjun Wang B.S.Agr., M.P.H. (The Ohio State University)
Lauren Marie Karman B.S.Agr. (The Ohio State University)	Randi Morgan McGeorge B.S.Agr. (The Ohio State University) <i>Summa Cum Laude</i>	Elizabeth Grace Porteus B.S.Agr. (The Ohio State University)	Annaliese Elizabeth Schrandt B.S. (Eckerd College)	Sarah Elizabeth Webster B.S. (North Carolina University)
Allison Kavanagh B.S. (University of Michigan) <i>Summa Cum Laude</i>	Meghan Renee McManus B.S. (Northwest Missouri State University)	Haley Lois Posin B.S. (North Carolina State University) <i>Summa Cum Laude</i>	Deja Monae Scott B.S. (Bowling Green State University)	Kortnie Mae Wheaton B.S. (University of Vermont)
Nicholas Robert Kearney B.S. (Westminster College) <i>Summa Cum Laude</i>	Justin Izach Cabading Mercado B.S. (University of Florida)	Brigitte Audrey Pronesti B.S.Agr. (University of Georgia)	Yi Fan Shen B.S. (University of Rochester)	Cierra Marie Winberg
Katelyn Keefer B.S. (Dickinson College)	Jose Javier Mercado Muniz B.S. (Inter American University PR)	Xavier Antonio Ramirez Cruz B.S. (University of Puerto Rico)	Katelyn Michele Shih B.S. (Bradley University)	Amanda Marie Wirfel B.S. (Colorado State University)
Emeline Macy Keene B.S. (Virginia Polytechnic Institute and State University)	Isabella Grace Merino B.S. (The Ohio State University)	Ingrid Ramirez Roman B.S. (University of Puerto Rico - Rio Piedras Campus)	Jacqueline Kristiana Shook B.S. (University of Toledo)	Samantha Sue Wong B.S. (University of California, Davis)
Cody M. Kelley B.S. (Kutztown University of Pennsylvania)	Molly Margaret Miller B.S. (Duquesne University)	Allison Marie Rapp B.S.Agr. (The Ohio State University)	Rachel Leigh Sit B.S.Mech.Eng. (Duke University) <i>Summa Cum Laude</i>	Mercedes Serenity Wood B.A. (Ohio Wesleyan University)
Gracie Lyn Kelly B.S. (The University of Findlay)	Sahar Humayun Mirza B.S. (Texas Tech University)	Breanah Grace Reid B.S. (University of Cincinnati)	Amandine A. Soreefan B.S. (University of Cincinnati)	Amanda Marie Zanola B.S.Agr. (The Ohio State University) <i>Summa Cum Laude</i>
	Karli Morrill B.S. (Medaille College)	Jordan Danae Reineke B.S. (The University of Findlay)	Hannah Marie Stack B.Tech. (State University of New York's College of Technology at Morrisville)	

Candidates to be Commissioned in the Armed Forces

United States Army

Second Lieutenant United States Army

Air Defense Artillery Corps
Broc Love

Armor
Lucas Mark*

Engineer Corps
Kaleb Bauman*

Field Artillery Corps
Daniel Parkison*

Infantry
John Cooke
Carson Craig*
Luke Peart*
Farris Reynaga

Medical Corps
Eric Cervantes
Marisa Mattoni*

Military Intelligence
Emily Krusinski*

Nursing Corps
Maria Ioanilli*
Marcella Pfaff
Samuel Taylor*

Ordnance Corps
Larri Lee
Emily Farrell*

Quartermaster Corps
Nicolette Liesen
Jeremy McIntire

Transportation Corps
Kyle Kuder

Second Lieutenant United States Army Reserves

Aviation Corps
Hannah Gill*

Engineer Corps
Andrew Francis*

Military Intelligence
Sophia Omar

Quartermaster Corps
Kaseim Pace Morris

Second Lieutenant United States Army National Guard

Adjutant General's Corps
Quazi Islam

Armor Corps
Michael Snider

Aviation Corps
Caleb Martus

Chemical Corps
Christian Rukundo
Sophia Stokes*

Engineer Corps
William Goldsmith

Medical Services Corps
Madeline Babcock

Signal Corps
Benjamin Reilly

United States Air Force

Second Lieutenant United States Air Force

Patrick A. Astroski
Henry J. Cregar
Joseph A. Doty**
Kyler H. McElroy
Justin D. Myers
Austin T. Rogers
Joshua M. Rorstad
Andrew J. Simon
Matthew J. Stark

United States Navy

Ensign United States Navy

Alexander Craig Banks
Caden Allen Brubaker
Mason Alexander Carrington
Andrew Ross Choi
Benjamin Andrew Crouch
Tyler Patrick Johnson
Michael Henry Kudish***
Wilfrido Martinez Lopez, Jr.
Ryan Thomas McBee
Caroline Sunghee Min
Jiwon Suh

Second Lieutenant United States Marine Corps

Mark Julius Belozerooff
Joseph Cannon
Jason Matthew Day
Isabell Marie Dettling
Cheney Gross
Nathanael James Rausch
Neil Brijen Sawant
Helen Cecil Simmons
Thomas Dominic Wesolowski
Stella Margaret Wineman

Graduates with Honors

Criteria for graduating with honors are listed below. Grade-point averages (GPA) are based on the student's penultimate semester.

Summa Cum Laude designates those who earned a 3.9 GPA or better.

Magna Cum Laude designates those who earned a 3.7 GPA or better.

Cum Laude designates those who earned a 3.5 GPA or better.

With Honors in the Arts and Sciences requires successful completion of the Arts and Sciences Honors Contract and graduation with a 3.4 GPA or better.

With Honors in Business/Accounting requires successful completion of a prescribed honors program of study and graduation with a 3.5 GPA or better.

With Honors in Education and Human Ecology requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Honors in Engineering requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Food, Agricultural, and Environmental Sciences requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Medicine denotes successful fulfillment of the College of Medicine Honors Program tenets and a 3.4 cumulative GPA or better.

With Honors in Nursing requires the successful completion of a prescribed honors program of study, completion of research culminating in a thesis and presentation of findings, and graduation with a 3.4 GPA or better.

With Honors in Pharmaceutical Sciences requires successful completion of the BSPS Honors Contract and graduation with a 3.5 GPA or better.

With Honors in Public Affairs requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Public Health requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Honors in Social Work requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Distinction requires successful completion of an undergraduate thesis and a 3.4 GPA or better.

*denotes Distinguished Military Graduate
**denotes Distinguished Air Force Graduate
***denotes Distinguished Naval Graduate

Summary of Degrees and Certificates

Spring Semester Commencement — 2025

College	Degree/Certificate	Degree/Cert. Total	Spring Semester 2025 College Total	Fiscal Year 2024-2025 Total
Graduate School	D.M.A.	3	294	741 Doctoral
	Ph.D.	285		
	Au.D.	3		
	Ed.D.	20		
	D.N.E.	16		
	D.N.P.	36		
	O.T.D.	46		
	D.P.T.	46		
	Ed.S.	5		
	M.Arml.Sci.	4		
	M.Stdy.Law.	9	172	190 Professional
	M.Acc.	60		
	M.Ac.Q.R.Mgt.	2		
	M.Appl.Econ.	12		
	M.Appl.Stat.	1		
	M.Arch.	22		
	M.A.	185		
	M.A.T.	10		
	M.B.A.	138		
	M.C.R.P.	12		
	M.Clin.Res.	5	1761	2981 Masters
	M.Dist.Nm.	25		
	M.Educ.	28		
	M.Engr.Mgt.	15		
	M.E.N.R.	6		
	M.F.A.	35		
	M.Global.Eng.Ldrshp.	1		
	M.H.A.	32		
	M.Hlth.Care.Innov.	27		
	M.Hum.Res.Mgt.	2		
	M.Land.Arch.	7	95	133 Certificates
	M.Learn.Tech.	4		
	M.Mus.	13		
	M.P.H.M.	5		
	M.P.A.	35		
	M.P.A.L.	18		
	M.P.H.	71		
	M.R.T.	1		
	M.S.	628		
	M.S.W.	268		
	M.Sprt.Coach	6	2322	4045
	M.Struct.Eng.	3		
	M.Supp.Chm.Mgt.	15		
	M.Trans.Data.Analy.	21		
	Spec.M.Bus.	30		
	Cert.Analytics	31		
	Cert.Ambi.Racism.Educ.	1		
	Cert.AI.Digit.Hlth.	1		
	Cert.Asst.Rehab.Tech.	4		
	Cert.Biomed.Inf.	1		
Cert.Bus.Ldrshp	24	3456	5053	
Cert.Clin.Res.Mgt.	4			
Cert.Crim.Just.Adm.	1			
Cert.Env.Assmt.	5			
Cert.Fed.Pol.Mgmt.	1			
Cert.GIS.Tech.	4			
Cert.Global.One.Health	1			
Cert.Health.Psych.	1			
Cert.Hlthcz.Ldrshp.Innov.	1			
Cert.Hydrogeology	1			
Cert.Nat.Hist.Mus.Cur.	2	1701	2228	
Cert.Neuroscience	2			
Cert.Pall.EQL.Care	4			
Cert.Publ.Mgt.	3			
Cert.Usabil.User.Exp.Hlth.	3			
B.A.	175			
B.A.Journal.	40			
B.Art Ed.	49			
B.F.A.	47			
B.Music	8			
B.Mus.Educ.	21	156	162	
B.S.Design	51			
B.S.Almos.Sci.	9			
B.S.Geog.Info.Sci.	25			
B.S.	1233			
A.A.	271			
Cert.Div.Eq.Incl.	23			
Cert.Essnt.Skils.Trnl.Bus.Russia	1			
Cert.Forens.Anthrop.	2			
Cert.Hydrogeology	1			
Business, Fisher College of	B.S.Bus.Adm.	1701	1701	2228
Dentistry	D.D.S.	119	156	162
	B.S.	3		
	B.S.Dent.Hyg.	34		
Education and Human Ecology	B.S.W.P.N.E.S.	9	707	966
	B.S.H.D.F.S.	60		
	B.S.Hum.Ecol.	75		
	B.S.Hsp.Mgt.	32		
	B.S.Nutrition	42		
	B.S.Educ.	488		
	Cert.Fund.Hosp.Srv.	1		
Engineering	B.S.Aero.Eng.	88	1446	1924
	B.S.Arch.	73		
	B.S.Aviation	22		
	B.S.Biomed.Eng.	95		
	B.S.Chem.Eng.	82		
	B.S.C.R.P.	26		
	B.S.Civ.Eng.	93		
	B.S.Cptr.Sci.Eng.	330		
	B.S.Elec.Cptr.Eng.	172		
	B.S.E.P.	15		
	B.S.Eng.Tech.	10		
	B.S.Env.Eng.	34		
	B.S.F.A.B.E.	36		
	B.S.I.S.E.	92		
	B.S.Land.Arch.	34		
	B.S.Mat.Sci.Eng.	28		
	B.S.Mech.Eng.	180		
	B.S.Weld.Eng.	13		
	Cert.Manufactur.Fnd.	23		
	B.S.Agr.	196	504	733
B.S.C.S.M.	39			
B.S.Env.Nat.Res.	149			
Environmnet and Natural Resources, School of Agricultural Technical Institute	B.S.Food.Sci.	28	165	173
	A.A.S.	28		
	A.Science	69		
Law, Michael E. Moritz College of	J.D.	154	165	173
LL.M.	11			
M.D.	193			
Medicine Health and Rehabilitation Sciences, School of	B.S.Biomed.Sc.	24	776	899
	B.S.Am.Ting.	22		
	B.S.Hlth.Reh.Sci.	493		
	Cert.Asst.Rehab.Tech.	39		
	Cert.Hlth.Rev.Data.Analyt.	4		
	Postbacc.Cert.Med.Lab.Sci.	1		
	B.S.Hlth.Wellness	2		
Nursing	B.S.Nurs.	212	214	295
Optometry	O.D.	60	60	60
Pharmacy	Pharm.D.	113	211	234
	B.S.Pharm.Sci.	98		
Public Affairs, John Glenn College of	B.A.	49	63	92
	B.S.	14		
Public Health	B.S.Pub.Hlth.	55	55	73
Social Work	B.S.Soc.Work	147	147	186
Veterinary Medicine	D.V.M.	163	163	164
Total Degrees and Certificates		12,146	12,146	17,287
Total Degrees this Semester		(not including certificates)	11,956	
Total Degrees since 1979		(not including certificates)	896,795	
Total Degrees during Last Decade		(not including certificates)	170,547	

The Academic Costume

The colorful ceremonies of The Ohio State University commencements derive from practices originating in the Middle Ages. When European universities were taking form in the 12th and 13th centuries, the scholars were usually clerics, and consequently they adopted costumes similar to those of their monastic orders. Cold halls and drafty buildings called for caps and floor-length capes with attached hoods, and the sobering influence of the church probably resulted in the staid character of the caps and gowns.

As the control of the universities gradually passed from the church,

some aspects of the costumes took on brighter hues. Old prints and engravings, however, reveal a strong similarity between the regalia worn in early universities and that of the present day.

In light of our nation's English heritage, academic costume has been in use in the United States since colonial times. To establish a standard of uniformity in regard to the practice, an intercollegiate commission was formed to prepare a code for caps, gowns and hoods that has since been adopted by all academic institutions.

Originally round, the shape of the cap is now the familiar mortarboard

square — a shape that, according to ballad folklore, resembles a scholar's book. Legend also has it that the privilege of wearing a cap was the initial right of a freed Roman slave; the academic cap, therefore, has become a sign of the freedom of scholarship. The flowing gown has become symbolic of the democracy of scholarship, for it covers any dress that might indicate rank or social status. The hood, reserved at The Ohio State University for those receiving doctoral and master's degrees, not only indicates the type of degree, but also is lined with the official colors of the university.

The Gown

Bachelor: The bachelor gown is black, full-cut with long pointed sleeves.

Master: The master gown is black, long or short sleeves, with an arc-shaped panel extended for each sleeve.

Doctor: The Ohio State University Doctor of Philosophy, Doctor of Nursing Education, Doctor of Musical Arts, and Doctor of Nursing Practice gown is scarlet with gray velvet panels on the front and three velvet bars on each sleeve. Other doctor gowns are black with velvet panels and bars, the color of which is distinctive of the field of study.

Honors Emblem

The Ohio State University honors emblem is a scarlet and gray tasseled braid (honor cord) worn over the gown. Students eligible for this curricular honor are those graduating *summa cum laude*, *magna cum laude*, and *cum laude*. At the discretion of their college, students graduating with distinction or with honors may also be eligible.

The Hood

Bachelor: Three feet long with a two-inch-wide velvet edging.*

Master: Three and one-half feet long with a three-inch-wide velvet edging.

Doctor: Four feet in length with a five-inch-wide velvet edging and panel at the sides.

The lining of all hoods, which is folded out, bears the official colors of the institution granting the degree. The color of the velvet indicates the field of study.

* Not usually worn by candidates for a degree.

Cap and Tassel

Candidates for degrees at The Ohio State University wear the black mortarboard with a tassel whose color is distinctive of the degree being received. The tassel colors are as follows:

Graduate School (PhD)	Gray
(Others)	Black
College of Arts and Sciences	
BA	White
BA Journalism	Crimson
BAE, BFA	Brown
BM, BME	Pink
BS, BS Design, BS Atmos.Sci., BS Geog.Info.Sci.	White
Fisher College of Business	Drab
College of Dentistry	Lilac
College of Education and Human Ecology	
Education	Light Blue
Human Ecology	Maroon
College of Engineering	Orange
Knowlton School of Architecture	Blue-Violet
College of Food, Agricultural, and	
Environmental Sciences	Maize
School of Environment and	
Natural Resources	Blue-Green
Moritz College of Law	Purple
College of Medicine	Green
School of Health and Rehabilitation Sciences	Green
College of Nursing	Apricot
College of Optometry	Seafoam Green
College of Pharmacy	Olive Green
John Glenn College of Public Affairs	Peacock Blue
College of Public Health	Salmon
College of Social Work	Citron
College of Veterinary Medicine	Gray

The gold tassel is worn frequently by those holding the doctoral degree and by college and university administrative officers.



Board of Trustees

(The expiration date of each trustee's term is given in parentheses.)

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- Kendall C. Buchan, *student trustee* (2026)
- Amy Chronis, *charter trustee* (2027)

Jessica A. Eveland, secretary

Photography

Photographs may be taken from the stands at any time during the ceremony. However, only press photographers are permitted on the arena floor. Guests are asked to be courteous and respectful of all those wishing to take photographs.

Complimentary Programs

A limited number of programs are available on a first-come, first-served basis. Requests should be sent to the Office of Commencement and Special Events, 1060 Blankenship Hall, 901 Woody Hayes Drive, Columbus, OH 43210-4016.

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Mansfield

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Human Ecology

Karen M. Rose
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Matthew J. Smith
Dean and Director, Ohio State Newark

Mary E. Stromberger
Vice Provost for Graduate Studies
Dean, Graduate School

Carroll Ann Trotman
Dean, College of Dentistry

Jeffrey J. Walline
Acting Dean, College of Optometry

Margaret M. Young
Dean and Director,
Ohio State Lima

Karla Zadnik
Interim Dean, College of Public Health

Inclement Weather

In the case of inclement weather, every effort will be made to hold commencement as planned. Commencement will take place in Ohio Stadium, unless weather conditions are dangerous or severe, in which case the ceremony will be canceled. No indoor facility on campus can accommodate the graduating class and their guests.

On commencement day, Ohio State officials will be in continuous contact with the National Weather Service to monitor approaching weather. If it is feasible to delay the start of the ceremony and wait for clearing or less severe weather, the start of the ceremony may be delayed up to one hour. Should this happen, any changes will be announced on-site to graduates and guests. Graduates will remain in the assembly locations; guests are asked to remain in protected areas of Ohio Stadium. Your patience and cooperation will help facilitate this plan.

In case of cancellation

If it is determined that severe weather will not permit us to hold commencement, the ceremony will be canceled. Once cancellation has been announced, graduates should report to the locations below one hour after cancellation to receive their diplomas.

It is strongly advised that graduates and guests prearrange a meeting place in case the ceremony is canceled. Guests should not go to French Field House or RPAC where most diplomas will be distributed to graduates. St. John Arena and various locations on West Lane Avenue are some suggested meeting sites.

Diplomas will remain in the following locations until 4 p.m. on commencement day. Diplomas not picked up by 4 p.m. will be taken to Buckeye Link on the first floor of the Student Academic Services (SAS) building, 281 West Lane Avenue. Diplomas will be available for pickup there between 9 a.m. and 4 p.m., May 5–9. If a graduate's diploma remains unclaimed after 12:00 p.m. on May 9, it will be mailed to the permanent address on record within two to four weeks of commencement. Graduates can verify/change their mailing addresses by navigating to the Buckeye Link website at buckeyelink.osu.edu. Click on "My Student Center," then scroll down to the "Personal Information" section to view the address. Click on the "Permanent Address" hyperlink if there is a need to edit it.



College	Report to:
Graduate School (Doctorates).....	Independence Hall
Graduate School (Masters).....	French Field House
Arts and Sciences.....	RPAC
Business.....	French Field House
Dentistry.....	RPAC
Education and Human Ecology	French Field House
Engineering.....	French Field House
Food, Agricultural and Environmental Sciences.....	French Field House
Law	RPAC
Medicine	RPAC
Nursing.....	RPAC
Optometry.....	RPAC
Pharmacy.....	French Field House
Public Affairs.....	French Field House
Public Health.....	French Field House
Social Work.....	French Field House
Veterinary Medicine	French Field House

Pomp, circumstance, and other songs of a lifetime

(continued from inside front cover)

I say, rather, the richness of us,
precious difference, the grand multiplicity
of selves that balance this globe
and enable it to spin true. Grandson
of peasant immigrants, I was given

the opportunity to earn a doctorate
in English literature from Ohio State—
because my family labored long nights
around the kitchen table trying to learn
this arduous English. I sat where

you're sitting twenty-six years ago.
Bob Dylan and Smokey Robinson got me
through. Yes, it took a prophet and Miracles!
My son earned an OSU Ph.D. in history.
Now you, graduates, are being honored—

by degrees. We've all come together
around the kitchen table of Ohio State.
Ohio, Round on the ends and high
in the middle. For the years to come
we'll sing together, Beautiful Ohio,

in dreams again I see, Visions of what
used to be. These psalms, sacred thoughts
of our tribes, 78's and 33's, tapes,
CD's—they take up space in shelves
of our skulls, our hearts. They remind us

we want a song beyond the run-
of-the-mill thrill, the moment throbbing
with pleasure or bathed in the blues.
We ache for something grander than
pure selfishness. Songs sung for one

alone are not true music. Arias shared
are music of the spheres, ways of saying
to another something from the soul.
Of course the Buckeye Battle Cry
is there. Drive, drive on down the field,

Men (and women!) of the Scarlet
and Gray. Well, you drove on down
the field, and you drove up and down
the streets, around and around
crowded lots, looking for a place to park,

and you searched our dark, ancient library
for a decent place to study. My wife,
Mary's, father marched in the first
"Script Ohio," in 1936. He's here today
with us, blowing his horn, I can't help

but feel, as is the sweet mother
I lost last year, the one who gave me
the stars. Today's music makes us think
of the debts we owe, and never can repay.
So many of us would not be here

were it not for the lullabies and songs
of dear parents, their parents, theirs.
Some are here today in the flesh.
Many are not. We mourn them with cadences
of our hearts. Think how many people

sang before us, gave us a name, a voice,
taught us the right words. We must
cherish them by remembering every song.
When we sing to others, we honor
our fathers and mothers, thank them

for this day of profound scarlet and gray
pomp and circumstance. O, come
let's sing Ohio's praise, And songs
to Alma Mater raise. Alma mater.
Ohio State is our sweet, nurturing mother.

We came of age here, with her help.
Well, Mother, we love you, but, like,
it's time we moved out, got a place
of our own. You're standing there,
Mom, gray hair, eyes scarlet

from crying. We won't forget you.
Now, even though this ceremony
means we're being weaned, taken off
the nipple, let's take care to cherish her
all our days. Let's remember

the words to the songs she taught us,
and pass them on. We'll remember
always, Graduation Day. Summer's heat,
and winter's cold, The seasons pass,
the years will roll, Time and change

will surely show How firm thy friendship,
O-hi-O. We call that little number
Carmen Ohio. Carmen means song
in Latin. You've worked hard; she
is your reward; today is your reward.

You're filled to overflowing with
the notes, the poems we've written
together. You know the score.
Continue to work hard for yourselves,
and one another. Find the ones who need

you to sing to, for them, in the world.
Graduates, this joyful litany, this hymn
our ancestors collaborated on with us,
the calling of your name today is music
to our ears. Sing that name proudly

all your days, as if your life depended
on it. It does, you know. It has been
an honor for me to speak—and sing—
to you today. Thank you, graduates,
and, again, Congratulations.



THE OHIO STATE
UNIVERSITY

APPENDIX II



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

DEGREES AND CERTIFICATES

Resolution No. 2025-86

Synopsis: Approval of Degrees and Certificates for spring and summer terms of 2025 is proposed.

WHEREAS pursuant to paragraph (E) of rule 3335-1-06 of the Administrative Code, the Board has authority for the issuance of degrees and certificates; and

WHEREAS the faculties of the colleges and schools shall transmit, in accordance with rule 3335-9-29 of the Administrative Code, for approval by the Board of Trustees, the names of persons who have completed degree and certificate requirements:

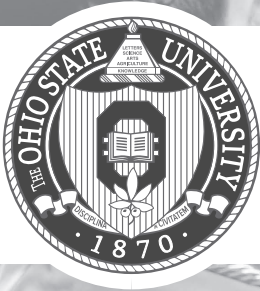
NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the degrees and certificates to be conferred on May 4 and August 3, 2025, to those persons who have completed the requirements for their respective degrees and certificates and are recommended by the colleges and schools.

CERTIFIED

This is to certify that the foregoing is a true and accurate excerpt from the minutes of the Board of Trustees meeting held May 21, 2025.

Jessica A. Eveland
Secretary



Summer Commencement

THE OHIO STATE UNIVERSITY
AUGUST 3, 2025



Pomp, circumstance, and other songs of a lifetime

—by Professor David Citino, 1947–2005, Late University Poet Laureate
(Originally presented as the 2000 Winter Commencement address)

If you're like me, you've got a big head,
not to mention a funny robe, full of music—
poems and melodies, the tunes
we move to, shower and shave by,
study, write to. Not just the incidental,

but the momentous music keeping time.
Our histories are measures of song.
Listen to your heart: drums of Africa,
sea-spume of blind, far-sighted Homer,
Sappho's honeyed love lyrics. Often,

music speaks for us, one note saying
a thousand words. Like Rodolpho
in Puccini's *La Bohème*, Sono un poeta.
I am a poet. Che cosa faccio? What
do I do? Scrivo. I write. This ceremony

is loud music—pomp and circumstance
of the life you began freshman year
or that first day of graduate school.
In my head I press Play, and the CD
of Big Days kicks on. I leap and linger

over moments too sweet, nearly, for words.
I'll never escape rhymes from the nursery.
Up above the world so high, like a diamond
in the sky. We knew from the start
our universe was aglow with wonder.

Italian, Latin, English songs in nasal accents
of Cleveland. Gaudeamus igitur, Juvenes
dum sumus. So, let us rejoice, while
we are young. Youth is that gift we can't
comprehend while we're young. This ceremony

means you all are less young than you were.
Don't let the heavy knowledge gained
from your studies deprive you of the gifts
of youth, to be able to rejoice at the drop
of a hat, to care for, be moved by others.

Now I hear golden hits of five decades.
Big Mama Thornton, and that so-called King
(King of what, fried butter sandwiches?)
who stole away her hound dog. You ain't
never killed a rabbit, you ain't no friend

of mine. As with those profs and TAs,
course after course, you had to produce—
kill some rabbits—to earn respect.
And at times OSU may have seemed
like Heartbreak Hotel, down at the end

of Lonely Street, so difficult was it
to do your best. Tennessee Ernie Ford,
"Sixteen Tons": St. Peter don't you
call me 'Cause I can't go. I owe
my soul to the company store.

You have been digging deep in mines
of knowledge. We all owe our souls
to Ohio State, company store of learning,
shared experience—precious ore
we have in common forever.

Now I hear Domenico Modugno's
fervent urging to wish, sing, fly,
Volare, Wo-oo. Cantare, Wo-o-o-o-o.
My grandfather was a peasant farmer,
a contadino in Calabria in the toe

of Italy. He knew it's the human lot
to dream of flying. Lucky, lucky,
lucky me, I'm a lucky son-of-a-gun.
I work eight hours, I sleep eight hours,
That leaves eight hours for fun.

Hey! He sailed in steerage across
the Atlantic, came to Cleveland, where
he stayed long enough to work 52 years
for the B&O Railroad, before lying down
to rest in good Ohio soil. So many of us

here today came from elsewhere,
or ancestors did. From Tennessee, Italy,
Africa, Asia, Appalachia—even,
President Kirwan, the wilds of Kentucky
and Maryland. Women and men with backs

supple as birch trunks. The courage
it took to pick up stakes and begin again
in a new world! Think of the work
those older ones did. For you. You all
are facing a change right now.

This sheepskin is your passport.
You're bound for emigration to
the next song of your life. Ohio State
is the ark on which you've been sailing.
You've been the precious cargo.

But, as Noah once said, I can see
clearly now the rain is gone. The ark,
our university, was filled to overflowing
with the diversity of us. Diversity.
Networks and talk shows devalue the word.

(continued on inside back cover)

The Ohio State University 440th Commencement

Summer 2025 • August 3, 2025 • 2:00 P.M. • Jerome Schottenstein Center

Presiding Officer

Walter E. Carter Jr.
President

Prelude—1:30 p.m. to 2 p.m.

Faculty Brass Quintet

Welcome

Melissa S. Shivers
Senior Vice President for Student Life

Processional

National Anthem

Graduates and guests led by
Sophia L. Haws
Undergraduate Student
School of Music

Invocation

Samson King
Chaplain
Department of Chaplaincy and
Clinical Pastoral Education
Wexner Medical Center

Commencement Address

Umit S. Ozkan
Distinguished University Professor
and Chair
Department of Chemical and
Biomolecular Engineering
College of Engineering
The Ohio State University

Conferring of Distinguished Service Awards

Recipients presented by
John W. Zeiger, Chair
Board of Trustees

Melissa M. Conrath

Charles R. Wise

Conferring of Degrees in Course

Colleges presented by
Ravi V. Bellamkonda
Executive Vice President
and Provost

Awarding of Diplomas

Welcome to New Alumni

Molly Ranz Calhoun
Senior Vice President, Engagement
President and CEO
The Ohio State University Alumni
Association

Alma Mater—Carmen Ohio

Graduates and guests led by
Sophia L. Haws

*Oh! Come let's sing Ohio's praise,
And songs to Alma Mater raise;
While our hearts rebounding thrill,
With joy which death alone can still.
Summer's heat or winter's cold,
The seasons pass, the years will roll;
Time and change will surely show
How firm thy friendship—O-hi-o!*

Recessional



Excerpts from the commencement ceremony will be broadcast on WOSU-TV, Channel 34, on Tuesday, August 5, at 7 p.m.

Livestream coverage and a replay of the ceremony in its entirety can be viewed at commencement.osu.edu.

Commencement Address

Umit S. Ozkan

Umit S. Ozkan, PhD, is a Distinguished University Professor and a College of Engineering Distinguished Professor at The Ohio State University.

She received her PhD from Iowa State University in December 1984 and joined the Ohio State faculty in January 1985. From 2000 to 2005, she served as associate dean for research in the College of Engineering.

Currently, she is the chair of the Chemical and Biomolecular Engineering Department. Dr. Ozkan is a member of the National Academy of Engineering and a fellow of the American Association for the Advancement of Science, American Institute of Chemical Engineers, and American Chemical Society. She is also a professional engineer registered in Ohio.

Her current research interests are focused on thermal catalysis

and electro-catalysis. She has edited eight books, written more than 300 refereed publications and book chapters, and given more than 350 conference presentations and more than 200 invited lectures in 20 different countries. She has eight patents. Dr. Ozkan also has held and continues to hold leadership positions in several professional organizations, including ACS, AIChE and the North American Catalysis Society. She served or continues to serve on the editorial boards of a number of scientific journals and publications.

Dr. Ozkan is the recipient of the American Institute of Chemical Engineers Margaret Rousseau Lifetime Achievement Award (2024), American Chemical Society George Olah Award (2024), North American Catalysis Society Burwell Lectureship Award (2023), ACS Henry H. Storch

Award (2017), ACS Energy and Fuels Distinguished Researcher Award (2012), John van Geuns Lectureship Award at the Van't Hoff Institute at the University of Amsterdam (2010), Iowa State University Professional Achievement Citation in Engineering (2010), AIChE Mentorship Excellence Award (2009), Fulbright Senior Scholar Award (2007) and the Society of Women Engineers Achievement Award (2002), among others. In 2013, she was honored by a special volume of *Topics in Catalysis*. The volume included contributions from 35 different research groups from 12 different countries. In 2019, she was again honored, this time by a special volume of *Catalysis Today*.

In her research group, Dr. Ozkan has advised and mentored more than 100 graduate students, postdoctoral researchers and honors students.

Recipients of Honors

Melissa M. Conrath

Distinguished Service Award

Throughout her remarkable career as an educator, Melissa M. Conrath, PhD, has played numerous roles, both formal and informal: director, superintendent, teacher, community leader, committed mentor and steadfast champion for students. Over nearly five decades in public education, Dr. Conrath has proven herself to be an educator who embodies what it means to lead through service.

A Buckeye alum who earned her doctorate in science education, Dr. Conrath most recently served as director of the Principal Licensure Program in the College of Education and Human Ecology at The Ohio State University, a role she held until her retirement in 2022. She was responsible for recruitment, orientation, advising, mentoring and student instruction in a number of graduate-level courses. She single-handedly led the program's faculty

through the accreditation process and worked with the Fisher College of Business to co-lead a two-year principal professional development program for entry-level principals in Columbus City Schools.

Prior to her tenure at Ohio State, Dr. Conrath held various roles in public teaching and administration. A trailblazer, she was Central Ohio's first female superintendent, leading Big Walnut Local Schools and then Worthington City Schools. She began her career as a science teacher in Marysville and Edgerton, where she taught middle- and high-school biology, physics, ecology and physical science and coached sports.

Dr. Conrath has given back generously to the community, with service to numerous boards and civic organizations. She has volunteered as a guest speaker in Ohio State classes, and countless students have shared that

her lessons on classroom assessment have had a strong impact on their learning and decision-making. She has served on the board of the Buckeye Association of School Administrators and as president of the Franklin County Superintendents Association, among other roles. She has been widely honored for community service and exemplary leadership, with awards including the Buckeye Association of School Administrators Exemplary Educational Leadership Award and the Excellence in Educational Leadership Award from the University Council for Educational Administration.

In retirement, Dr. Conrath remains a highly respected leader who is regularly sought out for her expertise and perspectives on a host of K-12 leadership issues.

Charles R. Wise

Distinguished Service Award

Charles R. Wise, PhD, served as the founding director of the John Glenn School (now College) of Public Affairs of The Ohio State University from 2007 to 2013. He is currently Professor Emeritus in the John Glenn College and teaching in the college's Washington Master of Public Affairs program.

As founding director, Dr. Wise established the strategy and culture of the Glenn College, launched its first undergraduate degree, and dramatically grew the core faculty. After stepping down from the director's role, he has continued to contribute to the academic life of the college and university by conducting and publishing peer-reviewed research, teaching at the graduate, professional and doctoral levels, and serving on the college's Board of Distinguished Visitors. Dr. Wise has

also generously supported the college's students, having established two scholarship funds.

Prior to his service at Ohio State, Dr. Wise was associate dean of the School of Public and Environmental Affairs of Indiana University, where he earned master's and doctorate degrees.

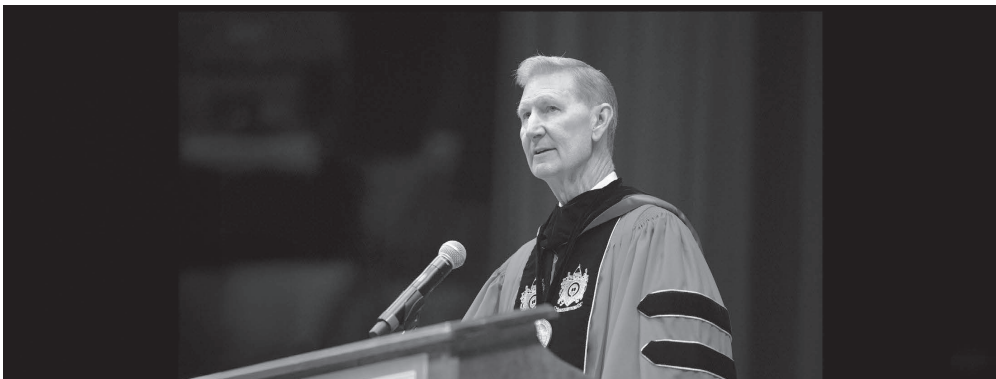
He served as director of the Parliamentary Development Project for Ukraine which was headquartered at Ohio State, and which aided the Ukrainian Parliament in developing into a stronger and more democratic representative institution. He also served in the United States Department of Justice, first as Special Assistant for Policy Analysis and then as the first Director of Intergovernmental Affairs for the Department.

Dr. Wise was elected President of the National Association of Schools

of Public Affairs and Administration and was selected as a Fellow of the National Academy of Public Administration. Three times his research was awarded the Mosher Award for best academic article of the year published in the *Public Administration Review*, public administration's leading journal. He is the only scholar to have received the award three times. He also served as managing editor of the *Public Administration Review*. His latest book published by Cambridge University Press in 2024 is *The Courts and the President: Judicial Review of Presidential Directed Action*.

Dr. Wise embodies Ohio State's motto of "Education for Citizenship" through his commitment to inspiring citizenship, developing leaders and continuing to pay forward through his teaching and giving.

A Message from President Carter



Dear Graduates,

Congratulations on earning your degree from The Ohio State University. It is an honor to join you and your loved ones in celebrating this momentous occasion.

Throughout your time with us as students, you have proven repeatedly that you possess the grit and determination to achieve success and reach your goals. Now that you count yourself among the hundreds of thousands of Buckeye alumni around the globe, I am certain you will continue to strive for excellence in all that you do as leaders in your fields and in your communities.

As you start the next chapter of your life, remember to lead with purpose and build upon the knowledge you have gained at Ohio State. Together, we can make great progress toward addressing the challenges the world faces today.

Congratulations, again — and Go Buckeyes!

Sincerely,

A handwritten signature in black ink that reads "Walter E. Carter, Jr." The signature is written in a cursive, flowing style.

Walter "Ted" Carter Jr.
President

Congratulations and Welcome to the Alumni Association

Dear Ohio State Alumni,

The moment has arrived! You are graduates of The Ohio State University.

This graduating class pushes the number of living Ohio State alumni to more than 625,000. Welcome to your very large and loving Ohio State alumni family.

Your time on campus has been filled with countless memories, relationships and learning experiences that have shaped you into the remarkable individuals you are today. From frantic all-night cram sessions to national championships, each moment has contributed to your growth and development. As you embark on this new adventure, remember that your connection to Ohio State doesn't end with graduation.

Your Alumni Association is an excellent resource for career guidance, professional development, or simply staying connected with fellow Buckeyes. I hope to see you around at the many events and activities we sponsor, whether you're staying nearby or moving to the other end of the world. Ohio State will always be a part of who you are, and there are so many ways of staying connected to the Buckeye community.

Enjoy Graduation Day. It's one you'll always remember. We'll be ready to celebrate your next momentous occasion, as you reach further milestones and make new memories.

Congratulations, Class of 2025. The world awaits your talents. The entire Ohio State family can't wait to see where your next adventure takes you.

Go Bucks!

In firm friendship,

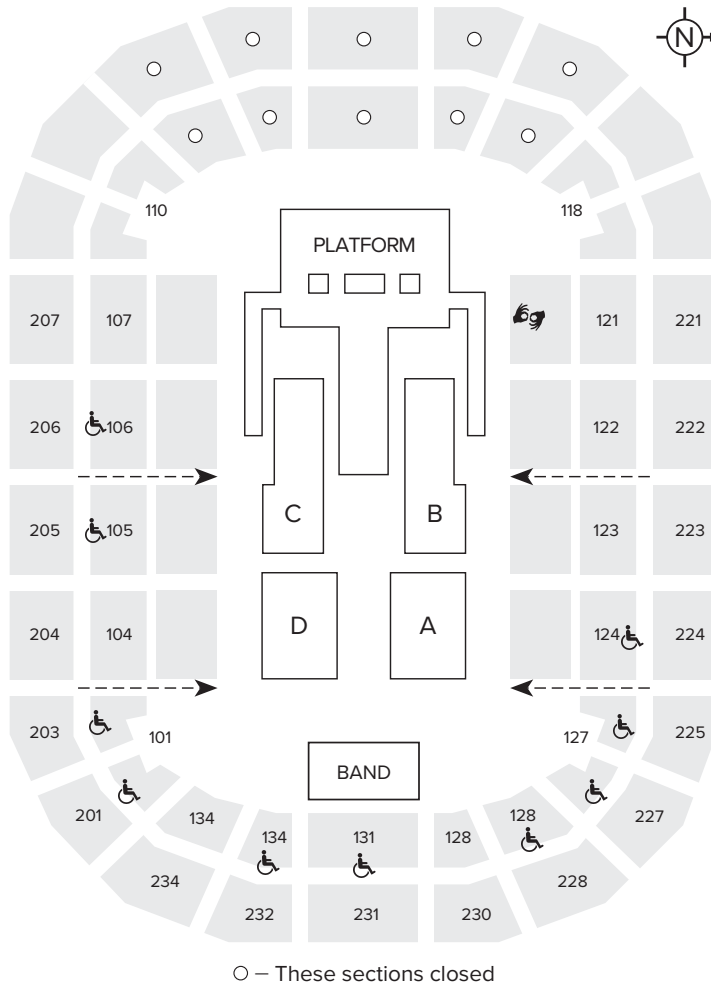


Molly Ranz Calhoun '86
President and CEO, The Ohio State University Alumni Association
Senior Vice President, Engagement

P.S. Follow me @BuckeyeMolly on X and Instagram, and discover what's available to you as graduates of this great university:
osu.edu/alumni/resources/recent-grads



Arena Seating



A – Public Health; Public Affairs; Social Work; Nursing; Education and Human Ecology; Business

B – Master's

C – PhD; Dentistry; Medicine; Food, Agricultural, and Environmental Sciences

D – Engineering; Arts and Sciences

ASL interpreter	
Wheelchair seating	

— — — — — ➔ Please keep these aisles clear for the Processional and Recessional ← — — — — —

This program is not an official graduation list.

This printed program lists students who were eligible to graduate for Summer Term 2025, as of 5:00 p.m., July 23, 2025, pending the outcome of final examinations and final grades. Therefore, it should not be used to determine a student's academic or degree status. The University's official registry for conferral of degrees is the student's permanent academic record, kept by the Office of the University Registrar, Student Academic Services Building, 281 West Lane Avenue, Columbus, OH 43210-1132.

The Graduate School

Dean: Mary E. Stromberger

Doctor of Musical Arts

Ge Ding

Bachelor's (Zhejiang Conservatory of Music)
Master's (Cleveland Institute of Music)
Music
Dr. Caroline Hong

Doctor of Philosophy

Mohammed Nasrdeleen Saeed Ali Abdelmaola

B.Eng., M.S.Mech.Eng. (Military Technical College)
M.S. (The Ohio State University)
Welding Engineering
Dr. Boyd Pantton
Dr. Glenn Doehn

Alhassan Abdul Rahman

B.A., M.Philos. (University of Ghana)
M.A. (Hamad Bin Khalifa University)
History
Dr. Ousman Kobo
Dr. Ahmad Sikangia

Christopher Acton

B.A. (University of Wisconsin)
M.A. (The Ohio State University)
Education
Dr. Laurice Joseph

Bindu Adhikari

B.S. (Tribhuvan University)
M.S. (University of Hawaii)
Comparative Biomedical Science
Dr. Anastasia Vlasova
Dr. Linda Saif

Sherifat Taiwo Alabi

Bachelor's (Federal University of Technology)
M.S. (University of Ibadan)
Agricultural Communication, Education, and Leadership
Dr. Joy Rumble

Maryum Alam

B.A. (Hofstra University)
M.A. (Indiana University)
M.A. (The Ohio State University)
Political Science
Dr. Christopher Gelpi

Md Siddik Alom

B.S., M.S. (University of Dhaka)
M.S. (Mississippi State University)
Ohio State Biochemistry Program
Dr. Kurt Fredrick

Cesar Augusto Alves Dos Santos Campanini

Bachelor's (Universidade Federal do Piaui)
M.A. (The Ohio State University)
Portuguese
Dr. Lucia Costigan

Kelly Marie Amaddio

B.S. (United States Air Force Academy)
M.S. (Air Force Institute of Technology)
Psychology
Dr. Duane Wegener

Midhun Naga Kesav Anne

B.Pharm. (Jawaharlal Nehru Technological University, Kakinada)
M.S. (Campbell University)
Molecular, Cellular, and Developmental Biology
Dr. Jacy Wagnon

Demetrio Antolini

Laurea (University of Bologna)
Master's (Ca' Foscari University of Venice)
M.A. (The Ohio State University)
Italian
Dr. Dana Renga
Dr. Jonathan Mullins

Andrea Paola Armijos Echeverria

B.A. (Universidad San Francisco de Quito)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Ana Maria Del Sarto

Evelyn Arrey

B.Eng., Ind Engin (Universidad Catolica del Norte)
M.S. (The Ohio State University)
Industrial and Systems Engineering
Dr. Theodore Allen

Syeda Tanjila Atik

B.S., M.S. (Jahangirnagar University)
Electrical and Computer Engineering
Dr. Marco Brocanelli

Brooklyn Bailey

B.A. (University of South Carolina)
M.S. (The Ohio State University)
Psychology
Dr. Daniel Strunk

Cemile Bahar Balaban

Bachelor's, Master's (Cukurova University)
Education
Dr. Leslie Moore

Kaarthik Abhinav Balakrishnan

B.S., M.S. (Indian Institute of Science Education & Research)
Biophysics
Dr. Martin Haesemeyer

Graham Christian Bartels

B.S., M.S. (The Ohio State University)
Psychology
Dr. Daniel Strunk

Skyler Keil Baugher

B.S., M.S. (University of Toledo)
Aerospace Engineering
Dr. Datta Gaitonde

Morgan Beers

B.A. (Lipscomb University)
M.A. (University of Alabama)
English
Dr. Christa Teston

Richard Jackson Berard III

B.S. (Southern Methodist University)
M.A. (The Ohio State University)
Human Sciences
Dr. Andrew Hanks

Genevieve Rose Berendt

B.A. (University of Minnesota Morris)
M.A. (The Ohio State University)
French and Italian
Dr. Sarah-Grace Heller

Joy Bhattacharyya

B.S. (Presidency University)
M.S. (The Ohio State University)
Astronomy
Dr. Annika Peter

Audrey Kathryn Blizard

B.S.Mech.Eng. (Pennsylvania State University)
M.S. (The Ohio State University)
Mechanical Engineering
Dr. Stephanie Stockar

Anna Cathryn Bogen

B.A. (New York University)Ph.D. (University of Sussex)
English
Dr. Evonne Norris
Dr. James Fredal

Matthew Ryan Boot

B.S. (Grand Valley State University)
Evolution, Ecology and Organismal Biology
Dr. Ian Hamilton

Kristina Antonwette Bowdrie

B.A. (Case Western Reserve University)
Au.D. (The Ohio State University)
Speech and Hearing Science
Dr. Rachael Holt

Peter James Brechtling

B.S. (Miami University)
Microbiology
Dr. Chad Rappleye

Michael William Carrigan

B.A. (Boston University)
M.S. (The Ohio State University)
Physics
Dr. Christopher Hill
Dr. Brian Winer

Michael Baker Chavez

B.S. (College of Charleston)
Oral Biology
Dr. Brian Foster

Hao Chen

B.S.Elec.Cptr.Eng., M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Abhishek Gupta
Dr. Ness Shroff

Yi Tang Chen

B.S. (University of Illinois at Urbana-Champaign)
M.S. (University of North Carolina)
M.S. (The Ohio State University)
Biostatistics
Dr. Sebastian Kurtek

Yu Chin Cheng

B.A. (Tunghai University)M.A. (The Ohio State University)
Arts Administration, Education and Policy
Dr. Joni Acuff

Hyeran Cho

B.S., M.S. (Pusan National University)
Mathematics
Dr. Jean-Francois Lafont

Hyeon Choe

B.S.Chem.Eng., M.S. (University of Seoul)
Chemical Engineering
Dr. Jeffrey Chalmers

Ye jin Choi

B.S. (Ewha Womans University)
Statistics
Dr. Sebastian Andrew Kurtek

Yong Min Choi

B.A. (Yonsei University)
M.S. (The Ohio State University)
Psychology
Dr. Julie Golomb

Gabriel Antonio Coloma Irazary

B.S. (University of Puerto Rico)
M.S. (The Ohio State University)
Mathematics
Dr. Ovidiu Costin

Michael Joseph Corsi

B.S. (Slippery Rock University)
M.A. (University of Hawaii)
History
Dr. Nicholas Breyfogle
Dr. David Hoffmann

Robin Gallagher Cremins

B.S. (University of Tennessee-Knoxville)
M.A. (The New School)
Women's, Gender, and Sexuality Studies
Dr. Shannon Winnubst
Dr. Daniel Rivers

Jorge Manuel Cruz Ibarra

B.S.Comm. (Universidad Panamericana)
M.A. (The Ohio State University)
Communication
Dr. Robert Garrett

Paul Michael Cuillier

B.S. (University of Arizona)
Materials Science and Engineering
Dr. Wolfgang Windl

Matthew Tito D'Urso

B.A. (State University of New York at Binghamton)
M.A. (University of Texas at Austin)
Economics
Dr. Julia Thomas

Zachary Robert Davis

B.A. (Columbia University)
Mathematics
Dr. Roy Joshua

Alanis Tamara De La Cruz Perez

B.A. (University of Puerto Rico)
M.A. (The Ohio State University)
Education
Dr. Kisha Radloff

Sydney Kay Decker

B.S. (Angelo State University)
Evolution, Ecology and Organismal Biology
Dr. Bryan Carstens

Kimberly Marie Denman

B.A., B.S.Chem.Eng. (University of New Mexico)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Gunjan Agarwal

Timothy Robert Raymond DeWitt

B.S.Biomed.Eng. (Wright State University)
M.S. (The Ohio State University)
Biomedical Engineering
Dr. Yun Seok Kang

Vishal Dey

B.Tech. (Bengal Engineering and Science University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Xia Ning

Ashok Vedantum Dheenan

B.S.Elec.Cptr.Eng., M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Siddharth Rajan

Long Phi Dinh

B.S. (University of South Alabama)
Chemistry
Dr. Christo Sevov

Thanh Thanh Trinh Dinh

B.S. (University of Washington)
Integrated Biomedical Science Graduate Program
Dr. Bethany Mundy-Bosse

Reed Wilson Donithen

B.A. (University of Rochester)
M.S. (The Ohio State University)
Psychology
Dr. Sarah Schoppe-Sullivan

Nathaniel Austin Dowell

B.A. (Clear Creek Baptist College)
M.A. (Liberty University)
M.A. (Yale University)
Philosophy
Dr. Declan Smithies

Zachary Drake

B.S. (Edinboro University of Pennsylvania)
Chemistry
Dr. Steffen Lindert

Alison Emily Duck

B.S. (University of Maryland)
M.S. (The Ohio State University)
Astronomy
Dr. Bernard Gaudi

Ashley Dunn

B.A., M.A. (Miami University)
Theatre
Dr. Ana Puga

Elizabeth Jean Duraney

B.A. (Bowling Green State University)
M.S. (The Ohio State University)
Psychology
Dr. Ruchika Prakash

Mahmoud Said Ahmed Mohamed Eid

Bachelor's, Master's (Al-Azhar University)
Integrated Biomedical Science Graduate Program
Dr. Jay Zweier

Ezgi Elmas

Bachelor's (Mugla Sitka Kocman University)
M.S. (The Ohio State University)
Molecular, Cellular, and Developmental Biology
Dr. Dean Lee

Islam Alaa Abdallah Mohamed Elsadek

B.Engr. (Zewail City of Science and Technology)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Eslam Yahya Tawfik

Brent Joseph Emerson

B.A. (Thomas More University)
M.P.H. (University of Kentucky)
Public Health
Dr. Mira Katz

Stacy M. Endres-Dighe

B.S. (Michigan State University)
M.P.H. (University of Michigan)
Public Health
Dr. Alison Norris

Eshita Eva

B.S., M.S. (University of Dhaka)
M.S. (Auburn University)
Geography
Dr. Steven Quiring

Angel Evans

B.A. (Miami University)
M.A. (University of Akron)
English
Dr. Beverly Moss

James Lawrence Fields

B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering
Dr. Jack McNamara

Karin Elizabeth Flora

B.A. (University of California, Santa Barbara)
M.A. (The Ohio State University)
History of Art
Dr. Karl Whittington

Stephanie Leah Flout

B.A. (University of Kentucky)
M.B.A. (University of Cincinnati)
Business Administration
Dr. Xiaoyan Deng

Leah Jane Ford

B.S.Chem.Eng. (University of South Carolina)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Nicholas Brunelli

Elizabeth Fosuah

B.S. (University of Ghana)
Ohio State Biochemistry Program
Dr. Tianmin Fu

Roman Augustus Fragasse

B.S.Elec.Cptr.Eng., M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Waleed Khalil

Marcella Mishelle Gallmeyer

B.S. (Indiana University)
M.Educ. (Regis University)
Education
Dr. Sheila Morgan

Ziran Gao

B.Engr. (Southwest Jiaotong University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Mahesh Illindala

Sarah Nicole Geiger

B.S. (University of Toledo)
M.A. (The Ohio State University)
Education
Dr. Brett Zyromski

Arnob Ghosh

B.S. (Bangladesh University of Engineering and Technology)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Shamsul Arafin

Mary Ella Gibaldi

B.A., M.A. (California State University, Chico)
English
Dr. James Phelan

Milton Sabat Gonzalez-Serrano

Bachelor's (University of Puerto Rico)
Ohio State Biochemistry Program
Dr. David Wood

Mithun Goutham

B.Tech. (National Institute of Technology Calicut)
M.S. (The Ohio State University)
Mechanical Engineering
Dr. Stephanie Stockar

Montgomery Lukacs Gray

B.S., M.S. (The Ohio State University)
Chemistry
Dr. John Herbert

Aidan Flannery Greene

B.S. (University of Louisville)
M.S. (The Ohio State University)
Chemistry
Dr. Casey Wade

Marquianna Griffin

B.S., M.S. (University of Illinois at Urbana-Champaign)
M.A. (The Ohio State University)
Sociology
Dr. Ryan King

Umut Mert Gurses

B.S. (Middle East Technical University)
M.A. (Bilkent University)
Comparative Studies
Dr. Philip Armstrong

Gabriel Guzman Camacho

Licenciado (Universidad Privada Boliviana)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Ana Maria Del Sarto
Dr. Fernando Unzueta

Mariah Hagadone-Bedir

B.S. (James Madison University)
M.Educ. (Ohio University)
Education
Dr. Richard Voithofer

Erika Brannon Hagen

B.S. (University of Wisconsin)
M.A. (The Ohio State University)
Speech and Hearing Science
Dr. Richard J. Voithofer

Rebecca Marie Haight

B.S. (University of Illinois at Urbana-Champaign)
M.S. (The Ohio State University)
Chemistry
Dr. Patrick Woodward

Jonathan Michael Hall

B.S.Elec.Cptr.Eng., M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Julia Zhang

Julia Tydings Harth

B.A., M.A. (University of Oklahoma)
Arts Administration, Education and Policy
Dr. Dana Kleitchka

Ives Lux Hartman

B.A., B.S. (Texas A&M University)
History
Dr. Kent Curtis

Reham Reda Abdelraouf Hassan

B.S. (Zewail City of Science and Technology)
M.S. (The Ohio State University)
Chemistry
Dr. Jonathan Parquette

Arianna Louise Henning

B.A. (Colby-Sawyer College)
M.A. (The Ohio State University)
Education
Dr. Shirley Yu

Christina Marie Henry

B.S. (Hollins University)
M.A. (The Ohio State University)
Communication
Dr. Matthew Grizzard

Matthew Joseph Herkins

B.S.F.A.B.E., M.S. (The Ohio State University)
Food, Agricultural and Biological Engineering
Dr. Lingying Zhao

Jamie Lynn Herman

B.A. (Luther College)
M.A. (The Ohio State University)
Education
Dr. Winston Thompson
Dr. Bryan Warnick

Andrew Steven Hibbert

B.S. (La Sierra University)
M.B.A. (Claremont Graduate University)
Business Administration
Dr. Oded Shenkar

Angga Hidayat

Bachelor's (Universitas Muhammadiyah)
Master's (Universitas Negeri Surabaya)
M.A. (The Ohio State University)
Education
Dr. Laurie Katz

William Todd Higgins

B.S. (University of Central Arkansas)
M.S. (The Ohio State University)
Ohio State Biochemistry Program
Dr. Damien Wilburn

Jordon Hilliard

B.S. (Texas State University)
Chemistry
Dr. Casey Wade

Diego Alberto Hincapié Ossa

B.Eng., M.S. (Universidad de Los Andes)
Master's (University of Melbourne)
Civil Engineering
Dr. Daniel Gingerich

Emma Jordan Hoelzen

B.S., M.S. (The Ohio State University)
Pharmaceutical Sciences
Dr. Christopher Coss
Dr. A Phelps

Deanna Faye Holroyd

B.A.Honors (University of Durham)
M.A. (University of Leiden)
Comparative Studies
Dr. Maurice Stevens

Christopher Edward Holt

B.A. (North Carolina Agricultural and Technical State University)
M.A. (The Ohio State University)
Speech and Hearing Science
Dr. Robert Allen Fox
Dr. Ewa Jacewicz

Michaela Rayn Hostetler

B.S.Env.Nat.Res. (The Ohio State University)
Earth Sciences
Dr. Steven Lower

Hsin-Lun Hsieh

B.S., M.S. (National Defense Medical Center)
Integrated Biomedical Science Graduate Program
Dr. Jeffrey Parvin

Ya Hsiang Hsu

B.S. (National Tsing Hua University)
M.S. (National Taiwan University)
M.S. (The Ohio State University)
Materials Science and Engineering
Dr. David McComb

Lizeng Huang

B.A. (Shandong Agricultural University)
M.A. (Brandeis University)
M.A. (Minzu University of China)
Education
Dr. Richard Voithofer

Yuzhou Huang

B.S. (China Pharmaceutical University)
M.S. (The Ohio State University)
Environmental Science
Dr. John Lenhart

Yujie Hui

Bachelor's (Shanghai Jiao Tong University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Yang Wang

Brandon William Joseph Iwaniec

B.S., M.S. (Eastern Michigan University)
Ohio State Biochemistry Program
Dr. Jane Jackman

Junyoung Jeong

B.Eng. (Korea University)
M.A. (Seoul National University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Yongyang Cai

Xinyun Jiang

Bachelor's, Master's (Chongqing University)
M.Appt.Stat. (The Ohio State University)
City and Regional Planning
Dr. Yasuyuki Motoyama

Bernal Jimenez Gutierrez

B.A. (University of California, Berkeley)
Computer Science and Engineering
Dr. Yu Su

Kaushik Kandadi Suresh

B.Tech. (National Institute of Technology Tiruchirappalli)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Dhableswar Panda
Dr. Hari Subramoni

Rhiar Lynn Kanouse

B.A. (Central Michigan University)
M.A. (The Ohio State University)
Comparative Studies
Dr. Katherine Borland

Philip Kauffman

B.A. (Capital University)
Ohio State Biochemistry Program
Dr. Ross Dalbey

Sarah Kaye

B.S. (Dickinson College)
M.S. (The Ohio State University)
Neuroscience Graduate Studies Program
Dr. Jie Gao

Kyeongmin Kim

Pharm.D., M.S. (Seoul National University)
Pharmaceutical Sciences
Dr. A Phelps

Minje Kim

B.Bus.Adm., B.A. (Korea University)
M.A. (Yonsei University)
M.A. (The Ohio State University)
Psychology
Dr. Marc Tasse

Michael Charles Kines

B.S., M.S. (University of Michigan)
Electrical and Computer Engineering
Dr. Waleed Khalil

Natalie Susan Kopp

B.A. (Saint Olaf College)
M.A. (The Ohio State University)
English
Dr. Scott DeWitt

Sharbel Kozhaya

B.S. (Lebanese American University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Zak Kassas

Michael William Kraemer

M.A. (University of Kentucky)
B.A. (Saint Olaf College)
History
Dr. Nicholas Breyfogle
Dr. Margaret Newell

Joshua David Krech

B.S. (Ohio University)
M.S. (Wright State University)
Anatomy
Dr. James Cray
Dr. Derek Harmon

Akshay Ashok Kudva

B.Tech. (Vellore Institute of Technology)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Joel Paulson

Chih Chun Kuo

B.S. (Taipei Medical University)
M.S. (Iowa State University)
Food Science and Technology
Dr. Osvaldo Campanella

Kara Ann Lamantia

B.S. (University of Dayton)
M.S. (The Ohio State University)
Earth Sciences
Dr. Lonnie Thompson

Felipe Friday Lamenza

B.S. (The Ohio State University)
Microbiology
Dr. Steve Oghumu

Changyeop Lee

B.S. (Erasmus University Rotterdam)
B.A. (Sungkyunkwan University)
Economics
Dr. Huanxing Yang

Jongwoo Lee

B.A., M.A. (Dankook University)
Education
Dr. Peter Paul

Jonathan Emmanuel Lee-Rodriguez

B.S. (University of Puerto Rico)
Entomology
Dr. Luis Canas

Melissa Rose Leonard

B.S. (Miami University)
D.V.M. (The Ohio State University)
Comparative Biomedical Science
Dr. Ken Oestreich

Chih-Hao Li

B.S. (National Chung Hsing University)
M.S. (University of Central Florida)
Electrical and Computer Engineering
Dr. Ronald Reano

Ran Li

Certificat (National I-Lan University)
B.A. (China Agricultural University)
M.S. (Louisiana State University, Baton Rouge)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Brian Roe

Yongqi Liu

B.S. (University of Science and Technology of China)
M.S. (The Ohio State University)
Statistics
Dr. Shili Lin

Nikaela Marie Losievski

B.S. (Michigan State University)
M.S. (The Ohio State University)
Neuroscience Graduate Studies Program
Dr. Stephen Kolb

Shuangyuan Lu

B.S. (Peking University)
Physics
Dr. Yuanming Lu

Zitong Lu

B.Eng. (Northeastern University)
M.S. (East China Normal University)
M.S. (The Ohio State University)
Psychology
Dr. Julie Golomb

Zahra Mahmoudi

B.A., M.A. (Ferdowsi University of Mashhad)
Near Eastern Languages and Cultures
Dr. Sean Anthony

Yashvi Malhotra

B.Eng., M.B.A. (Punjab University)
M.S. (Teri University)
Civil Engineering
Dr. Daniel Gingerich
Dr. Jordan Clark

Khyati Malik

B.Bus.Adm. (Guru Gobind Singh Indraprastha University)
M.B.A. (Institute of Chartered Financial Analysts of India)
Master's (Paris Institute of Political Studies)
M.P.A. (London School of Economics and Political Science)
M.A. (Ohio University)
M.S. (The Ohio State University)
Agricultural, Environmental, and Development Economics
Dr. Elena Irwin
Dr. Sathya Gopalakrishnan

Aniket Mandal

B.S. (University of Calcutta)
M.S. (Indian Institute of Technology)
Chemistry
Dr. John Herbert

Alexander Robert Marr

B.S. (University of Missouri-Columbia)
Integrated Biomedical Science Graduate Program
Dr. Nicole Grieselhuber

Adriana Isabel Martinez

B.A. (American University, Washington, DC)
M.A. (New York University)
Education
Dr. Eric Anderman

Ralph Jacob Martins

B.S. (Northwestern University)
Communication
Dr. William Eveland

Meredith McCormack-Mager

B.A. (Wellesley College)
M.S. (The Ohio State University)
Biostatistics
Dr. Abigail Shoben

Oliver J. McLellan

B.S. (Brown University)
Earth Sciences
Dr. Jill Leonard-pingel

Madhur Mehta

B.S., M.S. (Indian Institute of Science Education & Research)
M.S. (The Ohio State University)
Physics
Dr. Samir Mathur

Jiaxing Miao

B.S. (Beijing Agricultural University)
M.S. (Illinois Institute of Technology)
Integrated Biomedical Science Graduate Program
Dr. Jing Zhao

Alexandra Watson Mickle

B.A. (Saint Olaf College)
M.A. (University of Oregon)
History of Art
Dr. Erica Levin

Kevin Allen Miller

B.A. (College of Wooster)
Chemistry
Dr. Christopher Hadad

Michael Francis Miller

B.S.Elec.Cptr.Eng.
M.A. (The Ohio State University)
Electrical and Computer Engineering
Dr. Aaron Arehart

DeAvin Anthony Mitchell

B.A. (University of Kentucky)
M.A. (The Ohio State University)
Arts Administration, Education and Policy
Dr. Joni Acuff
Dr. James Sanders

Charles Monge

B.S. (Illinois College)
M.S. (University of Illinois at Urbana-Champaign)
M.A. (The Ohio State University)
Communication
Dr. Nicholas Matthews
Dr. Matthew Grizzard

Jena N. Moody

B.A. (Saint Olaf College)
M.S. (The Ohio State University)
Psychology
Dr. Jasmeet Hayes

Courtney Alyssa Moore

B.A., M.A. (Baylor University)
M.S. (The Ohio State University)
Psychology
Dr. Russell Fazio

Hannah Grace Morrison

B.A. (Asbury University)
M.A. (Ohio University)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Paloma Martinez-Cruz

Brittany Lynn Multer Hopkins

B.S. (University of Kansas)
M.S. (The Ohio State University)
Environment and Natural Resources
Dr. Rattan Lal

Samuel Thomas Murphy

B.S. (Montana State University)
M.A. (The Ohio State University)
Psychology
Dr. Daniel Strunk

Rumbidzai Tatenda Mushunje

B.S. (The Ohio State University)
M.A. (University of Cincinnati)
Education
Dr. Tanya Middleton
Dr. Colette Dollarhide

Khue Ngoc Minh Nguyen

B.S. (University of Mississippi)
M.S. (The Ohio State University)
Chemistry
Dr. David Nagib

Kate Nolan

B.S., M.S. (State University of New York at Stony Brook)
M.S. (The Ohio State University)
Psychology
Dr. Jasmeet Hayes

Jennifer Marie Nunes

B.S. (Cornell University)
M.F.A. (Louisiana State University, Baton Rouge)
M.A. (The Ohio State University)
East Asian Languages and Literatures
Dr. Kirk Denton
Dr. Patricia Sieber

Rebekkah Skye O'Beallain

B.S. (Muskingum University)
M.S. (Northern Michigan University)
Education
Dr. Tiffany Wild

Thomas Aloysius O'Hare

B.A. (Brandeis University)
Mathematics
Dr. Andriy Gogolyev

Hwoi Min Oh

B.S. (University of Maryland Baltimore County)
Master's (American College of Acupuncture & Oriental Medicine)
B.S. (Johns Hopkins University)
M.S. (The Ohio State University)
Anatomy
Dr. James Cray
Dr. Claudia Masley

Pedro Antonio Ortiz Ramirez

Bachelor's (Universidad Nacional Autonoma de Mexico)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. John Grinstead

Anusha Janardan Pai Asnodkar

B.S. (California Institute of Technology)
M.S. (The Ohio State University)
Astronomy
Dr. Ji Wang

David Franklin Palzer

B.S., M.S. (Western Washington University)
Computer Science and Engineering
Dr. John Foster-Lussier

Shinjini Pandey

B.Comr.Three (University of Delhi)
M.S. (Indira Gandhi Institute of Development Research)
Agricultural, Environmental, and Development Economics
Dr. Leah Bevis

Amogh Vishram Parab

B.Tech., M.S. (Indian Institute of Technology)
Mathematics
Dr. Niles Johnson

Seungbin Park

Bachelor's, Master's (Korea University)
City and Regional Planning
Dr. Harley Etienne

Sarah Ann Parmenter

B.S.Humn.Ecol., M.S.W. (The Ohio State University)
Social Work
Dr. Susan Yoon

Snehal Sanjay Patil

B.Eng. (Institute of Chemical Technology)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Umit Ozkan

Geoffrey Logan Pelfrey

B.A. (The Ohio State University)
Education
Dr. Laura Justice

Jose Oviedo Perez

B.A. (University of Florida)
Master's (Universidade Federal do Rio Grande do Sul)
M.A. (The Ohio State University)
Political Science
Dr. Jennifer Mitzen

Caprice Lynette Phillips

B.S. (University of Arkansas)
M.A. (University of Texas at Austin)
M.S. (The Ohio State University)
Astronomy
Dr. Ji Wang

Gatot Prasetyo

Bachelor's (Universitas Negeri Semarang)
M.A. (The Ohio State University)
Education
Dr. Leslie Moore

Yusuf Qaddura

B.A. (Swarthmore College)
M.Appl.Stat., M.S. (The Ohio State University)
Mathematics
Dr. Dustin Mixon

Ruoxi Qi

Bachelor's (Jiangxi Science & Technology Normal University)
M.S. (California State Polytechnic University)
Human Sciences
Dr. Jay Kandampully

Jiashu Qian

B.Eng. (Nanjing University of Science and Technology)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Anant Agarwal
Dr. Marvin White

Zhen Qin

B.S. (Ludong University)
Master's (Southeast University)
Computer Science and Engineering
Dr. Zhihui Zhu

Yehong Qiu

B.S., M.S. (The Ohio State University)
Chemistry
Dr. Karin Musier-Forsyth

Balaji Ramesh

B.Eng. (Anna University)
Master's (Virginia Polytechnic Institute and State University)
Public Health
Dr. Armando Hoet
Dr. Ayaz Hyder

Bharath Ramesh

B.Eng. (Visveswaraiiah Technological University)
M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Dhbabeswar Panda
Dr. Hari Subramoni

Sarah Ramsey

B.A. (Rutgers University)
M.P.H. (Emory University)
Public Health
Dr. Amy Ferketich

Maxwell Stuart Reese

B.S. (West Virginia University)
Chemistry
Dr. Shiyu Zhang

Vishnu Renganathan

B.Tech. (Sri Ramaswamy Memorial University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Qadeer Ahmed
Dr. Keith Redmill

Micaela Richter

B.S. (Case Western Reserve University)
M.S. (The Ohio State University)
Biostatistics
Dr. Grzegorz Rempala
Dr. Eben Kenah

Blair Lucia Rist

B.S. (King's College)
M.S. (The Ohio State University)
Chemistry
Dr. Zachary Schultz

Marsalene Elise Robbins

B.A., M.A. (Purdue University)
English
Dr. Hannibal Hamlin

Andrew David Rockovich III

B.A. (Washington & Jefferson College)
M.S. (The Ohio State University)
Physics
Dr. Gregory Lafaytis

Dominick Michael Rowan

B.S. (Haverford College)
M.S. (The Ohio State University)
Astronomy
Dr. Krzysztof Stanek

Laine Rumreich

B.S.Cptr.Sci.Eng., M.S. (The Ohio State University)
Computer Science and Engineering
Dr. Paolo Sivilotti

Emily Nadine Runnion

B.S. (University of Arizona)
Evolution, Ecology and Organismal Biology
Dr. Frances Sivakoff

Paul Russell

B.S., M.S. (University of Michigan)
Ohio State Biochemistry Program
Dr. Michael Kearse

Fernando Sanchez Lopez

B.A., M.A. (University of Salamanca)
Master's (Universidad de Avila)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Laura Podalsky

Troye Isaiah Sas-Wright

B.S.Civ.Eng., M.S. (The Ohio State University)
Civil Engineering
Dr. Jordan Clark

Luke David Scarberry

B.S. (The Ohio State University)
Integrated Biomedical Science Graduate Program
Dr. Matthew Summers

Eiana Schettini

B.S. (University of Miami)
M.S. (The Ohio State University)
Psychology
Dr. Jennifer Cheavens
Dr. Zeynep Saygin

Forrest Scott Schoessow

B.A. (The Ohio State University)
M.S. (Utah State University)
Geography
Dr. Bryan Mark

Emily Kirchner Schwarz

B.S. (The Ohio State University)
Integrated Biomedical Science Graduate Program
Dr. William Carson

Natalia Server Beneto

B.A. (University of Valencia)
M.A. (The Ohio State University)
Spanish and Portuguese
Dr. Scott Schwenter
Dr. Carmen Taleghani-Nikazm

Ayesha Seth

B.S. (University of Delhi)
M.S. (Banaras Hindu University)
Chemistry
Dr. Abraham Badu-Tawiah

Victoria Anne Sevich

B.A. (The Ohio State University)
Speech and Hearing Science
Dr. Janet M. Weisenberger

Brandon Patrick Shannon

B.S. (University of Central Florida)
M.S. (The Ohio State University)
Environmental Science
Dr. Reed Johnson

Erica Rose Shelton

B.S. (University of Dayton)
O.D., M.S. (The Ohio State University)
Vision Science
Dr. Dean VanNasdale

Caralee Ann Shepard

B.A. (Hendrix College)
Entomology
Dr. Mary Gardiner

Elizabeth Anh Shi

B.S.Elec.Cptr.Eng. (Johns Hopkins University)
M.S. (The Ohio State University)
Electrical and Computer Engineering
Dr. Caglar Yardim

Maria Jane Sholola

B.S. (Loyola University Chicago)
Food Science and Technology
Dr. Jessica Cooperstone

Vaishnavi Sidharthan

B.S., M.S. (Indian Institute of Science Education & Research)
Chemistry
Dr. Venkat Gopalan

Harper Evan Smith

B.S. (University of Missouri - Saint Louis)
M.S. (The Ohio State University)
Biophysics
Dr. Steffen Lindert

Farshud Sorourifar

B.S.Chem.Eng. (University of California, Berkeley)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Joel Paulson

Kyle Stefan Sozanski

B.S. (North Carolina State University)
Evolution, Ecology and Organismal Biology
Dr. Rachelle Adams

Joseph Spurlock

B.Music, M.A. (The Ohio State University)
Education
Dr. Michiko Hikida
Dr. Theodore Chao

Jessica Hana Stark

B.S. (Union College)
M.S. (The Ohio State University)
Psychology
Dr. Scott Hayes

Samantha Ruth Stelnicki

B.S., M.A. (The Ohio State University)
Economics
Dr. Paul Healy

Jonathan Paul Stranan

B.S.Mech.Eng., M.S. (The Ohio State University)
Biomedical Engineering
Dr. Daniel Gallego Perez

Ashin Antony Sunny

B.Engr. (Institute of Chemical Technology)
M.S. (The Ohio State University)
Chemical Engineering
Dr. Liang-Shih Fan

Colin Padraic Sweeney

B.S. (College of William and Mary)
Evolution, Ecology and Organismal Biology
Dr. Marta Jarzyna

Sagarika Taneja

B.S. (University of Delhi)
M.S. (Indian Institute of Technology)
M.S. (The Ohio State University)
Chemistry
Dr. Jonathan Parquette

Noah Matthew Thomas

B.S., M.Appl.Stat., M.S. (The Ohio State University)
Psychology
Dr. Patricia Van Zandt

William Carl Thomas

B.S. (University of Chicago)
M.A. (The Ohio State University)
Linguistics
Dr. Kathryn Campbell-Kibler
Dr. Ashwini Deo

Sean Tomlin

B.S. (Wright State University)
M.S. (The Ohio State University)
Biostatistics
Dr. Bo Lu

Paul David Toth

B.S. (University of Akron)
Molecular, Cellular, and Developmental Biology
Dr. Steffen Lindert

Anthony Traver

B.A. (Boston College)
M.S.W. (Syracuse University)
Social Work
Dr. Holly Dabelko-Schoeny

Colin Weidner Trussa

B.S.Aero.Eng., M.S. (The Ohio State University)
Aerospace Engineering
Dr. Lian Duan
Dr. Clifford Whitfield

Ivy Rae Tyson

B.A. (University of Colorado at Colorado Springs)
M.Educ. (University of Georgia)
Education
Dr. Bryan Warnick

Arti Vedula

B.Tech. (National Institutes of Technology, India)
Electrical and Computer Engineering
Dr. Abhishek Gupta

Ana Maria Velasquez Giraldo

Bachelor's (Universidad Pontificia Bolivariana)
Diploma (Universidad Autónoma Latinoamericana)
M.P.A. (University of Massachusetts Amherst)
Food, Agricultural and Biological Engineering
Dr. Osvaldo Campanella
Dr. Dennis Heldman

Kaitlyn Elizabeth Viera

B.S., M.Educ. (Xavier University)
Education
Dr. Matthew Brock

Joseph John Vinci

Bachelor's, M.S. (University of Dayton)
Electrical and Computer Engineering
Dr. Caglar Yardim

Nicole Viola

B.A. (Baylor University)
M.S. (University of Texas at Dallas)
Speech and Hearing Science
Dr. Jennifer Peterson Lundine

Rachel Carolyn Wade

B.A. (Albion College)
M.A. (Michigan State University)
Communication
Dr. Hillary DeAndrea

Salmika Gathoni Wairegi

B.S. (University of Richmond)
Chemistry
Dr. Abraham Badu-Tawiah

Justin Dean Walton

B.S. (Brigham Young University)
M.S. (University of Texas at Austin)
Accounting and Management Information Systems
Dr. Annette Beatty

Qian Wang

B.A. (Linyi University)
M.A. (Ohio University)
M.A. (Beijing Language and Culture University)
M.A. (The Ohio State University)
East Asian Languages and Literatures
Dr. Zhiguo Xie

Xinyi Wang

B.S. (China Pharmaceutical University)
M.S. (University of Southern California)
Pharmaceutical Sciences
Dr. Jack Yalovich

Yifei Wang

B.Engr. (Sichuan University)
M.S. (University of Kentucky)
Animal Sciences
Dr. Benjamin Bohrer

Rylan Reese Watkins

B.S. (University of Florida)
Chemistry
Dr. Karin Musier-Forsyth

Jason Scott West

B.S.Pharm.Sci., M.S. (The Ohio State University)
Pharmaceutical Sciences
Dr. Mark Mitton-Fry

Tara West

B.S.Educ., M.A. (Northern Arizona University)
Education
Dr. Michelle Abate

Ethan Casey Whipp

B.S. (Ohio University)
M.S. (University of North Carolina at Wilmington)
Pharmaceutical Sciences
Dr. Rosa Lapalombella

Jameka Clinesha Wiggins

B.S. (University of Maryland Baltimore County)
M.Eng.Mgt. (The Ohio State University)
Engineering Education
Dr. Monica Cox

Winifred Graham Wilberforce

B.Educ. (University of Cape Coast)
Master's (George Washington University)
Education
Dr. Ann O'Connell
Dr. Jerome D'Agostino

Archibald James Williams

B.S. (Grinnell College)
M.S. (The Ohio State University)
Chemistry
Dr. Joshua Goldberger

Kyle Jeffrey Williams

B.A. (The Ohio State University)
Education
Dr. Bryan Warnick

Moment C. Woods

B.S. (Syracuse University)
M.A. (The Ohio State University)
Sociology
Dr. Corinne Reczek

Yu-Lun Wu

Bachelor's, Master's (National Taiwan University)
Agricultural Communication, Education, and Leadership
Dr. Emily Buck
Dr. Annie Specht

Mauricio Xavier da Silva Oliveira

B.S. (Universidade de Sao Paulo)
Bachelor's (Universidade Federal da Bahia)
M.S. (Mississippi State University)
Animal Sciences
Dr. Benjamin Enger

Juan Xie

B.Engr. (Huazhong Agricultural University)
M.S. (South Dakota State University)
M.S. (The Ohio State University)
Biostatistics
Dr. Dongjun Chung

Yuxuan Xin

Bachelor's (Sun Yat-sen University)
M.S. (Georgia Institute of Technology)
Statistics
Dr. Xinyi Xu
Dr. Bo Lu

Haoming Xiong

B.Laws, M.Laws (University of International Relations)
Master's (National University of Singapore)
M.A. (The Ohio State University)
Political Science
Dr. Randall Schweller
Dr. Skyler Crammer

Yifan Yang

B.S. (University of Washington)
M.S. (Georgia Institute of Technology)
Industrial and Systems Engineering
Dr. Sam Davanloo Tajbaksh

Hui Yao

B.A. (Shanghai International Studies University)
M.A. (University of Pennsylvania)
East Asian Languages and Literatures
Dr. Kirk Denton

Junwei Ye

B.A. (South China Normal University)
Master's (Guangdong University of Foreign Studies)
M.A. (The Ohio State University)
East Asian Languages and Literatures
Dr. Zhiguo Xie

Qinmao Ye

Bachelor's (Shanghai University of Traditional Chinese Med)
M.S. (Wright State University)
Integrated Biomedical Science Graduate Program
Dr. Yutong Zhao

Mingye Yin

B.S. (Nankai University)
M.S. (New York University)
Business Administration
Dr. Lu Zhang
Dr. Rene Stulz

Esther Hye-Min Yoon B.S., M.A. (Wheaton College) <i>Education</i> <i>Dr. Youngjoo Yi</i>	Doctor of Occupational Therapy	Amber McCraw B.S. (University of North Carolina) <i>Applied Neuroscience</i>	Michelle Susan Dreibelbis B.S.Bus.Adm., B.S.Educ. (The Ohio State University) <i>Education</i>	Nya Jeanne' Jerdine B.S. (Bowling Green State University) <i>Education</i>
Haozhen Yu B.S. (University of Science and Technology of China) M.S. (The Ohio State University) <i>Statistics</i> <i>Dr. Yoonkyung Lee</i>	Kathryn M. Dike B.A. (Baldwin Wallace University) <i>Health and Rehabilitation Sciences</i>	Emily Pistorova B.A. (College of Wooster) <i>Applied Neuroscience</i>	Nikhil Dubey B.S. (University of Rochester) M.S. (Tufts University) <i>Bioethics</i>	Cidaruh Jones B.A. (The Ohio State University) <i>Arts Administration, Education and Policy</i>
Meng Yu B.A. (Tianjin Foreign Studies University) M.B.A. (Nankai University) Master's (Cornell University) <i>City and Regional Planning</i> <i>Dr. Jennifer Clark</i>	Master in the Study of Law	Master of Arts	Autumn Saige Edmundson B.A. (Georgia State University) <i>Arts Administration, Education and Policy</i>	Namjae Kim B.A., M.A. (Kangwon National University) <i>Economics</i>
Huizi Zeng B.A. (Sun Yat-sen University) M.S. (Johns Hopkins University) <i>Education</i> <i>Dr. Antoinette Errante</i>	Rochelle L. Batdorf B.S. (The University of Findlay) M.B.A. (Mount Vernon Nazarene University) <i>Law</i>	Gabriel Gerard Alge B.S. (The Ohio State University) <i>Economics</i>	Morgan Paige Fetsko B.A., Bachelor's (College of Wooster) <i>Education</i>	Austin Chase Kiser B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>
Zhizhen Zhao B.A. (Zhejiang University) M.S. (The Ohio State University) <i>Statistics</i> <i>Dr. Xinyi Xu</i> <i>Dr. Bo Lu</i>	Tyler Braden B.Bus.Adm. (Kent State University) <i>Law</i>	Sanaa Mohammed Elsadek AzabAziz Bachelor's (Al-Azhar University) <i>Education</i>	Katherine Elizabeth Flynn B.S. (John Carroll University) M.Educ. (Ashland University) <i>Bioethics</i>	Alyssa Knickerbocker B.S.Educ. (The Ohio State University) <i>Education</i>
Robert Jiahua Zhou B.A. (University of California, Irvine) M.S. (The Ohio State University) <i>Psychology</i> <i>Dr. Daniel Strunk</i>	Michael Lee Gregory B.S. (Wright State University) Master's (University of Toledo) <i>Law</i>	Daniel Bacon B.S., M.D. (University of North Carolina) <i>Education</i>	Jesse Fry B.S. (Franklin University) <i>Education</i>	Cheng Yan Lee B.A., M.A. (National Tsing Hua University) <i>Economics</i>
Wei Zhou B.A. (Beijing University of Technology) M.A. (West Virginia University) <i>East Asian Languages and Literatures</i> <i>Dr. Marjorie Chan</i>	Mackenzie Reese Kneisly B.A. (Northwestern University) <i>Law</i>	Elizabeth Bank B.S.H.D.F.S. (The Ohio State University) <i>Education</i>	Isabella Antigone Gianakopoulos B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Yongwoo Lee B.A., B.S., M.A. (Sogang University) <i>Economics</i>
Kunxin Zhu B.S. (Nankai University) <i>Agricultural, Environmental, and Development Economics</i> <i>Dr. Sathya Gopalakrishnan</i>	Christopher Connor LaVelle B.A. (Wilmington College) M.C.R.P. (The Ohio State University) <i>Law</i>	Soledad Callisaya Callisaya Bachelor's (Universidad Mayor de San Andres) <i>Education</i>	Tara Godwin B.A.Honors (University of Utah) <i>History</i>	Wenrong Li B.A. (Jiangnan University) M.A. (Case Western Reserve University) <i>Education</i>
Devan Michelle Lander B.S. (Utah State University) Ph.D. (The Ohio State University) <i>Speech and Hearing Science</i> <i>Dr. Christina Roup</i>	Lacy McGuire B.A. (Capital University) <i>Law</i>	James George Cipolla B.S.Hlth.Reh.Sci. (The Ohio State University) <i>Bioethics</i>	Katherine Marie Graham B.S.Mech.Eng. (The Ohio State University) <i>Education</i>	Yifei Lu B.A. (Minzu University of China) M.F.A. (Beijing Normal University) <i>Communication</i>
Doctor of Audiology	Megan A. Mutchler B.A. (The Ohio State University) Master's (Kent State University) <i>Law</i>	Christian Contreras B.A. (Oakwood College) <i>African-American and African Studies</i>	Yvonne Alice Haight B.S., B.A. (Edinboro University of Pennsylvania) <i>Education</i>	Christina Marie Mahan B.F.A. (Bowling Green State University) <i>Education</i>
Max A. Huffman B.S.Hlth.Reh.Sci., M.S. (The Ohio State University) <i>Nursing</i>	Temple Dawn Patton B.A., M.A. (The Ohio State University) <i>Law</i>	Johana Stephanie Coronado Agustin B.A. (The Ohio State University) <i>Education</i>	Ladan O. Haji B.S.Soc.Work, M.S.W. (The Ohio State University) <i>Bioethics</i>	Molly Catherine McDevitt B.A. (Kent State University) <i>Arts Administration, Education and Policy</i>
Doctor of Nursing Practice	Malaika Reyes B.A.Honors (University of Alaska Fairbanks) <i>Law</i>	Devan Suzanne Costello B.A. (The Ohio State University) <i>Speech-Language Pathology Program</i>	Yuyang Han B.A. (Southwest University for Nationalities) Master's (Jilin University) <i>East Asian Languages and Literatures</i>	Peter Daniel Murray II B.S., Master's (University of Florida) M.D. (Temple University) <i>Bioethics</i>
	Katherine Olivia Smith B.S.Bus.Adm. (The Ohio State University) <i>Law</i>	Sara Kay Court B.A. (University of Florida) <i>Linguistics</i>	Kennedy Marie Harris Bachelor's (Hampton University) <i>Speech-Language Pathology Program</i>	Samuel Patrick Nolan B.Educ. (Kent State University) <i>Education</i>
	Master of Applied Neuroscience	Ruth Abigail Daley B.Music (Baldwin Wallace University) <i>Speech-Language Pathology Program</i>	Gillian Jennings B.S.Educ. (The Ohio State University) <i>Education</i>	Dohyeon Park B.A. (Sogang University) <i>Economics</i>
	Rose Emily Biddulph B.S.Biomed.Eng. (Temple University) <i>Applied Neuroscience</i>	Anne Nicole Dooley B.A.Honors, B.A. (University of Massachusetts Amherst) M.A. (Pennsylvania State University) <i>Communication</i>		
	Madeline Mary Dahl B.S. (The Ohio State University) <i>Applied Neuroscience</i>			
	Alexandra Grace Dorinsky B.S. (The Ohio State University) <i>Applied Neuroscience</i>			

Sarah Lindsey Peddicord
B.S.Educ. (The Ohio State University)
Education

Talina Perez
Bachelor's (Appalachian State University)
Bioethics

Mallory Sophia Petrucci
B.A. (Duquesne University)
Arts Administration, Education and Policy

Cheryl Denise Poindexter
B.S. (Franklin University)
Education

Sean Meredith Pusey
B.A. (The Ohio State University)
Speech-Language Pathology Program

Zahra Rahnamaei
B.A. (Allameh Tabatabaee University)
M.A. (University of Tehran)
Spanish and Portuguese

H Rainak Khan Real
B.S. (University of Dhaka)
Geography

Hazika Bilal Reshi
B.A. (University of Delhi)
M.A. (Bowling Green State University)
Economics

Lindsey Jo Royer
B.S. (Michigan State University)
Bioethics

Tate Noah Rubinstein
B.A. (The Ohio State University)
Education

Shana McKenna Sandborn
B.A. (Harvard University)
Women's, Gender, and Sexuality Studies

Chelsey Minerva Sarante
B.A., Bachelor's (Denison University)
Communication

Ila Vyshali Sharma
B.Music (The Ohio State University)
Music

Camille Nicole Sims
B.A. (Salisbury State University)
Education

Kyle N. Smith
B.A. (Grace College)
M.A. (University of Cincinnati)
Education

Katherine Marie Spets
B.Educ. (Northern Illinois University)
Arts Administration, Education and Policy

Gyuwon Suh
B.S., M.S. (University of Seoul)
Economics

Erin Rae Swager
B.S.Educ. (The Ohio State University)
Education

Yousheng Tang
B.A. (Colorado College)
Economics

Laura-Ashley Candice-Elizabeth Taylor
B.A. (Johnson C. Smith University)
M.A. (Georgia State University)
African-American and African Studies

Ashley Nichole Taylor Rauschenberger
B.S. (Denison University)
M.D. (Wright State University)
Bioethics

Isabelle Marie Thomas
B.Mus.Educ. (William Paterson University of New Jersey)
Music

Wen-An Tseng
B.A., M.A. (National Taiwan University)
Economics

Mason West
B.A. (University of Georgia)
Arts Administration, Education and Policy

Michaela Lauren Williams
B.S. (Ohio University)
Education

Kaiyu Zhang
B.S. (Rochester Institute of Technology)
M.S. (University of Michigan)
East Asian Languages and Literatures

Zhongyao Zhang
B.A. (Yangtze Normal University)
Education

Juncheng Zhu
B.A. (Yunnan University)
M.A. (East China Normal University)
East Asian Studies

Master of Business Administration

Greg Batchelder
B.S. (United States Coast Guard Academy)
M.A. (Columbia University)
Business Administration

Parker Bayer
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Erika Marie Muren Besley
B.S. (University of Pittsburgh)
Business Administration

Michael William Boehm
B.S.Chem.Eng., Ph.D. (The Ohio State University)
Business Administration

Loren Brockway
B.S. (Miami University)
M.S.Agr (Florida International University)
Business Administration

Jelliz E. Brown
B.S.Hlth.Reh.Sci. (The Ohio State University)
Business Administration

Naresh Bumma
B.Med.; B.Surg. (All India Institute of Medical Sciences)
Business Administration

Ross J. Chumsly
B.A., B.S. (Lafayette College)
Business Administration

Kammy Denee Cunningham
B.S. (The Ohio State University)
Pharm.D. (Campbell University)
Business Administration

Jacob Andrew DeVore
B.A. (Otterbein University)
Business Administration

Jacob Erickson
B.S. (Rensselaer Polytechnic Institute)
M.S. (Liberty University)
Business Administration

Keenan M. Fraylick
B.Engr. (Purdue University)
Business Administration

Na'Tyra D. Green
B.A.Journal. (Ohio University)
Business Administration

Caitlin Diane Griffin
B.A. (Colgate University)
Business Administration

Joshua Tyler Hamilton
B.S.Nurs. (The Ohio State University)
Business Administration

Taylor D. Hill
B.S. (University of Cincinnati)
Business Administration

Rie Hirakawa
B.Comr.Four (Doshisha University)
Business Administration

Daniel Hattois
B.S.Ind.Sys.Eng. (The Ohio State University)
Business Administration

Cole Howell
B.S. (University of North Carolina at Charlotte)
Business Administration

Abbas Y. Hussein
B.Bus.Adm. (University of Toledo)
Business Administration

Zachary R. Hutchinson
B.Engr. (Miami University)
Business Administration

Jon Kaminski
B.S. (University of Maryland Global Campus)
M.Hlth.Adm. (Pennsylvania State University)
M.S. (University of Texas at Austin)
Business Administration

Katherine Mae Karper
B.S.Nurs. (Mount Carmel College of Nursing)
Business Administration

Paige Kasper
B.S. (Miami University)
Business Administration

William J. Kellogg
B.A. (Indiana Wesleyan University)
Business Administration

Ashley Marie Keppler O'Brien
B.A. (University of Cincinnati)
Business Administration

Adam S. Kittai
B.S. (University of Maryland)
M.D. (Tel Aviv University)
Business Administration

Sukash Ranjan Koley
B.Tech. (University of Kalyani)
M.S. (University of Cincinnati)
Business Administration

Alex Kuhn
B.S.Mat.Sci.Eng. (The Ohio State University)
Business Administration

Samuel M. Lairh
B.A. (Miami University)
Business Administration

William G. Macke
B.F.A. (University of Hartford)
Business Administration

Molly Mackessy
B.S.Educ. (The Ohio State University)
Business Administration

Isaac Kilfeather Mallory
B.A. (Wittenberg University)
Business Administration

Lauren Hope Marshall
B.A. (The Ohio State University)
Business Administration

Marri Michelle McAndrews
B.S.Pharm.Sci., B.S.Nurs., M.S. (The Ohio State University)
Business Administration

Yusif Mohammed
B.S., M.D. (Marshall University)
Business Administration

John Marshall Morris
B.S.Nurs., M.S. (The Ohio State University)
Business Administration

Amy Jane Noe
B.S.Bus.Adm. (The Ohio State University)
B.S. (Capital University)
Business Administration

Evan Palcho
B.S., M.Tech. (Kent State University)
Business Administration

Joel Pickering
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Charles K. Quansah
B.Engr. (Kwame Nkrumah University of Science and Technology)
Business Administration

Collin L. Reeves
B.S.Bus.Adm. (The Ohio State University)
Business Administration

Catie Shuman-Damanti
B.A. (University of Vermont)
M.S. (Drexel University)
Business Administration

Margaret Ann Sullivan
B.A. (The Ohio State University)
Business Administration

Michael Patrick Sullivan
B.A. (The Ohio State University)
Business Administration

Vinay Roy Thykkutathil
Bachelor's (National Institutes of Technology, India)
Business Administration

Nikhil Tindal Amarnath
B.Eng. (Visvesvaraya Technological University)
M.S. (University of Missouri-Columbia)
Business Administration

Phillip A. Toth
B.A. (The Ohio State University)
Business Administration

Amber Linnell Traugott
B.S. (University of Georgia)
M.D. (Washington University in Saint Louis)
Business Administration

Ibrahim A. Warsame
B.A. (The Ohio State University)
M.D. (University of Toledo)
Business Administration

Katherine Jean Krummen Wayman
B.S.Honors (Miami University)
D.P.T. (University of Southern California)
Business Administration

Tabitha Julia Whitaker
B.S. (The Ohio State University)
Business Administration

Benjamin Joseph Williams
B.A. (The Ohio State University)
Business Administration

Victoria Sherman Winslow
B.S. (Saint Mary's College)
Business Administration

Colin Raymond Wylie
Business Administration

Lei Zhang
B.S. (Virginia Commonwealth University)
M.S. (Saint John's University, New York)
D.P.T. (University of Miami)
Business Administration

Zhongqi Zhang
B.S. (The Ohio State University)
Business Administration

Sydney Zhou
B.A. (University of Michigan)
Business Administration

Master of City and Regional Planning

Jiaheng Liu
B.S.Geog.Info.Sci. (The Ohio State University)
City and Regional Planning

Master of Clinical Research

Brady Anderson
B.S. (Purdue University)
Clinical Research

Walter Junior Baldeon
B.S. (The Ohio State University)
Clinical Research

Nicole Baringer
B.S. (Ohio University)
Clinical Research

Gina Marie Coviello
B.S., M.A.Teach. (Montclair State University)
Clinical Research

Jackson Lee Dew
B.S. (North Carolina State University)
Clinical Research

Rachel C. Ernst
B.A., B.S.Pub.Hlth. (The Ohio State University)
Clinical Research

Diviya S. Jacob
B.S., M.S. (The Ohio State University)
Clinical Research

Zahra Naushad Ahmed Kazmi
Doctorate (University of Karachi)
Clinical Research

Macy Louise Kuhar
B.S.Nurs. (Ohio University)
Clinical Research

Selena McVay
B.S. (The Ohio State University)
Clinical Research

Otilia Maria Oita
B.A. (College of Wooster)
Clinical Research

Jonathan Paskett
B.S. (Brigham Young University)
Clinical Research

Heather Poole
B.S. (University of Mississippi)
Clinical Research

Addison Brynn Rozwara
B.S. (Purdue University North Central)
Clinical Research

Master of Engineering Management

George Sam Ayoub
B.S.Chem.Eng. (Cleveland State University)
Engineering Management

Owen Alphonse Elger
B.S. (University of Dayton)
Engineering Management

Geonong Keanwong Ju
B.S. (Rutgers University-New Brunswick)
Engineering Management

Angela Renee Martin
B.S.Mech.Eng. (The Ohio State University)
Engineering Management

Nicholas Price
B.S. (University of Houston)
Engineering Management

Master of Environment and Natural Resources

Aravind Viswanathan Ramadas
B.S.Agr. (Tamil Nadu Agricultural University)
Environment and Natural Resources

Master of Fine Arts

Maryam Alihosseini
Bachelor's (Tehran University of Art)
Design

Priyanka Chowdhury
Bachelor's (Jadavpur University)
Design

William Christopher Evans
B.F.A., B.A. (University of Georgia)
Art

Dominique Gedanke Flaksberg
B.F.A., B.A. (The New School)
Design

Josiah Malik Jamison
B.F.A. (Columbus College of Art and Design)
Art

Matthew Machado
B.F.A. (University of Florida)
Art

Zachary Naylor
B.F.A. (Montserrat College of Art)
Art

Ivan David Qi Fan Ng
B.F.A. (Maryland Institute College of Art)
Art

James Paskett
B.S.Bus.Adm. (The Ohio State University)
Design

Heloisa Rocha Rincon
Bachelor's (Universidade Federal de Goias)
Design

James Patrick Waite
B.F.A. (Cleveland Institute of Art)
Art

Yuxin Yan
B.F.A. (University of Cincinnati)
Design

Master of Geographic Information Science and Technology

S M Ahsanullah
B.S., M.S. (University of Dhaka)
M.A. (University of Toledo)
Geography

Jonathan James Anderegg
B.S. (Bob Jones University)
M.A. (The Ohio State University)
Geography

Master of Landscape Architecture

Gizem Ozer
B.A. (Cukurova University)
Landscape Architecture

Catherine Marie Rolnicki
B.S.C.R.P. (The Ohio State University)
Landscape Architecture

Master of Learning Technologies

Mark A. Bolin
B.S. (Embry-Riddle Aeronautical University)
Education

Taylor Brogan
B.S.Honors (Arkansas State University)
Education

Katherine Elizabeth Dahs
B.A. (Lenoir-Rhyne College)
Education

Robert Matthew Long
B.S. (Susquehanna University)
Education

Jonathan Muddle
B.A. (The Ohio State University)
Education

Beatrice Betty Quinn
B.S.Educ. (The Ohio State University)
Education

Ashley Marie Smith
B.S. (Iowa State University)
Education

Master of Public Administration

Savannah Aimee Gonzalez-Caballero
B.A. (Sam Houston State University)
Public Policy and Management

Master of Public Administration and Leadership

Alleana Karen Bammerlin
B.Mus.Educ. (Otterbein University)
Public Policy and Management

Isabella Louise Blankenship
Pharm.D. (Drake University)
Public Policy and Management

Randall Scott Claar
B.A. (Thomas Edison State College)
Public Policy and Management

Zaki R. Hazou
B.A. (Kent State University)
Master's (Cleveland State University)
Public Policy and Management

Callie King
B.A., B.S. (Bowling Green State University)
Public Policy and Management

Catherine Molnar
B.Bus.Adm. (Malone University)
Public Policy and Management

Anthony John Pompous
B.A. (American Military University)
Public Policy and Management

Daniel Martin Pozniak
B.A. (The Ohio State University)
Public Policy and Management

Samuel Murray Shulaw
B.S. (Midway College)
Public Policy and Management

Master of Public Health

Hajera Afreeen
B.S. (University of Illinois at Urbana-Champaign)
M.D. (The Ohio State University)
Public Health

Julia Christine Baker
B.A. (Miami University)
Public Health

Ian Scott Brown

B.S.Biomed.Sci. (Brigham Young University)
Public Health

Samantha Ruth Charles

B.A. (The Ohio State University)
Public Health

Calesta Holloway

B.S.Pub.Hlth. (The Ohio State University)
Public Health

Jared Emilio Iacovetta

B.S.Pub.Hlth. (Kent State University)
Public Health

Emily Janovyak

B.A. (Berea College)
D.V.M. (Ross University School of Veterinary Medicine)
Public Health

Amy W. JZ

B.A. (Saint Mary's University of Minnesota)
M.D. (University of Wisconsin)
Public Health

Lily Corinne Kaufman

B.S. (The Ohio State University)
Public Health

Tyler Nils Lindskoog

B.S. (Virginia Polytechnic Institute and State University)
D.V.M. (The Ohio State University)
Public Health

Jianing Liu

B.A. (Northeastern University)
M.A. (Northern Arizona University)
Ph.D. (Arizona State University)
Public Health

Tiffany Lorraine Morton

B.A. (Tufts University)
Public Health

Bevughe Marian Onomake

B.A. (The Ohio State University)
Public Health

Rachel Amber Smith

B.S. (The Ohio State University)
Public Health

Anuja Sripameswaran

B.S. (University of Texas at Arlington)
M.S. (University of North Texas)
M.D. (University of Texas Medical Branch at Galveston)
Public Health

Amanda Kay Swanson

B.S. (Ohio Northern University)
D.D.S. (University of North Carolina)
Public Health

Rachel Emma Wolf

B.A. (Case Western Reserve University)
Public Health

Master of Science

Salma Bassem Elsharawy Abdelbaky

B.S. (Zewail City of Science and Technology)
Molecular, Cellular, and Developmental Biology

Sherif Abouzeid

B.S. (Helwan University)
M.S. (Niile University)
Electrical and Computer Engineering

Rawan Abu Sharia

B.S., M.S. (Philadelphia University)
Electrical and Computer Engineering

Ayobami Elizabeth Adeniyi

B.S. (Adekunle Ajasin University)
Ohio State Biochemistry Program

Ikenna Agbo

Bachelor's (University of California, Riverside)
Pharm.D. (West Coast University)
Translational Pharmacology

Godstand Aimiwu

B.Eng. (University of Benin)
Chemical Engineering

Serge Alhalbi

B.S. (Lebanese International University)
M.S. (University of Dayton)
Mechanical Engineering

Yousef Akram Alish

B.S.Pharm.Sci., B.S. (The Ohio State University)
Public Health

Madison Blake Allman

B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Arwa Saud A Almutair

B.Dent.Surg. (Alfarabi College)
Dentistry

Rami Alsabbagh

B.S. (University of Western Ontario)
D.D.S. (University of Toronto)
Dentistry

Ana De Jesus Alza Rodriguez

M.A. (University of Cincinnati)
B.S.Nurs. (Northern Kentucky University)
Nursing

Behzad Amirzade

Bachelor's (Amir Kabir University of Technology)
Industrial and Systems Engineering

Tuny Amphonechit

B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Sydney Renee Anderson

B.Eng. (University of Pittsburgh)
Biomedical Engineering

Maria Lynn Antonius

B.A. (The Ohio State University)
Human Sciences

Prokopios Argyris

Diploma, Postgrad.Dipl. (University of Athens)
Ph.D. (University of Minnesota)
Dentistry

Millie Lynn Ash

B.S.H.D.F.S. (The Ohio State University)
Human Sciences

Syeda Tanjila Atik

B.S., M.S. (Jahangirnagar University)
Electrical and Computer Engineering

Fatemeh Azadi

B.S. (Islamic Azad University)
M.S. (University of Tehran)
Chemical Engineering

Kassidy Dawn Aztergo

B.S. (Regis University)
Chemistry

Adrian Karym Bakhtar

B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Emma Caroline Bartley

B.A. (University of Notre Dame)
Psychology

Nicholas Lee Bean

B.S. (University of Missouri-Columbia)
Integrated Biomedical Science Graduate Program

Leonard Earl Belew IV

B.S.Aero.Eng. (University of Cincinnati)
Aerospace Engineering

Joseph Eric Choi Benson

B.S., D.D.S. (The Ohio State University)
Dentistry

Jacob Lee Bentley

B.S. (The Ohio State University)
Evolution, Ecology and Organismal Biology

Megan Elizabeth Berry

B.S. (University of Louisville)
Atmospheric Sciences

Alexander Michael Blackston

B.S. (Marietta College)
Materials Science and Engineering

Madison Marie Blake

B.S.Hlth.Reh.Sci. (The Ohio State University)
Public Health

Mora Boatman

B.S. (University of Missouri-Columbia)
Vision Science

Deborah Oluwakemi Bodunde

B.Dent.Surg. (University of Lagos)
Dentistry

Anna Elizabeth Bollag

B.S. (Georgia Institute of Technology)
Dentistry

Jeremy Taylor Borden

B.A. (Cornell University)
Physics

Adalyn Brown

B.S. (Arizona State University)
Molecular, Cellular, and Developmental Biology

Kevin Morrison Brown

B.S. (University of South Carolina)
Aerospace Engineering

Kallyn Alexandra Buckenmyer

B.A. (The Ohio State University)
Human Sciences

Madeline Grace Burghaze

B.S. (Indiana Wesleyan University)
Molecular, Cellular, and Developmental Biology

Kylee Taelyn Carden

B.S. (Massachusetts Institute of Technology)
Astronomy

Katherine Joyce Castelli

B.S. (Santa Clara University)
Human Sciences

Richard Isaac Cazares

B.S. (New Mexico State University)
Mechanical Engineering

Abigail Chadwick

B.S. (Marietta College)
Translational Pharmacology

Roy Chang

B.S. (State University of New York at Buffalo)
Public Health

Chong Chen

B.S. (Sichuan University)
Ph.D. (University of Science and Technology of China)
Electrical and Computer Engineering

Harrison Charles Childre

B.A. (Lubbock Christian University)
B.S. (Texas Tech University)
Aerospace Engineering

James J. Chung

B.A. (University of California, Santa Barbara)
Vision Science

Ghislain Cohen

B.S. (Oakwood College)
D.D.S. (Meharry Medical College)
Dentistry

Amber Yvonne Courtney

B.A. (Wake Forest University)
M.S. (North Carolina State University)
D.D.S. (Tufts University)
Dentistry

Jingyuan Dai

B.S.Honors (University of London)
B.Eng. (Beijing University of Posts and Telecommunications)
M.S. (University of Washington)
Integrated Biomedical Science Graduate Program

Preeti Darshita

B.Tech. (KIIT University)
Chemical Engineering

Mona Darvishi

B.S. (University of Tehran)
M.S. (Iran University of Medical Sciences)
Psychology

Moulisubhro Datta

B.S. (University of Calcutta)
M.S. (Indian Institute of Technology Bombay)
Molecular, Cellular, and Developmental Biology

David Thomas DeLisle

B.S. (Eastern Michigan University)
Electrical and Computer Engineering

Christina J. Dietz

B.S., M.S., Ph.D. (Clemson University)
Translational Pharmacology

Kevin Boyd Donnelly

B.S.Chem.Eng. (West Virginia University)
Chemical Engineering

Ryan Donnery

B.S. (Quinnipiac University)
Human Sciences

Emily Doss

B.S. (Michigan State University)
Chemistry

Yifan Dou
B.S. (The Ohio State University)
Computer Science and Engineering

Gerard Tyler Eatman
B.S.Educ. (The Ohio State University)
Human Sciences

Meghan Edwards
B.A. (Ohio Wesleyan University)
Environment and Natural Resources

Amanda Charnay Ervin
B.S.Hlth.Reh.Sci. (The Ohio State University)
Health and Rehabilitation Sciences

Zachary Warren Everett
B.S.Mat.Sci.Eng. (The Ohio State University)
Materials Science and Engineering

Rong Fan
B.S. (Indiana State University)
Translational Pharmacology

Xiao Chen Fan
B.S. (Xi'an Jiaotong University)
Electrical and Computer Engineering

Brian Connor Ferguson
B.S. (Colorado School of Mines)
Chemistry

Adam David Fisher
B.S. (Case Western Reserve University)
Physics

Lane Edward Flora
B.S.Chem.Eng. (The Ohio State University)
Chemical Engineering

Alexandria Elizabeth Foreback
B.S.Agr. (The Ohio State University)
Animal Sciences

Aubrey Marie Fox
B.S. (The Ohio State University)
Nursing

Isaiah Manuel Franco
B.A. (Wofford College)
Environment and Natural Resources

Andrew Thomas Freeman
B.S. (Hanover College)
Chemistry

Florence Jillian Freeman
B.S.Soc.Work (The Ohio State University)
Nursing

Michael Gabe
B.S. (Case Western Reserve University)
Physics

Emily Rose Gahagan
B.S. (Case Western Reserve University)
Translational Pharmacology

Tyra Gaines
B.S. (Georgia State University)
Translational Pharmacology

Ryan Kade Gallegos
B.S. (Utah State University)
Dentistry

Nanditha GayathriSrinivasan
B.Eng. (Anna University)
Biomedical Engineering

Callie Elizabeth Gernand
B.S. (Indiana State University)
Chemistry

Quinaya Destiny Glover
B.S.Hlth.Reh.Sci. (The Ohio State University)
Nursing

Morgan Denise Griffith
B.S. (Virginia Polytechnic Institute and State University)
Chemistry

Ally Marie Guiher
B.S. (The Ohio State University)
Translational Pharmacology

Brandi Fawn Hall
B.S., M.S. (University of Kentucky)
Doctorate (University of Louisville)
Dentistry

Fariha Musharrat Haque
B.S.Mech.Eng. (Bangladesh University of Engineering and Technology)
Mechanical Engineering

Abigail Rose Hershner
B.S. (Ohio Northern University)
Molecular, Cellular, and Developmental Biology

Jackson Emory Hise
B.S.Mech.Eng. (The Ohio State University)
Materials Science and Engineering

Alaysha Marsha Horne
B.S. (Oakland University)
Nursing

Abigail Marie Houser
B.S. (Saint Mary's College)
Chemistry

Shiva Houshmand
B.S. (University of Tabriz)
M.S. (K.N. Toosi University of Technology)
Electrical and Computer Engineering

Xucheng Hu
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Jingyi Huang
B.S. (Wuhan University)
Public Health

Thomas Jefferson Huddleston V
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Ryan Joseph Hudson
B.S.Educ. (The Ohio State University)
Human Sciences

Zachary Tomas Hunchuk
B.S. (Thiel College)
Chemistry

Hassan Iftikhar
B.S.Elec.Cptr.Eng. (University of Engineering and Technology, Lahore)
Biomedical Engineering

Kazi Aatish Imroz
B.S. (Indian Institute of Science)
Physics

Mirai Maeda Inaoka
B.S. (University of Illinois at Urbana-Champaign)
Horticulture and Crop Science

Jordan Earl Inskeep
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Jijeong Jeong
B.A., M.A. (Seoul National University)
Psychology

Cael Jones
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Aydan McKenzie Jordan
B.S. (Jacksonville University)
Human Sciences

Kyeong Joo Jung
Bachelor's (Yonsei University)
M.S. (State University of New York at Stony Brook)
Computer Science and Engineering

Meghna Kalra
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Haitham Kanj
B.Eng. (Lebanese American University)
Electrical and Computer Engineering

Megan Kerrigan
B.S.Nurs. (The Ohio State University)
Nursing

Ellie Grace Kidwell
B.S. (Kansas State University of Agriculture and Applied Science)
Animal Sciences

Jasmine L. King
B.A., B.S.Nurs. (University of Akron)
Nursing

Isabella Miina Kolodny
B.S. (Cleveland State University)
Molecular, Cellular, and Developmental Biology

Mia Lyn Kordowski
B.A. (The Ohio State University)
Biophysics

Koushik Kosanam
B.Eng. (Visveswaraiah Technological University)
M.S. (California State University, Northridge)
Materials Science and Engineering

Tithi Lai
B.S., M.S. (Indian Association for the Cultivation of Science)
Chemistry

Brandon Lee Lam
B.S.Educ. (The Ohio State University)
Human Sciences

Maya Langenecker
B.S. (University of Utah)
Translational Pharmacology

Hyunwoo Lee
B.S. (Korea Military Academy)
Computer Science and Engineering

Kaleb Hoyte Lee
B.S. (North Carolina State University)
Environment and Natural Resources

Sydney Maria Leon
B.S.Agr. (The Ohio State University)
Translational Pharmacology

Henry Leon Henao
Mech.Eng. (Universidad Nacional de Colombia)
Welding Engineering

Yanxi Liao
Bachelor's (Universidade de Macau)
Psychology

Katrina Lin
B.S. (University of California, San Diego)
Psychology

Nolan Robert Little
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Jialei Liu
B.Eng. (Chongqing University)
Electrical and Computer Engineering

Ningyi Liu
B.S. (The Ohio State University)
Statistics

Yiwen Liu
B.S. (Case Western Reserve University)
Chemistry

Yuan Liu
B.Eng. (China Agricultural University)
Electrical and Computer Engineering

Andrew Joseph Lorig
B.S. (Mount Mercy College)
Chemistry

Brenna Paige Loxley
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Allison Julie Lucas
B.S. (The Ohio State University)
Physics

Mikaela Raine Lujan
B.S. (University of South Carolina)
D.D.S. (University of California, Los Angeles)
Dentistry

Joshua Michael Lupi
B.S.Aero.Eng. (University of Cincinnati)
Aerospace Engineering

Christopher Steven Mangold
B.S. (Kentucky Wesleyan College)
Chemistry

Gannon Matthews
B.S.Educ. (The Ohio State University)
Human Sciences

Taylor Shay Matthews
B.S., M.S. (Eastern Kentucky University)
Chemistry

Heather Jean May
B.S. (Kansas State University of Agriculture and Applied Science)
B.S.Nurs. (Edinboro University of Pennsylvania)
Nursing

Reilly Shane McDowell
B.S. (Case Western Reserve University)
Physics

Evan Joseph McFadden
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Connor Dean McGee
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Connor Charles Geoffry McGowan
B.S. (The Ohio State University)
Anatomy

I'kia Keyon McKay
B.S. (Xavier University of Louisiana)
Chemistry

Victoria Lynn Menches
B.S. (Kent State University)
Chemistry

Quentin Hosea Merritt
B.S. (University of North Carolina at Greensboro)
Physics

Aimee Elisabeth Miley
B.A., B.S.H.D.F.S. (Miami University)
Human Sciences

Cassandra Marie Miller
B.S. (The Ohio State University)
Chemistry

Sophie Michelle Miller
B.S. (University of Georgia)
Chemistry

Robert Lee Milner
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Scott Douglas Mitchell
B.S. (Taylor University)
Chemistry

Kaylee Renee Montgomery
B.S.Agr. (The Ohio State University)
Animal Sciences

Andrew Michael Mulcahy
B.S.Bus.Adm. (The Ohio State University)
Human Sciences

Akshaya Narayanasamy
B.S., M.S. (Indian Institutes of Science Education & Research)
Chemistry

Muneebullah Nawaz
B.Engr. (National University of Sciences and Technology, Pakistan)
M.S. (King Abdullah University of Science and Technology)
Mechanical Engineering

Kate Neal
B.S. (University of Cincinnati)
Translational Pharmacology

Cara Nel
B.S. (University of Delaware)
Physics

Anthony Keith Ngo
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Tam Thanh Nguyen-Huynh
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Abigail Rae Miller Noonchester
B.S. (University of Cincinnati)
Chemistry

Celia Ward Nusekabel
B.S.Educ. (The Ohio State University)
Anatomy

Alec James Ogg
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Zianne Alisa Olverson
B.S. (The Ohio State University)
Molecular, Cellular, and Developmental Biology

Martha Valeria Ortega Zepeda
B.A. (Hanover College)
Chemistry

Zachary Ryan Osborn
B.S.Biomed.Eng. (The Ohio State University)
Biomedical Engineering

Jonathan L. Papa
B.A., B.S. (Thiel College)
Integrated Biomedical Science Graduate Program

Nicholas Stylianos Papakirk
B.S.Educ. (The Ohio State University)
Human Sciences

Michael Pappas
B.S.Cptr.Sci.Eng. (University of Minnesota)
Computer Science and Engineering

Jungweon Victoria Park
Bachelor's (Smith College)
Master's (Tufts University)
D.D.S. (Roseman University of Health Sciences)
Dentistry

Maria Lynn Park
B.A., D.D.S. (The Ohio State University)
Dentistry

Yashvi Patel
B.Pharm. (Gujarat Technological University)
Translational Pharmacology

Debadrita Paul
B.A., M.S. (University of Calcutta)
Molecular, Cellular, and Developmental Biology

Alison Leigh Peart
B.S.Agr. (The Ohio State University)
Plant Pathology

Madeline Christine Penna
B.S. (University of Kentucky)
Translational Pharmacology

Caitlyn Taylor Picard
B.S., M.S. (Miami University)
Health and Rehabilitation Sciences

Steven Taylor Poche
B.S. (Appalachian State University)
Physics

Aine Powell
B.F.A. (Miami University)
Translational Pharmacology

Gabrielle Rayne Pozza
B.S. (University of Maryland Baltimore County)
Chemistry

Kishore Prakash Sailaja
B.S.Cptr.Sci.Eng. (The Ohio State University)
Computer Science and Engineering

Tuyen Ngoc Thanh Quan
B.S. (The Ohio State University)
Anatomy

Francesca Racca
D.D.S., Master's (Universidade Estadual de Campinas)
Dentistry

Delaram Rashadfar
B.S.Mech.Eng. (Islamic Azad University)
Mechanical Engineering

Rajat Jaiprakash Rathi
B.Dent.Surg. (Maharashtra University of Health Sciences)
Dentistry

Selina Marie Reyes Flowers
B.S. (The Ohio State University)
Translational Pharmacology

Cameron Christopher Rich
B.S.Food.Sci. (The Ohio State University)
Food Science and Technology

Scott Ripperda
B.S. (University of Illinois at Urbana-Champaign)
M.S. (University of Alabama in Huntsville)
Geodetic Science and Surveying

Ainsley Rousseau
Bachelor's (Wheaton College Massachusetts)
Aerospace Engineering

Sonam Rustagi
B.S. (The Ohio State University)
Environment and Natural Resources

Emma J. Ruttendjie
B.S. (University of Wisconsin)
Welding Engineering

Christian Michael Sablak
B.S.Mech.Eng. (The Ohio State University)
Mechanical Engineering

Victoria Sabo
B.S. (Illinois Institute of Technology)
Chemistry

Lydia Faith Salsbury
B.S. (Texas A&M University)
Animal Sciences

Jose Alfredo Sanabria Gracia
B.S. (University of Puerto Rico)
Chemistry

Maria Eugenia Santiago-Padua
B.S. (University of Puerto Rico)
Horticulture and Crop Science

Emma Lucia Schell
B.A. (College of Wooster)
Chemistry

Kayla Grace Scott
B.S.Agr. (The Ohio State University)
Animal Sciences

Artun Sel
B.S. (Zonguldak Bulent Ecevit Univ)
M.S. (TOBB Economics & Technology University)
Electrical and Computer Engineering

Zahraa Shaghathi
B.Pharm. (Applied Science Private University)
Translational Pharmacology

Aminah Shahzad
B.S. (Textile Institute of Pakistan)
Human Sciences

Piyush Anil Kumar Sharma
B.S., M.S. (Sardar Vallabhbhai Nat In Tech)
Chemistry

Olaitan Comfort Shekoni
Diploma (Lagos State Polytechnic)
B.S.Honors (Fountain University)
Animal Sciences

Nazleen Sherali
Bachelor's (Liaquat University of Medical & Health Sciences)
Translational Pharmacology

Lindsey Marie Shimoda
B.S.F.A.B.E. (The Ohio State University)
Food, Agricultural and Biological Engineering

Nicholas Shonkwiler
B.S. (Wright State University)
Translational Pharmacology

Alexia Marques Silva
B.S., M.S. (Universidade de Sao Paulo)
Chemistry

Anil Singh
B.S.Mat.Sci.Eng. (The Ohio State University)
Welding Engineering

Simran Singh
B.S.Weld.Eng. (The Ohio State University)
Welding Engineering

Tatiana Danielle Slesnick
B.S.Env.Nat.Res. (The Ohio State University)
Environment and Natural Resources

Ryan Sonnabend
B.S. (Arizona State University)
D.D.S. (University of Washington)
Dentistry

John Robert Sotos
B.A. (Ohio Wesleyan University)
D.D.S. (The Ohio State University)
Dentistry

Ariana Nicole Spina
B.S. (University of Kentucky)
Food, Agricultural and Biological Engineering

Noura Srour
B.A. (Colby College)
B.Engr. (Dartmouth College)
Molecular, Cellular, and Developmental Biology

Emerie Jaede Stagner
B.S. (Pennsylvania State University)
Biomedical Engineering

Athena Irene Stamos
B.S. (The Ohio State University)
Integrated Biomedical Science Graduate Program

Alison Ross Starr
B.S.Hlth.Reh.Sci. (The Ohio State University)
Chemistry

Kyra MacKenzie Stillwell
B.S. (Miami University)
Welding Engineering

Muhammad Ahmad Sultan
B.S.Elec.Eng. (University of Engineering and Technology, Lahore)
Biomedical Engineering

I Cheng Sung
B.S. (Tajen University)
M.S. (National Yang Ming University)
Pharm.D. (The Ohio State University)
Translational Pharmacology

Nityasri Suresh
Bachelor's (Anna University)
Electrical and Computer Engineering

Dario Ante Susnjara
B.S.Aero.Eng. (The Ohio State University)
Aerospace Engineering

Amanda Kay Swanson
B.S. (Ohio Northern University)
D.D.S. (University of North Carolina)
Dentistry

Piyanadda Thipyapong
B.Engr. (Kasetsart University)
Aerospace Engineering

Nia Gabrielle Thomas
B.A. (The Ohio State University)
Human Sciences

Tiana Arielle Townsend
B.A. (Augustana University)
Physics

Pattama Saengsawang Ulrich
Diploma (Stamford School of Management)
B.S.Nurs. (The Ohio State University)
M.P.H. (Wright State University)
Environmental Science

Lauren Christine Vogelgesang
B.S.Nurs. (The Ohio State University)
Nursing

Madison Faith Von Deylen
B.A., B.S. (University of Kentucky)
Evolution, Ecology and Organismal Biology

Sarah Marie Wallentine
B.S.Aero.Eng. (Auburn University)
B.S.Nurs. (The Ohio State University)
Civil Engineering

Chao Wang
B.Engr. (University of Electronic Science and Technology of China)
Computer Science and Engineering

Kodithuwakku Arachchige Don Thiranya Lanka Wanigarathna
B.S. (University of Peradeniya)
Horticulture and Crop Science

Shivam Nitin Waske
B.S., M.S. (Indian Institute of Science Education & Research)
Chemistry

Maria Weibel
B.S.Nurs. (The Ohio State University)
Nursing

Zachary Hunter Weisensteal
B.S. (The Ohio State University)
Neuroscience Graduate Studies Program

Daniel James White
B.S. (Villanova University)
Chemistry

Sarah Veronica White
B.S. (University of Scranton)
Evolution, Ecology and Organismal Biology

Nicholas Andrew Wile
B.S. (Otterbein University)
Mechanical Engineering

Madalyn Olivia Wiley
B.S.Elec.Cptr.Eng. (The Ohio State University)
Electrical and Computer Engineering

Daniel Christian Wingert
B.S., M.S. (Miami University)
Electrical and Computer Engineering

Joshua Kent Winters
B.S.Agr. (The Ohio State University)
Agricultural Communication, Education, and Leadership

Lark Wuetcher
B.S.Agr. (University of Kentucky)
Horticulture and Crop Science

Weiwei Xiang
B.S. (University of Wisconsin)
Translational Pharmacology

Xiaoheng Yan
B.S. (Wake Forest University)
Aerospace Engineering

Yihang Yang
Engineer (Zhejiang University)
Electrical and Computer Engineering

Yutong Yang
B.S., M.S. (Jiangnan University)
Chemical Engineering

Jagadeesh Yedla
B.Tech. (Motilal Nehru National Institute of Technology)
Electrical and Computer Engineering

Serra Nur Yesilata
B.S.Chem.Eng. (Middle East Technical University)
Chemical Engineering

Ariel Renee Young
B.A. (Ohio Christian University)
Nursing

Julian Zapata-Hall
B.A. (Union College)
Statistics

Kaitian Zhang
Bachelor's (Nanjing Normal University)
Electrical and Computer Engineering

Zonghao Zhang
B.S. (Purdue University)
Chemical Engineering

Xiaochuan Zheng
B.A. (Macalester College)
Physics

Master of Social Work

Grant Monroe Ames
B.A. (The Ohio State University)
Social Work

McKenna Jean Archey
B.A. (Wilmington College)
Social Work

Madeleine Ruth Bashaw
B.A. (Brigham Young University)
Social Work

Anna Beckloff
Social Work

Dominique Chantel Bevelle
B.S.Nutrition (The Ohio State University)
Social Work

Rachel Braun
B.S. (Ohio University)
Social Work

Noah Robert Brown
B.S.Soc.Work (The Ohio State University)
Social Work

Ryleigh Breahnna Carlin
B.S.Soc.Work (The Ohio State University)
Social Work

Gabrielle Cesareo
Bachiller (Tiffin University)
Social Work

Vanessa Jade Childers
B.S.H.D.F.S. (The Ohio State University)
Social Work

Alexandra Rae Chrzanowski
B.S.Soc.Work (The Ohio State University)
Social Work

Jennifer Lynn Chudey
B.A. (Lourdes University)
Social Work

Kaylee Renee Cobb
B.A. (California State University, Sacramento)
Social Work

Diana Estephania Colin
B.A. (The Ohio State University)
Social Work

Kirsten Cook
B.S.Soc.Work (The Ohio State University)
Social Work

Reese Elizabeth Cooper
B.S.Hlth.Reh.Sci. (The Ohio State University)
Social Work

Caitlin Mary Cronin
B.S.Soc.Work (The Ohio State University)
Social Work

Patrice S. DeJesus
B.S.Soc.Work (The Ohio State University)
Social Work

Sarah Katherine Dement
B.F.A. (University of Cincinnati)
M.A. (University of Galway)
Social Work

Chad Jeremy Drach
B.S. (Western Kentucky University)
Social Work

Delia Eberhard
B.A. (Concordia University Texas)
Social Work

Natalie Eberhard
B.S.Soc.Work (The Ohio State University)
Social Work

Anna Charlotte Ehram
B.S.Soc.Work (The Ohio State University)
Social Work

Adeena Jessie Eisen
B.A. (George Washington University)
Social Work

Sophia Ann Elias
B.S.Soc.Work (The Ohio State University)
Social Work

Isabel Maria Falbo
B.S.Soc.Work (The Ohio State University)
Social Work

Elisabeth Ellen Farmer
B.A. (Wheaton College)
Master's (George Washington University)
Social Work

Nathan Flores
Bachelor's (Capital University)
Social Work

Jazmyne Flowe
B.A. (Otterbein University)
M.A. (Capella University)
Social Work

Marlee Kristina Franklin-Calhoun
B.S.Soc.Work (The Ohio State University)
Social Work

Esther Joelle Fultz
B.S.Soc.Work (Cedarville University)
Social Work

Grace Marguerite Gamble
B.S.Soc.Work (Bowling Green State University)
Social Work

Onaniah Jewel Garrett
B.S.Soc.Work (The Ohio State University)
Social Work

Joshua Gass
B.A. (San Francisco State University)
M.A. (University of New Orleans)
Social Work

Akasia M.D. Gazal
B.S.C.R.P. (The Ohio State University)
Social Work

Sophia Loretta Gephardt
B.S.Soc.Work (The Ohio State University)
Social Work

Saraswati Ghaley
B.S.Soc.Work (The Ohio State University)
Social Work

David Michael Gordon
B.S.Educ. (Bowling Green State University)
Social Work

Mark Steven Green
B.S. (Ohio University)
B.A. (Ohio Dominican University)
Social Work

Ashlee Hackworth
Bachelor's (Tiffin University)
Social Work

Rebecca Sunshine Hanssen
B.S. (Williams Baptist College)
M.A. (Pepperdine University)
Social Work

Rachel Alyse Harbaugh
B.A. (Eastern Washington University)
Social Work

Alexandra Rose Harris
B.S. (Purdue University Global)
Social Work

Layne Hart
B.S.Soc.Work (The Ohio State University)
Social Work

Regan Kennedy Hartz
B.S.Soc.Work (The Ohio State University)
Social Work

Kennedi Priscilla Hawkins
B.A. (Coastal Carolina University)
Social Work

Andrew Mark Henson
B.A. (Occidental College)
Social Work

Todd Hickerson
B.A. (Harvard University Extension School)
Social Work

Nicole Renee Houston
B.S.Nurs. (Bowling Green State University)
Social Work

Thomas James Howden
B.A. (University of Minnesota Morris)
M.A. (Minnesota State University Moorhead)
Social Work

Mercedes Le Idle
B.S. (Florida State College at Jacksonville)
Social Work

Danielle Lee Justice
B.S.Soc.Work (The Ohio State University)
Social Work

Sugamya Lakshmi Juvvignunta
B.S.Soc.Work (The Ohio State University)
Social Work

Jennifer Kauer
B.A., M.A. (University of Bonn)
Social Work

Catherine Frances Keppers
B.S. (Michigan State University)
Social Work

Chloe Elizabeth Knight
B.S.Soc.Work (The Ohio State University)
Social Work

Ava Marie Kramhoeller
B.S.Soc.Work (Miami University)
Social Work

Vivian Ka-Wing Kwong
B.S.Soc.Work (The Ohio State University)
Social Work

Ryanna Laidlaw
B.S., M.A. (University of Toledo)
Social Work

Roni Gal Levine
B.A. (The Ohio State University)
Social Work

Jasmyne Lindsey-Lail
B.S.Soc.Work (Miami University)
Social Work

Amanda E. Loch
B.A. (The Ohio State University)
Social Work

Sarah Colleen Maguire
Bachelor's (Youngstown State University)
Social Work

Emma Grace Maier
B.S.Soc.Work (The Ohio State University)
Social Work

Natousha Renee Mangum
B.S.Soc.Work (The Ohio State University)
Social Work

Sara Marvin
B.A. (Bowling Green State University)
Social Work

Sheila Marie Master
B.F.A. (The University of the Arts (in Philadelphia))
Social Work

Maria Cheyenne McCoy
B.A. (The Ohio State University)
Social Work

Samantha May McGee
B.S.Soc.Work (The Ohio State University)
Social Work

Emily Melissa McKinley
B.A. (University of Washington)
Social Work

Jordan Leigh McLane
B.S.Soc.Work (University of Cincinnati)
Social Work

Mahayla Dawn Mellott-Rodibaugh
Bachelor's (University of Northern Iowa)
Social Work

Christina Marie Koepke Mercer
B.S.Soc.Work (Youngstown State University)
Social Work

Lauren Mercer
B.A. (Columbia College)
Social Work

Janelle Hill Mercurius
B.S. (Andrews University)
Social Work

Abigail Miller
B.S.Nutrition (The Ohio State University)
Social Work

Mallory Mae Moore
B.S.Soc.Work (Ohio University)
Social Work

Hannah Neff
B.S.Soc.Work (Mount Vernon Nazarene University)
Social Work

Charlotte Michaela Nesbit
B.A. (University of Kentucky)
Social Work

Madyson Kristina Newsome
B.S.Soc.Work (The Ohio State University)
Social Work

Olivia Madison Nurre
B.S.Hlth.Reh.Sci., M.P.H. (The Ohio State University)
Social Work

Kimberly Ortnan
B.A. (San Francisco State University)
Social Work

Shequea Overall
Bachelor's (Grambling State University)
Social Work

Julianne Pece
B.S.Soc.Work (Xavier University)
Social Work

Tracy Peprah
Bachelor's (Lincoln University)
Social Work

Max James Pesto
B.S. (The Ohio State University)
Social Work

Shelby Pritts
Bachelor's (Youngstown State University)
Social Work

Samuel Ra
B.A., Bachelor's (Indiana University)
M.Divinity (Trinity Evangelical Divinity School)
Social Work

Nael Raihan
B.S. (California State University, Dominguez Hills)
Social Work

Alyssa Sati Ramoo
B.A. (City University of New York, Queens College)
Master's (Relay Graduate School of Education)
Social Work

Leslita L. Reed
B.S.Educ. (University of Cincinnati)
M.Educ. (Jones International University)
Social Work

Molly Ann Richards
B.S.Soc.Work (The Ohio State University)
Social Work

Greta De Roberts
B.S.Soc.Work (The Ohio State University)
Social Work

Schylar Marie Rowell
B.A. (Capital University)
Social Work

Kathy Miliagros Santana Rivera
B.S.Soc.Work (The Ohio State University)
Social Work

Daniella Noemi Santos
B.S.Soc.Work (The Ohio State University)
Social Work

Nur Farhin Sattar
B.A. (University of California, Los Angeles)
Social Work

Mackenzie Anne Schade
B.S. (Ithaca College)
Social Work

Katelin Elizabeth Schweitzer
B.S.Soc.Work (Capital University)
Social Work

Nadine Sheikh
B.S.Soc.Work (The Ohio State University)
Social Work

Malorie Snider Omasta
B.A. (Harvard University)
M.S. (University of Oxford)
M.D. (University of Pennsylvania)
Social Work

Summer Grace Snyder
B.A. (The Ohio State University)
Social Work

Emily Nicole Suchan
B.S.Soc.Work (The Ohio State University)
Social Work

Evan Patrick Sugrue
B.S. (Wittenberg University)
Social Work

Bethany Irene Tackett
B.S.Soc.Work (The Ohio State University)
Social Work

Sabrina Monique Torres
B.S. (Xavier University)
Social Work

Stephanie Jasmine Vazquez
B.A. (California State University, Stanislaus)
Social Work

Shania Dawn Vestal
B.S.Soc.Work (Wilmington College)
Social Work

Brittan Alexa Wawro
B.S. (Brigham Young University)
Social Work

Samuel Thomas Weinstein
Bachelor's (University of Kansas)
Social Work

Sierra Williams
B.S.Soc.Work (The Ohio State University)
Social Work

Kaylee Jayne Yoder
B.A., Bachelor's (Liberty University)
Social Work

Katherine Beverly Zenick
B.S. (The Ohio State University)
Social Work

Master of Sports Coaching

Ryan Marshall Butler
B.S. (Liberty University)
Human Sciences

Moustapha Faye
B.S.Educ. (The Ohio State University)
Human Sciences

Aiden Reid Hansen Bukata
B.S. (Rochester Institute of Technology)
Human Sciences

Spencer Adam Hill
B.S. (University of North Carolina at Asheville)
Human Sciences

Maxwell Logan Lomonico
B.S.H.D.F.S. (The Ohio State University)
Human Sciences

Paola Pineda Vazquez
B.S. (University of Texas at Austin)
Human Sciences

Madelyn Isabel Marie Wheeler
B.S. (University of Wisconsin)
Human Sciences

Master of Supply Chain Management

Suzanne F. Chuparkoff
B.A. (University of Michigan)
Supply Chain Management

Zac Meyers
B.S. (University of Cincinnati)
Supply Chain Management

Matthew Pierce
B.S. (Regis University)
Supply Chain Management

Maxwell Nelson Rodney
B.A. (The Ohio State University)
Supply Chain Management

Michael R. Trujillo
B.A. (University of Cincinnati)
Supply Chain Management

Master of Translational Data Analytics

Indi Malam Ngoudo Dagoul
B.S. (Widener University)
Translational Data Analysis

Specialized Master in Business

Holly M. Aguridakis
Diploma (Galen College of Nursing - San Antonio)
B.S. (Wayland Baptist University)
B.Bus.Adm. (Kent State University)
M.B.A. (Texas A&M University - Corpus Christi)
Business Administration: Analytics

Habiba M. Ali
B.S. (Franklin University)
Business Administration: Analytics

Luc Emerson Azen
B.S. (The Ohio State University)
Business Administration: Analytics

Lina Belouadah
B.A. (The Ohio State University)
Business Administration: Analytics

Kalaya Bennett
B.A. (Strayer University)
Business Administration: Analytics

Gregory John Bohurjak
B.A. (Miami University)
M.S. (Case Western Reserve University)
Business Administration: Analytics

Luke E. Borgemenke
B.Bus.Adm. (University of Cincinnati)
Business Administration: Analytics

Paige B. Brielmaier
B.A. (Denison University)
Business Administration: Analytics

Alexis Brianna Chambers
B.S. (Kent State University)
Business Administration: Analytics

Priya Chhetri
B.A. (The Ohio State University)
Business Administration: Analytics

Ryan Joseph Davis
B.S. (The Ohio State University)
Business Administration: Analytics

Sarah Tischler Dawson
B.S. (The Ohio State University)
Business Administration: Analytics

Conal Donovan
B.S. (Miami University)
Business Administration: Analytics

Sean P. Dosedel
B.S. (Miami University)
Business Administration: Analytics

Amanda M. Edwards
B.S., M.S. (James Madison University)
D.P.T. (Marymount University)
Business Administration: Analytics

Scott B. Eise
B.S. (Indiana University)
Master's (DePaul University)
Business Administration: Analytics

Ramon Mark Gatica, Jr.
Bachelor's (Texas Tech University)
Business Administration: Analytics

Alyssa Johanna Graves
B.A. (The Ohio State University)
Business Administration: Analytics

James Green
B.S. (Bellevue University)
Business Administration: Analytics

Joseph Alexander Green
B.S. (College of William and Mary)
Business Administration: Analytics

Grant James Gucker
B.S. (Bowling Green State University)
Business Administration: Analytics

Elizabeth Anne Hall
B.A., Pharm.D. (The Ohio State University)
Business Administration: Analytics

Samuel Dawson Knight
B.S. (Arizona State University)
Business Administration: Analytics

Matthew W. Leonard
B.A., M.A. (MidAmerica Nazarene University)
B.S. (DeVry University - Kansas City)
Business Administration: Analytics

Janelle T. Lightbourn
B.S. (Central State University)
Business Administration: Analytics

Abigail Linxwiler
B.S. (Cedarville University)
Business Administration: Analytics

Qiyao Lu
B.S.Bus.Adm. (The Ohio State University)
Business Administration: Analytics

Stephen D. Monroe
B.S. (University of Tennessee-Knoxville)
Business Administration: Analytics

Stacy C. Moore
B.S. (Ohio Dominican University)
Business Administration: Analytics

Joseph Morrison
B.A. (The Ohio State University)
Business Administration: Analytics

Niharika R. Patel
B.S. (Virginia Commonwealth University)
Business Administration: Analytics

Steven Prebonick
B.S.Bus.Adm. (The Ohio State University)
Business Administration: Analytics

Yushi Qiao
B.S. (The Ohio State University)
Business Administration: Analytics

Arun RajanBabu
B.S. (The Ohio State University)
Business Administration: Analytics

Kyle A. Richards
B.S. (The Ohio State University)
Business Administration: Analytics

Christine Ann Richardson
B.A. (The Ohio State University)
Business Administration: Analytics

Grant Michael Shepardson
B.A. (The Ohio State University)
Business Administration: Analytics

Kishore Srivathsa
B.Comr.Three (Janardan Rai Nagar Raj Vid)
Diploma (Tamilnadu Advanced Technical Training Institute)
Master's (William Carey University)
Business Administration: Analytics

Blake Andrew Stanaland
B.S.Bus.Adm. (The Ohio State University)
Business Administration: Analytics

Carl L. Stover II
B.S.Bus.Adm. (The Ohio State University)
Business Administration: Analytics

Mackenzie Hiltbrand Szudlo
B.S. (The Ohio State University)
Business Administration: Analytics

Kira Narisse Tavanello
B.S. (Ashland University)
Business Administration: Analytics

Mary Trabold
B.S. (Duquesne University)
Business Administration: Analytics

Peyton John Urbancic
B.S. (University of Tulsa)
Business Administration: Analytics

Troy Douglas Ward
B.S.Educ., B.S.Bus.Adm. (The Ohio State University)
Business Administration: Analytics

Brandi Warner
B.A. (American Military University)
Business Administration: Analytics

Jiqiang Wu
B.S., M.S. (University of Utah)
Business Administration: Analytics

Eugene Zheng
Bachelor's (University of Cincinnati)
Business Administration: Analytics

Povilas Zincenko
Diploma (Lithuania Business University)
B.S. (Technological University Dublin)
Business Administration: Analytics

This program is not an official graduation list.

This printed program lists students who were eligible to graduate for Summer Term 2025, as of 5:00 p.m., July 23, 2025, pending the outcome of final examinations and final grades. Therefore, it should not be used to determine a student's academic or degree status. The University's official registry for conferral of degrees is the student's permanent academic record, kept by the Office of the University Registrar, Student Academic Services Building, 281 West Lane Avenue, Columbus, OH 43210-1132.

College of Arts and Sciences

Dean: David G. Horn

**Dana Renga, Divisional Dean
Arts and Humanities**

**Susan V. Olesik, Divisional Dean
Natural and Mathematical
Sciences**

**Ryan D. King, Divisional Dean
Social and Behavioral Sciences**

Bachelor of Arts

Asisa Jama Abdi
Murtah Jama Abdirahman
Agbor Enow Agboayoh
Adelaide Agyemang
Faith Uwemabasi Akpan
Maryam Hassan Mohamed Al
Ramadhani
Summa Cum Laude
Salma Albezreh
Magna Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in
History
Amira Ali
Thomas Anton Almedina
Cum Laude
Asma Hamed S Almobiad
Magna Cum Laude
Kayla Marie Anderson
Cum Laude
Margaret Ruth Andrews
Magna Cum Laude
Issys Nicole Archie
Chloe Armentrout
Miles Aronovitz
Thomas Lewis Bader
Cum Laude
Ebony Chantel Banks

Caitlin Elizabeth Barber
Sienna Alyse Barnish
Caroline Beesten
Arav Bhatt
Lacy Rae Bilyeu
Irina Bothel
Magna Cum Laude
Andrew Russell Boudreau
Audrey Lynn Bowers
Summa Cum Laude
Ryan Bross
Dominic Anthony Carosielli
Walter Edward Carreker III
Olivia Ann Carriero
Summa Cum Laude
Alvina Sotia Chea
Siwei Chen
Saejin Chong
Joseph Cirino
Brandon Clayton
Joshua Irving Cochran
Magna Cum Laude
Molly Louise Conomy
Magna Cum Laude
Valeria Cordova
Abigail Kim Damewood
Francesca Decker
Owen Micheal Delmore
Magna Cum Laude
Emily Meghan Dempsey
Andrea Jean Downing
Benjamin Thomas Dragmen
Summa Cum Laude
Natalie Aretha Drake Boykin
Summa Cum Laude
Millie Ann Dube
Sophia Grace Dunks
Summa Cum Laude
Samuel Eshetu
Sarah Anne Esker
Summa Cum Laude
Luke Evans
Branson Charles Faul
Alessandra Helena Flevares
Madalyn Nicole Fredericks
Meagan Elizabeth Fuqua
Magna Cum Laude
Madelaine Gauthier
Cum Laude
Brianna Marie Gendics
Magna Cum Laude
JaReisha Arielle Gibson
Sharanayashree Giri
Seth Jamison Glover
Olivia Ann Goodlin
Chance Gray
Xijiangtong Guan
Juliana Gutierrez Mendez
Summa Cum Laude
Luke Ronald Guzy
Shelby Grace Hanthorn
Camryn Jai Harris
Suly Melissa Olvera Henriquez
Ellie Henze
Liam Hill
Magna Cum Laude

Alexia Elizabeth Honse Vaughn
Summa Cum Laude
Kaylin Jolie Howey
Cornelius Hubbard, Jr.
Melanie Hurtado Vargas
Cum Laude
Hadia Hussien
Melanie Mariah Iacoangeli
Cum Laude
Nadia Ibrahim
Magna Cum Laude
Suad Hassan Ibrahim
Wilberto Irizarry
Aidan Luke Irvine
Oluebubechukwu Peculiar
Victorious Iwegbu
Nijah Emami Jackson
J'Khai James
Hadijatou Jarjue
Changqingyuan Jiao
Magna Cum Laude
Brian Robert Johnson
Kyla Charis Johnson
Tara Lee Johnson
Lexis Grace Jordan
Andrew Kristin Joseph
Eiva Kabbani
Nicholas Alexander Kalas
Robert L. Kaleal IV
Theresa A. Kauffman
Gleb Kazartsev
Magna Cum Laude
Cameron Thomas Keck
Emma Nicole Kemp
Jordan Ryan Kightlinger
Myles Donovan King
Sadie Rose Klaff
Summa Cum Laude
with Honors in the Arts and Sciences
Carol A. Kleffner
Summa Cum Laude
Maxwell William Knauer
Lexi Paige Krisley
Jonas Fletcher Kolaja
Yongpeng Kong
Brandon Andrew Kopkas
Magna Cum Laude
Kelsi Leeana Krout
Kalidou Labghaly
Henry James Ledman
Summa Cum Laude
Marisa Jean Lemmon
Luxinyi Li
Jacob Theodore Lingnau
Lingling Liu
Mai Liu
Nicholas Michael Longano
Myah Mahari
Jenna Deanne Maher
Magna Cum Laude
Shahed Maheydat
Sara Hakeem Malin
Jairyn Kristina Mann
Sonali Manoharan
John Anthony Marino

Dayana Rubi Martinez Vargas
Janessa Christen Mathews
Rylie McCall
Cum Laude
Maya Elizabeth McClure
Ericka Angela Denise McFarland
Kassandra Elizabeth McKibben
Annika Skye McNicol
Magna Cum Laude
Jenna Ann Melville
Summa Cum Laude
Daniel Glenn Menges
Gabrielle Georgette Maria Merk
Summa Cum Laude
Siddhardha Satyanarayana Metta
Salma Mohamud
Stephanie Y. Montanez-Diaz
Camille Ashton Morrison
Sophia Muliolis
Cum Laude
Ellie Rachael Muñoz
Magna Cum Laude
Margo June Nagle
Summa Cum Laude
John Kenneth Nahrstedt
Jayanth Nandigala
Daniel Henry Neese
Cortnie Nicole Newman
Lyric Magdalena Neyer
Zaria Marie Nichols
Lorenzo Gabriel Nieves
Nicholas Sean O'Dell
Joshua Osterday
Alexander Thomas Panico
Sareg Panse
Magna Cum Laude
Daniel Christian Pappas
Summa Cum Laude
Adeline Catherine Pavlin
Bryce Pearlstein
Jasmina Pejic
Magna Cum Laude
Ariana Martha Penny
Madison Victoria Perlina
Myaia Danielle Peterson
Breanne Lee Petrowski
Magna Cum Laude
Mahathi Phanibhushan
Ruibin Pi
Cum Laude
Natalie Sue Piel
Briana Jade Povell
Cum Laude
Gabrielle Price
James Thomas Race
Alex Scott Raphaelson
Shivani Ravuri
Victoria Maria Regan
Cum Laude
Beckett Rickel
Shiloh Emerson Riderour
Trevor Alan Rogers
Max Aderly Roman
Chay Robert Rossing
with Research Distinction in Philosophy
with Research Distinction in Religious
Studies
Andreja Ruzic

Tiara Reann Sabo
Maia Zoya Saiter
Paulina Salazar Martinez
Meera Nicole Salem
Natalie Christa Schmitt
Cum Laude
Aleeza Michelle Schneider
Emma Grace Schwartz-Anderson
Summa Cum Laude
Danielle Erin Selzer
Rania Mohamed Sharif
Sadie Wood Sheridan
Cum Laude
Xenia Eloise Shuman
Magna Cum Laude
Evan Michael Slifer
Haley Ann Smith
Ty Juan Jerome Smith
Omid John Soleimanpour
Madison Leighann Stanley
Hailey Morgan Stapleton
Mitchell Alexander Stiefel
Abigail Katherine Stockmeier
Magna Cum Laude
Adrian Streciwlik
Cum Laude
Abigail Jeanne Struck
Gabrielle YOUNOPLU Tarr
Emily Samantha Tavarez
Michael Anthony Taylor
Michael Daniel Taylor
Sylvia Louise Taylor
Cum Laude
Kabrina Thompson
Emily Rose Thorsen
Mason Bailey Tirtonegoro-Potts
Makaeyla Touville
Aidan Thomas Tuck
Trevor William Turkovich
Otis Elizabeth Twilight
John Valko II
Jack Douglas VandeBerg
Bryce Xavier Vellky
George von Zedlitz
Ethan Christopher Walters
Nicholas James Walters
William Yuhao Wang
Aiyah Denae Watts
Magna Cum Laude
Amari D. Williams
Jaylon VanBuren Williams
Keondae Williams
Nolan Ellis Williams
Kalece Aaliyah Wills
Magna Cum Laude
Jared Woodrow Wilson
Korey Thomas Woods
Tyler John Woodward
YiJun Wu
Andrew Wurth
Ailing Xie
Cum Laude
Yilin Xu
Han Zhao
Ruiven Zhu
Cum Laude
Yibo Zhu

Bachelor of Arts in Journalism

Carly Jo Damon

Bachelor of Fine Arts

Alaina Nicole Craig
Sopheaveak Rey
Alena Jane Nicole Stubbs

Bachelor of Science in Design

Emily Grace Holt
Magna Cum Laude

Bachelor of Science in Atmospheric Sciences

Daniel William Baltes
Cum Laude

Bachelor of Science in Geographic Information Sciences

Maymuna Abdullahi Ahmed
Erik Britz
Cum Laude
Yordanos B. Mamo
Joschka Yang vom Hofe

Bachelor of Science

Raza Ahmed
Anas Alhomsi
Abdulla Ahmed Matar Khalfan
Alneyadi
Cum Laude
Sara Patricia Bauer
Magna Cum Laude
with Research Distinction in Earth Sciences

Madison Suzanne Bensman
Anya Rose Bertke
Hariti Brahmhatt
Laikyn Marie Bruner
Mykayla Renée Cassidy
Hui Chen
Magna Cum Laude
Jingdian Chen
Moti Chibsa
Cum Laude
Leslie Ann Clemens
Magna Cum Laude
Ryan Day
Logan Arthur DeNezza
Sophia Grace DiGiandomenico
Cum Laude
Bo Ding
Cum Laude

Ella Isalina DiSario
Magna Cum Laude
Owen Rafe Doyle
Courtney Nicole Earhart
Thomas Robert Elkin
Wasim Elsharkwy
Sophia Rose Exline
Magna Cum Laude
Aminata Faal
Sami A. Faour
Birik Mark Fliegelman
Liam Callahan Garrison
Magna Cum Laude
Danielle Gelin
Emma Jean Glauvitz
Jasritha Guddanti
Madilynn E. Hager
Cum Laude
Hasti Hooshiari
Magna Cum Laude
Mahin Shaimonti Hossain
Ruoxin Huang
Robert Thomas Huttner
Magna Cum Laude
Hyeongu Hwang
Magna Cum Laude
Fadumo Ibrahim
Nicholas James Irwin
Laiba Inas Ismail
Rahima Mohamoud Ismail
Kaileb Allen Jackson
Shaish Jamshaid
Adam Fethi Jmiai
Ella Juenger
Husni Hashem Ketaneh
Destiny Khalil
Cum Laude
Yo Seop Kim
Selin Ayla Kirbas
Jenna Rose Lapurga
Grace Elizabeth Le Penske
Darren Robert Leupp
Magna Cum Laude
with Research Distinction in Earth Sciences
Yihang Li
Shuang Liang
Yuhan Liu
Nolan Waltman Maag
Dayana Rubi Martinez Vargas
Jenna Ann Melville
Summa Cum Laude
Natalie Catherine Miller
Summa Cum Laude
with Honors in the Arts and Sciences
with Honors Research Distinction in Political Science
Somdutta Mukherjee
Ross Alexander Mullen
Kaitlyn Renee Murfitt
James Robert Myers
Cameron Nill
Janelle Serwah Nimako
Luca Nogueira

Oluwaleke Daniel Obayemi
Pengzhen Ouyang
Luc Alexandre Parrish
Magna Cum Laude
with Honors in the Arts and Sciences
Nguyen Nhi Lien Pham
Cum Laude
Grace Morgan Potter
Ayusha Pradhan
Aidan Uriah Presutti
Caitlin Mckenna Reickerd
Ethan Joseph Rekow
Lingwen Ren
Cassandra LeAnn Rose
Juliana Maria Sanchez-Radovanovic
Spencer Kevin Scanlon
Aidan Patrick Schmidt
Nasra Mahad Sheikh-Ibrahim
Jaclyn Sul-gee Sieck Shin
Summa Cum Laude
with Honors in the Arts and Sciences
Chongen Shu
Emily Irish Shuck
Cum Laude
Aaryan V. Singh
Hallie Piper Speer
Madison Irene Stretton
Hari Sai Anish Talluri
Chance Mackenzie Thorpe
Shane Tian
Magna Cum Laude
with Honors in the Arts and Sciences
Yue Tian
Isaiah William Tidjani
Cum Laude
with Honors in the Arts and Sciences
Sophia Angela Trzcinski
Nicholas Rann Tylka
Magna Cum Laude
Jake Edward Vilchinsky
Cum Laude
Sidney Nichole Washington
Cum Laude
Dylan Hunter Wells
Summa Cum Laude
with Honors in the Arts and Sciences
Andrew Michael Worpenberg
Miles Oliver Wurst
Hengyu Zhang

Associate of Arts

Joud Lourance Alhabashneh
Zoha Waseem Arain
Cum Laude
Elena Marie Arostegui
Summa Cum Laude
Correy Eli Ashbrook
John William Baker
Natonia Baker
Alaina Renee Barton
Magna Cum Laude
Collin Michael Bayer
Benjamin Thomas Bazan
Chase Aiden Blackburn
Jackson Thomas Borgerding
Magna Cum Laude

Riley Burchett
Bradley W. Burroughs
Taitym Ryhanna Byrne
Abigail Nicole Ciotti
Jennifer Coleman
Brycelyn Noelle Deickert
Julia Marie DePuy
Muskaan Kaur Gill
Cum Laude
Sophia Ruth Hance
Holly Ann Harra
Owen Michael Hart
Guinevere Raylen Jackson
Cameron Elizabeth Kinsey
Dylan Scott Laughery
Nadia Lowe
Destiny Martino
Mitchell George Mazzone
Summa Cum Laude
Alexis McMahan
Darian Miller
Keith A. Moore
Alexander Morehouse
Cum Laude
Yahye Abdulkadir Nur
Kylie M. Orr
Leanne Nicole Pastingh
Mahi Rahul Patel
Camden Grace Pauff
Jon Garrett Payer
Kaitlyn Rhoades
Savannah Ava Sheeley
Nasra Mahad Sheikh-Ibrahim
Oliver Blake Shores
Summa Cum Laude
Sanam Singh Sidhu
Carmelle Grace Castillon Smith
Magna Cum Laude
Kendall Alysee Smith
Brian Christopher Speckman
Karina Tellez-Sanchez
Summa Cum Laude
Katherine Lea Tibbals
Summa Cum Laude
Chayse Mackenzie Topy
Summa Cum Laude
Damon Eugene Wade
Lauren Ashley Walker
Danielle Christine Wuichner
Summa Cum Laude

The Max M. Fisher College of Business

Interim Dean: Aravind Chandrasekaran

Bachelor of Science in Business Administration

Daniel Adego
Katie Leigh Alexander
Magna Cum Laude

William Bennett Anderson
Chandini Asilynn Antal
Shakyla Azahra
Sydney Lincoln Ball
John Rees Bastian
Brayden Joseph Better
Magna Cum Laude
Jenna Marie Biedenbarn
Kvauev Booker
William James Borchers
Om Borkar
Julia Bowman
Zachary Bruni
Catherine Elizabeth Byrne
Wenqi Cai
Magna Cum Laude
Walter Carruthers, Jr.
Hugh Bryan Corrigan
Anthony Joseph Costanzo
Cum Laude
Taylor May Crouch
Magna Cum Laude
Feriehiwot Assefie Dagnew
Jillian Marie Davis
Alexander James Day
Owen Christopher Dickson
Yifei Dong
Cum Laude
Ryan Francis Dunn
Noah Zachary Emmenecker
Gianna Marie Fabio
Marco Giovanni Ferry
Joseph Connor Gaitten
Isaac Gayetsky
Magna Cum Laude
Joseph Domenic Grazia
Harsha Roghan Gunasekaran
Ibrahim Firas Habli
Cum Laude
Anna Marie Heiser
Cum Laude
Reilly Herbst
Luke Baker Houston
Ryleigh Jane Houston
Maxwell James Hutchins
Alexander Joseph Jamieson
Tarun Jarial
Byoungjun Jo
Magna Cum Laude
Kareena Joshi
Oumou Salamata Kane
Emily Elizabeth Kennedy
Sergio Landriscina-Johnson
Jonathan Michael Levene
Alex Michael Leyland
Cum Laude
Adam L. Lieberman
Zishuo Liu
Ruilin Lyu
Summa Cum Laude
Ruohan Ma
Magna Cum Laude
Aidan Gerrit McDonald
Joel Francis McElroy

Tyler Dwight McElroy
Adriana Medley
Jacob Mihaly
Grace Elizabeth Lee Moore
Hrushikesh Reddy Muskula
Nicholas Seth O'Brien
Nathan Christopher Ost
Cum Laude
George Oteng
Daniel Christian Pappas
Summa Cum Laude
Shrey Rohit Patel
Kyle Benjamin Pepera
Logan Daniel Rapp
Anas Rehmani
Isabella Anne Reniva
Zane Isaac Reynolds
Jonathan Michael Rusin
Ameer Salem
A'Maya Nicole Scott
Zachary Jacob Sechkar
Jackson Bryan Shepherd
Zijun Shi
Lawson I. Sidner
Gabriel Louis Siracusano
Jack Fitzgerald Slaughter
Cum Laude
Jordan Thomas Sopher
Erik Thomas Stern
Cum Laude
Cole Taglione
Montserrat Tlahuel-Flores
Jackson Richard Tomsic
Charles Gerald Von Sund
Magna Cum Laude
Kendall Marie Williams
Cum Laude
Alexander Wittenbrook
Wenrui Yan
Wen Fei Yang
Junyang Ye
Hao Yuan
Han Zeng
Jingyu Zhou

College of Dentistry

Dean: Carroll Ann Trotman

Doctor of Dental Surgery

Marjan Souayvixay
B.A. (The Ohio State University)

Bachelor of Science

Melinda Taylor Ashley
Jataysia Love Hitchcock
Kaitlin Rose Kelley
Amanda Maria Landon
Arina Dmitriyevna Peredreeva
Jaclyn Elyse Pierce
Mackenzie Marie Stover-Hanes

College of Education and Human Ecology

Dean: Donald B. Pope-Davis

Bachelor of Science in Health Promotion, Nutrition, and Exercise Science

Grace Ann Ritterspach

Bachelor of Science in Human Development and Family Science

Jordan R. Davis
Brianna Marie Gendics
Magna Cum Laude
Rabia Khan
Summa Cum Laude
Cotie Addyson McMahon
Chelsea Arlene Rager
Sam Robert Reitler
Wyatt Schmidt

Bachelor of Science in Human Ecology

Nicholas Richard Boehm
Brian Yuke Cao
Angelina Marie Coles
Mitchell Ewaska
Summa Cum Laude
Aiden Reese Hartley
Camilla Herrada
Andrew Wanamaker Hosbach
Summa Cum Laude
Gabriel Thomas Jasper
Josephine Marie Kaczkowski
Cum Laude
Ting Lin
Magna Cum Laude
Gabriel Louis Siracusano
Brayden Gabriel Ward
Noah Thomas Wiley
Issias Gebremeskel Yohannes

Bachelor of Science in Hospitality Management

Stephanie Lynne Berger
Magna Cum Laude
Nicholas Jackson Kotte
John Cornelius Lane III
Olivia Marie Madda
Isabella Romano

Bachelor of Science in Nutrition

Yupeng Ma
Jasmin Sophia Wang
Magna Cum Laude

Bachelor of Science in Education

Zella Belinda Bailey
Magna Cum Laude
Colby Reece Baumann
Payton Jonathon Beckman
Aaron Christopher Capocci
Luc A. Cossette
Jaret Dyer
Ava Corrinne Fortney
John Garrity
Magna Cum Laude
Justus James Goff
Stevie Iten
Demetrius Johnson
Landon M. Johnson
Samantha Noelle Keldsen
Thomas Richard Knezevic
Matthew Richard Joseph Kuban
Summa Cum Laude
Chelsea Marie Lively
Cum Laude
Sadie SuChun Loeffler
Misha Mahmood
Matthew Douglas Reider
Hafsah Aziz Rizvi
Magna Cum Laude
with Research Distinction
Jacob Richard Summers
Joe Louis Teague, Jr.
Brayden Zane Timko
Cum Laude
Jason Anthony Velazquez II
Cum Laude
Emillie Jade Waddell
Lucy Weeks
Cum Laude
Jack Clarence Zimmerman

College of Engineering

Dean: Ayanna Howard

Bachelor of Science in Aerospace Engineering

Milo Nguyen

Bachelor of Science in Architecture (Austin E. Knowlton School of Architecture)

Zachary Vaughan Zellner
Cum Laude

Bachelor of Science in Aviation

Donald Ray Brewer III
Carson Matthew Cox
Summa Cum Laude

Jonathan Yanwu Guo
Magna Cum Laude
Sheet Shailesh Patel
Cum Laude
Quentin Rucker
Cum Laude
Marissa Cori Wolff
Magna Cum Laude

Bachelor of Science in Biomedical Engineering

Olivia Faith Borowski
Magna Cum Laude
Kouta Mikhail Gorbach Tabata
Magna Cum Laude

Bachelor of Science in Chemical Engineering

Mia Adjei Leibold
Amelia Ann Smith
Hem Harshit Turakhia

Bachelor of Science in Civil Engineering

Jenna Nicole Easterwood
Cum Laude
Andrew John Thomann
Mary Jean Thomas

Bachelor of Science in Computer Science and Engineering

Muhammet Fatih Balsoy
Nina Michelle Bankovich
Neha Charka
Yuhao Du
Alexander Durbin
Marinna Ashley Hill
Nicholas Nathaniel Johnson
Nipun Reddy Jonnalagadda
Jacob Dylan Kolaczkowski
Devon De-Andre Lander
Erica Ahram Lee
Verich Van Luu
Ahmed Magzoub Mohamed
Nimit Nataraj
Mubarak Nur
Philip Onufriychuk
Lina Margarita Ordonez Aguiar
Brendan Pfahl
Magna Cum Laude
Javan Nathaniel Roundtree
Saurav Rafee Sabu
Cum Laude
Caleb Wesley Schetter
Alexander Thomas Wisser
Cum Laude
Raneem Esam J Zamzami
Cum Laude

Jiachen Zhang
Haibo Zhu

Bachelor of Science in Electrical and Computer Engineering

Lucas Barros Dos Santos
Nicholas Salvador Ianni
Zachary Thomas Schultz
Jun Xie

Bachelor of Science in Food, Agricultural, and Biological Engineering

Adriana Tamara Bruce
Chinyere Chukwuani

Bachelor of Science in Landscape Architecture (Austin E. Knowlton School of Architecture)

Abdul-Azeez Ahmad
Alessandra A. Thiemann

Bachelor of Science in Welding Engineering

Alexander Gabriel Niro

College of Food, Agricultural, and Environmental Sciences

Dean: Cathann A. Kress

Bachelor of Science in Agriculture

Neyshka Liz Aguilar Burgos
Cum Laude
Matthew Bryant Crisler
Olivia Catherine Eichelzer
Julia Michaela Hayes
Brooke Anna Hinkle
Elizabeth Anne O'Keefe
Emma Marie Rinehart
Blake Garrison Shade
Cum Laude
Samantha Jo Stack
Magna Cum Laude
Dominic Zaki Uddowlah
Cum Laude
Brock Williams
Nicole Shizuka Williams
Magna Cum Laude

Bachelor of Science in Construction Systems Management

Brandon P. Patton
Mark Tumash

**Bachelor of Science in Environment and Natural Resources
(School of Environment and Natural Resources)**

Christian Lytton Baisden
Joseph Aiden Ball
Maryellen Kimberly Black
Cum Laude

Evelyn Brown
Lilliana Teresa Exterovich
Baron Walter Funai
Fae Kathleen Hemlock
Ethan Frederick Herrel
Summa Cum Laude

Madelyn McDaniel
Tonya Ajalon Messam
Bradley Patrick Moses
Maximillian Reed Reed
Margaret Clementine Rundio
Cum Laude

Rico Pascal Schneider
Zachery Louis Shields
Michael Kelly Woods

**Associate in Applied Science
(Agricultural Technical Institute- Wooster)**

Emma LeeAnn Givens
Casey Richard Indermuhle
Cum Laude

Seth Robert Jokinen
Jehu Marvin Ramsier
Magna Cum Laude

Brock P. Rising
Caleb Stockman
Ileana Eliza Weber

**Associate of Science
(Agricultural Technical Institute- Wooster)**

Kahlen Elyse Burns
Magna Cum Laude
Jack Edward Huston
Christopher Samuel McKenzie
Mason Wayne Prouty
Rebecca Elaine Staley

College of Medicine

Dean: Carol R. Bradford

Doctor of Medicine

Abena Oforiwaa Minta
B.S. (The Ohio State University)

School of Health and Rehabilitation Sciences

Bachelor of Science in Health and Rehabilitation Sciences

Mohamed Ahmed Ahmed
Cum Laude
with Honors in Health and Rehabilitation Sciences

Ariana Martina Alberti
Madison Dawn Almond
Cum Laude

Sophia C. Arabo
Abigail Mae Barr
Magna Cum Laude

Lily Ann Block
Sienna Brunicardi
Cum Laude

Owen Bruce Conley
Deanna Alexandra Covelli
Ali Hamza Dada
Cum Laude

Riley Josephine Dunne
Mackenzie Everett
Cum Laude

Jaime Renee Gardner
Riley Harrison Goff
Yusra Hamidi
Badra Mohamud Haybe
Cum Laude

Olivia Nicole Heimann
Ethan Holka
Cum Laude

Lorena Jaramillo Jamaica
Lubna Mahmood Jasim
Alexander Adam Jasser
Kylie Marie Katafiasz
Cum Laude

Lauren Grace Kotlyn
Evan Jacob Lubinsky
Kylie Marie McClain
Magna Cum Laude

Zachary Michael McGrath
Cum Laude
Sacdiya Mohamed
Cum Laude

Katelyn K. Mohr
Ashton Rose Nair
Angelina J T Olivera
Cum Laude
Dahianna Mercedes Ontaneda Delgado

Ramy Saisurya Pandrangi
Khushi Niralkumar Patel
Magna Cum Laude

Joseph Reho
Remy Roscoe-Stewart
Ryan Schwenning
Emily Elizabeth Smith
Cum Laude

Wajeeha Sohail
Charley Lynn Sullins
Magna Cum Laude

Trey Ward
Alyssa Wheelock
Magna Cum Laude
Nashell Simone Wilson
Magna Cum Laude

Megan Wrathner
Cum Laude
Jenna Beth Zunic
Magna Cum Laude

College of Nursing

Dean: Karen M. Rose

Bachelor of Science in Nursing

Eugenia Adjai Anane Appiah
Lindsay Marie Bissell
Darrell Boyd
LaRaisha Marie Brown

Ashley Nichole Cheesebrough
Lisa D'Onofrio
Cum Laude

Dadhi Dangal
Hannah Lenore Farkas
Chelsea Hope Fashempour
Lucy Margaret Fowler
James C. Geron
Lauren Gierhart
Alyssa D. Graham
Amanda M. Hale
Lindsey Mae Hamman
Aubrey Lanae Hill
Korey Horne
Kirsi June Jackson
John Oboragware Joe-Ovbiye
Kryztoff Kovacs
Cindy Kuo
Stephanie Marie Lewis
Summa Cum Laude

Cody McCormick
Nicholas Michael Meyer
Amanda Moore
Jennifer Frances Morgan Pielhau
Hawa Musah
Monica Oyata
Ellen Osei
Candice M. Piros
Victoria I. Powell
Kelly Wan Shur
Magna Cum Laude

Isabel C. Sufilka
Allison Suzanne Sutton
Magna Cum Laude

Jordyn White
Shannon Michelle Wunderlich

College of Pharmacy

Dean: Deanna L. Kroetz

Doctor of Pharmacy

Weiwei Xiang
B.S. (University of Wisconsin)

John Glenn College of Public Affairs

Dean: Trevor L. Brown

Bachelor of Arts

Nicholas William Buehler
Magna Cum Laude

Kylie Hayes
Summa Cum Laude
with Honors in Public Affairs

Sarah Renee Mouncey
Caitlin Rose Percival
Magna Cum Laude

Bachelor of Science

Hunter Anthony Mattin Miller

College of Public Health

Dean: Paula H. Song

Bachelor of Science in Public Health

Damilola Mackenzie Aleator
Nicholas Francis DiPaolo
Cum Laude
Sydney Galusha
Magna Cum Laude

College of Social Work

Dean: David A. Jenkins

Bachelor of Science in Social Work

Anna Magdelin Bielanski
Kyla Michelle Carmel
Magna Cum Laude

Cicare Dechehlte Clayton
Cum Laude

Mollie Couch
Cum Laude
Gavri Ella Cox
Hayden Dranschak
Samantha Mae Fechner
Magna Cum Laude

Mason Derek Gastesi
Mark A. Hall
Dezerai Kyla CaRon Harris
Miranda Grace Hundley
Hannah Kern
Magna Cum Laude

Poorvaja Mahesh
Tristan Leigh Maynard
Summa Cum Laude
with Honors Research Distinction in Social Work

James Eric McCullough
Ava Marie Montemarano
Zebulan Jamal Morgan
Jude Marley Ross
Magna Cum Laude

Tamika Rucker
Laura Jean Simpkins
Tyesha Sullivan
Magna Cum Laude

Abram Clark Swanger
Antonio La Mar Travis
Hannah Zarina Weekly

College of Veterinary Medicine

Dean: Rustin M. Moore

Doctor of Veterinary Medicine

Kaylene Judith Milano
B.S. (State University of New York's College of Technology at Canton)

Candidates to be
Commissioned in
the Armed Forces

United States Air
Force

Second Lieutenant
United States Air Force

Jack D. VandeBerg

Graduates with Honors

Criteria for graduating with honors are listed below. Grade-point averages (GPA) are based on the student's penultimate semester.

Summa Cum Laude designates those who earned a 3.9 GPA or better.

Magna Cum Laude designates those who earned a 3.7 GPA or better.

Cum Laude designates those who earned a 3.5 GPA or better.

With Honors in the Arts and Sciences requires successful completion of the Arts and Sciences Honors Contract and graduation with a 3.4 GPA or better.

With Honors in Business/Accounting requires successful completion of a prescribed honors program of study and graduation with a 3.5 GPA or better.

With Honors in Education and Human Ecology requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Honors in Engineering requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Food, Agricultural, and Environmental Sciences requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Medicine denotes successful fulfillment of the College of Medicine Honors Program tenets and a 3.4 cumulative GPA or better.

With Honors in Nursing requires the successful completion of a prescribed honors program of study, completion of research culminating in a thesis and presentation of findings, and graduation with a 3.4 GPA or better.

With Honors in Pharmaceutical Sciences requires successful completion of the BSPS Honors Contract and graduation with a 3.5 GPA or better.

With Honors in Public Affairs requires successful completion of an honors experience contract and graduation with a 3.4 GPA or better.

With Honors in Public Health requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Honors in Social Work requires successful completion of a prescribed honors program of study and graduation with a 3.4 GPA or better.

With Distinction requires successful completion of an undergraduate thesis and a 3.4 GPA or better.

Summary of Degrees and Certificates

Summer Term Commencement – 2025

College	Degree/Certificate	Degree/Cert. Total	Summer Term 2025 College Total
Graduate School	D.M.A.	1	
	Ph.D.	265	266
	Au.D.	1	Doctoral
	D.N.P.	1	
	O.T.D.	1	
	M.Stdy.Law.	10	
	M.Appl.Neurosci.	5	
	M.A.	68	
	M.B.A.	58	
	M.C.R.P.	1	
	M.Clin.Res.	14	3
	M.Eng.Mgt.	5	Professional
	M.E.N.R.	1	
	M.F.A.	12	
	M.G.I.S.T.	2	
	M.Land.Arch.	2	
	M.Learn.Tech.	7	
	M.P.A.	1	
	M.P.A.L.	9	
	M.P.H.	17	633
	M.S.	246	Masters
	M.S.W.	113	
	M.Sprt.Coach	7	
	M.Supp.Chn.Mgt.	5	
	M.Trans.Data.Analy.	1	
	Spec.M.Bus.	49	
	Cert.Asst.Rehab.Tech.	2	
	Cert.Biomed.Inf.	3	
	Cert.Biostat.	1	
	Cert.Clin.Res.Mgt.	5	43
	Cert.Crim.Just.Adm.	1	Certificates
	Cert.Env.Assmt.	1	
	Cert.GIS.Tech.	6	
	Cert.Global One Health	1	
	Cert.Hlthcr.Ldrshp.Innov.	5	
	Cert.Marine Sci.	1	
	Cert.Min-MBA.Hlthcare	2	
	Cert.Neuroscience	5	
	Cert.Pub.Mgt.	8	
	Cert.Semiconduct.Opt.	1	
	Cert.Usabil.User.Exp.Hlth.	1	945
Arts and Sciences, College of	B.A.	233	
	B.A.Journal.	1	
	B.F.A.	3	
	B.S.Design	1	
	B.S.Atmos.Sci.	1	
	B.S.Geog.Info.Sci.	4	
	B.S.	100	
	A.A.	52	
Business, Fisher College of	Cert.Div.Eq.Incl.	6	401
	B.S.Bus.Adm.	92	92
Dentistry	D.D.S.	1	
	B.S.	7	8
Education and Human Ecology	B.S.H.P.N.E.S.	1	
	B.S.H.D.F.S.	7	
	B.S.Humn.Ecol.	14	
	B.S.Hsp.Mgt.	5	
	B.S.Nutrition	2	
	B.S.Educ.	27	56
Engineering	B.S.Aero.Eng.	1	
	B.S.Arch.	1	
	B.S.Aviation	6	
	B.S.Biomed.Eng.	2	
	B.S.Chem.Eng.	3	
	B.S.Civ.Eng.	3	
	B.S.Cptr.Sci.Eng.	25	
	B.S.Elec.Cptr.Eng.	4	
	B.S.F.A.B.E.	2	
	B.S.Land.Arch.	2	
Food, Agricultural, and Environmental Sciences	B.S.Weld.Eng.	1	50
	B.S.Agr.	12	
	B.S.C.S.M.	2	
	B.S.Env.Nat.Res.	16	
	A.A.S.	7	
Natural Resources, School of Agricultural Technical Institute	A.Science	5	42
Medicine Health and Rehabilitation Sciences, School of	M.D.	1	
	B.S.Hlth.Reh.Sci.	44	
	Cert.Asst.Rehab.Tech.	4	
	Cert.Hlth.Rev.Data.Anlyst.	1	
	Cert.Usabil.User.Exp.Hlth.	1	51
Nursing	B.S.Nurs.	36	
	Cert.Reg.Nur.Primary Care	1	37
Pharmacy	Pharm.D.	1	1
Public Affairs, John Glenn College of	B.A.	4	
	B.S.	1	5
Public Health	B.S.Pub.Hlth.	3	3
Social Work	B.S.Soc.Work	24	24
Veterinary Medicine	D.V.M.	1	1
Total Degrees and Certificates		1,716	1,716
Total Degrees this Term		(not including certificates)	1,660
Total Degrees since 1878		(not including certificates)	898,456
Total Degrees during Last Decade		(not including certificates)	168,796

The Academic Costume

The colorful ceremonies of The Ohio State University commencements derive from practices originating in the Middle Ages. When European universities were taking form in the 12th and 13th centuries, the scholars were usually clerics, and consequently they adopted costumes similar to those of their monastic orders. Cold halls and drafty buildings called for caps and floor-length capes with attached hoods, and the sobering influence of the church probably resulted in the staid character of the caps and gowns.

As the control of the universities gradually passed from the church,

some aspects of the costumes took on brighter hues. Old prints and engravings, however, reveal a strong similarity between the regalia worn in early universities and that of the present day.

In light of our nation's English heritage, academic costume has been in use in the United States since colonial times. To establish a standard of uniformity in regard to the practice, an intercollegiate commission was formed to prepare a code for caps, gowns and hoods that has since been adopted by all academic institutions.

Originally round, the shape of the cap is now the familiar mortarboard

square — a shape that, according to ballad folklore, resembles a scholar's book. Legend also has it that the privilege of wearing a cap was the initial right of a freed Roman slave; the academic cap, therefore, has become a sign of the freedom of scholarship. The flowing gown has become symbolic of the democracy of scholarship, for it covers any dress that might indicate rank or social status. The hood, reserved at The Ohio State University for those receiving doctoral and master's degrees, not only indicates the type of degree, but also is lined with the official colors of the university.

The Gown

Bachelor: The bachelor gown is black, full-cut with long pointed sleeves.

Master: The master gown is black, long or short sleeves, with an arc-shaped panel extended for each sleeve.

Doctor: The Ohio State University Doctor of Philosophy, Doctor of Nursing Education, Doctor of Musical Arts, and Doctor of Nursing Practice gown is scarlet with gray velvet panels on the front and three velvet bars on each sleeve. Other doctor gowns are black with velvet panels and bars, the color of which is distinctive of the field of study.

Honors Emblem

The Ohio State University honors emblem is a scarlet and gray tasseled braid (honor cord) worn over the gown. Students eligible for this curricular honor are those graduating *summa cum laude*, *magna cum laude*, and *cum laude*. At the discretion of their college, students graduating with distinction or with honors may also be eligible.

The Hood

Bachelor: Three feet long with a two-inch-wide velvet edging.*

Master: Three and one-half feet long with a three-inch-wide velvet edging.

Doctor: Four feet in length with a five-inch-wide velvet edging and panel at the sides.

The lining of all hoods, which is folded out, bears the official colors of the institution granting the degree. The color of the velvet indicates the field of study.

* Not usually worn by candidates for a degree.

Cap and Tassel

Candidates for degrees at The Ohio State University wear the black mortarboard with a tassel whose color is distinctive of the degree being received. The tassel colors are as follows:

Graduate School (PhD)	Gray
(Others)	Black
College of Arts and Sciences	
BA	White
BA Journalism	Crimson
BAE, BFA	Brown
BM, BME	Pink
BS, BS Design, BS Atmos.Sci., BS Geog.Info.Sci.	White
Fisher College of Business	Drab
College of Dentistry	Lilac
College of Education and Human Ecology	
Education	Light Blue
Human Ecology	Maroon
College of Engineering	Orange
Knowlton School of Architecture	Blue-Violet
College of Food, Agricultural, and	
Environmental Sciences	Maize
School of Environment and	
Natural Resources	Blue-Green
Moritz College of Law	Purple
College of Medicine	Green
School of Health and Rehabilitation Sciences	Green
College of Nursing	Apricot
College of Optometry	Seafoam Green
College of Pharmacy	Olive Green
John Glenn College of Public Affairs	Peacock Blue
College of Public Health	Salmon
College of Social Work	Citron
College of Veterinary Medicine	Gray

The gold tassel is worn frequently by those holding the doctoral degree and by college and university administrative officers.



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(The expiration date of each trustee's term is given in parentheses.)

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Pierre Bigby (2031)
Juan Jose Perez (2031)
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Jessica A. Eveland, secretary

Photography

Photographs may be taken from the stands at any time during the ceremony. However, only press photographers are permitted on the arena floor. Guests are asked to be courteous and respectful of all those wishing to take photographs.

Complimentary Programs

A limited number of programs are available on a first-come, first-served basis. Requests should be sent to the Office of Commencement and Special Events, 1060 Blankenship Hall, 901 Woody Hayes Drive, Columbus, OH 43210-4016.

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Wexner Medical Center
Executive Vice President
The Ohio State University

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Mansfield

Donald B. Pope-Davis
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Human Ecology

Karen M. Rose
Dean, College of Nursing

Jennifer E. Schlueter
Dean and Director, Ohio State Marion

Matthew J. Smith
Dean and Director, Ohio State Newark

Paula H. Song
Dean, College of Public Health

Mary E. Stromberger
Vice Provost for Graduate Education
Dean, Graduate School

Carroll Ann Trotman
Dean, College of Dentistry

Margaret M. Young
Dean and Director,
Ohio State Lima

Karla Zadnik
Dean, College of Optometry

Pomp, circumstance, and other songs of a lifetime

(continued from inside front cover)

I say, rather, the richness of us,
precious difference, the grand multiplicity
of selves that balance this globe
and enable it to spin true. Grandson
of peasant immigrants, I was given

the opportunity to earn a doctorate
in English literature from Ohio State—
because my family labored long nights
around the kitchen table trying to learn
this arduous English. I sat where

you're sitting twenty-six years ago.
Bob Dylan and Smokey Robinson got me
through. Yes, it took a prophet and Miracles!
My son earned an OSU Ph.D. in history.
Now you, graduates, are being honored—

by degrees. We've all come together
around the kitchen table of Ohio State.
Ohio, Round on the ends and high
in the middle. For the years to come
we'll sing together, Beautiful Ohio,

in dreams again I see, Visions of what
used to be. These psalms, sacred thoughts
of our tribes, 78's and 33's, tapes,
CD's—they take up space in shelves
of our skulls, our hearts. They remind us

we want a song beyond the run-
of-the-mill thrill, the moment throbbing
with pleasure or bathed in the blues.
We ache for something grander than
pure selfishness. Songs sung for one

alone are not true music. Arias shared
are music of the spheres, ways of saying
to another something from the soul.
Of course the Buckeye Battle Cry
is there. Drive, drive on down the field,

Men (and women!) of the Scarlet
and Gray. Well, you drove on down
the field, and you drove up and down
the streets, around and around
crowded lots, looking for a place to park,

and you searched our dark, ancient library
for a decent place to study. My wife,
Mary's, father marched in the first
"Script Ohio," in 1936. He's here today
with us, blowing his horn, I can't help

but feel, as is the sweet mother
I lost last year, the one who gave me
the stars. Today's music makes us think
of the debts we owe, and never can repay.
So many of us would not be here

were it not for the lullabies and songs
of dear parents, their parents, theirs.
Some are here today in the flesh.
Many are not. We mourn them with cadences
of our hearts. Think how many people

sang before us, gave us a name, a voice,
taught us the right words. We must
cherish them by remembering every song.
When we sing to others, we honor
our fathers and mothers, thank them

for this day of profound scarlet and gray
pomp and circumstance. O, come
let's sing Ohio's praise, And songs
to Alma Mater raise. Alma mater.
Ohio State is our sweet, nurturing mother.

We came of age here, with her help.
Well, Mother, we love you, but, like,
it's time we moved out, got a place
of our own. You're standing there,
Mom, gray hair, eyes scarlet

from crying. We won't forget you.
Now, even though this ceremony
means we're being weaned, taken off
the nipple, let's take care to cherish her
all our days. Let's remember

the words to the songs she taught us,
and pass them on. We'll remember
always, Graduation Day. Summer's heat,
and winter's cold, The seasons pass,
the years will roll, Time and change

will surely show How firm thy friendship,
O-hi-O. We call that little number
Carmen Ohio. Carmen means song
in Latin. You've worked hard; she
is your reward; today is your reward.

You're filled to overflowing with
the notes, the poems we've written
together. You know the score.
Continue to work hard for yourselves,
and one another. Find the ones who need

you to sing to, for them, in the world.
Graduates, this joyful litany, this hymn
our ancestors collaborated on with us,
the calling of your name today is music
to our ears. Sing that name proudly

all your days, as if your life depended
on it. It does, you know. It has been
an honor for me to speak—and sing—
to you today. Thank you, graduates,
and, again, Congratulations.



THE OHIO STATE
UNIVERSITY

APPENDIX III



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

June 4, 2025 – Legal, Audit, Risk and Compliance Committee Meeting

Members Present:

Elizabeth P. Kessler
Bradley R. Kastan

Juan Jose Perez
Kendall C. Buchan

John W. Zeiger (ex officio)

Members Present via Zoom:

Michael F. Kiggin

Amy Chronis

Members Absent: N/A

PUBLIC SESSION

The Legal, Audit, Risk and Compliance Committee of The Ohio State University Board of Trustees convened on Wednesday, June 4, 2025, virtually and in person at Longaberger Alumni House on Ohio State's Columbus campus. Committee Chair Elizabeth Kessler called the meeting to order at 2:00 p.m.

Item for Discussion:

1. External Audit Update: 2025 Audit Plan: Mr. David Gagnon, lead engagement partner and national industry leader for higher education at KPMG, outlined the timeline and process of the university's external audit for the fiscal year ending on June 30, 2025. The plan is consistent with last year's effort as far as focus areas (investments and patient accounts receivable). The teams at Ohio State and KPMG are also consistent, which will be beneficial to both organizations throughout the audit. He then discussed the new GASB standard for compensated absences and the university's single audit.

(See Attachment I for background information, page 191)

Item for Action:

2. Approval of Minutes: No changes were requested to the March 5, 2024, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.

EXECUTIVE SESSION

It was moved by Ms. Kessler and seconded by Mr. Kastan that the committee recess into executive session to consult with legal counsel regarding pending or imminent litigation; to consider business-sensitive trade secrets; and to discuss personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Ms. Kessler, Mr. Kastan, Mr. Kiggin, Mr. Perez, Dr. Buchan, Ms. Chronis and Mr. Zeiger.

The committee entered executive session at 2:09 p.m. The meeting adjourned at 5:24 p.m.



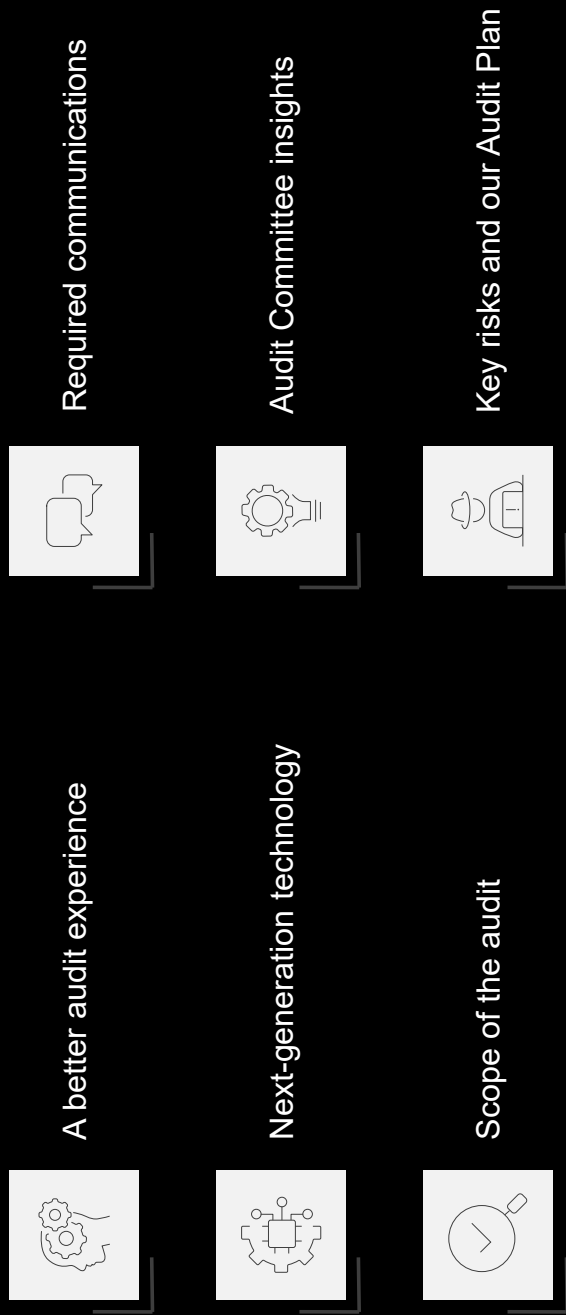
The Ohio State University

Discussion with those charged with governance

Audit plan and strategy for the year ending June 30, 2025

June 4, 2025

Key themes for our discussion

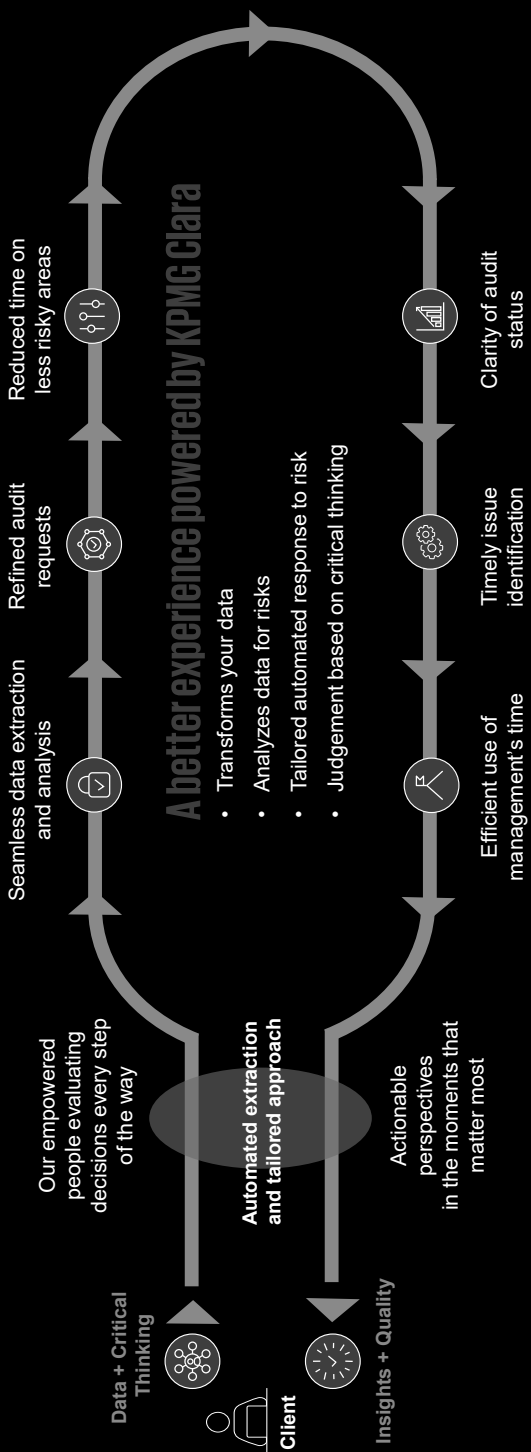


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How we work- Creating value for you

Accelerating the future of audit with our technology-driven platform, empowered by strategic partnerships (e.g., Microsoft and MindBridge)



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Engagement management to fit your team

KPMG and the University have a joint interest in driving quality and eliminating peaks in workload, particularly in the post year-end period. KPMG’s proprietary Engagement Management Life Cycle (EMLC) tool allows us to :



Communicate and coordinate with all levels of management and the LARC, including updates on key milestones



Accelerate work to drive quality and an exceptional client experience



Improve coordination between the University’s components by accelerating, streamlining, integrating, and standardizing requested evidence



We’re working with management throughout the University and its components to complete much of our risk assessment and interim testing before June 30.

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The OSU engagement team



Dave Gagnon
Lead Engagement Partner
National Industry Leader –
Higher Education



Jane Kim
Lead Senior Manager



Darryn Bradt
University Manager



Madelyn Fowle
University Senior Associate



Nick Stevenson
University Senior Associate



Kim Zavislak
Account Executive
Columbus Office
Managing Partner



Shelly Masi
University and Components
Engagement Quality Control
Review Partner



Amy Banovich
Healthcare Entities Engagement
Quality Control Review Partner



Mark Schierholt
Components
Managing Director



Rebecca Koerner
Components Manager



Cathy Baumann
University and
Single Audit Partner



Gina Devine
Single Audit
Senior Manager



Johnny Lewis
Healthcare Entities
Partner



Kody Seeger
Healthcare Entities
Senior Manager



Sidney Arnold
Healthcare Entities
Manager

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The OSU engagement team (continued)

Parms + Company



John Parmis
Managing
Partner



Tim Grant
Partner

Specialists



Susan Eickhoff
National Office Leader
Higher Education/Grants Compliance



John Ng
National Office
Government/GASB



Tara D'Agostino
Tax Compliance
Managing Director



Arun Khandelwal
Director – Global
Delivery Center



Adrienne Henderson
Tech Assurance
Managing Director



Casey Shork
Actuarial Director



Required communications to those charged with governance

Prepared on May 16, 2025
Presented on June 5, 2025

Audit plan required communications and other matters

Our audit of the financial statements of The Ohio State University (the University) as of and for the year ending June 30, 2025, will be performed in accordance with auditing standards generally accepted in the United States of America and the *Government Auditing Standards*. Performing an audit of financial statements includes consideration of internal control over financial reporting (ICFR) as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's ICFR.

Additionally, we will perform a Single Audit in accordance with the Uniform Guidance.

Matters to communicate		Response
Role and identity of engagement partner	✓	The lead audit engagement partner is Dave Gagnon. Cathy Baumann will serve as the partner on the single audit and support Dave on the University audit. Johnny Lewis will serve as the partner for the standalone reports for Wexner Medical Center Health System and Ohio State University Physicians, Inc. Mark Schierholt will serve as the managing director for the stand-alone component reports for The Ohio State University Foundation, Transportation Research Center Inc., and Campus Partners for Community Urban Redevelopment and Subsidiaries.
Scope of audit	✓	We will audit the University's financial statements for the year ending June 30, 2025, and those of the following components of the University: • The Ohio State University Foundation • Campus Partners for Community and Urban Redevelopment • The Ohio State University Physicians, Inc. • Transportation Research Center, Inc. • The Ohio State University Wexner Medical Center Health System Additionally, we will issue our reports on The Ohio State University Single Audit.

✓ = Matters to report X = No matters to report

Audit plan required communications and other matters (Continued)

Matters to communicate		Response
Significant findings or issues discussed with management	X	
Financial reporting entity	✓	Pages 10 and 11
Materiality in the context of an audit	✓	Page 12
Our timeline	✓	Page 13
Risk assessment: Significant risks	✓	Page 14
Risk assessment: Additional risks identified	✓	Page 15
Involvement of others	✓	Page 16
Newly effective accounting standards	✓	Page 17
Independence	✓	Page 18
Responsibilities	✓	Page 19
Inquiries	✓	Page 20

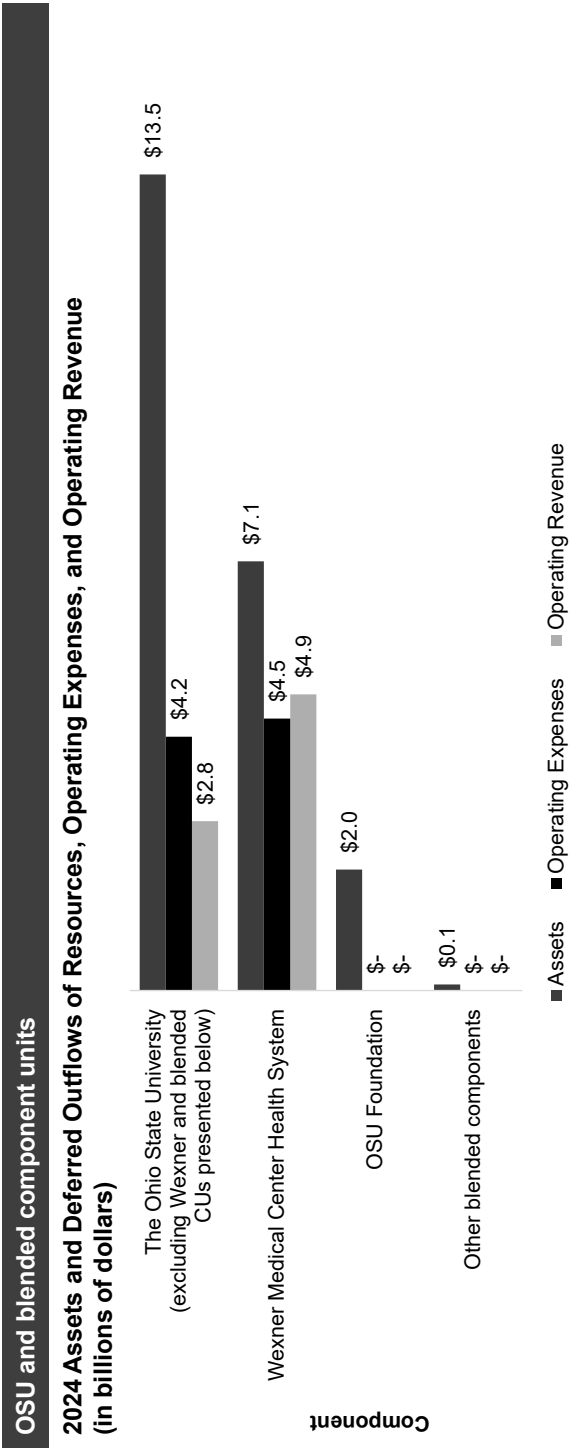
✓ = Matters to report X = No matters to report



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Financial reporting entity

The following illustration depicts the entities included in the Primary Government column of The Ohio State University financial statements.

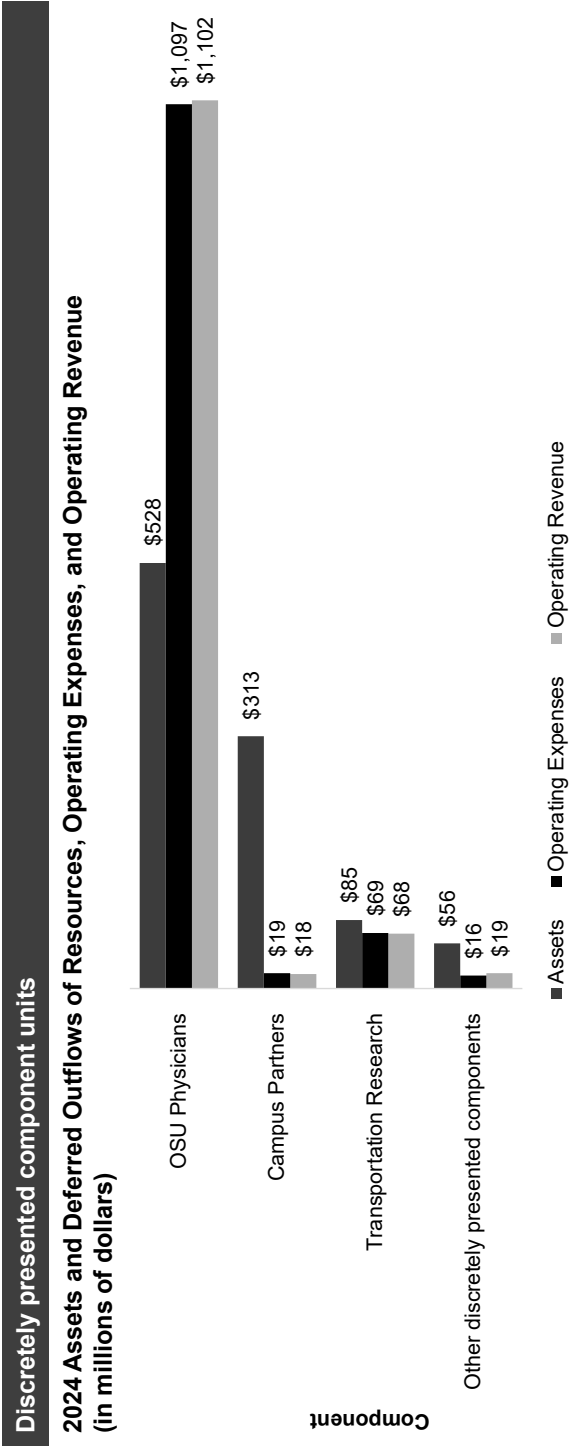


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Financial reporting entity (continued)

The following illustration depicts the entities included in the Discretely Presented Component Units column of The Ohio State University financial statements.



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Materiality in the context of the audit

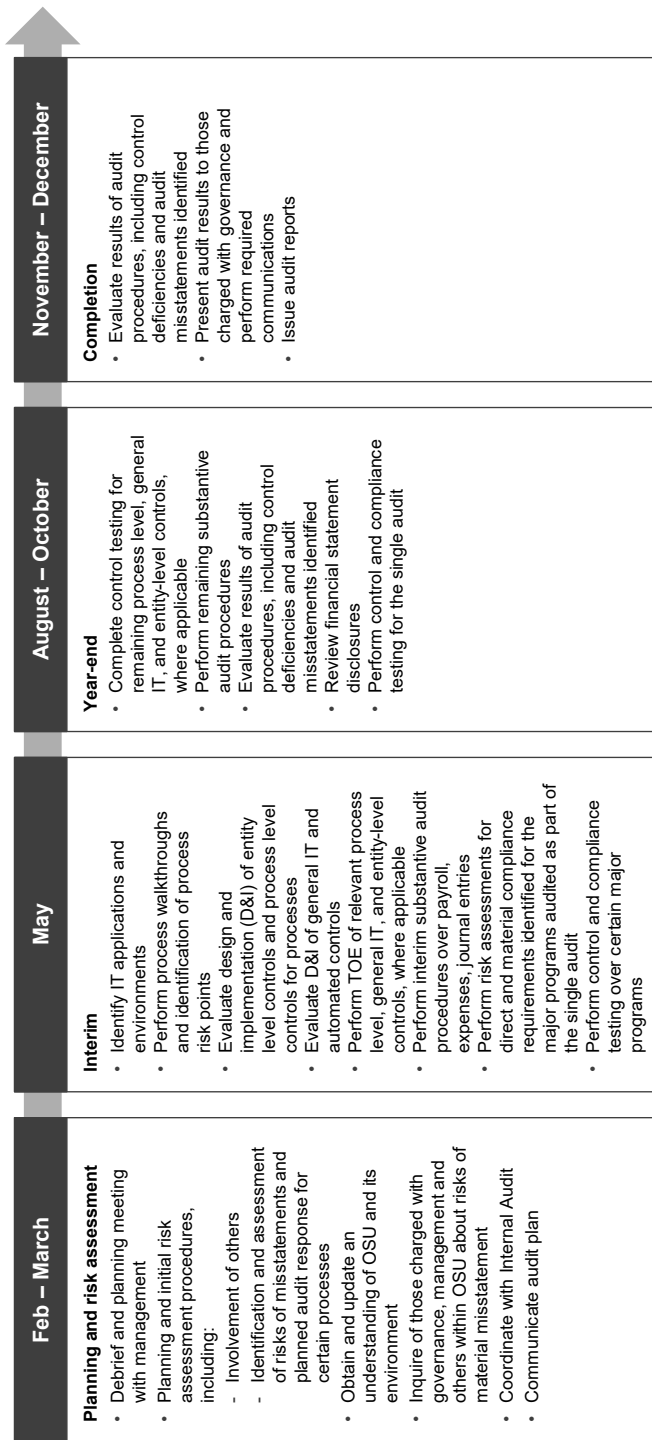
We will apply materiality in the context of the preparation and fair presentation of the financial statements, considering the following factors:

Misstatements, including omissions, are considered to be material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.	Judgments about materiality are made in light of surrounding circumstances and are affected by the size or nature of a misstatement, or a combination of both.	Judgments about materiality involve both qualitative and quantitative considerations.
Judgments about matters that are material to users of the financial statements are based on a consideration of the common financial information needs of users as a group. The possible effect of misstatements on specific individual users, whose needs may vary widely, is not considered.	Determining materiality is a matter of professional judgment and is affected by the auditor's perception of the financial information needs of users of the financial statements.	Judgments about the size of misstatements that will be considered material provide a basis for a. Determining the nature and extent of risk assessment procedures; b. Identifying and assessing the risks of material misstatement; and c. Determining the nature, timing, and extent of further audit procedures.

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Our timeline



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Risk Assessment: Significant Risks

Significant risk	Susceptibility to:	
	Error	Fraud
Management override of controls Management is in a unique position to perpetrate fraud because of its ability to manipulate accounting records and prepare fraudulent financial statements by overriding controls that otherwise appear to be operating effectively. Although the level of risk of management override of controls will vary from entity to entity, the risk nevertheless is present in all entities.		Yes



Risk assessment: Additional risks identified

Relevant factors affecting our risk assessment and planned response	
Additional risks identified	
Valuation of alternative investments	Due to the relative lack of transparency into the underlying assets, including that these investments are not valued on a daily basis, nor readily available, we will perform various procedures to determine whether net asset values (NAVs), as applicable, are reliable, including confirming balances and ownership percentages as of year-end, obtaining underlying audited annual financial statements and back-testing reported NAVs, evaluating NAV valuation and cash changes between the audit date and the University's fiscal year end.
Valuation of marketable securities, which are reported within current and noncurrent assets on the statement of net position	Management's estimate of the fair value of marketable securities, including stocks and fixed income assets, held directly by the University is determined based on quoted prices in active markets.
Valuation of pension and other post-employment benefit liabilities and related accounts	Management's estimates of net pension obligations reported are based on a variety of actuarial assumptions related to participant mortality, as well as interest rates, historical experience, the provisions of the related benefit programs, and desired reserve levels.

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Involvement of others

Others involved in the audit	Extent of planned involvement
Internal audit	No direct assistance will be received from the University's internal audit group. Internal audit reports will be reviewed and considered, as appropriate, as part of our risk assessment under <i>Government Auditing Standards</i> .
KPMG Tech Assurance	Assist the audit team in evaluating general information technology controls and IT application controls.
KPMG pension and postretirement benefit actuary	Assist the audit team in evaluating pension and postretirement benefit obligations.
KPMG Business Tax Services – Development and Exempt Organizations specialist	Assist the audit team in evaluating OSU's tax-exempt status as a governmental entity, tax-exempt status of component units, and assist in evaluating uncertain tax positions, if any.
Parms + Company LLC	Subcontractor firm assisting KPMG with certain audit procedures to be performed for OSU's financial statements (including OSU Physicians, Inc. and Wexner Medical Center) and the Single Audit.

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New and upcoming accounting pronouncements



**GASB Statement No. 101,
*Compensated Absences***

The requirements of this Statement are effective for periods beginning after December 15, 2023, or OSU's FY25 financials.

Establishes standards of accounting and financial reporting for compensated absences and associated salary related payments, including certain defined contribution pension and defined contribution OPEB.



**GASB Statement No. 103,
*Financial Reporting Model Improvements***

The requirements of this Statement are effective for periods beginning after June 15, 2025, or OSU's FY26 financials.

Establishes new accounting and financial reporting, and modifies existing requirements, related to management's discussion and analysis, unusual or infrequent items, presentation of proprietary fund statement of revenues, expenses, and changes in fund net position, information about major component units, budgetary comparison information, and financial trends information in statistical section.

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Shared responsibilities: Independence

Auditor independence is a shared responsibility and most effective when management, those charged with governance and audit firms work together in considering compliance with the independence rules. For KPMG to fulfill its professional responsibility to maintain and monitor independence, management, those charged with governance, and KPMG each play an important role.

System of Independence Quality Control The firm maintains a system of quality control over compliance with independence rules and firm policies. Timely information regarding upcoming transactions or other business changes is necessary to effectively maintain the firm's independence in relation to: • New affiliates (which may include subsidiaries, equity method investees/investments, and other entities that meet the definition of an affiliate under AICPA independence rules). • New officers, trustees, or directors with the ability to affect decision-making, individuals who are beneficial owners with significant influence over the University, and persons in key positions with respect to the preparation or oversight of the financial statements.	Certain relationships with KPMG Independence rules prohibit: • Certain employment relationships involving trustees, directors, officers, or others in an accounting or financial reporting oversight role and KPMG and KPMG covered persons. • The University or its trustees, officers, from having certain types of business relationships with KPMG or KPMG professionals.
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Responsibilities

Management responsibilities	
- Communicating matters of governance interest to those charged with governance. - The audit of the financial statements does not relieve management or those charged with governance of their responsibilities.	

KPMG responsibilities – objectives	
- Communicating clearly with those charged with governance the responsibilities of the auditor regarding the financial statement audit and an overview of the planned scope and timing of the audit. - Obtaining from those charged with governance information relevant to the audit. - Providing those charged with governance with timely observations arising from the audit that are significant and relevant to their responsibility to oversee the financial reporting process. - Promoting effective two-way communication between the auditor and those charged with governance. - Communicating effectively with management and third parties.	

KPMG responsibilities – other	
- If we conclude that no reasonable justification for a change of the terms of the audit engagement exists and we are not permitted by management to continue the original audit engagement, we should: - Withdraw from the audit engagement when possible under applicable law or regulation; - Communicate the circumstances to those charged with governance, and - Determine whether any obligation, either legal contractual, or otherwise, exists to report the circumstances to other parties, such as owners, or regulators. - Forming and expressing an opinion about whether the financial statements that have been prepared by management, with the oversight of those charged with governance, are prepared, in all material respects, in accordance with the applicable financial reporting framework. - Establishing the overall audit strategy and the audit plan, including the nature, timing, and extent of procedures necessary to obtain sufficient appropriate audit evidence. - Communicating any procedures performed relating to other information, and the results of those procedures.	

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Required inquiries

- What are your views about fraud risks, including management override of controls, at the entity and whether you have taken any actions to respond to these risks?
- Are you aware of, or have you identified, any instances of actual, suspected, or alleged fraud, including misconduct or unethical behavior related to financial reporting or misappropriation of assets?
If so, have the instances been appropriately addressed and how have they been addressed?
- Are you aware of or have you received tips or complaints regarding the entity's financial reporting (including those received through the internal whistleblower program, if such program exists) and, if so, what was your response to such tips and complaints?
- How do you exercise oversight over management's assessment of fraud risk and the establishment of controls to address/mitigate fraud risks?
- Has the entity entered into any significant unusual transactions?
- Are you aware of any matters relevant to the audit, including, but not limited to, any instances of actual or possible violations of laws and regulations, including illegal acts (irrespective of materiality threshold)?
- Has the entity complied with all covenants during the financial statement period and before the date of the auditor's report?
Have there been any events of default during the financial-statement period and before the dates of the auditor's report?
- What is the audit committee's understanding of the entity's relationships and transactions with related parties that are significant to the entity?
- Does any member of the audit committee have concerns regarding relationships or transactions with related parties and, if so, what are the substance of those concerns?

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Fiscal 2025 Single Audit – overview and scope

The Single Audit in accordance with the Uniform Guidance (UG) is required annually by federal regulation and is focused on compliance and internal control over compliance for programs that are federally funded. For addressees such as the University, programs audited must cover at least 20% of federal funds expended during the fiscal year.

Major programs are selected for audit based on quantitative and qualitative risk considerations prescribed by federal regulations. Larger programs ("Type A," which for the University are over \$3 million, or more depending on total federal expenditures) must be audited as major programs at least once every three years; however, certain Type A programs may be required to be audited more frequently based on agency directives that they are "higher risk".

While risk assessments are still in progress, below is a summary of major programs recently audited for the University and the planned fiscal 2025 major programs:

FY23 Major programs – audited	FY24 Major programs – audited	FY25 Major programs – planned*
• Research and Development Cluster • Student Financial Assistance Cluster • Education Stabilization Fund • Provider Relief Fund • Head Start Cluster • Smith-Lever Funding	• Research and Development Cluster • Student Financial Assistance Cluster • Supplemental Nutritional Assistance Program Cluster • Disaster Grants – Public Assistance (Presidentially Declared Disasters) • Airport Improvement Program	• Research and Development Cluster • Student Financial Assistance Cluster • Medicaid Cluster

* Finalization of major program determination is dependent upon the final supplementary schedule of expenditures of federal awards, risk assessment procedures, and requirements of the 2025 Compliance Supplement (expected to be issued in the Spring). Major program compliance test work over direct and material compliance requirements is planned based upon reliance on internal control over compliance. While we may test and report on internal control over compliance, we do not express an opinion on the effectiveness of internal control over compliance.



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Thank you

David Gagnon
Lead Engagement Partner
508-523-0042
dgagnon@kpmg.com

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Questions?

For additional information and audit committee resources, including National Audit Committee Peer Exchange series, a Quarterly webcast, and suggested publications, visit the KPMG Audit Committee Institute (ACI) at <https://boardleadership.kpmg.us/audit-committee.html>

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APPENDIX IV



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

July 2, 2025 – Talent, Compensation and Governance Committee Meeting

Members Present:

Jeff M.S. Kaplan
Elizabeth P. Kessler
Reginald A. Wilkinson

Tomislav B. Mitevski
Juan Jose Perez

Kara J. Trott (arr. 2:11 p.m.)
John W. Zeiger (ex officio)

Members Present via Zoom:

Gary R. Heminger (arr. 2:09 p.m.)

Members Absent: N/A

PUBLIC SESSION

The Talent, Compensation and Governance Committee of The Ohio State University Board of Trustees convened on Wednesday, July 2, 2025, virtually and in person at University Square South on Ohio State's Columbus campus. Committee Chair Jeff Kaplan called the meeting to order at 2:00 p.m. and recognized the Board's two newest members: Mr. Patrick J. Tiberi, who attended the meeting virtually, and Mr. Patrick C. Arp.

Item for Action:

1. Approval of Minutes: No changes were requested to the April 2, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.

EXECUTIVE SESSION

It was moved by Mr. Kaplan and seconded by Mr. Perez that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Kaplan, Ms. Kessler, Dr. Wilkinson, Mr. Mitevski, Mr. Perez and Mr. Zeiger. Mr. Heminger and Ms. Trott were not present for this vote.

The committee entered into executive session at 2:04 p.m. and adjourned at 5:14 p.m.

APPENDIX V



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
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SUMMARY OF ACTIONS TAKEN

July 16, 2025 – Academic Affairs and Student Life Committee Meeting

Members Present:

Reginald A. Wilkinson
Elizabeth A. Harsh
Jeff M.S. Kaplan

Bradley R. Kastan
Kendall C. Buchan

Eric Bielefeld
John W. Zeiger (ex officio)

Members Present via Zoom:

Michael F. Kiggin (arr. 2:40 p.m.) Stefanie Sanford (arr. 2:05 p.m.)

Members Absent:

Elizabeth P. Kessler

EXECUTIVE SESSION

The Academic Affairs and Student Life Committee of The Ohio State University Board of Trustees convened on Wednesday, July 16, 2025, in person and via Zoom in the Mount Leadership Room at Longaberger Alumni House on the Columbus campus. Committee Chair Reginald Wilkinson called the meeting to order at 2:00 p.m.

It was then moved by Dr. Wilkinson and seconded by Mr. Kaplan that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters involving the appointment, employment and compensation of public officials, which are required to be kept confidential under Ohio law.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Dr. Wilkinson, Mrs. Harsh, Mr. Kaplan, Mr. Kastan, Dr. Buchan, Dr. Bielefeld and Mr. Zeiger. Mr. Kiggin and Dr. Sanford were not present for this vote.

The committee entered executive session at 2:02 p.m. and reconvened in public session at 4:07 p.m.

PUBLIC SESSION

Items for Discussion:

1. Provost's Report: AI Fluency: Executive Vice President and Provost Ravi Bellamkonda and Executive Director of the Center for Software Innovation Shereen Agrawal provided an update on the university's new AI Fluency initiative. Announced earlier this summer, the effort will ensure every Ohio State graduate, beginning with the Class of 2029, understands how to engage with and ethically deploy artificial intelligence tools in their field of study.

The presentation covered the curricular focus of the AI Fluency initiative (acquiring foundational knowledge, applying in diverse areas of study, and considering implications and use cases); the



THE OHIO STATE UNIVERSITY

process for rolling out components of the initiative; and the creation of infrastructure to support its success.

Associate Professor of Marketing Jeff Dotson then demonstrated an example assignment he utilizes in one of his courses to familiarize students with the potential uses of artificial intelligence.

(See Attachment II for background information, page 225)

2. Senior Vice President for Student Life Report: Impact and Opportunity: Senior Vice President for Student Life Melissa Shivers reviewed work underway during the summer months to prepare for a successful move-in and high-quality student experience during the fall and spring. She made special mention of the outstanding contributions of the 42 volunteer members of the Campus Activism and Engagement Team; the public-private partnerships in Dining Services and the 120 food-delivery rovers that now operate on the Columbus campus; as well as the value of the new Monda Student Resource Center. Dr. Shivers closed by congratulating the team in the Office of Student Life for receiving the Association of College and University Housing Officers International Presidential Service Award.

(See Attachment III for background information, page 232)

Items for Action:

3. Approval of April 2025 Committee Meeting Minutes: No changes were requested to the April 16, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.
4. Resolution No. 2026-18: Approval to Establish a Master of Systems Engineering:

IN THE COLLEGE OF ENGINEERING

Synopsis: Approval to establish a Master of Systems Engineering degree program in the College of Engineering is proposed.

WHEREAS the proposed Master of Systems Engineering is a professional program aimed at practicing engineers seeking to increase their systems engineering modeling, planning, and decision-making skills; and

WHEREAS the proposed program would be technically based and education on concepts, principles, tools, and methods to model and manage systems engineering projects and programs across engineering settings and disciplines; and

WHEREAS the target audience for the program is engineers in business, industry, healthcare, and government who have worked in the field and are responsible for modeling, designing and deploying complex systems and may be employed in the public or private sectors; and

WHEREAS the curriculum is a minimum of 30 semester credit hours, will be delivered completely online, has well-developed learning outcomes, includes 15 required credit hours, 12 credit hours of electives and a three-credit hour capstone course, with content offered by faculty in the College of Engineering and the John Glenn College of Public Affairs; and

WHEREAS the proposal was reviewed and approved by the Council on Academic Affairs at its meeting on March 19, 2025; and

WHEREAS the University Senate approved this proposal on April 17, 2025:



THE OHIO STATE UNIVERSITY

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the proposal to establish a Master of Systems Engineering degree program in the College of Engineering.

(See Appendix XIV for background information, page 574)

5. Resolution No. 2026-19: Faculty Personnel Actions:

BE IT RESOLVED, That the Board of Trustees hereby approves the faculty personnel actions as recorded in the personnel budget records of the university since the May 21, 2025, meeting of the board, including the following appointments, faculty awards, appointments/reappointments of chairpersons, faculty professional leaves and emeritus titles:

Appointments

Name: ROBERT BAKER
Title: Professor (The Phyllis and Richard Leet Endowed Chair in Chemistry)
College: Arts and Sciences
Term: August 15, 2025, through August 14, 2030

Name: GLEN BARBER
Title: Professor (The Klotz Chair in Cancer Research #2)
College: Medicine
Term: May 1, 2025, through June 30, 2029

Name: ARAVIND CHANDRASEKARAN
Title: Interim Dean (The John W. Berry, Sr. Chair in Business)
College: Fisher College of Business
Term: June 1, 2025, through June 30, 2027, or until a permanent dean is appointed

Name: WEI-LUN (HARRY) CHAO
Title: Associate Professor (College of Engineering Innovation Scholar)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: DENNIS HIRSCH
Title: Professor (The Kara J. Trott Endowed Professorship in Law in honor of Prof. Lawrence Herman)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: YUHENG HU
Title: Associate Professor (Fisher College of Business Distinguished Associate Professor)
College: Fisher College of Business
Term: August 15, 2025, through August 14, 2028

Name: JEN-YI HUANG*
Title: Professor (The Dale A. Seiberling Professorship in Food Engineering)
College: Food, Agricultural, and Environmental Sciences
Term: January 1, 2026, through December 31, 2031

Name: KIM JORDAN



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Title: Professor-Clinical (The Joseph S. Platt-Porter, Wright, Morris, & Arthur Professorship)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: MARGARET KWOKA
Title: Professor (The Frank R. Strong Chair in Law)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: GABRIEL LADE*
Title: Professor (The C. William Swank Chair in Rural and Urban Policy)
College: Food, Agricultural, and Environmental Sciences
Term: August 15, 2025, through August 14, 2030

Name: KRISTEN LINDQUIST*
Title: Professor (Robert K. and Dale J. Weary Chair in Social Psychology)
College: Arts and Sciences
Term: August 15, 2025, through June 30, 2030

Name: GREGORY NIXON
Title: Professor-Clinical (The Vision Service Plan (VSP) Chair for the Advancement of Professional Practice)
College: Optometry
Term: June 1, 2025, through June 30, 2026

Name: MASAKI OSHIKAWA*
Title: Professor (Ohio Eminent Scholar in Condensed Matter Theory)
College: Arts and Sciences
Term: January 1, 2026, through June 30, 2030

Name: MARC SPINDELMAN
Title: Professor (The Heck-Faust Memorial Chair in Constitutional Law)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: JOHN STAFFORD*
Title: Professor (The Charles Austin Doan Chair of Medicine Funded by the Charles Austin Doan Fund)
College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: TODD STARKER
Title: Professor-Clinical (Charles W. Ebersold and Florence Whitcomb Ebersold Professorship)
College: Law
Term: August 15, 2025, through August 15, 2030

Name: YU SU
Title: Associate Professor (College of Engineering Innovation Scholar)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: SHIGEO TAMIYA
Title: Associate Professor (The Dr. Frederick H. Davidorf Honorary Professorship Fund)



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College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: WEN TANG
Title: Associate Professor (Burghes Professorship in the College of Medicine)
College: Medicine
Term: August 1, 2025, through June 30, 2029

Name: JIN WANG
Title: Professor (Distinguished Professor of Engineering)
College: Engineering
Term: August 15, 2025, through June 30, 2030

Name: JENNIFER WOYACH
Title: Professor (The Bertha Bouroncle M.D. and Andrew Pereny Chair of Medicine)
College: Medicine
Term: July 1, 2025, through June 30, 2029

Reappointments

Name: GEORGIOS ANAGNOSTOU
Title: Professor (The Miltiadis Marinakis Endowed Professorship of Modern Greek Language and Culture)
College: Arts and Sciences
Term: July 1, 2025, through June 30, 2030

Name: MICHAEL BEVIS
Title: Professor (Ohio Eminent Scholar in Geodynamics)
College: Arts and Sciences
Term: June 1, 2022, through May 31, 2027

Name: STEVEN CLINTON
Title: Professor (The Robert A. and Martha O. Schoenlaub Cancer Research Chair)
College: Medicine
Term: July 1, 2025, through June 30, 2029

Name: SARAH COLE
Title: Professor (The Michael E. Mortiz Chair in Alternative Dispute Resolution)
College: Law
Term: June 1, 2025, through May 31, 2030

Name: VADIM FEDOROV
Title: Professor (Corrine Frick Research Chair in Heart Failure and Arrhythmia)
College: Medicine
Term: July 1, 2025, through June 30, 2029

Name: DATTA GAITONDE
Title: Professor (The John Glenn Endowed Chair for Technology and Space Exploration and Ohio Research Scholar in Advanced Propulsion System Integration)
College: Engineering
Term: July 1, 2025, through June 30, 2030

Name: B. SCOTT GAUDI
Title: Professor (The Thomas Jefferson Chair for Discovery and Space Exploration)
College: Arts and Sciences



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Term: September 1, 2024, through August 31, 2029

Name: ANDREW GLASSMAN
Title: Professor and Chair (The Frank J. Kloenne Chair in Orthopedic Surgery)
College: Medicine
Term: July 1, 2025, through June 30, 2026

Name: SUSAN OLESIK
Title: Divisional Dean for Natural and Mathematical Sciences
College: Arts and Sciences
Term: July 1, 2025, through June 30, 2027

Name: LISA PINKERTON
Title: Associate Professor-Clinical (The Marie Clay Endowed Chair in Reading Recovery and Early Literacy)
College: Education and Human Ecology
Term: August 15, 2025, through August 14, 2030

Name: FRANK SCHWARTZ
Title: Professor (Ohio Eminent Scholar in Hydrogeology)
College: Arts and Sciences
Term: June 1, 2022, through May 31, 2027

Name: JAMI SHAH
Title: Professor (Honda Designated Professorship in Engineering Design for Manufacturing)
College: Engineering
Term: July 1, 2025, through June 30, 2028

Name: LU ZHANG
Title: Professor (John W. Galbreath Chair in Real Estate)
College: Fisher College of Business
Term: October 1, 2025, through August 14, 2030

*New Hire

University Faculty Awards

Name: BRUCE ACKLEY
Title: Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)
College: Food, Agricultural, and Environmental Sciences

Name: LAURA BOUCHER
Title: Associate Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Medicine

Name: KELLEN CALINGER-YOAK
Title: Assistant Professor-Clinical (Provost's Award for Distinguished Teaching by a Lecturer)
College: Arts and Sciences

Name: MEOW GOH
Title: Associate Professor (Alumni Award for Distinguished Teaching)
College: Arts and Sciences

Name: PETER HAHN



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Title: Professor (Distinguished University Professor)
College: Arts and Sciences

Name: L. CAMILLE HÉBERT
Title: Professor (President and Provost's Award for Distinguished Faculty Service)
College: Law

Name: ANITA HOPPER
Title: Professor (Distinguished University Professor)
College: Arts and Sciences

Name: JEFFREY JOHNSTON
Title: Senior Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)
College: Pharmacy

Name: SARA GOMBASH LAMPE
Title: Assistant Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Medicine

Name: MITCHELL LERNER
Title: Professor (President and Provost's Award for Distinguished Faculty Service)
College: Arts and Sciences, Newark

Name: ANDY MAY
Title: Associate Professor (Alumni Award for Distinguished Teaching)
College: Engineering

Name: LISA NGUYEN
Title: Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)
College: Arts and Sciences

Name: TANYA NOCERA
Title: Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Engineering

Name: NIKOLE PATSON
Title: Professor (Alumni Award for Distinguished Teaching)
College: Arts and Sciences, Marion

Name: KRISTIN PAULUS
Title: Senior Lecturer (Provost's Award for Distinguished Teaching by a Lecturer)
College: Education and Human Ecology

Name: PHILLIP POPOVICH
Title: Professor and Chair (Distinguished University Professor)
College: Medicine

Name: COLLEEN SETTINERI
Title: Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Law

Name: RUTH SMITH
Title: Assistant Professor-Clinical (Provost's Award for Distinguished Teaching by a Lecturer)
College: Arts and Sciences



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Name: KRISTIN STOVER
Title: Assistant Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Medicine

Name: SARA WATSON
Title: Associate Professor (President and Provost's Award for Distinguished Faculty Service)
College: Arts and Sciences

Name: LINDY WEAVER
Title: Associate Professor-Clinical (Alumni Award for Distinguished Teaching)
College: Medicine

Name: SHIRLEY YU
Title: Associate Professor (Alumni Award for Distinguished Teaching)
College: Education and Human Ecology

(See Appendix XV for background information, page 589)

6. Resolution No. 2026-20: Adoption of Required Policies, Rules and Plans Pursuant to Ohio Senate Bill 1, The Advance Ohio Higher Education Act:

Synopsis: Adoption of policies and plans for which Board of Trustees approval is required under Ohio Senate Bill 1, the Advance Ohio Higher Education Act.

WHEREAS Ohio Senate Bill 1 (SB1), the Advance Higher Education Act, took effect on June 27, 2025; and

WHEREAS the university created an implementation committee to identify all applicable requirements in SB1, consult with key organizational constituencies about each such measure (including faculty, staff, and student representatives), and develop appropriate action steps to meet these requirements; and

WHEREAS SB1 requires the Board of Trustees to adopt a series of policies in accordance with statutory requirements, including those concerning diversity, equity, and inclusion (DEI), intellectual diversity, controversial beliefs, faculty annual reviews, post-tenure review, tenure, and retrenchment, and to submit those policies to the chancellor of higher education for review; and

WHEREAS SB1 further requires the Board of Trustees to identify a plan for developing and offering a course or courses on civic literacy, which shall be required for all students beginning with those graduating in the spring semester of the 2029-2030 academic year, and to submit that plan to the chancellor of higher education for approval; and

WHEREAS, to fulfill these requirements, the following policies, which are attached hereto, were revised in consultation with workgroups consisting of faculty, staff, and students from across the university:

- DEI, Intellectual Diversity, and Controversial Beliefs under the Advance Ohio Higher Education Act (as required by R.C. 3345.0217(B));
- Faculty Annual Review, Post-Tenure Review, and Reappointment (as required by R.C. 3345.452(B) and R.C. 3345.453(B)); and
- Faculty Appointments, Tenure, and Retrenchment (as required by R.C. 3345.454(B)); and

WHEREAS SB1 likewise required changes to Faculty Rules 3335-5-04, 3335-5-04.1, and 3335-5-04.4 to address new complaint processes and post-tenure review as set forth in these policies, and



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these changes were similarly developed in consultation with key university constituents, including Senate leadership, which are attached hereto; and

WHEREAS the university has likewise developed the American Civic Literacy Plan and Request for Approval for providing civic literacy courses pursuant to R.C. 3345.382(B), which is attached hereto; and

WHEREAS the Board supports each policy, rule, and plan developed to meet these requirements, and has an obligation to adopt these provisions directly and submit them to the chancellor of higher education:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby adopts the DEI, Intellectual Diversity, and Controversial Beliefs under the Advance Ohio Higher Education Act policy; the Faculty Annual Review, Post-Tenure Review, and Reappointment policy; the Faculty Appointments, Tenure, and Retrenchment policy; the revisions to Faculty Rules 3335-5-04, 3335-5-04.1, and 3335-5-04.5; and the American Civic Literacy Plan and Request for Approval, and directs the President to take all required steps to submit these policies, rules, and plan to the chancellor of higher education as required by law.

(See Appendix XVI for background information, page 596)

Action: Upon the motion of Dr. Wilkinson, seconded by Mr. Kaplan, the foregoing motions were adopted by majority roll-call vote, with the following members present and voting: Dr. Wilkinson, Mrs. Harsh, Mr. Kaplan, Mr. Kastan, Dr. Buchan, Dr. Bielefeld and Mr. Zeiger. Mr. Kiggin was not present for this vote.

The committee adjourned at 4:53 p.m.



Provost's Report: AI Fluency

July 2025

Ravi V. Bellamkonda, Executive Vice President and Provost

Shereen Agrawal, Executive Director, Center for Software Innovation



AI Fluency

Equipping students to be fluent in the application of AI in their field of study

The Class of 2029 will graduate AI fluent

Learning Outcomes

- **Explain** foundational concepts such as artificial intelligence, large language models, machine learning
- **Explore** the potential benefits and limitations of common AI applications in the context of a chosen field
- **Evaluate** the types of inputs foundational to AI systems- including data, prompts, and emerging modalities- and explain how input form and quality influence output quality, performance, and reliability
- **Use** AI tools to accomplish specific goals in the field of study, and critically assess outputs for accuracy and relevance to the task
- **Design** innovative applications of AI within a discipline, supported by a rationale for the potential value and feasibility
- **Explore** the implications (ethical, societal, environmental, legal, practical) of AI use cases and develop reasoned recommendations for responsible implementation within a field of study

Approach

Meet the students where they are

- Preparation for first year students starting in GE Launch and First Year Success Series
- College/departement partnership for embedding in degrees
- Partnership with K-12 to stay in sync on handoffs

Support & connect educators

- Funding and resources for faculty to adapt and build courses
- Access to templates and foundational content
- Expansion of forums and community
- Celebration and recognition of efforts

Foundation of innovation & curiosity

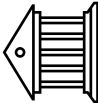
- Expanded AI technology toolkit
- Support building with AI through programs, events, resources
- Showcase and make connection between research and AI field applications

AI technology infrastructure

As the AI ecosystem rapidly evolves, so are our guidelines, tools, and capabilities



**Clear policy guidance
on product usage**

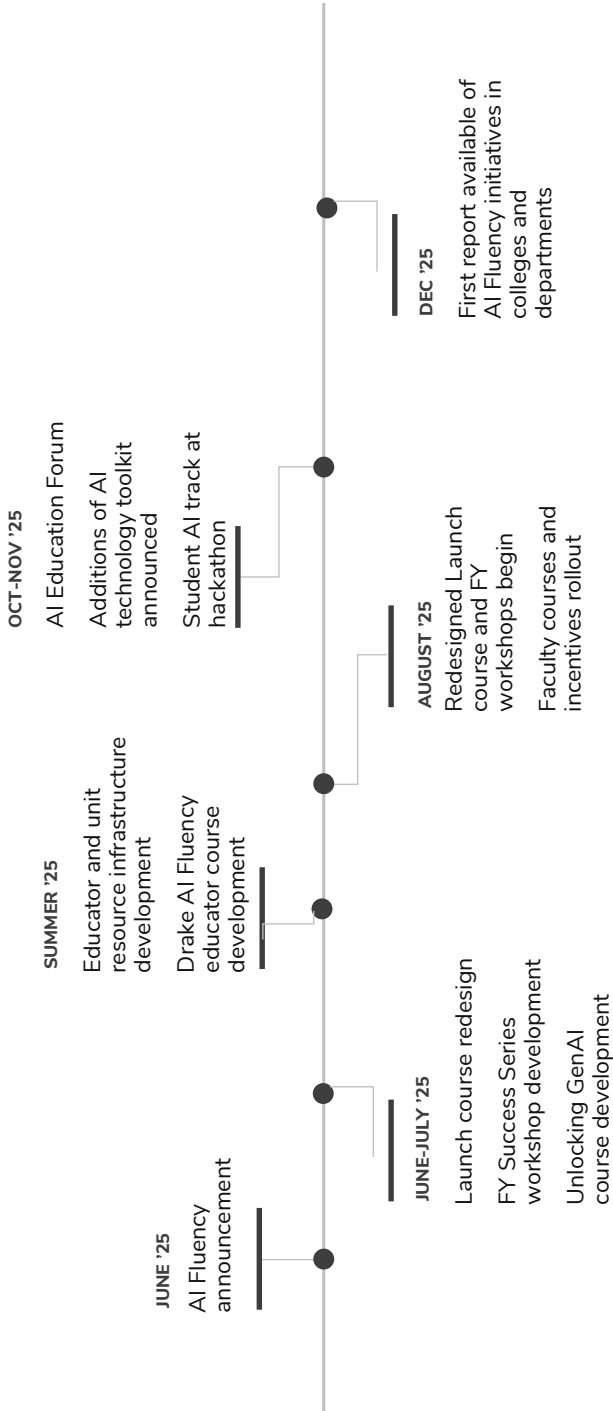


**Increasing ease of
access and use of
enterprise applications**



**New capabilities
integrated into Canvas**

Timeline





Questions?



Senior Vice President for Student Life Report: Impact and Opportunity



Dr. Melissa S. Shivers
Senior Vice President for Student Life



Preparing for Autumn

By the Numbers

- 36 residence halls, five houses and three graduate residence halls to prepare for students
- 6 million square feet of facilities across Ohio State's campuses managed by Student Life
- 20,000 spaces cleaned and maintained
- 6,600 pieces of furniture moved or set in master lease properties
- 27 two-day summer orientation sessions supported by Student Life
- August 20 – 23 move-in for the Columbus campus





Campus Activism and Engagement Team

69

events staffed throughout
2024-25 academic year

42

trained team members

40%

events occurring
after 5 p.m.

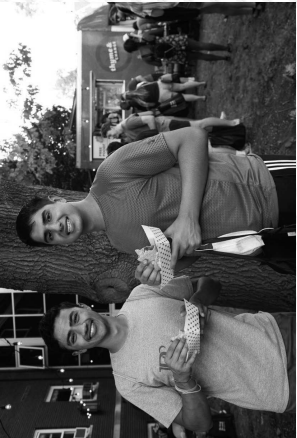
134

staff attended Freedom of
Expression general
awareness educational
session



Dining Services Innovations

Expanded Public-Private Partnerships





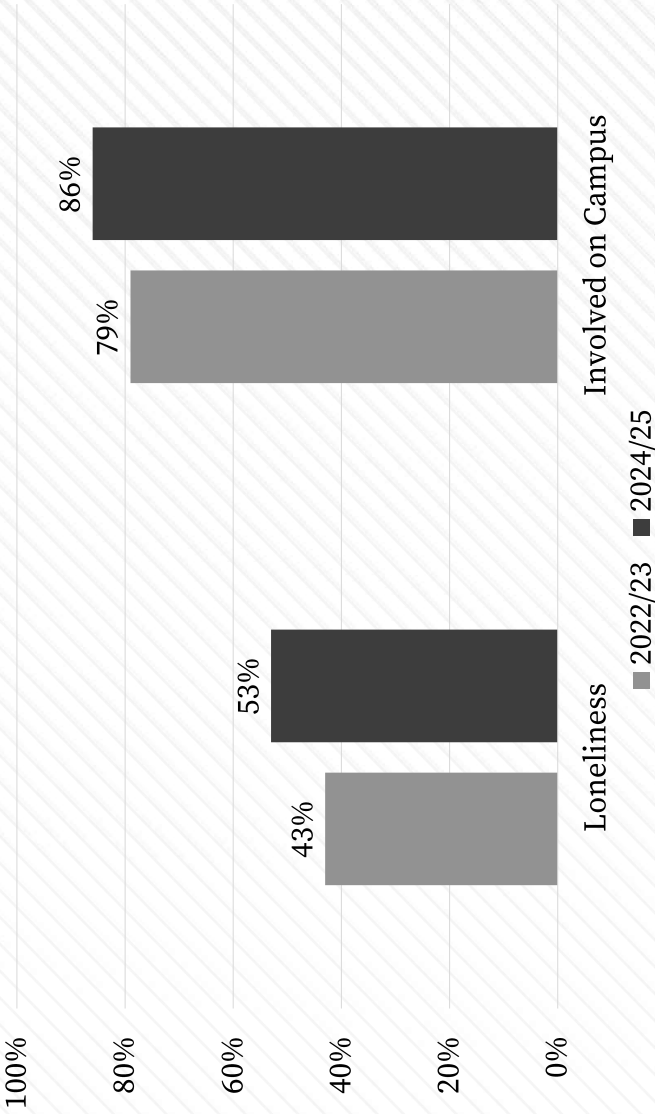
Monda Student Resource Center





Emerging Trends

Shifts in Student Loneliness and Involvement on Campus







Questions?



APPENDIX VI



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

July 30, 2025 – Master Planning and Facilities Committee Meeting

Members Present:

Juan Jose Perez
Reginald A. Wilkinson
Pierre Bigby

Bradley R. Kastan
Kendall C. Buchan

Robert H. Schottenstein
Keith Myers

Members Present via Zoom:

George A. Skestos (arr. 1:59 p.m.)

Members Absent:

Elizabeth A. Harsh

John. W. Zeiger (ex officio)

EXECUTIVE SESSION

The Master Planning and Facilities Committee of The Ohio State University Board of Trustees convened on Wednesday, July 30, 2025, in person at Longaberger Alumni House on Ohio State's Columbus campus. Committee Chair John Perez called the meeting to order at 1:57 p.m.

It was moved by Mr. Perez and seconded by Dr. Wilkinson that the committee recess into executive session to consider business-sensitive trade secrets and to consult with legal counsel regarding pending litigation. A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Perez, Dr. Wilkinson, Mr. Bigby, Mr. Kastan, Dr. Buchan, Mr. Schottenstein and Mr. Myers. Mr. Skestos was not present for this vote.

The committee entered executive session at 1:59 p.m. and reconvened in public session at 4:24 p.m.

PUBLIC SESSION

Items for Action:

1. Approval of Minutes: No changes were requested to the May 2, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.
2. Resolution No. 2026-21: Approval of Fiscal Year 2026 Capital Investment Plan:

Synopsis: Authorization and acceptance of the Capital Investment Plan for the fiscal year ending June 30, 2026, as proposed.

WHEREAS the university has presented the recommended capital expenditures for the fiscal year ending June 30, 2026; and

WHEREAS the recommended capital expenditures are the result of the university's comprehensive annual capital planning process; and



WHEREAS only those projects outlined in these recommendations will be approved for funding;
NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that Capital Investment Plan for the fiscal year ending June 30, 2026, as described in the accompanying documents, be approved; and

BE IT FURTHER RESOLVED, That any request for authorization to proceed with any project contained in these recommendations must be submitted individually by the university for approval by the Board of Trustees, as provided for by Board policy.

(See Appendix XVII for background information, page 652)

3. Resolution No. 2026-22: Approval to Enter Into/Increase Professional Services and Enter Into/Increase Construction Contracts:

APPROVAL TO ENTER INTO PROFESSIONAL SERVICES CONTRACTS

BLANKENSHIP HALL UPGRADES
BRAIN AND SPINE HOSPITAL – LOWER-LEVEL RENOVATION
DOAN HALL – PET/CT REPLACEMENT
OUTPATIENT CARE EAST – CLINIC RENOVATIONS & RELOCATIONS

APPROVAL TO ENTER INTO/INCREASE PROFESSIONAL SERVICES AND CONSTRUCTION CONTRACTS

EAST HOSPITAL – CHILLER & COOLING TOWER REPLACEMENT
HERRICK DRIVE REBUILD
1922 CLUB
POLARIS MEP UPDATES
600 ACKERMAN – SPECIALTY PHARMACY EXPANSION

APPROVAL TO INCREASE CONSTRUCTION CONTRACTS

TUNNEL REHABILITATION PHASE 1

Synopsis: Authorization to enter into/increase professional services and construction contracts, as detailed in the attached materials, is proposed.

WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts for the following projects; and

	Prof. Serv. Approval Requested	Total Requested	
Blankenship Hall Upgrades	\$1.2M	\$1.2M	University funds
Brain and Spine Hospital – Lower-Level Renovation	\$0.3M	\$0.3M	Auxiliary funds
Doan Hall – PET/CT Replacement	\$0.4M	\$0.4M	Auxiliary funds
Outpatient Care East – Clinic Renovations & Relocations	\$1.1M	\$1.1M	Auxiliary funds



WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts and enter into/increase construction contracts for the following projects; and

	Prof. Serv. Approval Requested	Construction Approval Requested	Total Requested	
East Hospital – Chiller & Cooling Tower Replacement	\$1.2M	\$5.8M	\$7.0M	Auxiliary funds
Herrick Drive Rebuild	\$0.6M	\$3.4M	\$4.0M	University debt
1922 Club	\$0.2M	\$14.3M	\$14.5M	University debt Auxiliary funds
Polaris MEP Updates	\$0.8M	\$6.6M	\$7.4M	Auxiliary funds
600 Ackerman – Specialty Pharmacy Expansion	\$1.2M	\$14.0M	\$15.2M	Auxiliary funds

WHEREAS in accordance with the attached materials, the University desires to increase construction contracts for the following projects; and

	Construction Approval Requested	Total Requested	
Tunnel Rehabilitation Phase 1	\$5.5M	\$5.5M	University debt University funds State funds Partner funds

WHEREAS the Master Planning and Facilities Committee has reviewed the projects listed above for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance Committee has reviewed the projects listed above for alignment with the Capital Investment Plan and other applicable financial plans.

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that the President and/or Senior Vice President for Business and Finance be authorized to enter into/increase professional services and construction contracts for the projects listed above in accordance with established university and State of Ohio procedures, with all actions to be reported to the board at the appropriate time.

(See Appendix XVIII for background information, page 654)

4. Resolution No. 2026-23: Approval of Ohio State Energy Partners Utility System Capital Improvements Plan for Fiscal Year 2026:

Utility System Life-Cycle Renovation, Repair and Replacement Projects

Synopsis: Approval of the Ohio State Energy Partners LLC (“OSEP”) utility system capital improvements plan (“OSEP CIP”) for fiscal year 2026; authorization for OSEP to make such capital improvements pursuant to the terms of the First Amended and Restated Long-Term Lease and



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Concession Agreement for The Ohio State University Utility System dated July 20, 2018, and as amended (the "Agreement").

WHEREAS the Agreement requires OSEP to annually submit an OSEP CIP for approval; and

WHEREAS the Board of Trustees approved an interim fiscal year 2026 OSEP CIP in May 2025, prior to the university's finalization of its capital investment plan for fiscal year 2026; and

WHEREAS the university has now finalized its capital investment plan for fiscal year 2026; and

WHEREAS the fiscal year 2026 OSEP CIP includes the requests for approval of these utility system capital improvement projects for the fiscal year beginning July 1, 2025; and

WHEREAS OSEP has provided detailed descriptions of the proposed capital improvement projects, including the construction schedules and supporting technical data and analysis, pursuant to Section 4.3(c) of the Agreement; and

WHEREAS these utility system capital improvement projects will be delivered pursuant to the terms of the Agreement, including the schedules as detailed in the project approval requests; and

WHEREAS these capital expenditures for the approved OSEP CIP utility system projects will be added to the utility fee pursuant to the Agreement and any associated university directives; and

WHEREAS the university has reviewed and considered the financial, technical, and operational aspects of the projects and the OSEP CIP alignment with university plans and sustainability goals; and

WHEREAS the Master Planning & Facilities Committee has reviewed the OSEP CIP for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance & Investment Committee has reviewed the OSEP CIP for alignment with the Capital Investment Plan and other applicable financial plans:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the fiscal year 2026 OSEP CIP; and

BE IT FURTHER RESOLVED, That the Board of Trustees authorizes OSEP to proceed with these fiscal year 2026 capital improvements to the Utility System as outlined in the attached materials.

(See Appendix XIX for background information, page 664)

5. Resolution No. 2026-24: Approval for Disposition of Real Property:

THAYER ROAD
BATH TOWNSHIP, ALLEN COUNTY, OHIO

Synopsis: Authorization to sell real property located along Thayer Road, Bath Township, Allen County, Ohio, is proposed.

WHEREAS The Ohio State University seeks to sell 5.369 acres along Thayer Road, Bath Township, Ohio, identified as Allen County parcel number 37-3500-02-001.000, to Allen County so they may improve and widen Thayer Road; and



THE OHIO STATE UNIVERSITY

WHEREAS the sale of this property corresponds with the strategic investment and divestment of land assets in support of the university's current and future needs; and

WHEREAS the administration has identified this site as excess and no longer aligning with current and future planned needs:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that the President and/or Senior Vice President for Business and Finance shall be authorized to take any action required to effect the sale of the aforementioned property upon terms and conditions deemed to be in the best interest of the university and at a sale price at or above the appraised value.

(See Appendix XX for background information, page 673)

Action: Upon the motion of Mr. Perez, seconded by Mr. Kastan, the foregoing motions were adopted by roll-call vote with the following members present and voting: Mr. Perez, Mr. Skestos, Dr. Wilkinson, Mr. Bigby, Mr. Kastan, Dr. Buchan, Mr. Schottenstein and Mr. Myers.

Written Reports

In the public session materials, there were two written reports shared for the committee to review:

- a. Physical Environment Scorecard
(See Attachment IV for background information, page 245)
- b. Major Project Updates
(See Attachment V for background information, page 246)

The committee meeting adjourned at 4:31 p.m.

ATTACHMENT IV

PHYSICAL ENVIRONMENT							FY25 Annual Target (Budget)	Comments
Actual Prior Year Same Period (FY24 YTD)	Actual	Target (Budget)	Target %Var	Actual vs Target				
A. FINANCIAL								
1. A&P Total Uses (General & Earnings Funds)							\$200,834,430	
B. OPERATIONAL								
1. % Projects Completed On Time >Bld Threshold							90.0%	Total of 52 of 52 projects completed On Time.
2. % Projects Completed On Budget >Bld Threshold							90.0%	Total of 52 of 52 projects completed On Budget.
3. Capital Investment Program Spend*							\$871.1	In Millions
4. Facility Condition Index**							0.08	Completed building assessments as of May 31, 2025. 200 buildings processed; 24.9 million GGF.
5. CABS Riders							3,168,000	Year-over-year increase in total ridership, and year-to-date ridership exceeds projected numbers
6. WMC Parking Garage Peak Time Occupancy % ***							80.0%	YTD (May) Occupancy: Transient = 68%, Permit = 85%, Moped = 62%. CampusPark uses loop counters to track counts. In high demand we saw occupancy reach 100%.
7. Cost of Daily Temporary Parking Space Closures							\$196,703	Key contributions YTD: SCAR MRI/ENGE Ductbank, Kenwood Window Replacement, Tunnel Restoration, B & Z Vault, Saxon Hall Chiller, Version 565, 12th Ave Waterline & Sanitary, Presley Floor Replacement, Steam Vault Repair, Presley/LJLR Expansion.
8. WOSU Broadcast Audience (Viewers, Listeners)							691,225	WOSU-FM is 38th in Columbus market, with spring audience growing after post-election decline. Classical 101 remains a top-20 station in Ohio.
9. WOSU Digital Audience (Unique Visitors, Video Views, Digital Audio)							7,796,015	While spot of Target trending in positive direction, YouTube channel experienced record growth with a 27.9% for reach, website unique viewers up 12.7%, NPR News stream up 6.6%.
C. SAFETY								
1. EHS Reportable Incident Rate (CYTD):							1.60	2025 Calendar YTD
2. Major On-Campus Crimes							174	Below targets for the month and year. YTD actuals are lower compared to last year
3. Average Response Time to In-Progress Calls for Service							5:00	Average response time YTD (4:19 minutes) is below YTD target (5:00 minutes)
4. Traffic Accidents Injury							36	YTD (32) same count as prior year actual.
5. Traffic Accidents Non-Injury							110	YTD above target and prior year, no discernable pattern
6. Off-Campus Crime Statistics							917	YTD above target by 17. Monetary damages of \$115,000 from July to May 2025. 39% of cases categorized as Motor Vehicle Theft (27%), and 61% of all campus crimes YTD related to Alarmed/Motor Vehicle Theft (58), Motor Vehicle Theft (27%), and Theft from Motor Vehicle

* For B3, Capital Investment Program Spend, Green = "Target %Variance" of + or - 10%, with an additional Yellow range extending 10% above and 20% below the Green range.

** For B4, Facility Condition Index, Green: <= 0.09, <= 0.15; Red: > 0.15; Target %Variance = Actual - Target.

*** For B6, Parking Garage Peak Time Occupancy %, the target is 80% + or - 5% pts., with an additional 5% pt. Yellow range in both directions. Peak time measured on weekdays between 12:30 and 1:30 p.m.



Major Project Updates

Projects over \$20M – July 2025

Project Status Report - Current Projects Over \$20M

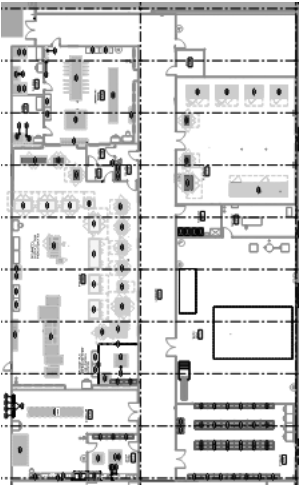
PROJECT NAME	CONSTRUCTION COMPLETION DATE	APPROVALS		BUDGET	ON TIME	ON BUDGET
		DES	CON			
Battery Cell Research & Demonstration Center	9/25	✓	✓	\$23.7 M		
Wexner Medical Center Inpatient Hospital	10/25	✓	✓	\$1,943.0 M		
Waterman Multispecies Animal Learning Center (MALC)	11/25	✓	✓	\$60.1 M		
Tunnel Rehabilitation Phase I	11/25	✓	✓	\$42.0M		
Biomedical and Materials Engineering Complex Phase 2	2/26	✓	✓	\$94.3 M		
Combined Heat & Power Plant/District Heating & Cooling Loop	4/26	✓	✓	\$420.8 M		
Campbell Hall Renovation	4/26	✓	✓	\$61.2 M		
Wexner Medical Center Outpatient Care Powell	4/26	✓	✓	\$183.0M		
Ohio State East Hospital 4th Floor OR Renovation	12/26	✓	✓	\$22.3 M		
TOTAL – PROJECTS				\$2,850.4 M		

On Track

Watching Closely

Not on Track

Battery Cell Research & Demonstration Center



Battery Cell Research & Demonstration Center

This facility is a research and development (R&D) prototype pilot site designed for small scale, experimental testing of new materials, battery cell designs, and processes. It functions as a laboratory to validate concepts, refine designs, and test prototype cells, helping to identify potential issues before foundation partners commit to large-scale investments at their respective production facilities.

PROJECT FUNDING: Corporate Partners, NIST

PROJECT UPDATE: Final inspections (excluding the Formation Room) are complete.

Commissioning for partial occupancy is on track for mid-September, with production equipment installation and connections continuing through September.



CURRENT BUDGET	
Construction w/ Cont	\$17.7 M
Total Project	\$23.7 M

CONSULTANTS	
Architect of Record	Wellogy
CM at Risk	Whiting Turner

PROJECT SCHEDULE	
BoT Approval	08/23
Construction	07/24-09/25
Facility Opening	09/25



Wexner Medical Center Inpatient Hospital



WEXNER MEDICAL CENTER INPATIENT HOSPITAL

New 1.9M square foot inpatient hospital tower with up to 820 beds in private room settings replacing and expanding on the 440 beds in Rhodes Hall and Doan Hall including an additional 84 James beds. Facilities include state-of-the-art diagnostic, treatment and inpatient service areas including emergency department, imaging, operating rooms, 51 neonatal intensive care unit bassinets, critical care and medical/surgical beds, and leading-edge digital technologies to advance patient care, teaching and research.

PROJECT FUNDING: University debt; fundraising; auxiliary funds

PROJECT UPDATE: Turnover of Levels 15–18 was completed May 2025. Levels 19–23 and portions of L5 were completed July 2025. Installation of FF&E and Technology ongoing on LL thru L20. 10th Avenue re-opened June 17th. Forecourt Phase 2 Canopy Steel Complete.



CURRENT BUDGET		CONSULTANTS	
Construction w/ Cont	\$1,774.2 M	Architect of Record	HDR
Total Project	\$1,943.0 M	CM at Risk	Walsh-Turner (JV)

PROJECT SCHEDULE	
BoT Approval	2/18
Construction	9/20-10/25
Facility Opening	Q1/Q2 2026



Waterman Multispecies Animal Learning Center (MALC)



MULTISPECIES LEARNING CENTER

Construction of a new 100,000 square foot animal facility and a new 24,000 square foot dairy to support the College of Food, Agricultural, and Environmental Sciences (CFAES) strategy for Waterman by providing access to animals, educational spaces, technology, equipment, and amenities. Program spaces include animal barns, a multi-purpose indoor arena, teaching, meeting and event spaces.

PROJECT FUNDING: University funds, state funds, fundraising

PROJECT UPDATE: Structural framing is complete. Underground mechanical, electrical and plumbing work is ongoing. The arena and multispecies barns, including the dairy barn, are enclosed.

CURRENT BUDGET	
Construction w/ Cont	\$49.7 M
Total Project	\$60.1 M

CONSULTANTS	
Architect of Record	Wellogy
CM at Risk	CK Construction

PROJECT SCHEDULE	
BoT Approval	08/23
Construction	02/24-11/25
Facility Opening	12/25



Tunnel Rehabilitation Phase I



TUNNEL REHABILITATION PHASE I

This project is a multiphase project to address deferred maintenance including structural repairs, removal of asbestos containing materials, drainage and water infiltration damage. The work will occur in the McCracken tunnel segment in the Academic core near McCracken Power Plant, Cockins Hall, Math Building, Math Tower and 209 W. 18th. Scope will also include waterline replacements and hardscape improvements at a north section of the Oval near Hughes, Hayes, Derby, Bricker and University Halls. This project will also include OSEP utility scope within the tunnels needed to preserve campus operations.

PROJECT FUNDING: University funds, University debt, State funds, Partner funds (OSEP/ENGIE)
PROJECT UPDATE: Midwest campus work complete. McCracken tunnel segment construction is underway. S. Neil tunnel package is in design with construction to begin Spring 2026.

CURRENT BUDGET	
Construction w/ Cont	\$26.8M
Total Project	\$42.0M

PROJECT SCHEDULE	
BoT Approval	08/24
Construction	03/25-11/25
Facility Opening	11/25

CONSULTANTS	
Architect of Record	RMF Engineering
MW Campus: General Contracting	McDaniel's Construction
N. McCracken: General Contracting	McDaniel's Construction



Biomedical and Materials Engineering Complex Phase 2



BIOMEDICAL AND MATERIALS ENGINEERING COMPLEX PHASE 2

This project will demolish Watts Hall (35,500 square feet) and renovate MacQuigg Laboratory (76,300 square feet) and include an addition to MacQuigg. The project will provide facilities for first year engineering, biomedical engineering and materials engineering. It will provide improved building services and create a dynamic and energy efficient facility.

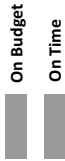
PROJECT FUNDING: State funds, fundraising, university debt, university funds

PROJECT UPDATE: Installation of mechanical, electrical and plumbing infrastructure is ongoing on all levels. Window frames are being installed along with exterior sheathing and brick. Roofing and civil infrastructure will be completed during the summer months. The Magee Family Plaza between Chemistry Engineering and Fontana will be completed prior to student return in August 2025.

CURRENT BUDGET	
Construction w/ Cont	\$84.4 M
Total Project	\$94.3 M

CONSULTANTS	
Architect/Engineer	DLR Group
CM at Risk	Walsh Construction

PROJECT SCHEDULE	
BoT Approval	05/23
Construction	08/23–02/26
Facility Opening	05/26



Combined Heat & Power Plant / District Heating & Cooling Loop



COMBINED HEAT AND POWER PLANT/ DISTRICT HEATING AND COOLING LOOP – CHP/ DHC

105 MW combined heat and power (CHP) plant, with a heating capacity of 285 klb/hr of superheated steam. The CHP plant will also contain an 8,000-ton cooling facility with future build-out potential to 13,000-ton. Installation of heating hot water (HHW) and chilled water (CW) on the midwest and west campuses to support existing and new campus buildings. Rehabilitation of John Herrick Drive bridge to support new utilities which connect the CHP to central campus.

PROJECT FUNDING: Utility fee

PROJECT UPDATE: Plant operation is expected April 2026. The team is closely monitoring the budget and actively managing the financial and operational risks.

CURRENT BUDGET		CONSULTANTS	
Total Project	\$420.8 M	Operator's Engineer	HDR
PROJECT SCHEDULE		Design-Builder (CHP)	ENGIE
BoT Approval	08/19	CMR (DHC/Bridge)	Whiting Turner/CK
Construction	04/26	A/E (DHC)	RMF Engineering
Facility Opening	04/26	A/E (Bridge)	EMH&T

On Budget On Time

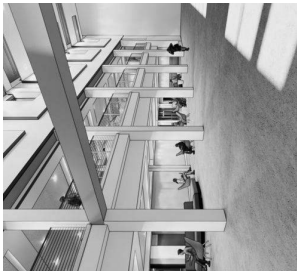
Campbell Hall Renovation

CAMPBELL HALL RENOVATION

This project will renovate the 115,000 square feet of Campbell Hall. The interior renovation will enable the College of Education and Human Ecology's longtime goal of centralizing teaching, research, and administrative functions along Neil Avenue. The project will address all deferred maintenance including new MEP systems, roofing, building envelope, and windows.

PROJECT FUNDING: State Funding, Fund Raising & Local Funds

PROJECT UPDATE: Exterior window installation is complete. Interior finishes are progressing throughout. Mechanical, electrical, and plumbing rough-ins are complete on lower floors and progressing to upper floors with main mechanical units in place to provide heat for Winter 2025.



CURRENT BUDGET	
Construction w/ Cont	\$48.0 M
Total Project	\$61.2 M

CONSULTANTS	
Architect of Record	Schooley Caldwell
CM at Risk	CK Construction Group

PROJECT SCHEDULE	
BoT Approval	5/23
Construction	07/23 - 04/26
Facility Opening	05/26



Wexner Medical Center Outpatient Care Powell



WEXNER MEDICAL CENTER OUTPATIENT CARE POWELL

Construct an approximately 200,000 square foot outpatient facility that will include a five-story medical office building and two-story ambulatory health center which includes imaging, outpatient rehab/PT, endoscopy, and support services.

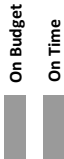
PROJECT FUNDING: Auxiliary funds

PROJECT UPDATE: Site wide tree planting, walking path and exterior lighting continues. Exterior brick work is wrapping up as the building is now enclosed. Interior wall framing and overhead MEP installation have begun on all floors as finishes have begun on floors 1, 2 and 3 of the MOB.

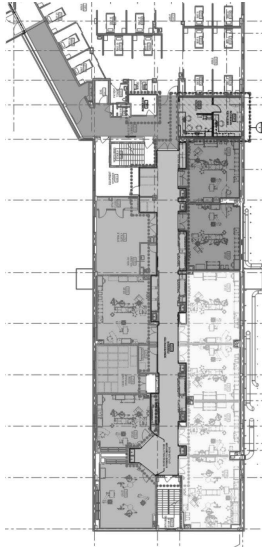
CURRENT BUDGET	
Construction w/ Cont	\$150.4M
Total Project	\$183.0 M

CONSULTANTS	
Architect of Record	DLR
CM at Risk	CK Construction

PROJECT SCHEDULE	
BoT Approval	02/24
Construction	04/24-04/26
Facility Opening	08/26



Ohio State East Hospital 4th Floor OR Renovation



OHIO STATE EAST HOSPITAL 4TH FLOOR OR RENOVATION

This project will renovate the existing Operating Rooms (OR) on the 4th Floor of the North Main Hospital Building. This project will go from 10 ORs to 9, as part of a projected 6-phase construction project. The existing operating rooms will be enlarged to meet joint commission requirements, add more designated storage areas, and add additional workspace. Two new air handler units will also be installed.

PROJECT FUNDING: Auxiliary funds

PROJECT UPDATE: Phase 2 of the project is underway. Framing and overhead MEP work continues. The new AHU and chiller have been set on the roof and progress continues. Unforeseen conditions will require additional demolition. The project team is actively evaluating the impacts to the project schedule.

CURRENT BUDGET		CONSULTANTS	
Construction w/ Cont	\$18.2 M	Architect of Record	IKM Architects
Total Project	\$22.3 M	CM at Risk	Messer

PROJECT SCHEDULE	
BoT Approval	05/23
Construction	12/24-12/26
Facility Opening	01/2027



APPENDIX VII



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

August 13, 2025 – Finance and Investment Committee Meeting

Members Present:

Tomislav B. Mitevski
Pierre Bigby

Gary R. Heminger
George A. Skestos

John W. Zeiger (ex officio)

Members Present via Zoom:

Michael F. Kiggin

Amy Chronis

Members Absent:

Kent M. Stahl

EXECUTIVE SESSION

The Finance and Investment Committee of The Ohio State University Board of Trustees convened on Wednesday, August 13, 2025, in person at Longaberger Alumni House on Ohio State's Columbus campus. Committee Chair Tomislav Mitevski called the meeting to order at 9:30 a.m.

It was moved by Mr. Mitevski and seconded by Mr. Bigby that the committee recess into executive session to consider business-sensitive trade secrets. A roll-call vote was taken, and the committee voted to go into executive session with the following members present and voting: Mr. Mitevski, Mr. Bigby, Mr. Kiggin, Mr. Skestos, Ms. Chronis and Mr. Zeiger. Mr. Heminger was not present for this vote.

The committee entered into executive session at 9:31 a.m. and reconvened in public session at 11:24 a.m.

PUBLIC SESSION

Items for Discussion:

1. Annual Financial Overview: Senior Vice President and Chief Financial Officer Michael Papadakis provided a high-level overview of the university's preliminary financial performance during fiscal year 2025. Highlights include an increase in operating revenue of \$982 million, a significant driver of which was healthcare. Investment income was up by \$235 million, year over year, and overall net position grew by 12% to \$12.6 billion in total. Expenses also rose, driven by ongoing strategic investments. The health system demonstrated strong performance as well, closing the fiscal year with an operating margin of \$310 million, a \$25 million increase over FY24.

Mr. Papadakis also noted that the university received a rating increase from S&P Global earlier this year to AA+. This is the institution's second rating upgrade in the last two years. He also reviewed the university's progress over the past five years in growing cash investments and the performance of the Long-Term Investment Pool as well as other intermediate and short-term investments. The university and medical center both surpassed targets for efficiencies and new resource generation.

(See Attachment VI for background information, page 268)



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2. FY26 Operating Budget: Mr. Papadakis began by reviewing the collaborative process that takes place with units across the institution. This begins in the fall of each year and includes input through the shared governance system on the university side. Vice President and Deputy Chief Financial Officer Kris Devine highlighted changes in the final budget compared to the interim budget approved by the Board of Trustees in May. These include a slight decrease in tuition-and-fee revenue as a result of a smaller class size and a slight increase in operating support from the state. The FY26 budget anticipates a drop in federal grant revenues and projects a total financial aid spend of \$527 million from both internal and external sources.

Wexner Medical Center Chief Financial Officer Richard Silveria reviewed the budget for the health system. Operating revenues are projected to increase 8.6% but will be outpaced by a 10.3% increase in expenses in the year ahead. The process of bringing the new hospital tower online is propelling many of these expenses. For example, the medical center anticipates hiring 1,000 new employees this fall to help staff the facility. Over time, additional revenues generated by services provided in the tower will balance out, and then exceed, these costs.

(See Attachment VII for background information, page 287)

3. FY26 Capital Investment Plan and FY26 Ohio State Energy Partners Capital Plan: The FY26-30 capital improvements plan includes over \$1.2 billion in continuing spending and \$328.8 million in new spending. New expenses include six projects that will cost over \$4 million: two in the Department of Athletics, one in the College of Dentistry, two in the College of Nursing, and one encompassing several dormitories. Eighty-three percent of these new outlays will be funded with cash.

All of the items in the Ohio State Energy Partners capital plan are life-cycle projects to maintain current operations.

(See Attachment VIII for background information, page 298)

4. Advancement Update: Senior Vice President for Advancement Michael Eicher reported on fundraising and engagement during FY25. The university set a new record in gifts and pledges, documenting a total of \$825.4 million in new fundraising activity and \$628.3 million in cash receipts. Giving from all sources increased over the past year, with the exception of foundation giving, which decreased 14%. Mr. Eicher then discussed the university's performance engaging recurring, new and lapsed donors; event attendance and experience; and goals for the coming year.

(See Attachment IX for background information, page 309)

Items for Action:

5. Approval of Minutes: No changes were requested to the May 14, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.
6. Resolution No. 2026-25, Approval of Fiscal Year 2026 Operating Budget:

Synopsis: Approval of the Operating Budget for the Fiscal Year ending June 30, 2026, is proposed.

WHEREAS The State of Ohio Biennial Budget for State Fiscal Years 2026 and 2027, including funding levels for State institutions of higher education, has been signed into law; and

WHEREAS Tuition and mandatory fee levels for the Columbus and Regional Campuses for the Academic Year 2025-2026 were proposed at the May 21, 2025, Board of Trustees meeting; and



THE OHIO STATE UNIVERSITY

WHEREAS The Administration now recommends approval of the Fiscal Year 2026 Operating Budget for the University for the Fiscal Year ending June 30, 2026.

NOW THEREFORE

BE IT RESOLVED, That the University's Operating Budget for the Fiscal Year ending June 30, 2026, as described in the accompanying Fiscal Year 2026 Operating Budget Book for the Fiscal Year ending June 30, 2026, be approved with authorization for the President to make expenditures within the projected income.

(See Appendix XXI for background information, page 675)

7. Resolution No. 2026-21, Approval of Fiscal Year 2026 Capital Investment Plan:

Synopsis: Authorization and acceptance of the Capital Investment Plan for the fiscal year ending June 30, 2026, as proposed.

WHEREAS the university has presented the recommended capital expenditures for the fiscal year ending June 30, 2026; and

WHEREAS the recommended capital expenditures are the result of the university's comprehensive annual capital planning process; and

WHEREAS only those projects outlined in these recommendations will be approved for funding;

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that Capital Investment Plan for the fiscal year ending June 30, 2026, as described in the accompanying documents, be approved; and

BE IT FURTHER RESOLVED, That any request for authorization to proceed with any project contained in these recommendations must be submitted individually by the university for approval by the Board of Trustees, as provided for by Board policy.

(See Appendix XVII for background information, page 652)

8. Resolution No. 2026-23, Approval of the Ohio State Energy Partners Utility System Capital Improvements Plan for Fiscal Year 2026:

Utility System Life-Cycle Renovation, Repair and Replacement Projects

Synopsis: Approval of the Ohio State Energy Partners LLC ("OSEP") utility system capital improvements plan ("OSEP CIP") for fiscal year 2026; authorization for OSEP to make such capital improvements pursuant to the terms of the First Amended and Restated Long-Term Lease and Concession Agreement for The Ohio State University Utility System dated July 20, 2018, and as amended (the "Agreement").

WHEREAS the Agreement requires OSEP to annually submit an OSEP CIP for approval; and

WHEREAS the Board of Trustees approved an interim fiscal year 2026 OSEP CIP in May 2025, prior to the university's finalization of its capital investment plan for fiscal year 2026; and

WHEREAS the university has now finalized its capital investment plan for fiscal year 2026; and



THE OHIO STATE UNIVERSITY

WHEREAS the fiscal year 2026 OSEP CIP includes the requests for approval of these utility system capital improvement projects for the fiscal year beginning July 1, 2025; and

WHEREAS OSEP has provided detailed descriptions of the proposed capital improvement projects, including the construction schedules and supporting technical data and analysis, pursuant to Section 4.3(c) of the Agreement; and

WHEREAS these utility system capital improvement projects will be delivered pursuant to the terms of the Agreement, including the schedules as detailed in the project approval requests; and

WHEREAS these capital expenditures for the approved OSEP CIP utility system projects will be added to the utility fee pursuant to the Agreement and any associated university directives; and

WHEREAS the university has reviewed and considered the financial, technical, and operational aspects of the projects and the OSEP CIP alignment with university plans and sustainability goals; and

WHEREAS the Master Planning & Facilities Committee has reviewed the OSEP CIP for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance & Investment Committee has reviewed the OSEP CIP for alignment with the Capital Investment Plan and other applicable financial plans:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves the fiscal year 2026 OSEP CIP; and

BE IT FURTHER RESOLVED, That the Board of Trustees authorizes OSEP to proceed with these fiscal year 2026 capital improvements to the Utility System as outlined in the attached materials.

(See Appendix XIX for background information, page 664)

9. Resolution No. 2026-26, Approval of Appointment to the Self-Insurance Board:

Synopsis: Appointment of a member to the Self-Insurance Board is proposed.

WHEREAS the Board of Trustees directed that a Self-Insurance Board be established to oversee the University Self-Insurance Program; and

WHEREAS all members of the Self-Insurance Board are appointed by The Ohio State University Board of Trustees upon recommendation of the President.

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approve that the following individual be appointed as a member of the Self-Insurance Board effective September 1, 2025, for the term specified below:

Christopher A. Cray, term ending June 30, 2027

BE IT FURTHER RESOLVED, That this appointment entitles each member to any immunity, insurance or indemnity protection to which officers and employees of the University are, or hereafter may become, entitled.



THE OHIO STATE UNIVERSITY

10. Resolution No. 2026-27, Approval of the University Foundation Report:

Synopsis: Approval of the University Foundation Report as of June 30, 2025, is proposed.

WHEREAS monies are solicited and received on behalf of the university from alumni, industry, and various individuals in support of research, instructional activities, and service; and

WHEREAS such gifts are received through The Ohio State University Foundation; and

WHEREAS this report includes: (i) the establishment of two (2) endowed chairs: the Dr. Harold "Hal" Miller and Betty J. Miller Endowed Chair in Organic Chemistry and Biochemistry and the Endowed Chair in Integrative Health; five (5) endowed professorships: the Honda Endowed Professorship in Artificial Intelligence in Mechanics and Manufacturing, the Dr. John M. McGregor Department of Neurosurgery Professorship, the Jeffrey Professorship in Children, Young Adult and Family Psychiatry, The Leon M. McCorkle Jr. Professorship in Commercial Law, and the Colleen McMahon Professorship in Music; two (2) professorship funds: The Ernestine R. Lowrie Professorship Fund in Thoracic Surgery and the Wayne Urban Endowed Professorship Fund; one (1) scholarship as part of the Scarlet and Gray Advantage Endowed Matching Gift Program; and twenty-one (21) additional named endowed funds; (ii) the revision of twenty-six (26) named endowed funds:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves The Ohio State University Foundation Report as of June 30, 2025.

(See Appendix XXII for background information, page 726)

11. Resolution No. 2026-28, Naming of Internal Spaces in University Hospital:

IN UNIVERSITY HOSPITAL

Synopsis: Approval for the naming of internal spaces in the University Hospital located at 650 W. 10th Avenue is proposed.

WHEREAS The Ohio State University is taking a major step forward with the development of the new University Hospital that, combined with modern educational space, will enhance a unified Ohio State Wexner Medical Center campus; and

WHEREAS the Ohio State Wexner Medical Center campus provides leading-edge research, outstanding clinical training and world-class patient care; and

WHEREAS the following donors have provided significant contributions to the Wexner Medical Center and University Hospital; and

- Stan and Jodi Ross
- Dr. Mark Landon
- Dawson Fund
- Cindy and Larry Hilsheimer

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy;

NOW THEREFORE



THE OHIO STATE UNIVERSITY

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned spaces be named the following:

- Stanley D. and Joan H. Ross Neurosciences Critical Care Unit (Floor 14)
- Mark B. Landon, MD and Jane Landon Visitor Lounge (Floor 23 Visitor Lounge)
- Janet and Elden Thomas Sanctuary (Room 2075)
- Cindy and Larry Hilsheimer Chairman's Conference Room (Room 0075)

12. Resolution No. 2026-29, Naming of Internal Spaces in the Riffe Building:

IN THE RIFFE BUILDING

Synopsis: Approval for the naming of the 2nd floor pharmacy classroom (classroom A) and the student lounge in the Riffe Building, located at 496 W. 12th Ave, is proposed.

WHEREAS the College of Pharmacy is consistently ranked a top pharmacy school in the country, home to world-class faculty, dedicated students and innovative researchers working toward improving medications and medication-related health outcomes; and

WHEREAS the College of Pharmacy commits to providing students access to state-of-the-art facilities and spaces to promote learning; and

WHEREAS the donors listed below have provided significant contributions to the Riffe Building renovations; and

- Dr. Robert Weber and Mrs. Barbara Weber
- Mrs. Ann M. Klein and Mr. Barry E. Klein

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned spaces be named the following:

- Dr. Robert J. and Barbara B. Weber Classroom
- Ann & Barry Klein Family Student Lounge

13. Resolution No. 2026-30, Naming of Internal Spaces in Mason Hall:

IN MASON HALL

Synopsis: Approval for the naming of internal spaces in Mason Hall, located at 250 W. Woodruff Avenue, is proposed.

WHEREAS Mason Hall is currently undergoing renovations to accommodate the growing and changing needs of Max M. Fisher College of Business students, reinforcing the university's commitment to being a preeminent business school that creates transformational ideas and leaders; and



THE OHIO STATE UNIVERSITY

WHEREAS Mason Hall includes state-of-the-art spaces for active learning and research to the benefit of students and faculty; and

WHEREAS the donors listed below have provided significant contributions to Fisher College of Business and are currently recognized with spaces affected by the renovation; and

- Nu Chapter Delta Sigma Pi Corporation
- Kathryn Esselburn
- Charles and Lynne Klatskin

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the spaces be named the following:

- Nu Chapter Delta Sigma Pi Corporation Room (room 133)
- Esselburn Breakout Room (room 140D)
- Neil M. Klatskin Conference Room and Neil M. Klatskin Collaborative and Learning Resource Corridor

14. Resolution No. 2026-31, Naming of Internal Space in The James Outpatient Care:

IN THE JAMES OUTPATIENT CARE

Synopsis: Approval for the naming of room 1234 in The Ohio State University Wexner Medical Center James Outpatient Care facility, located at 2121 Kenny Road, is proposed.

WHEREAS The James Outpatient Care facility provides convenient access to state-of-the-art health services for The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (OSUCCC – James) patients; and

WHEREAS the facility includes a variety of services supporting the OSUCCC – James program; and

WHEREAS Albert & Karen Sheridan and Stephen Sheridan have provided significant contributions to the OSUCCC – James and the James Outpatient Care facility; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That in acknowledgement of the aforementioned donors' philanthropic support, the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the internal space be named the following:

- Generous gift from the Metzger/Sheridan Family Fund (Room 1234)



THE OHIO STATE UNIVERSITY

15. Resolution No. 2026-32, Naming of Innovation District at Ohio State:

Synopsis: Approval for the administrative renaming of the university's innovation community, currently known as Carmenton, is proposed.

WHEREAS the administrative naming of the university's innovation community was approved on May 19, 2022; and

WHEREAS upon further consideration with stakeholders as plans for the district have evolved, a new name is recommended that provides brand clarity and accurately conveys the district's purpose; and

WHEREAS this change does not affect the names of streets approved on May 19, 2022; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Innovation District at Ohio State.

16. Resolution No. 2026-33, Naming of the Waterman – Multispecies Animal Learning Complex:

IN THE COLLEGE OF FOOD, AGRICULTURAL, AND ENVIRONMENTAL SCIENCES

Synopsis: Approval for the naming of the Multispecies Animal Learning Complex, located at the northwest corner of Lane Avenue and Kenny Road, is proposed.

WHEREAS the new Multispecies Animal Learning Complex (MALC) is being constructed to meet the aims of the Waterman Agricultural and Natural Resources Laboratory to provide comprehensive agricultural education; and

WHEREAS the College of Food, Agricultural, and Environmental Sciences (CFAES) aims to maintain consistent nomenclature across Waterman Complex; and

WHEREAS CFAES recommends and Planning, Architecture and Real Estate reviewed this change; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Waterman—Multispecies Animal Learning Complex.

17. Resolution No. 2026-34, Naming of Outpatient Care Powell:

IN THE WEXNER MEDICAL CENTER

Synopsis: Approval for the naming of the Powell outpatient care location (building #1046), located at 7171 Sawmill Parkway, is proposed.



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WHEREAS the new Powell outpatient facility is part of the Wexner Medical Center's suburban outpatient care program, supporting growth in the region and excellence in academic health care; and

WHEREAS the facility will provide convenient access to comprehensive health care services to the Powell community; and

WHEREAS the Wexner Medical Center recommends and Planning, Architecture and Real Estate reviewed this change; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named Outpatient Care Powell.

18. Resolution No. 2026-35, Naming of Commercial Vehicle Innovation Laboratory:

IN THE COLLEGE OF ENGINEERING

Synopsis: Approval for the administrative naming of the building located at 920 Kinner Road (building #1145) in the College of Engineering, is proposed.

WHEREAS the building being constructed at 920 Kinner Road will further the mission of the Center for Automotive Research; and

WHEREAS this facility name accurately reflects its purpose and current naming standards within the College of Engineering; and

WHEREAS the College of Engineering recommends and Planning, Architecture and Real Estate reviewed these changes; and

WHEREAS the naming has been reviewed according to the approval process outlined in the Naming of University Spaces and Entities policy:

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves, in accordance with paragraph (D) of rule 3335-1-08 of the Ohio Administrative Code, that for the life of the physical facility the aforementioned space be named the Commercial Vehicle Innovation Laboratory.

19. Resolution No. 2026-22, Approval to Enter Into/Increase Professional Services and Enter Into/Increase Construction Contracts:

APPROVAL TO ENTER INTO PROFESSIONAL SERVICES CONTRACTS

BLANKENSHIP HALL UPGRADES

BRAIN AND SPINE HOSPITAL – LOWER-LEVEL RENOVATION

DOAN HALL – PET/CT REPLACEMENT

OUTPATIENT CARE EAST – CLINIC RENOVATIONS & RELOCATIONS

APPROVAL TO ENTER INTO/INCREASE PROFESSIONAL SERVICES AND CONSTRUCTION CONTRACTS

EAST HOSPITAL – CHILLER & COOLING TOWER REPLACEMENT

HERRICK DRIVE REBUILD



1922 CLUB
POLARIS MEP UPDATES
600 ACKERMAN – SPECIALTY PHARMACY EXPANSION

APPROVAL TO INCREASE CONSTRUCTION CONTRACTS
TUNNEL REHABILITATION PHASE 1

Synopsis: Authorization to enter into/increase professional services and construction contracts, as detailed in the attached materials, is proposed.

WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts for the following projects; and

	Prof. Serv. Approval Requested	Total Requested	
Blankenship Hall Upgrades	\$1.2M	\$1.2M	University funds
Brain and Spine Hospital – Lower-Level Renovation	\$0.3M	\$0.3M	Auxiliary funds
Doan Hall – PET/CT Replacement	\$0.4M	\$0.4M	Auxiliary funds
Outpatient Care East – Clinic Renovations & Relocations	\$1.1M	\$1.1M	Auxiliary funds

WHEREAS in accordance with the attached materials, the University desires to enter into/increase professional services contracts and enter into/increase construction contracts for the following projects; and

	Prof. Serv. Approval Requested	Construction Approval Requested	Total Requested	
East Hospital – Chiller & Cooling Tower Replacement	\$1.2M	\$5.8M	\$7.0M	Auxiliary funds
Herrick Drive Rebuild	\$0.6M	\$3.4M	\$4.0M	University debt
1922 Club	\$0.2M	\$14.3M	\$14.5M	University debt Auxiliary funds
Polaris MEP Updates	\$0.8M	\$6.6M	\$7.4M	Auxiliary funds
600 Ackerman – Specialty Pharmacy Expansion	\$1.2M	\$14.0M	\$15.2M	Auxiliary funds

WHEREAS in accordance with the attached materials, the University desires to increase construction contracts for the following projects; and

Construction Approval Requested	Total Requested
---------------------------------------	--------------------



Tunnel Rehabilitation Phase 1	\$5.5M	\$5.5M	University debt University funds State funds Partner funds
-------------------------------	--------	--------	---

WHEREAS the Master Planning and Facilities Committee has reviewed the projects listed above for alignment with all applicable campus plans and guidelines; and

WHEREAS the Finance Committee has reviewed the projects listed above for alignment with the Capital Investment Plan and other applicable financial plans.

NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby approves that the President and/or Senior Vice President for Business and Finance be authorized to enter into/increase professional services and construction contracts for the projects listed above in accordance with established university and State of Ohio procedures, with all actions to be reported to the board at the appropriate time.

(See Appendix XVIII for background information, page 654)

Action: Upon motion of Mr. Mitevski, seconded by Mr. Heminger, the foregoing motions were adopted by roll-call vote with the following members present and voting: Mr. Mitevski, Mr. Bigby, Mr. Heminger, Mr. Kiggin, Mr. Skestos, Ms. Chronis and Mr. Zeiger.

Written Reports

In the public session materials, there were four written reports shared for the committee to review:

- a. University Financial Scorecards
(See Attachment X for background information, page 310)
- b. Preliminary Consolidated Financial Statements for the Year Ending June 30, 2025
(See Attachment XI for background information, page 313)
- c. FY25 Annual Waiver of Competitive Bidding Report
(See Attachment XII for background information, page 319)
- d. Detailed Foundation Report
(See Attachment XIII for background information, page 325)

The committee adjourned at 11:59 p.m.

Annual University Financial Overview

Michael Papadakis, Senior Vice President and CFO

Finance & Investment Committee | August 13, 2025

Financial Performance Highlights

OPERATING REVENUES INCREASED \$982M IN FY25 COMPARED TO FY24, DRIVEN PRIMARILY BY:



HEALTHCARE REVENUES

\$772M increase in healthcare revenues, reflecting strong growth in outpatient and surgical volumes, as well as growth in chemotherapy, outpatient infusion, radiology and procedural care;



GRANTS AND CONTRACTS

\$24M increase in grants and contracts, primarily due to increases in private grants and contracts of \$18M and state grants and contracts of \$8M;



TUITION AND FEES

\$71M increase in student tuition, due primarily to increases in enrollment and rate increases in instructional and non-resident surcharges;



SALES AND SERVICES

\$85M increase in sales and services due to a \$45M increase in Athletics revenues (2 additional football games and increased Big Ten media rights), \$10M increase in OHTech sales, and \$6M increase in academic clinical services.



INVESTMENT INCOME

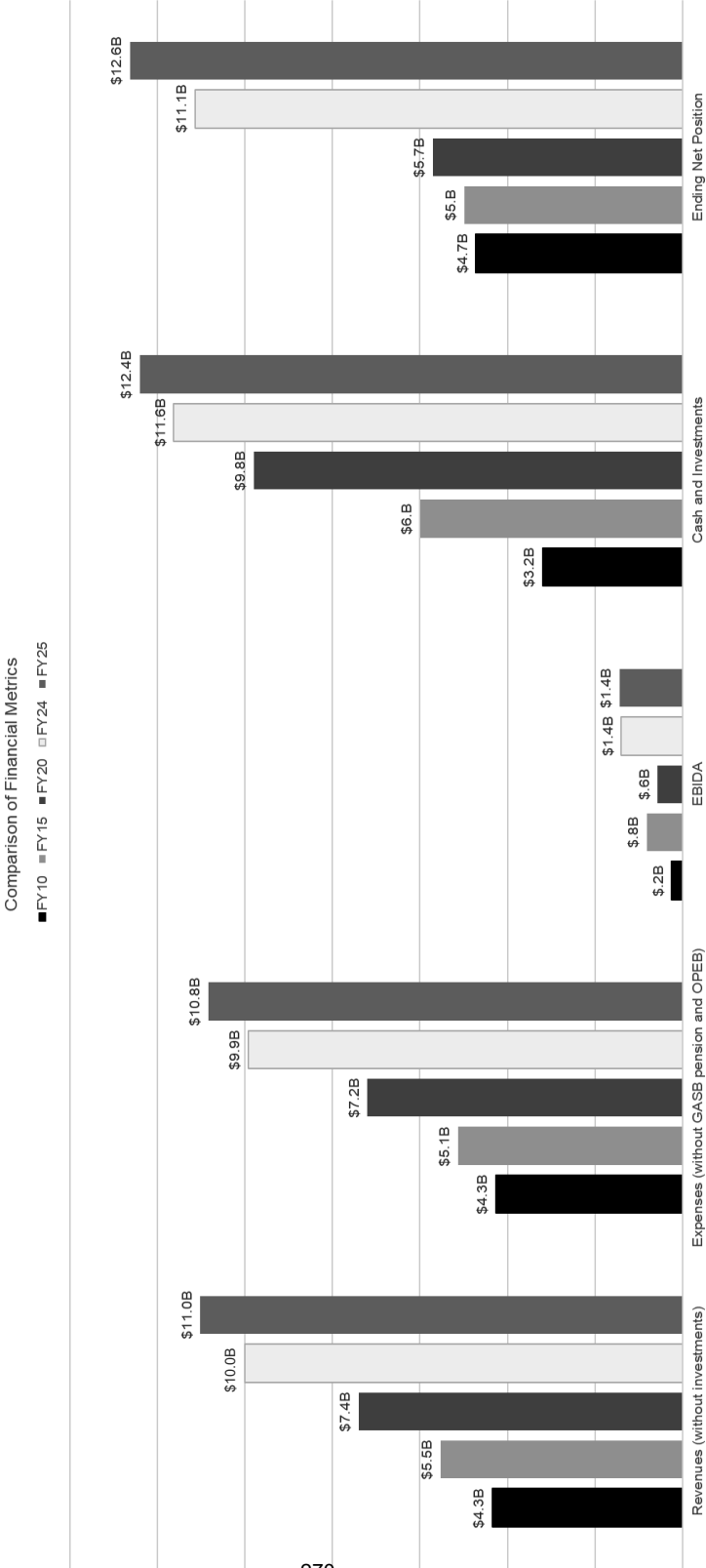
Net investment income remained strong in FY25 with a \$235M increase in net investment income over FY24 resulting from a strong performance for the LTIP (+11.81%) and strong returns for our short- and intermediate-term portfolios (6.04%).



NET POSITION

The FY25 increase in net position was \$1.49B bringing the total net position to \$12.6B.

Financial Metrics Demonstrate Positive Momentum



Consolidated Balance Sheet

(as of June 30)

Assets and Liabilities (\$ in millions)	2025	2024	2023
Cash and cash equivalents	\$ 826	\$ 1,167	\$ 1,240
Total investments	\$ 11,575	\$ 10,462	\$ 9,551
Capital assets, net	\$ 9,341	\$ 9,008	\$ 8,494
Pension and OPEB assets and deferred outflows	\$ 1,112	\$ 1,199	\$ 1,838
Other assets	\$ 2,119	\$ 1,841	\$ 1,690
Total Assets	\$ 24,973	\$ 23,677	\$ 22,813
Accounts payable and other current liabilities	\$ 1,558	\$ 1,421	\$ 1,325
Debt	\$ 3,823	\$ 3,909	\$ 3,715
Pension and OPEB liabilities and deferred inflows	\$ 4,378	\$ 4,539	\$ 4,998
Concessionaire and other liabilities	\$ 2,588	\$ 2,665	\$ 2,505
Total Liabilities	\$ 12,347	\$ 12,534	\$ 12,543

Net Position (\$ in millions)	2025	2024	2023
Ending net position (eliminate pension and OPEB)	\$ 15,476	\$ 14,071	\$ 13,003
Ending net position - pension and OPEB	\$ (2,850)	\$ (2,928)	\$ (2,733)
Total Net Position	\$ 12,626	\$ 11,143	\$ 10,270

Key Metrics	2025	2024	2023
Enterprise Days Cash on Hand	197 Days	214 Days	211 Days
Total Cash and Investments to Direct Debt	2.99x	2.76x	2.69x

Consolidated Income Statement (for the fiscal year ended June 30)

Total Revenue (\$ in millions)	2025	2024	2023
Tuition and Fees	\$ 1,165	\$ 1,094	\$ 1,060
Grants and Contracts	\$ 1,306	\$ 1,252	\$ 1,181
Sales and Services	\$ 674	\$ 589	\$ 596
Health System & OSUP Sales and Services	\$ 6,762	\$ 5,991	\$ 5,451
State Subsidies and Capital Appropriations	\$ 629	\$ 590	\$ 555
Gifts and Additions to Permanent Endowments	\$ 352	\$ 321	\$ 341
Other Revenues	\$ 134	\$ 166	\$ 154
Total Revenues (w/o investments)	\$ 11,022	\$ 10,003	\$ 9,338
Investment income	\$ 1,224	\$ 989	\$ 515
Total Revenues (w/ investments)	\$ 12,246	\$ 10,992	\$ 9,853
Total Expenses (\$ in millions)	2025	2024	2023
University Education and General Expenses	\$ 3,438	\$ 3,274	\$ 2,996
Auxiliary Sales and Services	\$ 501	\$ 450	\$ 405
Health System & OSUP	\$ 6,110	\$ 5,396	\$ 4,926
Depreciation	\$ 623	\$ 617	\$ 580
Interest Expense on Plant Debt	\$ 170	\$ 186	\$ 172
Total Expenses (w/o pension and OPEB)	\$ 10,842	\$ 9,923	\$ 9,079
Net Margin	\$ 1,404	\$ 1,069	\$ 774
Pension and OPEB Expense	\$ (79)	\$ 196	\$ 110
Total Expenses (w/ pension and OPEB)	\$ 10,763	\$ 10,119	\$ 9,189
Change in Net Position	\$ 1,483	\$ 873	\$ 664
Key Metrics	2025	2024	2023
EBIDA (\$)	\$ 1,435	\$ 1,396	\$ 1,350
Debt Service Coverage (EBIDA / Debt Service) *	4.89x	4.33x	5.22x

* Reflects Moody's calculation

OSU Health System Activity Summary (for the fiscal year ended June 30)

OSUWMC Consolidated Activity Summary			
	FY25 Actual	FY24 Actual	FY23 Actual
Discharges	61,330	60,903	61,228
Patient Days	418,487	428,036	433,885
Surgeries	60,769	58,897	56,040
Outpatient Visits	1,799,539	1,666,112	1,548,271
Average Length of Stay	6.82	7.03	7.09
Case Mix Index (CMI)	2.17	2.12	2.06

Operations - Health System (\$ in millions)			
	FY25 Actual	FY24 Actual	FY23 Actual
Total Operating Revenue*	\$ 5,144	\$ 4,539	\$ 4,125
Total Operating Expense	4,834	4,254	3,823
Excess of Revenue over Expense	\$ 310	\$ 285	\$ 302
Operating Margin %	6.2%	6.4%	7.5%

Adjusted Discharges			
	152,188	145,726	138,217
Operating Revenue per Adjusted Discharge	\$ 33,086	\$ 30,496	\$ 29,109
Operating Expense per Adjusted Discharge	\$ 30,356	\$ 28,044	\$ 26,648

* Includes investment income, Provider Relief Funds, & FEMA

Credit Ratings Overview

Higher Education & Healthcare Sector Outlooks

- Credit rating agencies continue to view the Higher Education and Healthcare Sectors as challenged and evolving, however outlooks have become less negative for the healthcare sector as post pandemic patient volumes continue to rebound.
- Macro headwinds persist for both sectors: Contributing factors include federal policy and inflationary headwinds, pressure on tuition revenue, and NCAA settlement payments in Higher Education. Federal policy impacts as well as labor and supply cost pressures remain a concern within the Healthcare sector.

Sector		Higher Education		Healthcare	
Rating Agency	Outlook	Comments	Outlook	Comments	
Moody's	Negative	Revised from Stable.	Stable		
S&P	Bifurcated	Negative on less selective institutions with limited financial flexibility. Stable on those with strong demand and robust financial resources.	Stable	Revised from Negative in CY24.	
Fitch	Deteriorating		Neutral	Improved from Deteriorating in CY23+CY24.	

- In March 2025, **S&P upgraded Ohio State to 'AA+'** and Moody's/Fitch affirmed the university's 'Aa1/AA+' ratings, each assigning a 'Stable' outlook. A **strong relationship continues** with the rating agencies and includes regular updates.
- S&P's upgrade reflects their views on the university's enrollment trend, flagship status, and position as a top research and academic center, citing strengths of recurring surplus from operations, strong balance sheet, and fundraising success.
- This marks Ohio State's 2nd credit rating upgrade in the last two years. Fitch upgraded the university to 'AA+' in early 2023. Prior to 2023, Ohio State had not received a credit rating upgrade since 2010 (Moody's to 'Aa1').

	Moody's	S&P	Fitch	Comment
Credit Rating	Aa 1	AA+	AA+	Reflects the 2 nd highest rating by each rating agency.
Rating Outlook	Stable	Stable	Stable	Outlook conveys possible direction of rating.

Investments

Cash & Investments

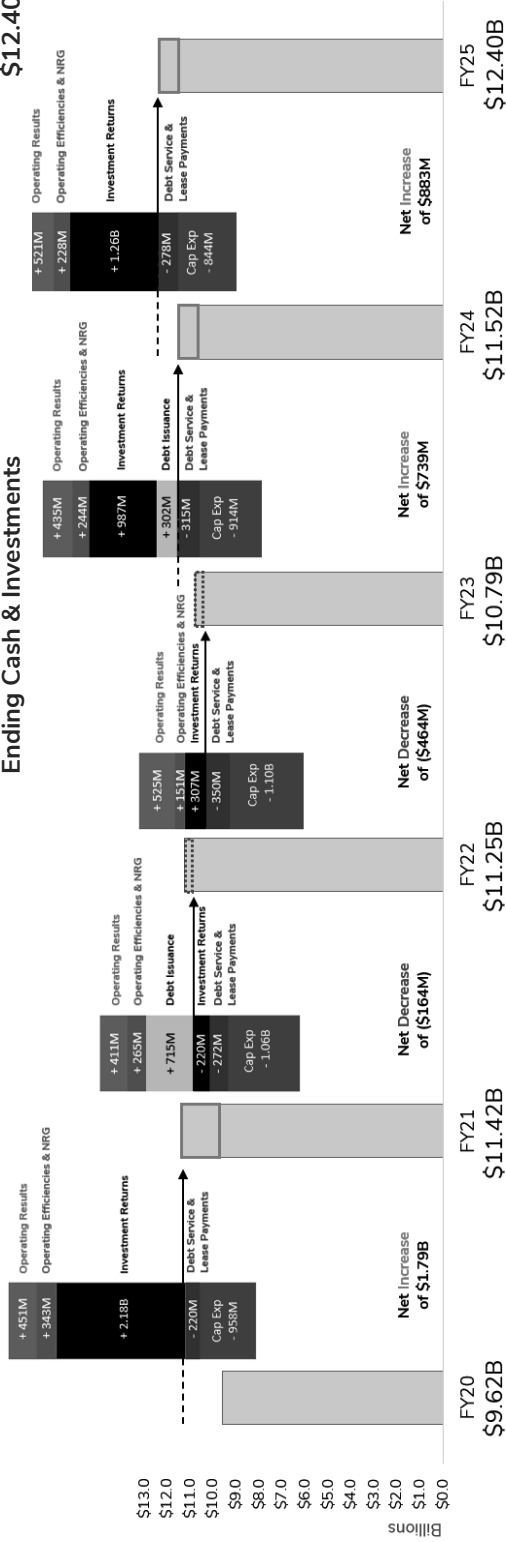
Significant impacts to cash and investments

5-YEAR SUMMARY

Beginning Cash & Investments	\$9.62B
Operating Results	+ \$2.34B
Operating Efficiencies & New Resource Generation (NRG)	+ \$1.23B
Investment Returns	+ \$4.50B
Debt Issuance	+ \$1.02B
Capital Expenditures	- \$4.88B
Debt Service & Lease Payments	- \$1.44B

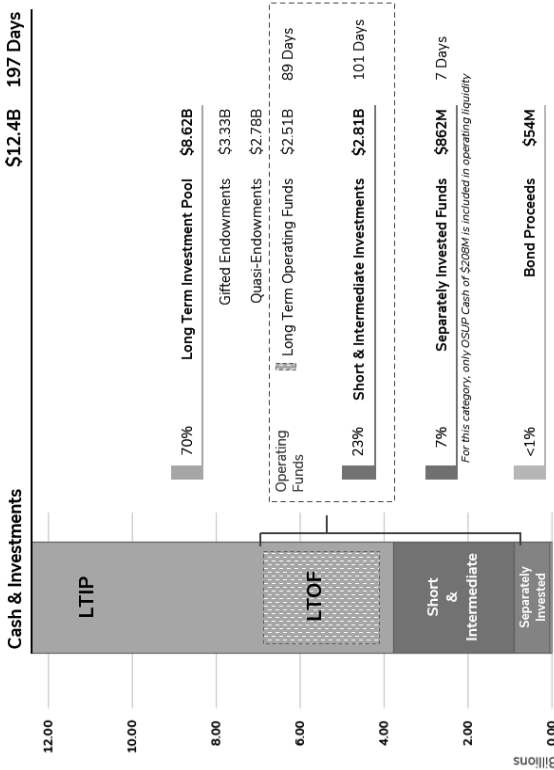
Ending Cash & Investments

\$12.40B



University Total Cash and Investments (as of 6/30/25)

- Cash and Investments totals \$12.4B and consists of the endowment (LTIP) and operating funds. Operating funds consist of Short & Intermediate Investments as well as Long-Term Operating Funds invested in the Long-Term Investment Pool. The FY25 year end operating funds portfolio balance was \$5.55B.
- The enterprise has 197 days of total liquidity. Operating liquidity, excluding operating funds in the LTIP, ended the year at 108 days—above the 90-day policy minimum. The university is prohibited from borrowing for operating purposes and, as such, seeks to maintain total liquidity levels above 180 days.
- In FY25, Short & Intermediate term investments returned 6.04% outperforming the benchmark by 51 bps. The total operating fund portfolio, inclusive of Long-Term Operating Funds invested in the LTIP, returned 8.61% and outperformed the benchmark by 129 bps.



Operating Funds Investment Performance

Excludes OSUP cash

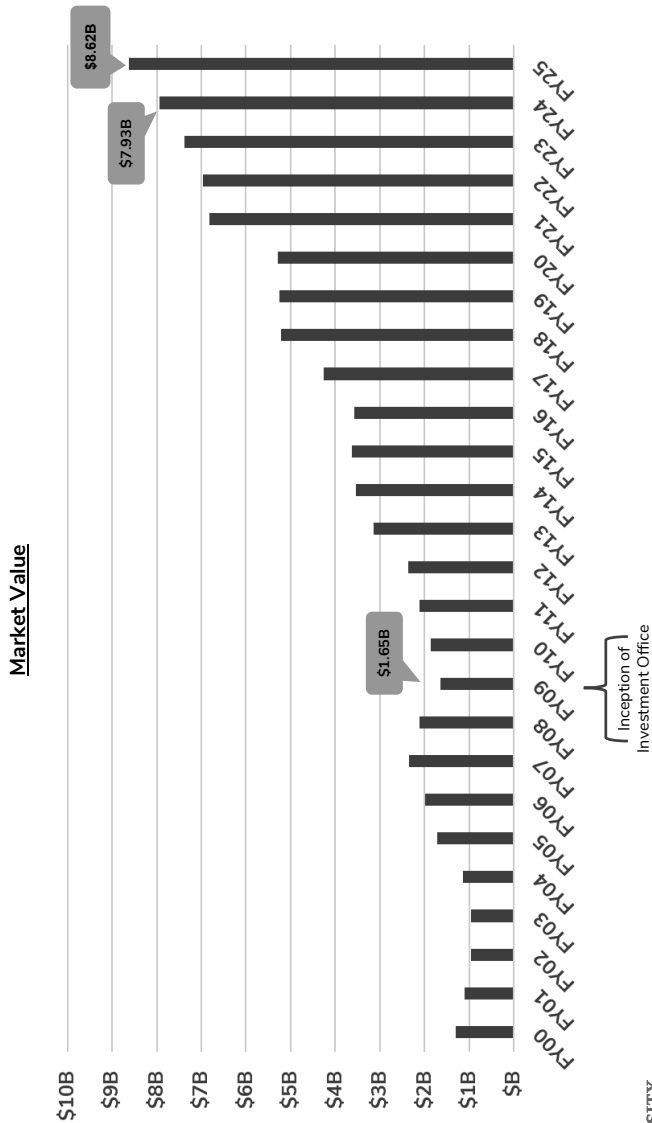
S&I Performance	FY25	FY24	3 yr	5 yr
Total Return	6.04%	5.82%	4.89%	2.74%
Composite Benchmark	5.53%	5.10%	4.12%	2.19%
Excess Return	0.51%	0.72%	0.77%	0.55%

LTIF Performance	FY25	FY24	3 yr	5 yr
Total Return	11.81%	10.78%	9.79%	11.55%
Composite Benchmark	9.54%	14.95%	9.65%	9.32%
Excess Return	2.27%	-4.17%	0.14%	2.23%

Total Return	8.61%	8.13%	7.14%	6.54%
Total Excess Return	1.29%	-1.56%	0.48%	1.28%

LTIP Market Value

In FY25 the LTIP increased in value from \$7.93B to \$8.62B and generated \$922M in investment income.

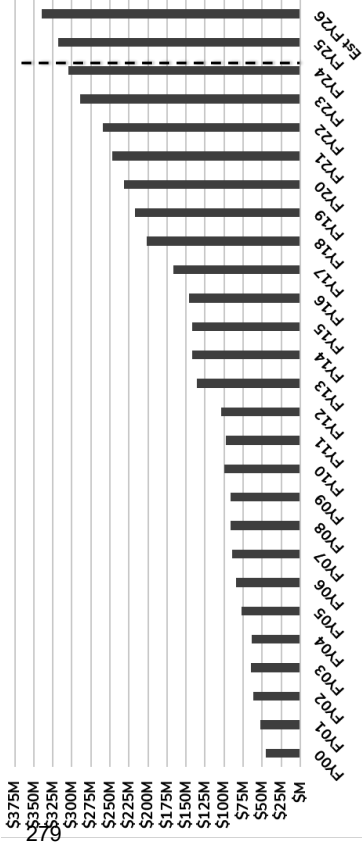


LTIP Distributions

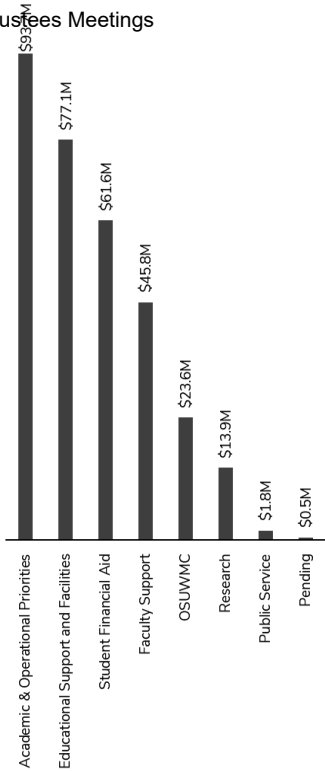
Since FY00, annual distributions from the LTIP to support university priorities have grown from \$46M to \$318M.

- Based on FY25 LTIP performance, FY26 distribution is estimated to be \$340M.
- Annual disbursements of 4.5%, based on a five-year average.

Historical and Projected Annual Distributions



FY25 Distributions: \$318M



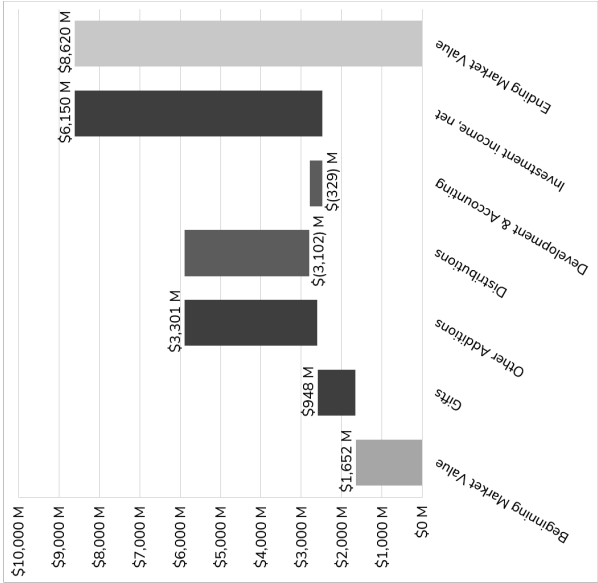
LTIP Summary as of June 30, 2025

	Portfolio Weight as of 6/30/25	Performance					
		Qtr	1 Year	3 Year	5 Year	10 Year	7/09-6/25
Public Equity	40.1%	11.33%	17.32%	16.51%	12.97%		
MSCI ACWI - ND		11.53%	16.17%	17.35%	13.65%		
Private Equity (Including Buyouts, Growth & Venture Capital)	27.0%	3.61%	10.22%	5.17%	17.22%		
MSCI ACWI - ND w/one quarter lag		-1.32%	7.15%	6.91%	15.18%		
Real Estate & Infrastructure	7.9%	-0.14%	8.08%	7.14%	11.34%		
Cambridge Associates Real Estate (50%) & Infrastructure		1.68%	2.90%	2.35%	9.21%		
Legacy Investments	2.3%	-2.77%	-13.79%	-7.29%	-0.72%		
Return of Actual Underlying Funds		-2.77%	-13.79%	-7.29%	-0.72%		
Hedge Funds (Including Liquid Credit & Illiquid Credit)	18.7%	3.28%	10.45%	10.03%	9.89%		
HFRI/FOF Composite		3.42%	7.25%	6.54%	6.21%		
Cash & High-Grade Bonds	3.9%	2.41%	8.43%	4.90%	2.07%		
Bloomberg Barclays US Aggregate Bond Index		1.21%	6.08%	2.55%	-0.73%		
LTIP Return		5.92%	11.81%	9.79%	11.55%	7.72%	8.63%
Total Consolidated Benchmark		4.65%	9.54%	9.65%	9.32%	7.78%	7.96%

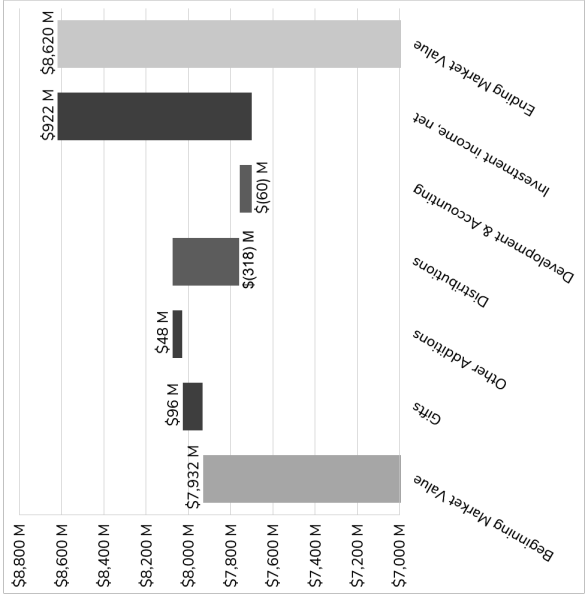
LTIP Market Value Roll Forward

Since inception and in FY25, the LTIP has grown through investment income, other additions and gifts, while funding significant distributions.

FY09 – FY25 LTIP Evolution



FY25 LTIP Evolution



Note: Chart starts at \$7B

Efficiency

3-Year Efficiency Targets

Efficiency Targets		FY23	FY24	FY25	Total
University		\$25M	\$60M	\$100M	\$185M
OSUWMC		\$30M	\$60M	\$90M	\$180M
Capital		\$30M	\$15M	\$15M	\$60M
Total		\$85M	\$135M	\$205M	\$425M

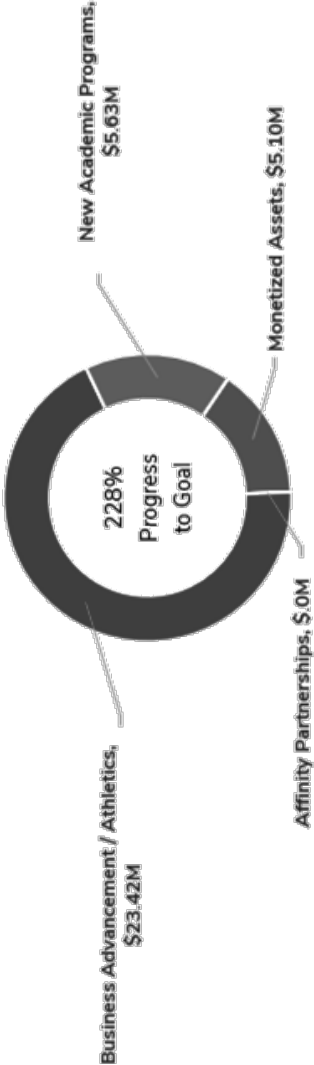


Operational Efficiency Progress Report

Efficiency Savings	FY25 Target	FY25 Total	Progress to Goal	Status
University	\$35M	\$48.69M	139%	
OSUWMC	\$30M	\$131.5M	438%	
Capital Efficiencies	\$15M	\$47.32M	315%	

New Resource Generation Goal: \$15M

Total: \$34.15M



Conclusion

Financial State of the University

- The university's overall financial position is strong, driven by a variety of factors, including our diversity of operations and our continued focus on operating and capital efficiencies, along with a strategic focus on growing new revenue streams.
- Operating revenues increased \$982M in FY25 compared to FY24, driven primarily by strong growth in healthcare revenues, sales and services and tuition and fee increases.
- Administrative efficiencies enabled us to redirect funds to our core mission of access, affordability, academic excellence and patient care.
- Net investment income remained strong in FY25 with a \$235M increase in net investment income over FY24, resulting from a strong performance for the LTIP (+11.81%) and strong returns for our short- and intermediate-term portfolios (+6.04%).
- The FY24 increase in net position was \$1.5B, bringing the total net position to \$12.6B.
- Following S&P's upgrade of Ohio State's credit rating to 'AA+', the university has the second-highest rating by each rating agency and holds a stable rating outlook.

University Budget Process & FY 2026 Operating Budget

Michael Papadakis, Senior Vice President and CFO
Kris Devine, Deputy CFO & Vice President of Operations
Richard Silveria, OSUWMC Chief Financial Officer

Finance & Investment Committee | August 13, 2025

University Financial Model - Overview

The type of Fund drives how the College and Support Unit budgets are determined:

- **GENERAL FUNDS** (Instructional Fees, State Subsidy, Non-Resident Surcharge, Program, Tech and Course Fees, Indirect Cost Recoveries) fund teaching faculty, support staff and space. Revenues generated from these sources are allocated to the Colleges (after a charge for central administration's strategic funds and administrative overhead) based on average credit hours delivered by the College.
- **EARNING FUNDS** (Medical Center, Athletics, Student Life, Conferences, Core Labs, Teaching Clinics) fund the operations of those units and are budgeted as a stand-alone business intended to earn a profit or break even, depending on the function after an overhead charge.
- **RESTRICTED FUNDS** Endowment (Investment Earnings & Principal); Current Use Gifts (one-time cash); Research Grants and Contracts; revenue from these funds are budgeted to be spent in compliance with the underlying restriction of the donor/grantor.

University Budget - Process Overview

- The budget planning process starts with the establishment of key drivers at both the University and Health System. The drivers are utilized to calculate budget allocations and common expenses to Colleges and Support Units and to create budgets by College/Unit. These “bottom-up” budgets are reviewed and assessed for alignment with strategic initiatives and are then consolidated. Investments in strategic initiatives are made at both the College and Unit level, and at the Central Administration level to incentivize strategic activities.
- Key Assumptions are determined for revenue and expense lines that are distributed to the Colleges, Support Units and the Health System.
- Some key drivers are reviewed and established centrally, and other drivers are processed through a rigorous shared governance process with Senate Fiscal for review and recommendations, which are forwarded to the Provost & CFO for a final decision.

CENTRAL KEY DRIVERS	SHARED GOVERNANCE
• Enrollment Plans inform Tuition/Fee Rates, which drive College-level budgets based on credit hours delivered • Tuition & Fee Rates: – Undergraduate & Graduate Tuition – Non-Resident & International Surcharges – Housing, Dining & Recreation Sports – Student Health Insurance • Investment Rate of Return and Endowment Distribution Formulas • AMCP (Annual Merit Compensation Process)	• Master's & Professional Programs Differential Fees Request • Overhead Rates • Regional Campus Service Charge • Plant, Operations & Maintenance (POM) Rates • Support Office Budget Requests • Strategic Investments • Composite Benefit Rates

- Financial, Planning & Analysis (FP&A) consolidates all College and Support Unit plans and incorporates Central revenue and expenses to create an overall University operating budget.
- A position control process exists to validate that the position is necessary and within budget. The rigor around the process varies depending on the financial status of the College/Support Unit.
- OSU's Adaptive Planning budget tool supports the campus position control process in Workday, allowing campus units to utilize position-based budgets to communicate strategic hiring plans. Central review and approval of position hires is required only for those units that have been identified by Financial Planning & Analysis as requiring financial monitoring.

OSUWMC Budget - Process Overview

- Like the University, the Health System and OSU Physicians budget planning process starts with a bottom-up review and the establishment of key drivers.
 - Cost centers and lines of business benchmark their respective key drivers to determine assumptions and set prices, which are consolidated into the budget.
- | Medical Center Key Drivers |
|--|
| <ul style="list-style-type: none">▪ Payor Mix and price implications▪ Admissions/outpatient visits▪ Worked Hours/Adjusted Admissions▪ Surgeries▪ Case mix index▪ Total Beds▪ Length of Stay▪ Pharmaceuticals/Drugs▪ Salaries/Wages/Benefits▪ Interest▪ Depreciation▪ Annual Capital Expenditures▪ Medical Center Investments (MCI) |
- Requests to hire an employee position not included in the current budget must be approved through an established budget committee prior to posting the position.

Benchmarking, Efficiencies & Optimizing Spend

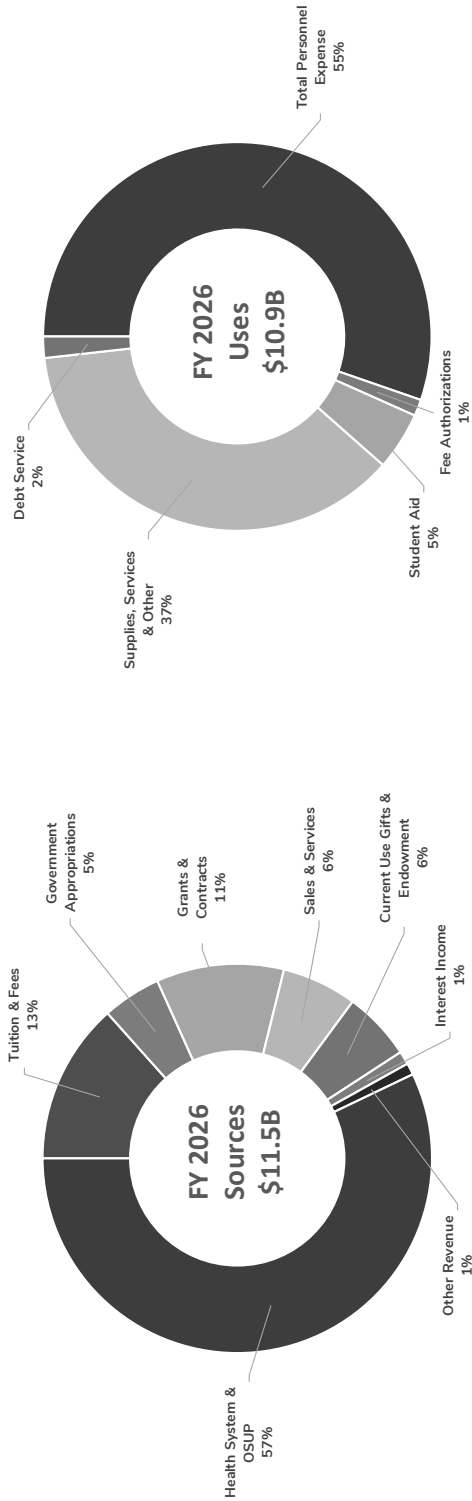
Strategic benchmarking, revenue optimization and expense efficiency activities occur continuously throughout the year.

- The university is a member of a higher education benchmarking consortium with 75+ member institutions. Our membership provides benchmarks for administrative FTE and employee direct costs compared to academic peers.
 - This national benchmarking of peer institutions is completed to ensure that data-informed decisions across the Colleges/Units are established in creating a Standard Activity Model (SAM) that consistently measures FTEs, expenditures and other drivers.
 - In FY25, a consulting firm benchmarked central administrative spend against peer data
- General Funds Revenue (Tuition and State Subsidy) is allocated to Colleges based on average credit hours delivered aligning academic and administrative cost delivery with the revenue-generating college.
- An Efficiency Committee comprised of Executive Leadership focuses on savings opportunities and execution. Efficiencies have been a focus of the institution since FY12. Projects in FY26, subject to President and new Provost approval, include:

Efficiency Projects	OE@OSU Projects	Quick Improvements	OAA Projects	ERIK Research Projects
• Span & Layers of Control • Earnings Unit Assessment • Hybrid Workspace Guidelines • Low Enrollment Courses & Majors • P&L by Academic Program • Eliminate Vacancies • Human Resources Service Delivery ZBB • Strategic Procurement • Open Position Review • Workforce Planning • Review and Consolidation of A&P and OTDI Shared Services • Workday Process Re-engineering	• Strategic Safety Initiative • Student Mental Health outcomes • Security Camera Cost Reduction • Inventory Conversion Costs • FDC Contract Efficiency • OPERS Student Exemptions • Billing Reconciliation • Lock and Key Process • Vehicle Replacement Assessment • Space Optimization / Utilization • Plot Assessment • 1099 Process Review • Student Life Mental Health Assessment	• Supplier Setup • Independent Contractor Review • Tax Withholding Reconciliation • State and Federal Combined Filing • Supplier Maintenance • Match Exceptions • Software Purchases • Research Process Mapping • WiFi Equipment refresh review • Computer Warranties Utilization • Computer Loaner Program Review • Optimization Useful Life • Optimization Vendor Maintenance Improvements	• Degree Audit Implementation • Faculty Approval Process • Dean Reappointment Process • Regional Campus Connectiveness • SEM Technology Mapping • International Grad Student Experience • Hiring Process • COAM Case Submission • International Student Team Process • Website Accessibility Project	• Grant AR Escalation • Grant Payment Application • Grant Reporting • Award Setups • Roles and Responsibilities • Cost Share Review • Revenue/Expense Recognition

- Administrative units have undergone multi-year budget reductions. University Administrative budget requests follow a rigorous process, including a review of that unit's budget for internal reallocation opportunities and a Senate Fiscal review, which is a subcommittee of the University Senate (part of our shared governance structure).

FY 2026 Financial Plan: Consolidated Sources & Uses



FY 2026 Strategic Investments Highlights

- **Academic Excellence**
 - With the goal to support academic excellence, the FY26 Plan includes incremental investments of \$50M.
- **Research Innovation and Transformative Endeavors - AI**
 - With the goal to support transformational Artificial Intelligence (AI) endeavors, the FY26 Plan includes incremental investments of \$25M.
- **Service and Clinical Excellence**
 - The Ohio State University Wexner Medical Center (OSUWMC) continues to reinvest projected margin in patient care and capital planning to support growing demand, including several strategic initiatives currently under construction and the development of new partnerships to continue accelerating the pace of innovation in research, education, and patient care. Our strategic growth into the surrounding communities will continue, with outpatient growth driven by the continued ramp-up of Outpatient Care New Albany, Outpatient Care Dublin, and the James Outpatient Care facility.

FY 2026 Consolidated Sources & Uses

Total Sources (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Tuition & Fees (gross)	\$1,104,466	\$1,271,606	\$1,310,009	\$1,374,390	\$1,473,897	\$1,533,838	\$59,941	4.1%
State Share of Instruction	\$401,420	\$403,564	\$417,224	\$428,599	\$437,373	\$453,309	\$15,935	3.6%
Other Operating Appropriations	\$84,696	\$89,685	\$91,480	\$99,937	\$103,312	\$105,418	\$2,107	2.0%
Exchange Grants & Contracts	\$840,451	\$888,530	\$1,001,952	\$1,144,473	\$1,119,954	\$1,059,237	(\$60,717)	-5.4%
Non-Exchange Grants & Contracts	\$240,197	\$290,625	\$190,804	\$118,506	\$150,296	\$154,003	\$3,706	2.5%
Sales & Services - Auxiliaries	\$202,336	\$407,181	\$436,183	\$450,352	\$492,416	\$484,281	(\$8,135)	-1.7%
Sales & Services - Departmental	\$178,760	\$176,149	\$205,028	\$200,308	\$222,321	\$229,282	\$6,961	3.1%
Sales & Services - Health System	\$3,726,605	\$4,178,956	\$4,019,388	\$4,440,400	\$4,964,944	\$5,390,544	\$425,600	8.6%
Sales & Services - OSU Physicians	\$647,601	\$701,680	\$840,375	\$933,463	\$1,038,232	\$1,149,480	\$111,248	10.7%
Current Use Gifts	\$129,723	\$233,381	\$172,835	\$189,492	\$190,000	\$197,000	\$7,000	3.7%
Endowment Distributions	\$290,330	\$323,532	\$348,466	\$371,294	\$423,929	\$458,549	\$34,619	8.2%
Interest Income	\$37,230	\$43,111	\$96,616	\$224,820	\$191,990	\$125,748	(\$66,242)	-34.5%
Other Revenues	\$37,198	\$72,089	\$258,047	\$174,543	\$124,602	\$110,988	(\$13,615)	-10.9%
Total Sources	\$7,921,014	\$9,080,089	\$9,388,407	\$10,150,577	\$10,933,267	\$11,451,676	\$518,409	4.7%
Total Uses (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Personnel Expense	\$4,115,321	\$4,435,562	\$4,751,044	\$5,190,140	\$5,530,860	\$6,020,241	\$489,380	8.8%
Fee Authorizations	\$110,545	\$130,040	\$124,373	\$140,316	\$147,807	\$149,250	\$1,443	1.0%
Student Aid	\$420,303	\$489,745	\$428,697	\$468,315	\$524,279	\$527,001	\$2,722	0.5%
Supplies, Services & Other	\$2,481,648	\$2,873,276	\$2,982,855	\$3,319,796	\$3,693,223	\$3,996,812	\$303,589	8.2%
Debt Service	\$171,718	\$229,076	\$203,694	\$201,207	\$209,332	\$193,437	(\$15,895)	-7.6%
Total Non-Personnel Expense	\$3,184,214	\$3,722,137	\$3,739,619	\$4,129,634	\$4,574,641	\$4,866,500	\$291,859	6.4%
Total Uses	\$7,299,535	\$8,157,699	\$8,490,663	\$9,319,774	\$10,105,501	\$10,886,740	\$781,239	7.7%
Sources Less Uses, Operating	\$621,479	\$922,390	\$897,745	\$830,803	\$827,766	\$564,936		
Capital Sources and Uses (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan		
Total Capital-Related Sources	\$398,200	\$678,496	\$1,256,437	\$590,477	\$302,091	\$269,169		
Total Capital-Related Uses	\$1,048,239	\$1,286,985	\$1,640,709	\$964,303	\$1,043,499	\$1,046,462		
Sources Less Uses, Capital	(\$650,039)	(\$608,488)	(\$384,272)	(\$373,826)	(\$741,408)	(\$777,293)		
Sources Less Uses, Capital and Operating	(\$28,560)	\$313,901	\$513,473	\$456,977	\$86,358	(\$212,358)		

FY 2026 University Sources & Uses

Total Sources (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Tuition & Fees (gross)	\$1,104,466	\$1,271,606	\$1,310,009	\$1,374,390	\$1,473,897	\$1,533,838	\$59,941	4.1%
State Share of Instruction	\$401,420	\$403,957	\$417,224	\$428,599	\$437,373	\$453,309	\$15,935	3.6%
Other Operating Appropriations	\$84,696	\$89,685	\$91,480	\$99,937	\$103,312	\$105,418	\$2,107	2.0%
Exchange Grants & Contracts	\$784,021	\$814,074	\$917,371	\$1,016,551	\$1,030,222	\$966,813	(\$63,409)	-6.2%
Non-Exchange Grants & Contracts	\$218,838	\$253,603	\$120,650	\$116,078	\$150,296	\$154,003	\$3,706	2.5%
Sales & Services - Auxiliaries	\$202,336	\$407,181	\$436,183	\$492,416	\$492,416	\$484,281	(\$8,135)	-1.7%
Sales & Services - Departmental	\$168,707	\$197,121	\$191,910	\$205,271	\$212,780	\$219,455	\$6,675	3.1%
Current Use Gifts	\$129,603	\$174,362	\$126,538	\$171,294	\$190,000	\$197,000	\$7,000	3.7%
Endowment Distributions	\$290,330	\$323,532	\$348,466	\$371,294	\$423,929	\$458,549	\$34,619	8.2%
Interest Income	\$37,230	\$43,111	\$50,024	\$122,643	\$149,942	\$100,355	(\$49,587)	-33.1%
Other Revenues	\$49,693	\$53,829	\$104,695	\$66,869	\$85,561	\$47,827	(\$37,733)	-44.1%
Total External Sources	\$3,471,341	\$4,032,060	\$4,114,550	\$4,424,565	\$4,749,727	\$4,720,847	(\$28,881)	-0.6%
Net Transfers from OSU Health System	\$183,960	\$195,432	\$183,046	\$204,756	\$231,633	\$283,086	\$51,453	22.2%
Total Sources	\$3,655,301	\$4,227,492	\$4,297,596	\$4,629,321	\$4,981,361	\$5,003,932	\$22,572	0.5%
Total Uses (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Salaries	\$1,555,797	\$1,638,825	\$1,742,926	\$1,898,102	\$2,001,463	\$2,119,906	\$118,443	5.9%
Benefits	\$455,054	\$471,656	\$497,468	\$545,244	\$568,402	\$613,457	\$45,054	7.9%
Total Personnel Expense	\$2,010,851	\$2,110,481	\$2,240,394	\$2,443,346	\$2,569,865	\$2,733,363	\$163,497	6.4%
Fee Authorizations	\$110,545	\$130,040	\$124,373	\$140,316	\$147,807	\$149,250	\$1,443	1.0%
Student Aid	\$420,303	\$489,745	\$428,697	\$468,315	\$524,279	\$527,001	\$2,722	0.5%
Supplies, Services & Other	\$960,210	\$1,039,801	\$1,023,167	\$1,238,061	\$1,315,573	\$1,373,420	\$57,848	4.4%
Debt Service	\$88,802	\$103,772	\$86,322	\$86,443	\$78,645	\$68,048	(\$10,597)	-13.5%
Total Non-Personnel Expense	\$1,579,860	\$1,763,358	\$1,662,559	\$1,933,135	\$2,066,304	\$2,117,719	\$51,416	2.5%
Total Uses	\$3,590,711	\$3,873,838	\$3,902,952	\$4,376,481	\$4,636,169	\$4,851,082	\$214,913	4.6%
Sources Less Uses, Operating	\$64,590	\$353,654	\$394,644	\$252,840	\$345,192	\$152,850		
Capital Sources and Uses (\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan		
Total Capital-Related Sources	\$168,112	\$418,522	\$797,101	\$219,193	\$277,280	\$230,304		
Total Capital-Related Uses	\$482,237	\$576,265	\$965,533	\$337,282	\$519,897	\$480,210		
Sources Less Uses, Capital	(\$314,126)	(\$157,743)	(\$168,433)	(\$118,089)	(\$242,617)	(\$249,905)		
Sources Less Uses, Capital and Operating	(\$249,536)	\$195,911	\$226,211	\$134,751	\$102,574	(\$97,055)		

FY 2026 Health System Income Statement

(\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Operating Revenue	\$3,616,236	\$3,816,536	\$4,023,304	\$4,444,042	\$4,964,944	\$5,390,544	\$425,600	8.6%
Salaries & Benefits	\$1,591,818	\$1,721,204	\$1,849,437	\$2,019,464	\$2,164,404	\$2,392,835	\$228,431	10.6%
Supplies	\$425,877	\$423,060	\$476,320	\$516,707	\$560,441	\$608,603	\$48,162	8.6%
Drugs & Pharmaceuticals	\$464,833	\$510,658	\$548,383	\$642,946	\$749,846	\$816,641	\$66,794	8.9%
Services	\$348,471	\$399,278	\$412,240	\$482,102	\$553,807	\$640,349	\$86,541	15.6%
Depreciation	\$175,930	\$187,800	\$208,930	\$231,473	\$267,881	\$291,132	\$23,250	8.7%
Interest	\$29,508	\$42,275	\$44,443	\$41,362	\$50,682	\$47,328	(\$3,354)	-6.6%
University Overhead	\$73,371	\$74,793	\$75,571	\$80,757	\$86,540	\$92,454	\$5,914	6.8%
Other Expenses	\$55,295	\$59,387	\$67,904	\$71,855	\$75,590	\$82,972	\$7,382	9.8%
Total Operating Expenses	\$3,165,103	\$3,418,455	\$3,683,227	\$4,086,666	\$4,509,192	\$4,972,313	\$463,121	10.3%
Gain/Loss from Operations	\$451,133	\$398,081	\$340,076	\$357,376	\$455,752	\$418,231		
Medical Center Investments	(\$183,960)	(\$190,419)	(\$229,502)	(\$235,433)	(\$247,635)	(\$311,051)	(\$63,416)	-225.6%
Investment Income	\$102,259	(\$726)	\$42,241	\$92,051	\$56,217	\$50,984	(\$5,233)	-9.3%
Other Gains (Losses)	\$119,298	\$119,974	\$148,980	\$71,299	\$34,042	\$58,010	\$23,969	70.4%
Excess of Revenue over Expenses	\$488,730	\$326,910	\$301,796	\$285,293	\$298,376	\$216,174		

FY 2026 OSU Physicians Income Statement

(\$ thousands)	FY21 Actuals	FY22 Actuals	FY23 Actuals	FY24 Actuals	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Net Patient Revenue	\$426,218	\$614,375	\$633,435	\$696,431	\$759,871	\$845,439	\$85,568	11.3%
Other Revenue	\$121,913	\$143,826	\$211,291	\$247,158	\$278,361	\$304,041	\$25,680	9.2%
Medical Center Investments	\$101,374	\$118,155	\$162,041	\$159,004	\$153,905	\$176,914	\$23,009	15.0%
Interest Income	\$0	\$673	\$4,351	\$10,126	\$8,514	\$9,687	\$1,173	13.8%
Total Revenue	\$649,505	\$877,029	\$1,011,118	\$1,112,719	\$1,200,651	\$1,336,081	\$135,430	11.3%
Provider Salaries & Benefits	\$409,616	\$627,794	\$653,084	\$717,406	\$786,255	\$883,345	\$97,090	12.3%
Non-Provider Salaries & Benefits	\$113,992	\$136,829	\$189,385	\$206,636	\$232,078	\$260,528	\$28,450	12.3%
Other Expenses	\$113,111	\$93,171	\$160,056	\$177,743	\$177,250	\$187,594	\$10,344	5.8%
Depreciation	\$3,122	\$9,935	\$19,135	\$5,417	\$4,800	\$4,389	(\$411)	-8.6%
Interest	\$0	\$3,339	\$7,756	\$444	\$235	\$225	(\$10)	-4.3%
Total Expenses	\$639,841	\$871,068	\$1,029,416	\$1,107,645	\$1,200,618	\$1,336,081	\$135,463	11.3%
Change in Net Assets	\$9,664	\$5,961	(\$18,298)	\$5,074	\$33	\$0		

ATTACHMENT VIII

FY 2026-2030 Final Capital Investment Plan

August 13, 2025

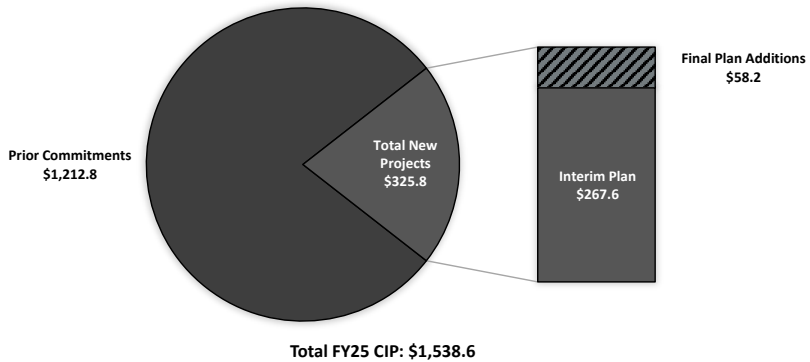


Table 1 - Prior Commitments - Remaining Spend (As of April 14 Actuals)

\$ in Millions

Line	Capital Priority	Projected Capital Expenditures					
		FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	Total
1	ABA - Schottenstein Center - Main Roof Replacement	\$ 2.2	\$ 5.5	\$ 0.5	\$ -	\$ -	\$ 8.2
2	ABA - Schottenstein Center - Scoreboard Replacement	\$ 1.0	\$ 2.8	\$ 1.2	\$ -	\$ -	\$ 5.0
3	A&S - Biological Sciences Building Upgrades	\$ -	\$ 1.8	\$ 5.3	\$ 4.7	\$ 2.3	\$ 14.0
4	A&S - Department of Economics Relocation	\$ 4.5	\$ 4.9	\$ -	\$ -	\$ -	\$ 9.4
5	COE - BMEC Phase 2	\$ 32.1	\$ 9.4	\$ 1.4	\$ -	\$ -	\$ 42.9
6	COE - Bus Testing Facility	\$ 2.7	\$ 12.6	\$ 0.7	\$ -	\$ -	\$ 16.0
7	EHE - Campbell Hall Renovation	\$ 16.1	\$ 20.5	\$ 6.3	\$ -	\$ -	\$ 42.9
8	ERIK - Battery Cell Research and Demonstration Center	\$ 6.0	\$ 1.3	\$ -	\$ -	\$ -	\$ 7.4
9	ERIK - Microelectronic Commons	\$ 2.4	\$ -	\$ -	\$ -	\$ -	\$ 2.4
10	FAES - Waterman Infrastructure Project	\$ -	\$ 4.1	\$ 2.8	\$ -	\$ -	\$ 7.0
11	FAES - Waterman Multispecies Animal Learning Center	\$ 21.9	\$ 18.3	\$ -	\$ -	\$ -	\$ 40.2
12	VET - PET/CT Space Renovation	\$ 0.3	\$ 0.8	\$ 1.4	\$ -	\$ -	\$ 2.5
13	WMC - Inpatient Hospital	\$ 201.3	\$ 88.6	\$ -	\$ -	\$ -	\$ 289.9
14	WMC - James Cellular Therapy Lab	\$ 1.3	\$ 3.8	\$ 1.7	\$ -	\$ -	\$ 6.8
15	WMC - James Outpatient Care	\$ 7.5	\$ -	\$ 12.7	\$ -	\$ -	\$ 20.2
16	WMC - James Outpatient Care Buildout	\$ 1.0	\$ 3.8	\$ 1.7	\$ -	\$ -	\$ 6.5
17	WMC - Magnetic Resonance Linear Accelerator & Housing	\$ 0.9	\$ 3.2	\$ 3.6	\$ 2.3	\$ 0.3	\$ 10.3
18	WMC - OSU East 4th Floor OR Renovation	\$ 0.8	\$ 7.0	\$ 10.6	\$ -	\$ -	\$ 18.4
19	WMC - Outpatient Care Powell	\$ 58.3	\$ 46.3	\$ -	\$ -	\$ -	\$ 104.6
20	Roll Up Other Projects	\$ 196.8	\$ 179.2	\$ 160.1	\$ 13.9	\$ 8.5	\$ 558.4
21	Subtotal	\$ 557.1	\$ 413.9	\$ 209.8	\$ 20.9	\$ 11.1	\$ 1,212.8

FY 2026-2030 Final Capital Investment Plan
August 13, 2025

Table 2 - New Projects Beginning in FY2026

\$ in Millions

Line	Capital Priority	Projected Capital Expenditures					Total
		FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	
1	Anticipated Spend for CIP Changes	\$ 10.0	\$ -	\$ -	\$ -	\$ -	\$ 10.0
2	Roll up of Small Infrastructure RDM Projects	\$ 2.7	\$ 10.4	\$ 10.8	\$ 5.4	\$ -	\$ 29.3
3	Small Programmatic Cash Ready	\$ 3.6	\$ 13.8	\$ 11.6	\$ 2.3	\$ -	\$ 26.8
4	WMC/COM - Roll up of Multiple Cash Ready	\$ 173.6	\$ 7.9	\$ 5.3	\$ -	\$ -	\$ 186.9
5	New Major Projects						
6	ATHL - 1922 Club Renovation (Construction)	\$ 1.8	\$ 5.4	\$ 5.4	\$ 1.9	\$ -	\$ 14.5
7	ATHL - Technology Modernization (Construction)	\$ 2.7	\$ 8.0	\$ 7.9	\$ 2.8	\$ -	\$ 21.3
8	DENT - Dental Simulation Space Modernization	\$ 0.2	\$ 1.5	\$ 3.7	\$ 3.4	\$ 1.8	\$ 10.6
9	NURS - Newton Hall Space Upgrades	\$ 0.2	\$ 1.4	\$ 2.1	\$ 0.4	\$ -	\$ 4.0
10	NURS - Newton Hall AHU Replacements	\$ 0.3	\$ 2.7	\$ 4.2	\$ 0.8	\$ -	\$ 8.0
11	SL - North Towers Upgrades - Jones, Taylor, Drackett (Design)	\$ 2.2	\$ 6.7	\$ 1.1	\$ -	\$ -	\$ 10.0
12	Grand Total	\$ 197.3	\$ 57.8	\$ 52.0	\$ 16.9	\$ 1.8	\$ 325.8

Table 3 - Funding for New Projects by Type and Funding Source

\$ in Millions

Line	Unit	Projected Capital Expenditures							Def. Maint. Addressed	Def. Maint. %
		Local	WMC	State	Grant	Gift- Pledged	University Debt	Grand Total		
1	Academic Support	\$ 29.9	\$ -	\$ 4.6	\$ -	\$ -	\$ 2.9	\$ 37.3	11.4%	\$ 12.9 34.5%
2	Athletics	\$ 9.5	\$ -	\$ -	\$ -	\$ 1.0	\$ 35.5	\$ 46.0	14.1%	\$ 20.9 45.5%
3	Infrastructure	\$ 32.8	\$ -	\$ -	\$ 0.5	\$ -	\$ -	\$ 33.2	10.2%	\$ 20.0 60.3%
4	Regional Campuses	\$ -	\$ -	\$ -	\$ 0.4	\$ -	\$ -	\$ 0.4	0.1%	\$ - 0.0%
5	Student Life	\$ 12.0	\$ -	\$ -	\$ -	\$ -	\$ 10.0	\$ 22.0	6.8%	\$ 19.8 90.0%
6	WMC/COM	\$ 15.9	\$ 171.0	\$ -	\$ -	\$ -	\$ -	\$ 186.9	57.4%	\$ 45.9 24.6%
7	Grand Total	\$ 100.0	\$ 171.0	\$ 4.6	\$ 0.9	\$ 1.0	\$ 48.4	\$ 325.8	100.0%	\$ 119.5 36.7%

BACKGROUND

TOPIC: Approval of Ohio State Energy Partners' ("OSEP") Utility System Capital Improvements Plan for Fiscal Year 2026

CONTEXT: Pursuant to the First Amended and Restated Long-Term Lease and Concession Agreement for The Ohio State University Utility System dated July 20, 2018, and as amended (the "Agreement"), OSEP will fund and implement capital improvements to the Utility System.

Proposed capital projects are evaluated for alignment with applicable strategic, financial, and physical plans and to ensure continued reliability, safety, and compliance.

Approval of these projects is pursuant to the project scopes, schedules, cost breakdowns, total project costs outlined below, any applicable university directives, applicable project approval request forms, and supporting documentation submitted pursuant to the Agreement.

These OSEP capital projects are categorized as Life-Cycle Renovations, Repair, and Replacement Projects ("LFC"): LFC projects are capital improvements to existing utility system plants and distribution networks.

SUMMARY:

Campus Gas – Building Systems Upgrades 101-25-LFC

Scope: This project will upgrade the natural gas systems necessary to comply with codes and/or the university's Building Design Standards (including gas entrances, building meters, and regulators). Specifically, this project will perform the upgrades required for 11 buildings connected to master meters #7 and #9. This project was previously approved for design.

Construction Cost Request: \$ 2.012 M

Project Cost Breakdown	Cost
FY 2025 – Design	\$ 0.659 M
FY 2026 – Design	\$ 1.102 M
FY 2026 – Construction	\$ 0.069 M
FY 2027 – Construction	\$ 1.707 M
FY 2027 – Construction	\$ 0.236 M
Total Project Cost	\$ 3.773 M

Building Transformer Replacements - Phase 1 154-26-LFC

Scope: Replacement of existing end-of-life medium voltage transformers and associated equipment. This request is limited to the procurement of long-lead equipment. Construction is expected to begin in fiscal year 2028. The design for this project was completed under project 127-23-LFC.

Construction Procurement Cost Request: \$ 1.779 M

Project Cost Breakdown	Cost
FY 2026 – Procurement	\$ 0.217 M
FY 2027 – Procurement	\$ 0.563 M
FY 2028 – Procurement	\$ 1.000 M
FY 2028 – Construction Estimate	\$ 2.414 M
FY 2029 – Construction Estimate	\$ 6.117 M
FY 2030 – Construction Estimate	\$ 2.515 M
Total Project Cost Estimate	\$ 12.826 M

Steam & Condensate Repairs and Replacements – East of Neil 156-24-LFC

Scope: Replacement of an end-of-life expansion joint, support structures, and approximately 2,500 feet of condensate piping, and repair of a steam pipe leak in the 12th Avenue and College Road tunnels. This project was previously approved for design with an original construction estimate of over \$12M. Detailed design and assessment of the existing system revealed the steam piping could be repaired in lieu of replacement reducing the total project cost to \$6.033M.

Construction Cost Request: \$ 5.149 M

Project Cost Breakdown	Cost
FY 2024 – Design	\$ 0.015 M
FY 2025 – Design	\$ 0.400 M
FY 2026 – Design	\$ 0.469 M
FY 2026 – Construction	\$ 5.149 M
Total Project Cost	\$ 6.033 M

OSU Substation Transformers Replacement T1 & T2 193-25-LFC

Scope: Detailed design for the replacement of two of the existing three 138kV transformers at the OSU substation and upgrades to associated telemetry, monitoring, and alarm equipment. The project was previously approved for preliminary design. The current request is to complete design.

Design Cost Request: \$ 2.165 M

Project Cost Breakdown	Cost
FY 2025 – Preliminary Design	\$ 0.318 M
FY 2026 – Preliminary Design	\$ 0.014 M
FY 2026 – Detailed Design	\$ 1.600 M
FY 2027 – Detailed Design	\$ 0.555 M
FY 2027 – Procurement estimate	\$ 4.485 M
FY 2028 – Procurement estimate	\$15.640 M
FY 2029 – Construction estimate	\$ 5.042 M
FY 2030 – Construction estimate	\$ 0.350 M
Total Project Cost Estimate	\$ 28.004 M

McCracken UPS B Replacement 194-26-LFC

Scope: Design of the replacement of the end-of-life Universal Power Supply (UPS) B in the McCracken Power Plant. UPS A was approved for replacement under a previously approved project (31-21-LFC). Design work will include updated electrical drawings and load studies to properly size the new UPS system.

Design Cost Request: \$ 0.421 M

Project Cost Breakdown	Cost
FY 2026 – Design	\$ 0.363 M
FY 2027 – Design	\$ 0.058 M
FY 2027 – Construction Estimate	\$ 1.216 M
FY 2027 – Construction Estimate	\$ 1.163 M
Total Project Cost Estimate	\$ 2.800 M

New West Steam Leg 306-26-LFC

Scope: Design of the replacement and relocation of the portion of the steam piping system that runs north and south along the east side of Cannon Drive. The current portion of piping is subject to water infiltration when excessive rain raises the river water level. Repeated efforts to repair this leg of the system as part of 144-23-LFC over the past several years have not been effective, requiring a full replacement.

Design Cost Request: \$ 1.565 M

Project Cost Breakdown	Cost
FY 2026 – Design*	\$ 1.565 M
FY 2027 – Construction Estimate	\$ 21.785 M
Total Project Cost Estimate	\$ 23.350 M

* Preliminary design in the amount of \$200,00 was approved in March 2025 under project 144-23 LFC.

REQUESTED OF THE MASTER PLANNING & FACILITIES AND THE FINANCE & INVESTMENT COMMITTEES: Approval of the resolution.

Project Data Sheet for Board of Trustees Approval

Campus Gas - Building system upgrade

101-25-LFC

Project Location: Master Meter 7 and 9

- **Approval(s) Requested and Amount**
Construction \$2.012 M

Total requested \$2.012 M

- **Project Budget**
Design \$ 0.082 M
Construction \$ 3.691 M
w/contingency
Total project budget \$ 3.773 M

- **Project Funding**
OSEP Financed \$ 3.773 M
University \$ 0.000 M

- **Project Schedule**
BoT design & construction approval 08/24
BoT construction approval 08/25
Construction 08/24 – 12/27

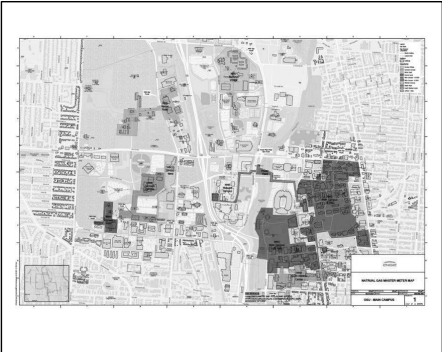
Completion /full operation 09/25 – 12/27

- **Project Delivery Method**
Design-Bid-Build

- **Project Scope**
 - Replace and upgrade meters and regulators are non-code compliant or non-functioning with new designed full setting.

- **Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Additional risks include gas leaks which may lead to minor service interruptions

- **Approval Requested**
 - Requesting approval for construction in FY26.



project team

- OSEP project manager: Firas S. Oueis
- General Contractor: Design, Bid, Build – To be determined

August 2025

Project Data Sheet for Board of Trustees Approval

Building Transformer Replacement 1

154-26-LFC

Project Location: Various Buildings across campus

- Approval(s) Requested and Amount**

Long lead procurement	\$1.779 M
Total requested	\$1.779 M
- Project Budget**

Construction	\$ 12.826 M
w/contingency	
Total project budget	\$ 12.826 M
- Project Funding**

OSEP Financed	\$ 12.826M
University	\$ 0.000M
- Project Schedule**

BoT Procurement approval	08/25
BoT Construction approval (estimate)	05/26
Construction	5/27-8/29
Completion /full operation	8/29
- Project Delivery Method**

Design-Bid-Build
- Project Scope**

Replace and upgrade aging transformers for several buildings, including those identified as safety hazards or requiring upgrades due to University-led renovation projects.
- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Supply chain issues leading to longer than anticipated delivery times and meeting university outage schedules
- Approval Requested**
 - Long lead procurement



project team	
• OSEP project manager:	Aoun Barki
• General Contractor:	To be determined

August 2025

Project Data Sheet for Board of Trustees Approval

Steam and Condensate Repairs and Replacements - East of Neil

156-24-LFC

Project Location: Southeast Tunnels – Upper 12th Ave. and College Tunnels

Approval(s) Requested and Amount	
Construction w/contingency	\$5.149 M
Total requested	\$5.149 M
Project Budget	
Design	\$0.884 M
Construction w/contingency	\$5.149 M
Total project budget	\$6.033 M
Project Funding	
OSEP Financed	\$6.033 M
University	\$0.000 M
Project Schedule	
BoT design Approval	11/23
Design	05/24 – 02/25
BoT construction approval	08/25
Construction	10/25 – 11/26
Completion /full operation	12/26



- Project Delivery Method**
Design-Bid-Build
- Project Scope**
 - Replace and upgrade approximately 2,500 linear feet of pumped condensate distribution piping in the Upper 12th Ave. and College Road tunnels.
 - Replace structural supports of the piping systems, including pipe stanchions, grout footing, connections, anchors, expansion joints, saddles, guides, and slides.
 - Replace an expansion joint located in the College Road tunnel between Page Hall and Ohio Union, and repair a steam leak near Canfield Hall.
- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Constrained space in the tunnels, which complicates the work.
 - Health and safety risks inherent in working along the route of active steam and in areas with compromised ventilation.
 - Labor shortage and supply chain issues.
- Approval Requested**
 - Approval for design received for FY24. Requesting Approval for construction in FY26.

project team	
• OSEP project manager:	Francisco D. Saavedra
• AE/design architect:	Osborn Engineering
• General Contractor:	Design, Bid, Build – To be determined

Project Data Sheet for Board of Trustees Approval

OSU Substation Transformer Replacement - T1, T2

193-25-LFC

Project Location: OSU Substation

- Approval(s) Requested and Amount**

Detailed Design	\$ 2.165 M
Total requested	\$2.165 M
- Project Budget**

Initial Design	\$ 0.332 M
Design and Engineering Services	\$ 2.165 M
Construction w/contingency	\$25.507 M
Total project budget	\$28.004 M
- Project Funding**

OSEP Financed	\$28.004 M
University	\$ 0.000 M
- Project Schedule**

BoT Pre-Design Approval	02/25
BoT Full Engineering Approval	08/25
BoT Long Lead Approval	11/25
BoT Construction Approval	TBD
- Project Delivery Method**

Design-Bid-Build
- Project Scope**
 - This project will replace two (T1 and T2) of the three 84MVA, 138kV to 13.8kV stepdown transformers at the OSU substation to maintain reliable delivery of electricity to the campus and modernize support infrastructure.
 - In addition to improving the resiliency of the electrical system, this project implements an online transformer monitoring system which will provide real time information including warning and alarms relevant to the operating characteristics of the transformers to facilitate faults before they become failures, thereby minimizing downtime and unplanned outages.
- Project Risks and Impacts**
 - Long lead equipment
 - Project duration and complexity
- Approval Requested**

Design and Engineering Services



project team

- OSEP project manager: Chris Schneider
- AE/design architect: To be determined
- General Contractor: To be determined

August 2025

Project Data Sheet for Board of Trustees Approval

McCracken UPS B Replacement

194-26-LFC

Project Location: McCracken Power Plant

- Approval(s) Requested and Amount**

Design	\$0.421 M
Total requested	\$0.421 M
- Project Budget**

Design & Construction w/contingency	\$ 2.799 M
Total project budget	\$ 2.799 M
- Project Funding**

OSEP Financed	\$ 2.799 M
University	\$ 0.000 M
- Project Schedule**

BoT Design approval	08/25
Design	9/25 – 6/26
BoT Construction approval	5/26
Completion /full operation	8/27
- Project Delivery Method**

Design-Bid-Build
- Project Scope**
 - This project involves the replacement of Universal Power Supply (UPS) “B”, a critical component of the McCracken Power Plant’s electrical infrastructure that is past its operational lifespan.
- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Equipment lead times could drive the construction schedule
 - Close coordination will be required with the operations team at McCracken during construction to minimize disruption to operations
- Approval Requested**
 - Design only



project team	
• OSEP project manager:	Aoun Barki
• Engineer:	Osborn Engineering

August 2025

Project Data Sheet for Board of Trustees Approval

West Steam Leg Installation

306-26-LFC

Project Location: South of OSU Stadium on OSU Columbus Campus

- Approval(s) Requested and Amount**

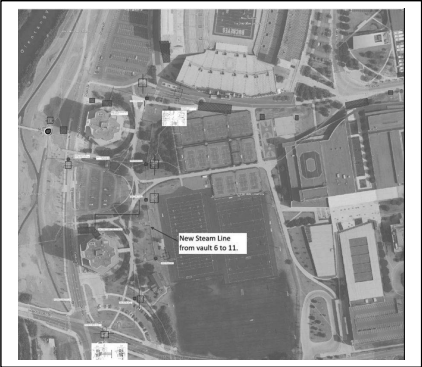
Design	\$ 1.565 M
Total requested	\$ 1.565 M
- Project Budget**

Design	\$ 1.565 M
Construction w/contingency	\$21.785 M
Total project budget	\$23.350 M
- Project Funding**

OSEP Financed	\$23.350 M
University	\$ 0.000 M
- Project Schedule**

BoT design Approval	08/25
Design	08/25 – 11/25
BoT construction approval	02/26
Construction	07/26 – 07/27
Completion /full operation	10/27
- Project Delivery Method**

Design-Bid-Build
- Project Scope**
 - Install approx. 1,500 linear feet of steam and condensate piping systems between steam vaults 6 and 11 located east of the Morrill and Lincoln dormitory towers.
 - Use exclusively Perma-Pipe buried pipes suitable for direct burial and can withstand the operating temperatures and pressures, including the installation of pipe connections, anchors, expansion loops, guides, and supports.
- Project Risks and Impacts**
 - Service outages and maintenance of traffic to be coordinated with Facilities Operations and Development, Facilities Design and Construction, Student Life, Wexner Med Center, Athletics, Rec-sports, Traffic and Transportation Management and Buckeye Grove departments.
 - Soil conditions, water table level, and existing utilities that may interfere with the piping installation.
 - Health and safety risks inherent in working along the route of the new steam and condensate pipes of active construction areas such as opened trenches, hot work, heavy equipment, material handling, and so on.
 - Supply chain issues and labor shortages could pose risks to completing the construction on time. No permitting risks are anticipated.
- Approval Requested**
 - Requesting approval for design in FY26.



project team	
• OSEP project manager:	Francisco D. Saavedra
• AE/design architect:	Affiliated Engineers, Inc.
• General Contractor:	Design, Bid, Build – To be determined

ATTACHMENT IX



The Ohio State University

BOARD OF TRUSTEES MEETING | August 2025

ADVANCEMENT SCORECARD						
DATA THROUGH June 30, 2025		FY25 GOAL	FY25 FINAL	FY24 FINAL	3 FY FINAL AVERAGE	FY 25 FINAL %
A FISCAL YEAR MEASURES						
1. GIFTS AND PLEDGES		\$675M	\$825.4M	\$657.3M	\$676.8M	122.3%
2. CASH		\$500M	\$628.3M	\$622.4M	\$556.5M	125.7%
3. TOTAL DONORS		235,000	225,177	222,746	228,950	95.8%
A. RENEWED DONORS		130,000	130,844	131,266	127,402	100.7%
B. ACQUIRED AND REACQUIRED DONORS		105,000	94,333	91,480	101,547	89.8%
B EVENTS						
1. CONSTITUENT ATTENDANCE ACROSS EVENTS		65,000	78,243	92,327	52,311	120.4%
2. AVERAGE NET PROMOTER SCORE		75.0	74.0	80.0	76.3	98.7%



ATTACHMENT X

CONSOLIDATED FINANCIAL SCORECARD

Enterprise Operating Activity					Status
1. Sources	FY25 YTD Actual	FY25 YTD Plan			106.5%
	\$11.08B	\$10.40B			
2. Uses	FY25 YTD Actual	FY25 YTD Plan			103.3%
	\$10.18B	\$9.86B			
3. Sources less Uses	FY25 YTD Actual	FY25 YTD Plan			164.2%
	\$0.90B	\$0.55B			
Capital Projects / Debt Service					Status
1. Capital Spend Activity - All sources	FY25 YTD Actual	FY25 YTD Plan			90.2%
	\$708M	\$785M			
2. Net Capital Spend Activity - Cash	FY25 YTD Actual	FY25 YTD Plan			90.7%
	\$693M	\$764M			
3. Debt Service	FY25 YTD Actual	FY25 YTD Plan			101.8%
	\$202M	\$199M			
Liquidity					Status
1. Operating Liquidity - Days Cash on Hand	FY25 YTD Actual	Target			Stable
	108	Policy > 90 Days			
2. Total Enterprise Liquidity - Days Cash on Hand	FY25 YTD Actual	Target			Stable
	197	> 180 Days			
Investment Performance					Status
Operating Funds					Status
FYTD Performance	FY25 YTD Actual	Benchmark			+0.51%
	6.04%	5.53%			
3-Year Performance	FY25 YTD Actual	Benchmark			+0.77%
	4.89%	4.12%			
Long Term Investment Pool					Status
FYTD Performance	FY25 YTD Actual	Benchmark			+2.27%
	11.81%	9.54%			
3-Year Performance	FY25 YTD Actual	Benchmark			+0.14%
	9.79%	9.65%			
Institutional Financial Metrics					Status
1. Credit Rating	FY25 YTD Actual	Target			Stable
	Aa1 / AA+ / AA+	Aa1 / AA+ / AA+			
2. Debt Service to Operating Expenses (OpEx)	FY25 YTD Actual	Target			Stable
	2.0%	< 4.0%			
3. Debt Service Coverage (EBIDA/DS)	FY25 YTD Actual	Target			Stable
	4.9x	> 3.0x			
4. Cash & Investments to OpEx	FY25 YTD Actual	FYE 24			Stable
	1.21x	1.16x			



UNIVERSITY FINANCIAL SCORECARD

UNIVERSITY Operating Activity					Status
1. Sources	FY25 YTD Actual	FY25 YTD Plan			105.2%
2. Uses	\$4.99B	\$4.75B			
	\$4.65B	\$4.58B			101.6%
3. Sources less Uses	\$348M	\$172M			202.0%
Revenue Drivers					Status
1. Enrollment - summer, autumn, spring	FY25 YTD Actual	FY25 YTD Plan			102.0%
2. Credit Hours - summer, autumn, spring	152,012	149,076			
3. Tuition and Fees, gross	1,918,281	1,860,732			103.1%
4. Total Grants and Contracts (Exchange & Non-Exchange)	\$1,48B	\$1,43B			103.3%
5. State Operating Support	\$1,20B	\$1,16B			103.3%
6. LTIP Distributions	\$103M	\$103M			100.5%
7. Fundraising - Current Use Cash Receipts	\$422M	\$423M			99.8%
8. Net Contribution from Auxiliary Enterprises (Operating)	\$195M	\$173M			112.6%
	-\$8M	-\$32M			174.5%
Performance Metrics					Status
1. New first year student retention	FY25 Actual	FY24 Actual			100.0%
2. Four year graduation rate	94.2%	94.2%			
3. Six year graduation rate	72.8%	71.1%			102.4%
	87.7%	87.7%			100.0%



MEDICAL CENTER FINANCIAL SCORECARD

Medical Center Operating Activity	FY25 YTD Actual	FY25 YTD Plan	Status
1. Sources	\$5.20B	\$4.81B	108.2%
2. Uses	\$4.71B	\$4.41B	106.8%
3. Sources less Uses, Operating	\$490M	\$395M	124.1%
4. Income Statement: Excess of Revenue over Expense	\$310M	\$221M	139.9%
5. OSUP Sources less Uses	-\$2.2M	\$4.7M	-46.9%

Revenue Drivers	FY25 YTD Actual	FY25 YTD Plan	Status
1. Patient Discharges	61,330	64,335	95.3%
2. Total Surgeries	60,769	62,249	97.6%
3. Outpatient Visits	1,799,539	1,685,145	106.8%
4. ED Visits	95,530	87,502	109.2%

Performance / Activity Metrics	FY25 YTD Actual	FY25 YTD Plan	Status
1. Operating EBIDA Margin	14.4%	14.2%	101.3%
2. Total Health System Liquidity - Days Cash on Hand	138 Days	119 Days	Stable
3. Health System Operating Liquidity - Days Cash on Hand	88 Days	73 Days	Stable
4. Debt Service Coverage	6.8x	5.9x	Stable



ATTACHMENT XI

THE OHIO STATE UNIVERSITY

TOPIC: Fiscal Year 2025 Financial Report – June 30, 2025

CONTEXT: The purpose of this report is to provide an update of financial results for the year ending June 30, 2025.

FINANCIAL SUMMARY

The university's overall financial position remains strong. Operating revenues increased \$982 million in fiscal year 2025 compared to fiscal year 2024, driven primarily by strong growth in healthcare revenues. Specific impacts include:

- A \$772 million increase in healthcare revenues, driven primarily by growth in outpatient volumes.
- A \$71 million increase in net student tuition, due primarily to increases in enrollment and resident and non-resident rate increases.
- A \$45 million increase in auxiliary revenues, primarily reflecting increases in Athletics ticket revenues and distributions of media rights revenues from the Big Ten.
- A \$35 million increase in non-exchange grants, primarily reflecting increases in federal Pell grants and Ohio College Opportunity grants.
- A \$31 million increase in gift revenues, driven primarily by a \$22 million increase in endowment gifts.

The year-to-date increase in net position was \$1,483 million, a \$610 million increase compared to the prior year. The \$610 million increase relates primarily to a \$318 million reduction in net operating loss and a \$235 million increase in net investment income. The reduction in net operating loss is primarily due to the increase in healthcare revenues, which outpaced increases in related healthcare expenses, and a \$275 million decrease in pension and OPEB expense. The increase in net investment income reflects increases in net investment income for both the Long-Term Investment Pool (up \$141 million) and other investments (up \$94 million). Additional details on university revenues, expenses, cash and investments, debt and cash flows are provided below.

Revenues

Student tuition and fees, net - increased \$71 million or 6.5%, to \$1,165 million in fiscal year 2025 compared to fiscal year 2024, due primarily to an increase in gross tuition and other student fees of \$101 million, offset by an increase in scholarship allowances of \$30 million. The increase in gross tuition revenue is primarily driven by both increases in enrollment and rate increases in instructional and non-resident surcharges. Overall, university autumn enrollments increased 2.3%. New freshmen enrollment (all campuses) increased 15%. Instructional and general fees increased 3% for undergraduates in the AU24 Tuition Guarantee Group and 3% for graduate students. Non-resident fees increased 5% for undergraduates and 4% for graduate students.

Grants and contracts – increased \$24 million in fiscal year 2025 compared to fiscal year 2024 due primarily to increases in private grants and contracts of \$18 million, state grants and contracts of \$8 million and local grants and contracts of \$1 million. Federal grant and contract revenues were relatively flat, declining \$3 million to \$553 million for fiscal year 2025.

Gifts – increased \$31 million over the prior year, reflecting increases in current use gifts (up \$5 million), capital gifts (up \$4 million) and endowment gifts (up \$22 million).

Sales and services of auxiliary enterprises - increased \$45 million over the prior year due primarily to a \$51 million increase in Athletics revenues. The increase in Athletics revenues is mainly attributable to eight home football games in fiscal year 2025 compared to six home games in fiscal year 2024 and increases in distributions of media rights revenues from the Big Ten. These increases were partially offset by a \$13 million decrease in concert revenues related to fewer stadium shows in fiscal year 2025.

Sales and services of the OSU Health System and OSU Physicians, Inc. - increased \$772 million to \$6,762 million. Health System revenues increased \$677 million, driven by growth in outpatient volumes. Total surgical volumes grew over the prior year by 3.2% with outpatient surgeries exceeding the prior year by 6.3%. Additionally, chemotherapy, outpatient infusion, radiology, and procedural volumes contributed to the strong results. OSU Physicians revenues increased \$95 million due to continued investment in primary care and community outreach services, growth of specialty services, expansion in regional outpatient clinics, and increased surgical capacity with expansion of operating hours and investment in community anesthesia providers.

Non-exchange grants – increased \$35 million primarily due to a \$17 million increase in federal Pell Grants, an \$11 million increase in Ohio College Opportunity Grants and a new Governor's Merit Scholarship of \$6 million.

Expenses

University – expenses, excluding pension and OPEB, increased \$135 million to \$3,916 million in fiscal year 2025. Additional information about pension and OPEB is provided in a separate section below. Salaries increased \$102 million, or 6%, primarily due to a 3.5% increase in faculty and staff salary guidelines and additional investments in human capital related to strategic investments in academic excellence and research and to address market wage pressures. Benefits, excluding pension and OPEB, increased \$68 million, reflecting increases in medical costs and higher retirement contributions due to an increasing salary base. The university portion of the pension and OPEB expenses decreased \$217 million. Supplies and services decreased \$23 million, or 3%, primarily reflecting decreases in supplies and utility costs.

OSU Health System and OSU Physicians – expenses, excluding pension and OPEB but including depreciation and interest expenses, increased \$737 million to \$6,426 million in fiscal year 2025. The Health System's portion of pension and OPEB expenses decreased \$51 million. The Health System continued to focus on throughput, workforce retention, and recruiting. The Health System's expenses

and labor management was strong and in line with volumes for FY2025. OSU Physicians increased \$91 million, primarily due to higher provider expenses associated with investment in patient care services growth and access improvement.

Auxiliary – expenses, excluding pension and OPEB, increased \$51 million to \$501 million in fiscal year 2025. Athletics expenses increased \$28 million, primarily reflecting game-day expenses associated with eight home football games and the CFP game and NIL payments to student-athletes. Housing and Dining expenses increased \$14 million. The Auxiliary portion of pension and OPEB expenses decreased \$8 million.

Cash and Investments

For the year ending June 30, 2025, total university cash and investments increased \$883 million to \$12,401 million compared to June 30, 2024, primarily due to increases in Long-Term Investment Pool of \$688 million, temporary investments of \$441 million and other long-term investments of \$60 million, which were partially offset by decreases in cash and cash equivalents of \$285 million and unexpended bond proceeds of \$56 million. Additional details for the Long-Term Investment Pool and temporary investments are provided below.

Long-Term Investment Pool and Temporary Investments

For the year ending June 30, 2025, the fair value of the university's Long-Term Investment Pool increased by \$688 million to \$8,620 million. Changes in total valuation compared to the prior year are summarized below:

	2025	2024
Market Value at July 1	\$ 7,931,714	\$ 7,383,676
Net Principal Additions	152,014	99,999
Change in Market Value	806,660	667,954
Income Earned	201,481	193,640
Distributions	(317,983)	(304,804)
Expenses	(153,965)	(108,751)
Market Value at June 30	\$ 8,619,921	\$ 7,931,714

Net principal additions include new endowment gifts (\$96.3 million), reinvestment of unused endowment distributions (\$23.8 million), and other net transfers of university monies (\$24.1 million). Change in fair value includes realized gains (losses) on the sale of investment assets and unrealized gains (losses) associated with assets held in the pool on June 30, 2025. Income earned includes interest and dividends and is used primarily to help fund distributions. Expenses include investment management expenses (\$86.3 million), University Development related expenses (\$59.2 million), and other administrative-related expenses (\$0.7 million).

LTIP Investment Returns

For the year ending June 30, 2025, the LTIP earned a return, net of investment fees, of 11.81%. The comparable year ending June 30, 2024, saw a net investment return of 10.78%.

Temporary Investments

For the year ending June 30, 2025, the Tier 1 Investments earned a return of 5.02%, outperforming the Bank of America ML 90-day T-Bill (4.63%) by 0.39%. Tier 2 Investments earned 6.73%, outperforming the blended benchmark of ICE Bofa US Corp & Govt 1-3 Years, BBG US Govt/Credit 1-5 Years, BBG US Ag Govt/Cr Intrmd, and ICE Bofa US Treasury 1-10 (6.14%) by 0.59%.

For the comparable year ending June 30, 2024, the Tier 1 Investments earned a return of 5.76%. Tier 2 Investments returned 5.87% for the same time period.

Pension and Other post-employment benefit (OPEB) plans

The university participates in two multi-employer cost-sharing retirement systems, OPERS and STRS-Ohio, and is required to record its proportionate share of the net liabilities or net assets in these retirement systems, along with related deferrals. In 2025, the university's share of OPERS and STRS-Ohio net pension liabilities decreased \$181 million, to \$3.69 billion as of June 30, 2025. OPERS and STRS-Ohio net pension liabilities decreased \$108 million and \$73 million, respectively, reflecting positive investment returns for both retirement systems. OPERS realized an 8.82% return on defined benefit plan investments for calendar year 2024, compared to a projected return of 6.9%. STRS-Ohio realized a 10.53% return for the fiscal year ended June 30, 2024, compared to a projected return of 7.0%. Pension deferred outflows decreased \$170 million, and pension deferred inflows increased \$43 million. The changes in pension deferrals relate primarily to OPERS and STRS-Ohio projected vs actual investment returns. Deferred outflows and deferred inflows related to pensions will be amortized to expense in future periods.

In 2025, the university's proportionate share of net OPEB assets increased \$163 million to \$358 million at June 30, 2025, reflecting positive investment returns for both retirement systems. OPERS realized a 10.00% return on its health care investments for calendar year 2024, compared to a projected return of 6.0%. STRS-Ohio realized a 10.53% return for the fiscal year ended June 30, 2024, compared to a projected return of 7.0%. Deferred outflows related to OPEB decreased \$78 million, to \$18 million at June 30, 2025, and deferred inflows related to OPEB decreased \$26 million, to \$108 million at June 30, 2025. The changes in OPEB deferrals relate primarily to OPERS projected vs actual investment returns. These deferrals will be recognized as OPEB expense in future periods.

Other Assets and Liabilities

Accounts receivable, net increased by \$156 million, primarily reflecting a combination of increases in healthcare receivables of \$81 million and grants and contracts receivables of \$46 million. Unexpended bond proceeds decreased by \$56 million, reflecting expenditures for capital projects. Accounts payable and accrued expenses increased by \$141 million, primarily due to a \$156 million increase in payables to vendors for supplies and services, which was partially offset by a \$14 million decrease in accrued compensation and benefits. Deposits and advance payments for goods and services decreased by \$26 million, primarily due to a \$41 million decrease in advances for grants and contracts, which was partially offset by an increase of \$8 million for tuition and fees and housing and dining for Summer semester.

Debt

On September 4, 2024, the university issued \$64 million of tax-exempt fixed-rate General Receipts Refunding Bonds, Series 2024A. The Series 2024A Bonds are structured with serial maturities due in 2025 through 2039. The interest rate coupons on the Series 2024A Bonds are 5.00%. The proceeds of the 2024A Bonds were used to refund certain maturities of the outstanding General Receipt Bonds, Series 2014A and to pay the cost of issuance of the 2024A Bonds. Total university debt decreased \$112 million, to \$4,263 million as of June 30, 2025, primarily reflecting principal payments.

Cash Flows

University cash and cash equivalents decreased \$285 million in fiscal year 2025 compared to June 30, 2024. Net cash used in operating activities was \$276 million, compared to net cash used by operating activities of \$265 million in the prior year. The increase in cash usage relates primarily to increases in payments made to employees and vendors, which were partially offset by receipts for sales and services. Net cash provided by noncapital financing activities was \$960 million in fiscal year 2025, which is a \$119 million increase compared to the prior year, primarily due to increases in receipts for gifts and non-exchange grants. Net cash used by capital financing activities was \$1,056 million in fiscal year 2025 compared to \$825 million in fiscal year 2024, primarily reflecting capital expenditures and no new debt issuance in fiscal year 2025 (proceeds of the Series 2024A bonds were used to refund existing debt). Net cash provided by investing activities was \$87 million, primarily due to investment income.

THE OHIO STATE UNIVERSITY
CONSOLIDATED STATEMENTS OF NET POSITION - UNAUDITED
June 30, 2025 and June 30, 2024
(in thousands)

	As of June 2025	As of June 2024	Increase/(Decrease) Dollars %	
ASSETS:				
Current Assets:				
Cash and cash equivalents	\$ 771,701	\$ 1,056,657	\$ (284,956)	-27.0%
Temporary investments	2,657,126	2,215,831	441,295	19.9%
Accounts receivable, net	1,244,461	1,088,072	156,389	14.4%
Notes receivable - current portion, net	6,456	6,456	-	0.0%
Pledges receivable - current portion, net	62,182	62,107	75	0.1%
Accrued interest receivable	24,781	22,637	2,144	9.5%
Inventories, prepaid expenses, and other assets	235,757	222,616	13,141	5.9%
Investments held under securities lending program	33,514	-	33,514	100.0%
Total Current Assets	5,035,978	4,674,376	361,602	7.7%
Noncurrent Assets:				
Unexpended bond proceeds	54,375	109,975	(55,600)	-50.6%
Notes receivable, net	23,741	27,410	(3,669)	-13.4%
Pledges receivable, net	172,377	172,377	-	0.0%
Net other post-employment benefit asset	357,668	194,698	162,970	83.7%
Long-term investment pool	8,619,921	7,931,714	688,207	8.7%
Other long-term investments	264,607	204,539	60,068	29.4%
Leases receivable, net	43,103	43,103	-	0.0%
Other noncurrent assets	305,701	305,701	-	0.0%
Capital assets, net	9,341,240	9,008,416	332,824	3.7%
Total Noncurrent Assets	19,182,733	17,997,933	1,184,800	6.6%
Total Assets	24,218,711	22,672,309	1,546,402	6.8%
Deferred Outflows:				
Pension	718,996	888,530	(169,534)	-19.1%
Other post-employment benefits	17,543	95,656	(78,113)	-81.7%
Other deferred outflows	17,845	20,034	(2,189)	-10.9%
Total Assets and Deferred Outflows	\$ 24,973,095	\$ 23,676,529	\$ 1,296,566	5.5%
LIABILITIES AND NET POSITION:				
Current Liabilities:				
Accounts payable and accrued expenses	\$ 1,030,322	\$ 888,944	\$ 141,378	15.9%
Deposits and advance payments for goods and services	385,926	412,407	(26,481)	-6.4%
Current portion of bonds, notes and leases payable	128,450	128,398	52	0.0%
Long-term bonds payable, subject to remarketing	603,820	603,820	-	0.0%
Liability under securities lending program	33,514	-	33,514	100.0%
Other current liabilities	108,672	119,295	(10,623)	-8.9%
Total Current Liabilities	2,290,704	2,152,864	137,840	6.4%
Noncurrent Liabilities:				
Bonds, notes and leases payable	3,090,237	3,176,520	(86,283)	-2.7%
Concessionaire payable	440,521	466,671	(26,150)	-5.6%
Net pension liability	3,688,568	3,869,225	(180,657)	-4.7%
Net other post-employment benefit liability	22,970	22,970	-	0.0%
Compensated absences	247,663	239,488	8,175	3.4%
Self-insurance accruals	70,039	87,290	(17,251)	-19.8%
Amounts due to third-party payors - Health System	67,887	79,153	(11,266)	-14.2%
Irrevocable split-interest agreements	36,368	33,123	3,245	9.8%
Refundable advances for Federal Perkins loans	15,362	18,141	(2,779)	-15.3%
Advance from concessionaire	919,723	943,319	(23,596)	-2.5%
Other noncurrent liabilities	363,206	359,726	3,480	1.0%
Total Noncurrent Liabilities	8,962,544	9,295,626	(333,082)	-3.6%
Total Liabilities	11,253,248	11,448,490	(195,242)	-1.7%
Deferred Inflows:				
Parking service concession arrangement	426,917	438,390	(11,473)	-2.6%
Pension	124,296	81,069	43,227	53.3%
Other post-employment benefits	107,893	133,721	(25,828)	-19.3%
Other deferred inflows	434,682	431,653	3,029	0.7%
Total Deferred Inflows	1,093,788	1,084,833	8,955	0.8%
Total Net Position	12,626,059	11,143,206	1,482,853	13.3%
Total Liabilities, Deferred Inflows, and Net Position	\$ 24,973,095	\$ 23,676,529	\$ 1,296,566	5.5%

THE OHIO STATE UNIVERSITY
CONSOLIDATED STATEMENTS OF REVENUES, EXPENSES,
AND CHANGES IN NET POSITION - UNAUDITED
For the Twelve Months Ended June 30, 2025 and June 30, 2024
(in thousands)

	As of June 2025	As of June 2024	Increase/(Decrease)	
			Dollars	%
Operating Revenues:				
Student tuition and fees, net	\$ 1,165,276	\$ 1,094,229	\$ 71,047	6.5%
Federal grants and contracts	553,325	556,542	(3,217)	-0.6%
State grants and contracts	134,918	126,623	8,295	6.6%
Local grants and contracts	33,956	33,042	914	2.8%
Private grants and contracts	446,536	428,266	18,270	4.3%
Sales and services of educational departments	238,212	197,209	41,003	20.8%
Sales and services of auxiliary enterprises	436,040	391,487	44,553	11.4%
Sales and services of the OSU Health System, net	5,565,143	4,888,549	676,594	13.8%
Sales and services of OSU Physicians, Inc., net	1,197,346	1,102,050	95,296	8.6%
Other operating revenues	132,179	103,244	28,935	28.0%
Total Operating Revenues	9,902,931	8,921,241	981,690	11.0%
Operating Expenses:				
Educational and General:				
Instruction and departmental research	1,338,700	1,364,360	(25,660)	-1.9%
Separately budgeted research	711,413	708,664	2,749	0.4%
Public service	209,385	211,283	(1,898)	-0.9%
Academic support	365,855	354,520	11,335	3.2%
Student services	137,880	136,168	1,712	1.3%
Institutional support	292,932	328,492	(35,560)	-10.8%
Operation and maintenance of plant	152,222	167,276	(15,054)	-9.0%
Scholarships and fellowships	119,891	106,674	13,217	12.4%
Auxiliary enterprises	501,930	458,464	43,466	9.5%
OSU Health System	4,972,640	4,400,375	572,265	13.0%
OSU Physicians, Inc.	1,169,239	1,078,267	90,972	8.4%
Depreciation	623,034	616,748	6,286	1.0%
Total Operating Expenses	10,595,121	9,931,291	663,830	6.7%
Operating Loss	(692,190)	(1,010,050)	317,860	-31.5%
Non-operating Revenues (Expenses):				
State share of instruction and line-item appropriations	540,728	528,536	12,192	2.3%
Federal subsidies for Build America Bonds interest	11,321	11,321	-	0.0%
Federal non-exchange grants	88,218	70,982	17,236	24.3%
Federal COVID-19 assistance programs	36	5,352	(5,316)	-99.3%
State non-exchange grants	48,841	30,851	17,990	58.3%
Gifts	194,745	189,492	5,253	2.8%
Net investment income (loss)	1,224,071	988,951	235,120	23.8%
Interest expense	(169,671)	(185,612)	15,941	-8.6%
Other non-operating revenues (expenses)	(7,874)	51,104	(58,978)	-115.4%
Net Non-operating Revenues (Expenses)	1,930,415	1,690,977	239,438	14.2%
Income (loss) before changes in net position	1,238,225	680,927	557,298	81.8%
Changes in Net Position				
State capital appropriations	88,756	61,016	27,740	45.5%
Private capital gifts	61,025	57,232	3,793	6.6%
Additions to permanent endowments	96,347	74,174	22,173	29.9%
Capital contributions and other changes in net position	(1,500)	-	(1,500)	0.0%
Total Changes in Net Position	244,628	192,422	52,206	27.1%
Increase (decrease) in Net Position	1,482,853	873,349	\$ 609,504	69.8%
Net Position - Beginning of Year	11,143,206	10,269,857		
Net Position - End of Period	\$ 12,626,059	\$ 11,143,206		

THE OHIO STATE UNIVERSITY
STATEMENTS OF CASH FLOWS - UNAUDITED
For the Year Ended June 30, 2025 and June 30, 2024
(in thousands)

	June 2025	June 2024	Increase/(Decrease)	
			Dollars	%
Cash Flows from Operating Activities:				
Tuition and fee receipts	\$ 1,066,850	\$ 946,677	\$ 120,173	12.7%
Grant and contract receipts	1,083,352	1,104,227	(20,875)	-1.9%
Receipts for sales and services	7,318,319	6,427,307	891,012	13.9%
Receipt from parking service concession	—	70,000	(70,000)	100.0%
Receipt from energy concessionaire	—	8,099	(8,099)	-100.0%
Payments to or on behalf of employees	(4,744,942)	(4,401,591)	(343,351)	-7.8%
University employee benefit payments	(1,346,515)	(1,123,032)	(223,483)	-19.9%
Payments to vendors for supplies and services	(3,634,932)	(3,298,825)	(336,107)	-10.2%
Payments to students and fellows	(142,101)	(90,738)	(51,363)	-56.6%
Student loans issued	(1,939)	(571)	(1,368)	-239.6%
Student loans collected	4,243	12,025	(7,782)	-64.7%
Student loan interest and fees collected	2,026	5,501	(3,475)	-63.2%
Other receipts	119,591	75,914	43,677	57.5%
Net cash provided (used) by operating activities	(276,048)	(265,007)	(11,041)	-4.2%
Cash Flows from Noncapital Financing Activities:				
State share of instruction and line-item appropriations	538,157	528,536	9,621	1.8%
Non-exchange grant receipts	137,059	101,833	35,226	34.6%
Federal COVID-19 assistance programs	36	5,352	(5,316)	-99.3%
Gift receipts for current use	194,670	128,641	66,029	51.3%
Additions to permanent endowments	96,347	74,174	22,173	29.9%
Drawdowns of federal direct loan proceeds	315,450	312,753	2,697	0.9%
Disbursements of federal direct loans to students	(317,085)	(310,862)	(6,223)	-2.0%
Amounts received from irrevocable split-interest agreements	4,251	1,684	2,567	152.4%
Amounts paid to annuitants and life beneficiaries	(1,006)	(2,128)	1,122	52.7%
Agency funds receipts	5,909	5,742	167	2.9%
Agency funds disbursements	(6,169)	(5,279)	(890)	-16.9%
Other receipts (payments)	(8,009)	-	(8,009)	100.0%
Net cash provided by noncapital financing activities	959,610	840,446	119,164	14.2%
Cash Flows from Capital Financing Activities:				
Proceeds from capital debt and leases	-	301,736	(301,736)	100.0%
Gift receipts for capital projects	61,025	91,657	(30,632)	-33.4%
Payments for purchase or construction of capital assets	(844,253)	(965,325)	121,072	12.5%
Principal payments on capital debt and leases	(91,810)	(83,592)	(8,218)	-9.8%
Interest payments on capital debt and leases	(186,384)	(179,960)	(6,424)	-3.6%
Federal subsidies for Build America Bonds interest	5,501	10,733	(5,232)	-48.7%
Net cash provided (used) by capital financing activities	(1,055,921)	(824,751)	(231,170)	-28.0%
Cash Flows from Investing Activities:				
Purchases of investments	(10,982,012)	(5,924,686)	(5,057,326)	-85.4%
Proceeds from sales and maturities of investments	10,695,934	5,627,664	5,068,270	90.1%
Investment income	373,481	363,431	10,050	2.8%
Net cash provided (used) by investing activities	87,403	66,409	20,994	31.6%
Net Increase (Decrease) in Cash	(284,956)	(182,903)	\$ (102,053)	-55.8%
Cash and Cash Equivalents - Beginning of Year	1,056,657	1,239,560		
Cash and Cash Equivalents - End of Period	\$ 771,701	\$ 1,056,657		

ATTACHMENT XII

THE OHIO STATE UNIVERSITY BOARD OF TRUSTEES FINANCE COMMITTEE

TOPIC: Annual Waiver Report for the 2025 Fiscal Year

SUMMARY:

2025 Fiscal Year (7/1/2024 - 6/30/2025)

A total of 1,043 waivers of competitive bidding were approved as sole source, emergency or for economic reasons, and by Board of Trustees resolution totaling approximately \$1,004.1 million.

- Eight percent (8%) or \$81.1 million of spend was sole source waivers
- One tenth of one percent (0.1%) or \$0.9 million of spend was emergency purchase waivers
- Twenty-two percent (22%) or \$216.9 million of spend was for sufficient economic reason
- Seventy percent (70%) or \$705.2 million of spend was Board of Trustees resolution waivers

2024 Fiscal Year (7/1/2023 - 6/30/2024)

A total of 981 waivers of competitive bidding were approved as sole source, emergency or for economic reasons, and by Board of Trustees resolution totaling approximately \$1,088.6 million.

- Twenty-two percent (22%) or \$241.9 million of spend was sole source waivers
- Two percent (2%) or \$21.0 million of spend was emergency purchase waivers
- Twenty-three percent (23%) or \$245.2 million of spend was for sufficient economic reason
- Fifty-three percent (53%) or \$580.5 million of spend was Board of Trustees resolution waivers

Period-Over-Period Comparison

Period-over-period increase in the count of waivers was 62 and the waiver spend decreased by \$84.5 million. This decrease was primarily attributed to the following:

- Affiliate Waivers - Software/eContent used by OhioLink member libraries. Pre-paid multi-year subscription renewals of ~\$99.7 Mils. recognized in FY24 reporting.

Board of Trustees resolution waivers consist of items such as software license renewals, term orders for utilities, talent fees for performers, renovations and repairs, pharmaceuticals, surgical products, and consulting and physician services.

The Ohio State University
Competitive Bid Waiver Report for Fiscal Year 2025

Category	Sufficient Economic Reason	Count	Emergency	Count	Sole Source	Count	Total	Count
Academic Support	\$ 24,268,238	24	\$ -	0	\$ 4,369,615	10	\$ 28,637,853	34
Administrative Support Equipment and Services	\$ 97,172,411	137	\$ 623,868	3	\$ 14,806,979	58	\$ 112,403,258	198
Instructional and Academic Research Equipment and Services	\$ 35,180,659	104	\$ 242,815	1	\$ 28,947,543	67	\$ 64,371,017	172
Affiliate Academic Support	\$ 89,200	1	\$ -	-	\$ -	0	\$ 89,200	1
Affiliate Administrative Support Equipment and Services	\$ 43,179,443	19	\$ -	-	\$ 984,720	2	\$ 44,164,163	21
Affiliate Instructional and Academic Research Equipment and Services	\$ 130,293	1	\$ -	-	\$ 11,014,265	9	\$ 11,144,558	10
Health Systems - Professional Health Care Services	\$ 6,110,041	11	\$ 75,000	1	\$ 11,878,623	19	\$ 18,063,664	31
Health Systems - Administrative Equipment and Services	\$ 10,764,808	25	\$ -	0	\$ 9,272,649	20	\$ 20,037,454	45
TOTAL WAIVERS	\$ 216,895,092	322	\$ 941,683	5	\$ 81,074,393	185	\$ 298,911,167	512
Waivers Authorized by BOT Resolutions							\$ 34,471,488	94
Health Systems - Waivers Authorized by BOT Resolutions							\$ 670,711,252	437
TOTAL BOT Resolutions							\$ 705,182,740	531
GRAND TOTAL							\$ 1,004,093,907	1,043

The Ohio State University
Competitive Bid Waiver Report for Fiscal Year 2024

Category	Sufficient Economic Reason	Count	Emergency	Count	Sole Source	Count	Total	Count
Academic Support	\$ 3,066,149	12	\$ 399,900	1	\$ 12,992,118	21	\$ 16,458,167	34
Administrative Support Equipment and Services	\$ 40,891,304	90	\$ 5,660,741	7	\$ 27,976,517	85	\$ 74,528,562	182
Instructional and Academic Research Equipment and Services	\$ 9,382,941	48	\$ 581,349	4	\$ 49,425,382	133	\$ 59,389,672	185
Affiliate Academic Support	\$ 3,742,520	1	\$ -	-	\$ 1,060,497	1	\$ 4,803,017	2
Affiliate Administrative Support Equipment and Services	\$ 15,835,311	14	\$ -	-	\$ 7,024,346	7	\$ 22,859,657	21
Affiliate Instructional and Academic Research Equipment and Services	\$ 1,082,181	2	\$ -	-	\$ 114,980,427	14	\$ 116,062,608	16
Health Systems - Professional Health Care Services	\$ 151,415,106	22	\$ 12,950,000	3	\$ 15,035,805	17	\$ 179,400,911	42
Health Systems - Administrative Equipment and Services	\$ 19,741,915	16	\$ 1,424,402	5	\$ 13,486,517	17	\$ 34,652,834	38
TOTAL WAIVERS	\$ 245,157,428	205	\$ 21,016,392	20	\$ 241,981,608	295	\$ 508,155,428	520
Waivers Authorized by BOT Resolutions							\$ 14,667,166	43
Health Systems - Waivers Authorized by BOT Resolutions							\$ 565,804,007	418
TOTAL BOT Resolutions							\$ 580,471,173	461
GRAND TOTAL							\$ 1,088,626,601	981

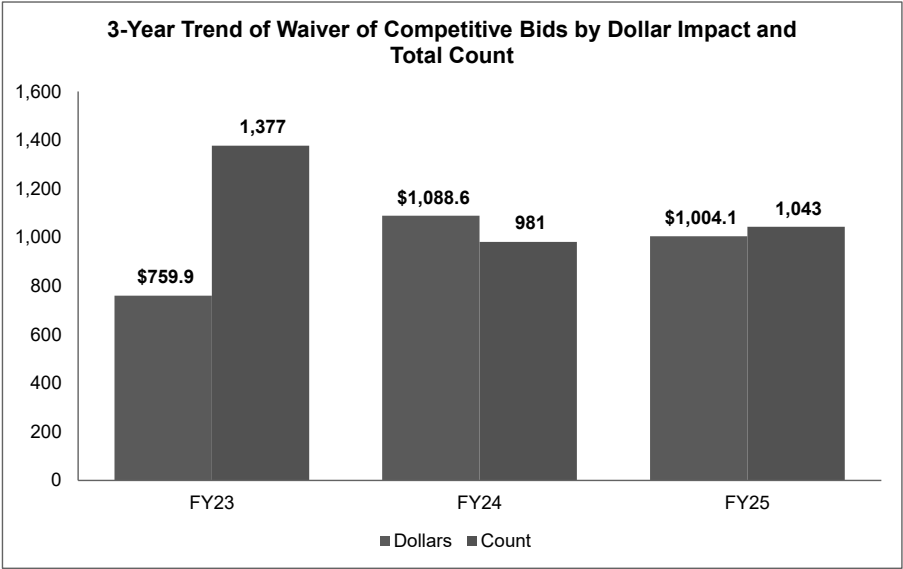
The Ohio State University
Competitive Bid Waiver Report Comparison for FY25 and FY24

Category	Sufficient Economic Reason	Count	Emergency	Count	Sole Source	Count	Total	Count
Academic Support	\$ 21,202,089	12	\$ (399,900)	(1)	\$ (8,622,504)	(11)	\$ 12,179,686	0
Administrative Support Equipment and Services	\$ 56,281,107	47	\$ (5,036,873)	(4)	\$ (13,369,538)	(27)	\$ 37,874,696	16
Instructional and Academic Research Equipment and Services	\$ 25,797,718	56	\$ (338,534)	(3)	\$ (20,477,839)	(66)	\$ 4,981,345	(13)
Affiliate Academic Support	\$ (3,653,320)	0	\$ -	0	\$ (1,060,497)	(1)	\$ (4,713,817)	(1)
Affiliate Administrative Support Equipment and Services	\$ 27,344,132	5	\$ -	0	\$ (6,039,626)	(5)	\$ 21,304,506	0
Affiliate Instructional and Academic Research Equipment and Services	\$ (951,888)	(1)	\$ -	0	\$ (103,966,162)	(5)	\$ (104,918,050)	(6)
Health Systems - Professional Health Care Services	\$ (145,305,065)	(11)	\$ (12,875,000)	(2)	\$ (3,157,182)	2	\$ (181,337,247)	(11)
Health Systems - Administrative Equipment and Services	\$ (8,977,110)	9	\$ (1,424,402)	(5)	\$ (4,213,868)	3	\$ (14,615,380)	7
TOTAL WAIVERS	\$ (28,262,336)	117	\$ (20,074,709)	(15)	\$ (160,907,215)	(110)	\$ (209,244,261)	(8)
Waivers Authorized by BOT Resolutions							\$ 19,804,322	51
Health Systems - Waivers Authorized by BOT Resolutions							\$ 104,907,245	19
TOTAL BOT Resolutions							\$ 124,711,567	70
GRAND TOTAL							\$ (84,532,694)	62

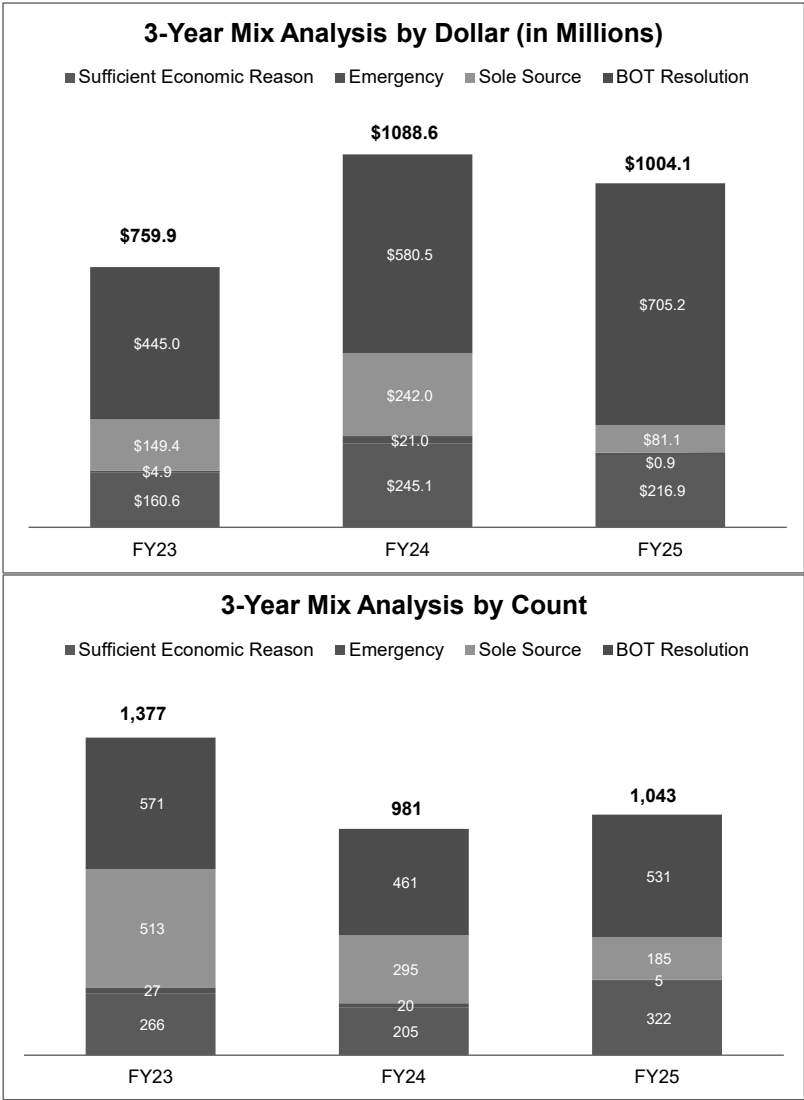
Annual Waiver Report for Fiscal Year 2025

Waiver of Competitive Bids Summary FY23 - FY25

Waiver Type	FY23		FY24		FY25	
(\$ in Millions)	Dollars	Count	Dollars	Count	Dollars	Count
Sufficient Economic Reason	\$ 160.6	266	\$ 245.1	205	\$ 216.9	322
Emergency	\$ 4.9	27	\$ 21.0	20	\$ 0.9	5
Sole Source	\$ 149.4	513	\$ 242.0	295	\$ 81.1	185
BOT Resolution	\$ 445.0	571	\$ 580.5	461	\$ 705.2	531
TOTAL	\$ 759.9	1,377	\$ 1,088.6	981	\$ 1,004.1	1,043



Waiver of Competitive Bids Summary
Fiscal Years FY23, FY24 and FY25



ATTACHMENT XIII

Honda Endowed Professorship in Artificial Intelligence in Mechanics and Manufacturing

The Board of Trustees of The Ohio State University shall establish the Honda Endowed Professorship in Artificial Intelligence in Mechanics and Manufacturing effective August 21, 2025, as a quasi-endowment, with a match from the College of Engineering Dean's Endowed Faculty Position and Graduate Student Fellowship Match Program.

The annual distribution from this fund supports a professorship position in the College of Engineering. The person appointed to such professorship shall be a tenure track professor in the college with preference for a faculty member with a joint appointment in the Department of Integrated Systems Engineering and the Department of Materials Science and Engineering. If the position is vacant, the annual distribution may be used to support faculty in the college who are focused on manufacturing.

The Ohio State University Foundation shall share with American Honda Motor Co., Inc. the qualifications and capabilities of the initial appointee and the subsequent appointees for a period of fifty years following the date of the initial gift; provided, that American Honda Motor Co., Inc. acknowledges and agrees that American Honda Motor Co., Inc. shall have no role in selection of each appointee, and that selection of each appointee is within the sole discretion and control of The Ohio State University pursuant to the University's policies.

The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. If the position is vacant, the annual distribution may be used to support faculty in the College of Engineering. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the College of Engineering or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the quasi-endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the College of Engineering or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

Dr. John M. McGregor Department of Neurosurgery Professorship

The Board of Trustees of The Ohio State University shall establish the Dr. John M. McGregor Department of Neurosurgery Professorship effective August 21, 2025, as a quasi-endowment, with a fund transfer by the Department of Neurosurgery.

The annual distribution from this fund supports a professorship position in Department of Neurosurgery, if full funding is reached. If the position is vacant, the annual distribution may be used to support faculty in the department. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the College of Medicine.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with the University's Gift Acceptance Policy, Fund Transfers – Unrestricted to Endowment Policy, Investment Policy, and all other applicable University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of College of Medicine that the quasi-endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the college named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the college or his/her designee to identify a similar purpose consistent with the original intent of the college. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

Mary Seaton Breese Scholarship Fund

The Board of Trustees of The Ohio State University shall establish the Mary Seaton Breese Scholarship Fund effective August 21, 2025, with estate gifts from Mary Seaton Breese.

The donor's original intent was to provide support for student-athletes who are playing at the point-guard position on The Ohio State University Women's Varsity Basketball Team. Her realized gift was extremely generous making it no longer appropriate to support the original intent only, because such an approach would regularly lead to significant unused annual distribution. Consistent with the goals of the donor to use her gift in support of student-athletes, the fund's purpose shall be expanded to support additional student-athletes, including other members of the Women's Varsity Basketball Team.

The annual distribution from this fund supplements the grant-in-aid costs of student-athletes who are playing at the point-guard position on The Ohio State University Women's Varsity Basketball Team. If annual distribution remains, the scholarship(s) will be open to all student-athletes who are playing on The Ohio State University Women's Varsity Basketball Team. If annual distribution still remains, the scholarship(s) will be open to all student-athletes who are playing on women's varsity teams. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the Department of Athletics, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees or The Ohio State University, with the right to invest and reinvest as occasion dictates.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the need for this fund cease to exist or so diminish as to provide unused income, then another use shall be designated by the Board of Trustees, in consultation with the appropriate college dean, department chairperson, or program administrative officer in order to carry out the desire of the donor.

College of Medicine Greatest Needs Fund

The Board of Trustees of The Ohio State University shall establish the College of Medicine Greatest Needs Fund effective August 21, 2025, as a quasi-endowment, with a fund transfer by College of Medicine of an unrestricted gift from the estate of Mary Ann Stockum.

The annual distribution from this fund supports the greatest needs of the College of Medicine as determined by the highest ranking official in the college or his/her designee. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with the University's Gift Acceptance Policy, Fund Transfers – Unrestricted to Endowment Policy, Investment Policy, and all other applicable University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of College of Medicine that the quasi-endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the unit named above. If the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the college or his/her designee to identify a similar purpose consistent with the original intent of the unit. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

College of Medicine Scholarship Fund for First-Year Medical Students

The Board of Trustees of The Ohio State University shall establish the College of Medicine Scholarship Fund for First-Year Medical Students effective August 21, 2025, as a quasi-endowment, with a fund transfer by College of Medicine of an unrestricted gift from the estate of Mary Ann Stockum.

The annual distribution from this fund provides one or more scholarships to first-year medical students who demonstrate academic merit and/or financial need. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the College of Medicine, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with the University's Gift Acceptance Policy, Fund Transfers – Unrestricted to Endowment Policy, Investment Policy, and all other applicable University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of College of Medicine that the quasi-endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the unit named above. If the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the college or his/her designee to identify a similar purpose consistent with the original intent of the unit. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

Julia Holland Memorial Scholarship Fund

The Board of Trustees of The Ohio State University shall establish the Julia Holland Memorial Scholarship Fund effective August 21, 2025, with gifts from friends and family of Julia Holland (BA 2023).

The annual distribution from this fund provides one or more scholarships to students who are enrolled in the Michael E. Moritz College of Law with preference given to students who are interested in criminal defense law.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the Michael E. Moritz College of Law, in consultation with Student Financial Aid.

The highest ranking official in the Michael E. Moritz College of Law or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the Michael E. Moritz College of Law or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

The Jo Ann M. Ferguson Fund for Artistic Swimming

The Jo Ann M. Ferguson Scholarship Fund for Synchronized Swimming was established February 1, 1991, by the Board of Trustees of The Ohio State University with gifts to The Ohio State University Development Fund from Jo Ann M. Ferguson Kale (B.S.Nurs. 1976) of Fort Smith, Arkansas. The name and description were revised October 6, 2000. Effective August 21, 2025, the fund name and description shall be further revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution shall be used to enhance the varsity artistic swimming program at the discretion of the head coach in consultation with the administrative official in charge of artistic swimming, and in accordance with department and NCAA rules and regulations.

It is the desire of the donor that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused distribution, then another use shall be designated by the Board of Trustees in consultation with Jo Ann M. Ferguson Kale or her representative, when possible, and the appropriate administrative official of the University then responsible for the intercollegiate varsity athletics program in order to carry out the desire of the donor.

The Brad H. Rovin Endowed Professorship for Kidney Research

The Ohio State University Nephrology Endowed Professorship for Kidney Research was established November 3, 2017, by the Board of Trustees of The Ohio State University, with a fund transfer from the Division of Nephrology given by the faculty members to promote basic, translational and clinical research in kidney diseases at The Ohio State University Wexner Medical Center. The fund description was revised November 21, 2024. Effective August 21, 2025, the fund name and description shall be revised.

The annual distribution from this fund shall be used for a professorship position in the Division of Nephrology in the Department of Internal Medicine, supporting a nationally or internationally recognized physician faculty member in the field of Nephrology. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. If the professorship position is vacant, the annual distribution may be used to support the Division of Nephrology.

The professorship may be revised to an endowed chair position when the endowment principal balance reaches the minimum funding level required at that date for an endowed chair position. Alternatively, at the discretion of the division director and approved by the department chair and college dean, the professorship may be closed and its principal balance transferred to the Dr. Lee A. Hebert Distinguished Professorship in Nephrology.

Unused annual distribution shall be reinvested in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the College of Medicine or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

The Mary Lundie Stewart Vorman Endowed Scholarship Fund

The Mary Lundie Stewart Vorman Scholarship Fund was established March 5, 2004, by the Board of Trustees of The Ohio State University, with a gift from the estate of Helen Vorman Anderson (BS in Ed 1923, MA 1931) formerly of Salinas, California, in memory of her mother, Mary Lundie Stewart Vorman. The name and description were revised on February 1, 2013. Effective August 21, 2025, the fund name and description shall be further revised.

The annual distribution from this fund shall provide student scholarships for the study of Celtic literature with an emphasis on Scottish literature to the most able applicants who have financial need. The scholarships are intended to provide at least twenty-five percent (25%), but not more than ninety percent (90%), of the recipient's financial needs. Each scholarship should be limited to one academic year unless the recipient exhibits outstanding academic achievement and ambition in which case the scholarship may be extended for a second academic year. Scholarships may be awarded in varying amounts based on student enrollment, available funding, and other factors. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the College of Arts and Sciences, in consultation with Student Financial Aid.

The investment and management of, and expenditures from all endowment funds shall be in accordance with the University's policies and procedures as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity.

The W. E. Cramer Scholarship Fund

The W. E. Cramer Scholarship Fund was established February 7, 1986, by the Board of Trustees of The Ohio State University with gifts from the Edward Orton, Jr., Ceramic Foundation in memory of its former trustee and from Helen M. Cramer in memory of her late husband, W. E. Cramer, B.Cer.E. '20, PRO, Ceramic Engineering, 1937. Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution will be used to support the Department of Materials Science and Engineering through undergraduate scholarships. Preference will be given to outstanding students majoring in material science engineering who are United States citizens or permanent residents. Recipients will be named annually, but maybe eligible to compete for renewed awards. Recipients may be recommended by the highest ranking official in the department or his/her designee. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the College of Engineering. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

Should the need for this fund cease to exist or so diminish as to provide unused distribution, then the distribution may be used for any purpose whatsoever as determined by the Board of Trustees, with preference being given to recommendations from the highest ranking official in the College of Engineering or his/her designee in consultation with the appropriate administrative official of the University who is then directly responsible for ceramic engineering education.

Faculty Initiatives and Research Discovery Endowment Fund

The Faculty Initiatives and Research Discovery Endowment Fund was established November 9, 2012, by the Board of Trustees of The Ohio State University with funding acquired from the monetization of the University's parking assets in 2012. Effective August 21, 2025, the fund description shall be revised.

The annual distribution will be invested in faculty recruitment and retention initiatives, including but not limited to, the Discovery Themes Initiative. Decisions on allocation of the annual distribution will be made by the Executive Vice President and University Provost, with recommendations by the Discovery Themes leadership team for Discovery Theme-related proposed expenditures. The annual distribution will support faculty personnel expenses, faculty start-up expenses, retention of outstanding faculty, research expenses in priority areas of development and in support of the academic strategy, research support staff and faculty research and academic-related expenses deemed necessary by the University Provost.

In any given year that the endowment distribution is not fully used for its intended purpose, the unused portion should be held in the distribution account to be used in subsequent years and only for the purposes of the endowment, or reinvested in the endowment principal at the discretion of the executive vice president and provost and the senior vice president of Business and Finance.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the University that this fund should benefit the University in perpetuity. Should unforeseen circumstances arise in the future so that the need for this endowment ceases to exist, then another use shall be designated by the University's Board of Trustees in consultation with the executive vice president and provost and the senior vice president of Business and Finance.

The Julie Price Memorial Scholarship Fund in Law

The Julie Price Memorial Scholarship Fund in Law was established November 1, 1985, by the Board of Trustees of The Ohio State University with gifts to The Ohio State University Development Fund from the family and friends of Julie Price, B.A., Humanities, '81; J.D., Law, '84. Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution is to be used for financial aid for one or more students enrolled in the Michael E. Moritz College of Law who have a demonstrated financial need. Preference will be given to students who are from Knox County, Ohio and its contiguous counties. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the college. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

Should the need for this fund cease to exist or so diminish as to provide unused distribution, then the distribution may be used for any purpose whatsoever as determined by the Board of Trustees, with preference being given to recommendations from the highest ranking official in the Michael E. Moritz College of Law or his/her designee.

The Ruth Haignere Rose Student Nurse Scholarship Fund

The Ruth Haignere Rose Student Nurse Scholarship Fund was established June 11, 1986, with funds donated December 5, 1985, by Ruth Haignere Rose (B.S.Ed. '40, Certificate of Graduate Nursing '40) and contributions by Ralph Rose (B.Cer.E. '42). The name and description were revised December 2, 1988. Effective August 21, 2025, the fund description shall be revised.

The annual distribution is to be used for tuition and incidental fees for the College of Nursing by qualified undergraduate students who are citizens or permanent residents of the United States and who have financial need. They must agree to sponsor another student nurse in their lifetime. Such is not the responsibility of The Ohio State University, but it is incumbent upon the award recipient. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

Should the need for this fund cease to exist or so diminish as to provide unused distribution, then the distribution may be used for any purpose whatsoever in the College of Nursing as directed by the Board of Trustees, with preference being given to recommendations from the highest ranking official in the college or his/her designee.

The Shepherd Scholarship Award Fund

The J. M. Shepherd Scholarship Fund was established April 3, 1987, by the Board of Trustees of The Ohio State University, with gifts from J. M. Shepherd (BCerE 1958; MBA 1959). The name and description were revised December 1, 1989. The description was further revised on February 1, 2013. Effective August 21, 2025, the fund description shall be revised.

The annual distribution may be used to recruit graduates of Withrow High School (Cincinnati, Ohio) or Norwood High School (Norwood, Ohio). The annual distribution shall provide one or more scholarship awards to undergraduate students at any class ranking level who are graduates of Withrow High School or Norwood High School and who are enrolled in or intend to enroll in the College of Engineering. Recipients shall have evidence of financial need for the first year's selection only and promise of academic achievement in any engineering discipline. This scholarship can be renewed annually until graduation as long as each recipient maintains progress toward a degree and is in good academic standing. If there are no eligible Withrow or Norwood graduates, non-renewable awards should be made available to any deserving engineering student, with preference to graduates of the Cincinnati Public Schools in Cincinnati, Ohio. It is the donor's desire to provide as significant financial support as possible to as few students as possible. Recipients, the number of recipients, and amount of each scholarship award shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Engineering or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the College of Engineering or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

The Wildah Turnbull and Joseph K. Walkup Memorial Fund

The Wildah Turnbull Walkup Memorial Fund was established February 1, 1974, by the Board of Trustees of The Ohio State University with a gift to The Ohio State University Development Fund from Joseph K. Walkup (B.A. 1932, B.M.E. 1941, Professional I.E. 1941) and his sons David W., Robert E., and John D. Walkup in memory of his wife and their mother, Wildah Turnbull Walkup (B.A. with honors 1931, M.A. 1932). Upon the death of Joseph K. Walkup and at the request of his executor and son, Robert E. Walkup, and the College of Engineering, the name and description were revised to include both Mr. and Mrs. Walkup on June 29, 2001. Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution is to be used to provide one or more undergraduate scholarships for students enrolled in the College of Engineering who participate in activities that promote leadership or community service efforts to broaden participation by women and girls in the field of engineering. Recipient(s) will be chosen during the first full year of enrollment in the engineering curriculum. Basis for selection also takes into account academic achievement. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

It is the desire of the donors that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused distribution, then another use shall be designated by the Board of Trustees, in consultation with the highest ranking official in the College of Engineering, in order to carry out the desire of the donors.

The Herbert G. Utz Memorial Scholarship Fund

The Herbert G. Utz Memorial Scholarship Fund was established April 5, 1991, by the Board of Trustees of The Ohio State University, with gifts to The Ohio State University Development Fund from the Utz family, Complete General Construction Company, the Ohio Contractors Association, and friends of Herbert G. Utz (B.C.E. '61). Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution shall be used to provide an annual scholarship to a civil engineering student(s). Preference shall be given to a student(s) who is a United States citizen or permanent resident, a resident of the state of Ohio, and a graduate or undergraduate majoring in construction. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the College of Engineering. Recipients may be recommended by the highest ranking official in the Department of Civil, Environmental and Geodetic Engineering (formerly known as the Department of Civil Engineering), Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid. The Department of Civil Engineering shall also provide an annual report to the descendants of Herbert G. Utz.

It is the desire of the donors that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused distribution, then another use shall be designated by the Board of Trustees in consultation with the highest ranking official in the College of Engineering or his/her designee in order to carry out the desire of the donors.

The Dorothy Sumption Wirthwein – Women's Physical Education Fund

The Dorothy Sumption Wirthwein – Women's Physical Education Fund was established September 2, 1983, by the Board of Trustees of The Ohio State University with gifts to The Ohio State University through The Ohio State University Development Fund from alumnae, students and colleagues in memory of Dorothy Sumption Wirthwein, Columbus, Ohio. The description was changed September 6, 1985, and February 22, 2024. Effective August 21, 2025, the fund description shall be further revised.

All gifts are to be invested in the University's Permanent Endowment Fund, under the rules and regulations adopted by the Board of Trustees of The Ohio State University, with the right to invest and reinvest as occasion dictates.

The annual distribution from this fund supplements the grant-in-aid costs of first year graduate or professional students who are members of one of the following teams: women's basketball, women's cross country, women's fencing, field hockey, women's golf, women's gymnastics, women's ice hockey, women's lacrosse, rowing, women's soccer, women's softball, women's swim & dive, artistic swimming, women's tennis, women's track & field, or women's volleyball. Preference shall be given to candidates who have indicated a desire to pursue a career in teaching, coaching or conducting sports programs. Selection shall be based on clearly demonstrated personal qualities of leadership and of academic potential. Need may be used as a criterion. If no students meet the selection criteria, distribution supplements the grant-in-aid costs undergraduate student-athletes who are members of one of the following teams: women's basketball, women's cross country, women's fencing, field hockey, women's golf, women's gymnastics, women's ice hockey, women's lacrosse, rowing, women's soccer, women's softball, women's swim & dive, artistic swimming, women's tennis, women's track & field, or women's volleyball. Recipients, the number of recipients, and amount of support shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the Department of Athletics, in consultation with the College of Education and Human Ecology and Student Financial Aid.

Should the need for this fund cease to exist or so diminish as to provide unused annual distribution, then the annual distribution may be used for any purpose whatsoever as determined by the Board of Trustees, with preference being given to recommendations from the highest ranking officials in the Department of Athletics and the College of Education and Human Ecology or their designees.

**Dr. Harold "Hal" Miller and Betty J. Miller Endowed Chair
in Organic Chemistry and Biochemistry**

The Dr. Harold "Hal" Miller and Betty J. Miller Endowed Professorship in Organic Chemistry and Biochemistry was established February 10, 2022, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from Betty Jane Miller in memory of Dr. Harold "Hal" Miller (BA '48, MA '51, PhD '59 Chemistry). The required funding level for a chair has been reached. Effective August 21, 2025, the fund name and description shall be revised and the position shall be established.

The annual distribution from this fund supports a chair position in the College of Arts and Sciences, Department of Chemistry and Biochemistry. The chair may be used to recruit or retain candidates who demonstrate excellence in teaching and conduct research in organic chemistry and/or biochemistry. If the position is vacant, the annual distribution may be used to support faculty in the department.

The highest ranking official in the College of Arts and Sciences or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Endowed Chair in Integrative Health

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Endowed Chair in Integrative Health effective August 21, 2025, with gifts from Christina E. Grote and James E. Grote.

The annual distribution from this fund supports a chair position in the College of Medicine to be held by the highest ranking official in the Center for Integrative Health. Subsequent to the date on which the current Director of the Center, Maryanna D. Klatt (MA 2001, PhD 2002), retires or is otherwise no longer the Director of the Center, the fund shall be renamed the Maryanna D. Klatt Endowed Chair in Integrative Health. If the position is vacant, the annual distribution may be used to support the priorities of the Center. If the center ever ceases to exist, the annual distribution shall support faculty in the college. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Medicine or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Jeffrey Professorship in Children, Young Adult and Family Psychiatry

The Jeffrey Postdoctoral Fellowship Fund in Academic Child and Adolescent Psychiatry was established April 6, 2007, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Robert H. "Tad" and Anne K. "Nancy" Jeffrey of Bexley, Ohio. Effective August 21, 2025, the fund name and description shall be revised.

The annual distribution from this fund shall be used for a professorship position in the Department of Psychiatry and Behavioral Health focused on activities relevant to advancing the quality of mental health services delivered to children, adolescents, and young adults with mental disorders and their families. The position holder shall be appointed and reviewed in accordance with then current guidelines and procedures for faculty appointment. If the position is vacant, the annual distribution may be used to support faculty in the College of Medicine. Expenditures shall be approved in accordance with then current guidelines and procedures established by the college.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that this fund should benefit the University in perpetuity. If, in the future, the need for this fund should cease to exist or so diminish as to provide unused distributions, then another use shall be designated by the Board of Trustees and Foundation Board as recommended by the highest ranking official in the College of Medicine or his/her designee. Any such alternate distributions shall be made in a manner as nearly aligned with the original intent of the donors as good conscience and need dictate.

The Leon M. McCorkle Jr. Professorship in Commercial Law

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Leon M. McCorkle Jr. Professorship in Commercial Law effective August 21, 2025, with gifts from Leon M. McCorkle Jr. (JD 1972).

The annual distribution from this fund supports a professorship position in the Michael E. Moritz College of Law focused on commercial and consumer law. If the position is vacant, the annual distribution may be used to support faculty in the college who are focused on commercial and consumer law. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the Michael E. Moritz College of Law or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Michael E. Moritz College of Law or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Colleen McMahon Professorship in Music

The Colleen McMahon Faculty Excellence Fund in Music was established May 19, 2022, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from the Honorable Colleen McMahon (BA 1973). The required funding level for a professorship has been reached. Effective August 21, 2025, the fund name and description shall be revised and the position shall be established.

The annual distribution from this fund supports a professorship position in the School of Music. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. If the position is vacant, the annual distribution may be used to support faculty in the school. This endowment should be used to enhance the school's reputation for faculty excellence, by facilitating the recruitment and retention of outstanding educators and researchers who display the potential for leadership both in their specialty and in the College of Arts and Sciences. Preferred fields of specialization are choral music and music theory. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the College of Arts and Sciences, in consultation with the highest ranking official in the School of Music or his/her designee, has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences, in consultation with the highest ranking official in the School of Music or his/her designee, to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Ernestine R. Lowrie Professorship Fund in Thoracic Surgery

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Ernestine R. Lowrie Professorship Fund in Thoracic Surgery effective August 21, 2025 with gifts from Ernestine R. Lowrie.

If the gifted principal balance of the fund reaches the required professorship funding level of \$1,000,000 by July 1, 2030, the annual distribution from this fund supports a professorship position in the Division of Thoracic Surgery. Prior to full funding, if the position is vacant, or if full funding is not reached, the annual distribution may be used to support faculty in the division. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. Expenditures shall be approved in accordance with the then current guidelines and procedures established by The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute.

The highest ranking official in The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Wayne Urban Endowed Professorship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Wayne Urban Endowed Professorship Fund effective August 21, 2025, with gifts from Dr. Wayne Joseph Urban.

If the gifted principal balance of the fund reaches the required professorship funding level of \$1,000,000 by December 31, 2035, the annual distribution from this fund supports a professorship position in the College of Education and Human Ecology. Candidates should be focused on the history of American education and/or the history of American higher education. Prior to full funding, if the position is vacant, or if full funding is not reached, the annual distribution may be used to support faculty working in the areas of philosophy and history of education in the Department of Educational Studies. The position holder shall be appointed and reviewed in accordance with the then current guidelines and procedures for faculty appointment. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The annual distribution shall be reinvested in the endowment principal for up to the first five years of the fund's existence at the discretion of the highest ranking official in the College of Education and Human Ecology or his/her successor. Thereafter, the highest ranking official in the college or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Education and Human Ecology or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Jeffrey M. Prestel Professional Sales Support Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Jeffrey M. Prestel Professional Sales Support Fund effective August 21, 2025, with grants from The Columbus Foundation as recommended by Jeffrey Michael Prestel (MBA 1989).

The annual distribution from this fund provides operational support for professional sales programs and initiatives in the Max M. Fisher College of Business. Expenditures may be used for, but are not limited to, enhancing the curricular offerings, programmatic offerings, and technology enhancements for use in the classroom related to sales. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the Max M. Fisher College of Business or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor and advisor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor and advisor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Max M. Fisher College of Business or his/her designee to identify a similar purpose consistent with the original intent of the donor and advisor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Darlene and Tom McCalmont Sustainability & Cancer Research Graduate Fellowship

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Darlene and Tom McCalmont Sustainability & Cancer Research Graduate Fellowship effective August 21, 2025, with gifts from Darlene Hinerman McCalmont (BS 1976) and David Thompson McCalmont.

The annual distribution from this fund supports a graduate fellowship(s) in the College of Engineering for PhD candidates who are studying in the William G. Lowrie Department of Chemical and Biomolecular Engineering. Preference shall be given to candidates who are pursuing sustainability-related research or cancer-related research. Additional preference shall be given to students who participate in activities that promote leadership or community service efforts to broaden participation by women and girls in the field of engineering.

The donors desire that the fellowship be used for recruitment purposes and to provide as significant financial support as possible to one eligible recipient. Any remaining distribution may be used to provide as significant financial support as possible to additional eligible recipients. If full funding is not reached, the annual distribution shall be used to support existing fellows in the William G. Lowrie Department of Chemical and Biomolecular Engineering.

The University may modify any criteria used to select recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

Recipients, the number of recipients, and amount of support shall be determined in accordance with the then current guidelines and procedures established by the College of Engineering, in consultation with Student Financial Aid. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the College of Engineering or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above, accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Engineering or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Krishan and Vicky Joshi Eye Research Endowed Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Krishan and Vicky Joshi Eye Research Endowed Fund effective August 21, 2025, with gifts from Krishan K. Joshi (B.A.A.E. 1961) and Vicky M. Joshi.

The annual distribution from this fund supports faculty, residents, or medical students in the Department of Ophthalmology & Visual Sciences who are developing or conducting research programs to discover innovative treatments and cures for eye diseases. Expenditures shall be used for, but are not limited to, salary support, research supplies, and/or equipment costs. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the College of Medicine.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Medicine or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Edward J. Wagner II and Erva M. Wagner Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Edward J. Wagner II and Erva M. Wagner Scholarship Fund effective August 21, 2025, with an estate gift from Edward J. Wagner II (BA 1958, MA 1959, PhD 1963) and Erva M. Wagner.

The annual distribution from this fund provides financial aid scholarships to fulltime, undergraduate students who are majoring in studies in the College of Arts and Sciences who qualify for a financial aid scholarship under the University's standard financial aid guidelines. In addition, in order to receive this scholarship, the student(s) must have maintained at least a B cumulative grade point average in high school if the candidate(s) is a freshman or maintained at least a B cumulative grade point average (per University criteria) at all times while a student at the University if the student(s) is a sophomore, junior or senior. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by Student Financial Aid.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused annual distribution, then another use shall be designated by the University's Board of Trustees and the Foundation's Board of Directors, in consultation with the vice president of University Development and the director of Student Financial Aid for the University in order to carry out the desire of the donors to provide financial assistance to support academically strong undergraduate students who qualify under University standards for financial aid.

Karen Collins (O'Neal) Memorial Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Karen Collins (O'Neal) Memorial Scholarship Fund effective August 21, 2025, with gifts from David M. O'Neal Jr. in memory of his wife, Karen Collins O'Neal (MSW 1982).

The annual distribution from this fund supports students who are enrolled in the Master's of Social Work program in the College of Social Work. First preference shall be given to MSW students who demonstrate an interest in working in the medical or behavioral health field. Second preference shall be given to any students enrolled in the MSW program. Recipients, the number of recipients, and amount of support shall be determined in accordance with the then current guidelines and procedures established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Social Work or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Social Work or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Yvette McGee Brown and Tony Brown Athletic Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Yvette McGee Brown (JD 1985) and Tony Brown Athletic Scholarship Fund effective August 21, 2025, with gifts from the Honorable Yvette M. McGee Brown and Anthony L. Brown (MA 1986) and matching funds as part of the Scarlet and Gray Advantage Endowed Matching Gift Program. The Donors wish to honor Leo M. Brown (DDS 1962), the first black co-captain of The Ohio State University Football team in 1955-57.

The annual distribution from this fund supplements the grant-in-aid costs of undergraduate student-athletes with preference towards those who have overcome substantial educational or economic obstacles. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the Department of Athletics, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the Department of Athletics or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Department of Athletics or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Rosenfield Family Athletics Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Rosenfield Family Athletics Scholarship Fund effective August 21, 2025, with gifts from Daniel Lawrence Rosenfield (BS 1973, MA 1974).

The annual distribution from this fund supplements the grant-in-aid costs of undergraduate student-athletes who are majoring in finance or real estate within the Max M. Fisher College of Business. First preference shall be given to candidates who are enrolled in or have taken courses on Hebrew and Jewish Studies and/or have demonstrated experience through academic study, community service, or other work with issues affecting individuals or communities of Jewish faith. Second preference shall be given to candidates who are from the New York City metro area. If no students meet the selection criteria, the scholarship(s) will be open to all undergraduate student-athletes.

The donor desires to support two recipients annually. Scholarships may be awarded in varying numbers based on student enrollment, available funding, and other factors. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by Department of Athletics, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the Department of Athletics or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Department of Athletics or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Dr. Hedda Litowitz Haning and Dr. Ray Vernon Haning, Jr. Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Dr. Hedda Litowitz Haning and Dr. Ray Vernon Haning Jr. Fund effective August 21, 2025, with gifts from anonymous donors.

The annual distribution from this fund supports The Ohio State University. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the University.

The highest ranking official in The Ohio State University or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the University or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Anil K. Makhija Undergraduate Impact Fund

The Board of Trustees of The Ohio State University shall establish The Anil K. Makhija Undergraduate Impact Fund effective August 21, 2025, with gifts from friends, family, and colleagues to honor the leadership of Anil K. Makhija.

As Dean of the Max M. Fisher College of Business from 2014 - 2024, Anil K. Makhija prioritized continuous innovation in the college's educational offerings, helped establish the college as an educational destination for leadership, entrepreneurship and global perspective to equip students to define their own leadership journey, voice, and style; and has long championed service and social responsibility within the college's community.

The annual distribution from this fund shall be used for leadership development, social responsibility, and experiential learning opportunities for undergraduate students at the Max M. Fisher College of Business. The donors desire the fund be used to enhance student leadership competencies. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The highest ranking official in the Max M. Fisher College of Business or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with the University's Gift Acceptance Policy, Fund Transfers – Unrestricted to Endowment Policy, Investment Policy, and all other applicable University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University may modify the purpose of this fund. The University shall consult the highest ranking official in the Max M. Fisher College of Business or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees, in accordance with the policies of the University.

Morris Beja Odyssey Award: Thriving Through Global Discovery Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Morris Beja Odyssey Award: Thriving Through Global Discovery Fund effective August 21, 2025, with gifts from Andrew Beja, friends, family and colleagues of Morris Beja.

The annual distribution from this fund provides one or more travel awards to undergraduate and/or graduate students who are pursuing degrees in the Department of English. Preference shall be given to undergraduate students who are specializing in Literature, Film, Folklore and Popular Culture Studies. Expenditures may include, but are not limited to, costs associated with delivering a paper, attending a conference, or doing site-specific research.

It is the donors' desire that applicants submit a statement of 500 words or fewer that addresses why traveling is important to your area of study; how you expect to benefit from the experience; and how the award will help you financially afford to participate in the venture.

Graduate students may be recommended by the highest ranking official in the Department or his/her designee. Recipients, the number of recipients, and amount of each award shall be determined in accordance with the then current guidelines and procedures established by the College of Arts and Sciences, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Arts and Sciences or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Moussallem Foundation Civil Engineering Endowed Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Moussallem Foundation Civil Engineering Endowed Scholarship Fund effective August 21, 2025, with gifts from Maroun Moussallem (BS 1983, MS 1985).

The annual distribution from this fund provides one or more scholarships to students who are enrolled in the College of Engineering and are majoring in civil engineering. Preference shall be given to candidates who demonstrate high financial need and are in good academic standing with a minimum 3.0 grade point average on a 4.0 scale. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Engineering or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Engineering or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Dr. Frederick “Fritz” Stocker Memorial Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Dr. Frederick “Fritz” Stocker Memorial Fund effective August 21, 2025, with gifts from friends, family and colleagues of Dr. Frederick “Fritz” Stocker.

The annual distribution from this fund provides one or more scholarships to graduate students who are enrolled in the John Glenn College of Public Affairs and demonstrate financial need. The group desires that when awarding this scholarship special consideration be given for students who have encountered or overcome substantial educational or economic obstacles. It is the group’s desire to provide as significant financial support as possible to one eligible recipient. Any remaining distribution shall be used to provide as significant financial support as possible to additional eligible recipients. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the college.

Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the John Glenn College of Public Affairs, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the John Glenn College of Public Affairs or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University’s costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the John Glenn College of Public Affairs or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University’s Board of Trustees and the Foundation’s Board of Directors, in accordance with the policies of the University and Foundation.

The Jarka and Grayce Susan Burian Research Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Jarka and Grayce Susan Burian Research Fund effective August 21, 2025, with a gift from the estate of Grayce Susan Burian.

The annual distribution from this fund shall be available to scholars at the graduate student, faculty, and theatre professional levels, and will support research in the collections on Czech theatre and culture held in the Jerome Lawrence and Robert E. Lee Theatre Research Institute of The Ohio State University Libraries. If the distribution is not awarded in a given year, the distribution may be used to support a Burian Symposium presenting research or analysis on Czech theatre or Czech theatre artists, additions to the collections of works of Czech theatre, or reinvested in the fund's principal. The funds are to be administered at the discretion of the Institute curator. Expenditures shall be approved in accordance with the then current guidelines and procedures established by The Ohio State University Libraries.

The highest ranking official in The Ohio State University Libraries or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in The Ohio State University Libraries or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Sandra Jennifer Coco Endowed Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Sandra Jennifer Coco Endowed Scholarship Fund effective August 21, 2025, with gifts from Robert A. Coco and Mary W. Coco.

The annual distribution from this fund provides one or more scholarships to undergraduate students who are enrolled in the College of Nursing and have a passion for and/or demonstrate an interest in working in oncology nursing. The donors desire to support at least two students annually. Scholarships may be awarded in varying amount based on student enrollment, available funding, and other factors. If no students meet the selection criteria, the scholarship(s) will be open to all undergraduate students who are enrolled in the college.

Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the College of Nursing, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Nursing or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Nursing or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Michael Dubetz, Jr. Endowed Scholarship in Tax Law

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The Michael Dubetz, Jr. Endowed Scholarship in Tax Law effective August 21, 2025, with gifts from Michael Dubetz Jr. (JD 1989).

The annual distribution from this fund provides one or more scholarships to second- or third-year students who are enrolled in the Michael E. Moritz College of Law. First preference shall be given to candidates who demonstrate an interest in tax law. Second preference (which shall be applied only when no candidates are available that meet the first preference) shall be given to candidates who demonstrate an interest in corporate/business law. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the Michael E. Moritz College of Law or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Michael E. Moritz College of Law or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Andrew and Rosemary Fogarty Global Eye Health Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Andrew and Rosemary Fogarty Global Eye Health Fund effective August 21, 2025, with gifts from Patricia A. McElroy and Cathy Busemeyer, with inspiration from the rest of the Fogarty family, in memory of Andrew and Rosemary Fogarty and in honor of Robert Chambers, DO.

The annual distribution from this fund supports global outreach initiatives in ophthalmology to assist with medical care and education in low resource communities. Expenditures may be used for, but are not limited to, salary support, supplies, equipment, or other expenses for faculty, alumni, staff, and learners aspiring to build knowledge and local resource capacity toward preventing blindness. If in any given year, there is remaining distribution after being used for the purpose above, or if there are no eligible global outreach initiatives, the annual distribution may be used to support regional outreach initiatives in ophthalmology. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the College of Medicine, in consultation with the Department of Ophthalmology & Visual Sciences.

The highest ranking official in the College of Medicine or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Medicine or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The McClure Nursing Scholarship Fund

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish The McClure Nursing Scholarship Fund effective August 21, 2025, with gifts from Colonel Roger E. McClure (BS 1955) and Mary C. McClure (BS 1955).

The annual distribution from this fund provides one or more scholarships to undergraduate students enrolled in the College of Nursing and are in good academic standing. Preference shall be given to students who graduated from high school in from Greater Dayton and/or the Miami Valley area of Ohio. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Nursing or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Nursing or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Peter L. & Cathy A. Hahn Endowment for Faculty and Student Excellence in History

The Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, shall establish the Peter L. & Cathy A. Hahn Endowment for Faculty and Student Excellence in History effective August 21, 2025, with gifts from Peter L. Hahn and Cathy A. Hahn.

The annual distribution from this fund supports the enhancement of the World War II academic program in the Department of History. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the College of Arts and Sciences.

If the World War II academic program ceases to exist, the annual distribution shall be used to provide one or more scholarships to students who are enrolled in the College of Arts and Sciences and are studying the history of U.S. international relations. If no students meet the selection criteria, the scholarship(s) will be open to all students who are studying in the Department of History. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Arts and Sciences or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Frederick Luis Aldama Leadership Scholarship Fund

The Frederick Luis Aldama Inclusive Excellence Scholarship Fund was established August 22, 2024, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, established the with gifts from Dr. Frederick L. Aldama and matching funds as part of the Scarlet and Gray Advantage Endowed Matching Gift Program. Effective August 21, 2025, the fund name and description shall be revised.

The annual distribution from this fund provides one or more scholarships to undergraduate students who are affiliated with programs and services in the Department of English. The donor desires that when awarding this scholarship, special consideration be given for students who have encountered substantial educational or economic obstacles and/or have participated in at least one leadership development program. Essays submitted by applicants may be taken into consideration by the department for selection purposes. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the College of Arts and Sciences, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Arts and Sciences or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Mike and Linda Kaufmann Scholarship Fund

The Mike Kaufmann Diversity, Equity & Inclusion Scholarship Fund was established February 16, 2023, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Cardinal Health Foundation and matching funds as part of the Scarlet and Gray Advantage Endowed Matching Gift Program. The fund name and description were revised May 18, 2023, and February 22, 2024. Effective August 21, 2025, the fund name and description shall be further revised.

The annual distribution from this fund provides one or more scholarships to undergraduate students who have demonstrated interest in careers in the mental health field with preference given to students studying in areas related to counseling and mental health services available in the Department of Psychology. It is the donor's desire to provide as significant financial support as possible to one eligible recipient. Any remaining distribution shall be used to provide as significant financial support as possible to additional eligible recipients. If no students meet the selection criteria, the scholarship(s) will be open to all undergraduate students. Scholarships are renewable as long as recipients meet the selection criteria and are making satisfactory progress on their degree.

Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the College of Arts and Sciences, in consultation with Student Financial Aid. Recipients may reapply for this scholarship as long as they continue to meet the eligibility criteria.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Arts and Sciences or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Arts and Sciences or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Thomas E. Reardon Chemical Engineering Scholarship Fund

The Tom and Gail Reardon Chemical Engineering Scholarship Fund was established October 29, 2010, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Tom Reardon (BS 1988 Chemical Engineering) and Gail Reardon, a friend of the Department of Chemical and Biomolecular Engineering. Effective August 21, 2025, the fund name and description shall be revised.

Tom Reardon created this scholarship fund to assist students who are struggling with grades because they are supporting their education through employment. As a Chemical Engineering student, Tom Reardon worked extensively to support his education and the consequential time demands impacted his grades. It is the wish of the donor that students, who are struggling with grades and supporting their education through employment, receive financial assistance through this fund so they can reduce the time spent on their employment and improve their grades. If a student receives assistance through this fund as a junior and their grades improve, then the intent of this fund is being fulfilled, and therefore it is the wish of the donor that the student should be renewed for assistance as a senior.

The annual distribution from this fund shall provide scholarship support to undergraduate students enrolled in the College of Engineering majoring in chemical engineering who are ranked juniors or seniors, who are supporting their education through part-time employment and who have grade point averages below the mean for chemical engineering majors with preference given to candidates who graduated from high schools in the State of Ohio. The highest ranking official in the college or his/her designee and the highest ranking official in the William G. Lowrie Department of Chemical and Biomolecular Engineering or his/her designee shall be responsible for selecting the "Tom and Gail Reardon Scholars" and coordinating the scholarships with Student Financial Aid. Scholarships may be renewed if the recipient's grade point average increases.

The University may modify any selection criteria should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

Per the donor's request, recipients shall be given the option to correspond with the donor. The highest ranking official in the area of chemical engineering or his/her designee will provide each Scholar with the donor's mailing address.

In any given year that the endowment distribution is not fully used for its intended purpose, the unused portion should be held in the distribution account to be used in subsequent years and only for the purposes of the endowment, or reinvested in the endowment principal at the discretion of the highest ranking official in the College of Engineering or his/her designee.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should unforeseen circumstances arise in the future so that the need for this endowment ceases to exist, then another use as nearly aligned with the original intent of the contribution as good conscience and need dictate, shall be designated by the Foundation's Board of Directors and the University's Board of Trustees. In making this alternate designation, the Boards shall seek advice from the donor, should he be alive, and the highest ranking official in the College of Engineering or his/her designee.

The Vorman-Anderson Faculty Support Fund for Nordic Languages and Literatures

The Vorman-Anderson Professorship of Nordic Languages and Literatures was established April 3, 1998, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts to The Ohio State University from the estate of Helen Vorman-Anderson, (B.S.Ed. '23; M.A. English '31 from The Ohio State University) formerly of Salinas, California, in memory of her father, Frank Alexis Vorman and her husband Andrew Frederik Anderson. Effective August 21, 2025, the fund name and description shall be revised.

All gifts are to be invested by the Foundation, under the rules and regulations adopted by the Foundation's Board of Directors, with the right to invest and reinvest as occasion dictates.

The annual distribution from this fund shall be used to support faculty focused on the study of Nordic literature with emphasis on Swedish literature. If no candidates meet the selection criteria, the support will be open to all faculty in the College of Arts and Sciences focused on the study of literature. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

The endowment may be revised when the gifted endowment principal reaches the minimum funding level required at that date for a chair position. The position holder shall be appointed and reviewed in accordance with then current guidelines and procedures for faculty appointment.

It is the desire of the donor that this fund should benefit the University in perpetuity. Should the units of Ohio State referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest.

The Jessica C. Beck Memorial Scholarship Fund

The Jessica C. Beck Memorial Scholarship Fund was established July 7, 2006, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from friends and family of Jessica C. Beck from Richmond, Virginia. Effective August 21, 2025, the fund description shall be revised.

Jessica, age 21, was a senior at The Ohio State University, where she was a member of the synchronized swimming team. Jessica was acknowledged as an exceptional scholar-athlete as exemplified in her attainment of Academic All Big Ten, National Scholarship, and the Dean's List. She was a sister to each of her teammates on Ohio State's renowned synchronized swimming team, and an integral part of two collegiate national championship teams. She was an inspiration to all who had the honor and privilege of knowing her. This scholarship has been established in her loving memory and in admiration for the many ways she touched the lives of her Ohio State family.

The annual distribution from this fund shall be used to supplement the grant-in-aid scholarship costs of an upper-class intercollegiate student-athlete who is pursuing an undergraduate degree at The Ohio State University and participating in the sport of artistic swimming. Preference will be given to an out-of-state student-athlete. The recipient shall be selected by the director of Athletics, in consultation with Student Financial Aid.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that this fund should benefit the University in perpetuity. If, in the future, the need for this fund should cease to exist or so diminish as to provide unused distributions, then another use shall be designated by the Board of Trustees and Foundation Board as recommended by the director of Athletics. Any such alternate distributions shall be made in a manner as nearly aligned with the original intent of the donor as good conscience and need dictate.

Anthony Boone '74 & Steve W. Jemison '75 Scholarship Fund

The Anthony Boone '74 & Steve W. Jemison '75 Scholarship Fund was established February 20, 2025, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Anthony Boone and Steve Jemison. Effective August 21, 2025, the fund description shall be revised.

The annual distribution from this fund provides one or more scholarships to students who are enrolled in the Michael E. Moritz College of Law and demonstrate financial need. Preference shall be given to students who

- (1) are United States citizens or eligible non-citizens,
- (2) demonstrate financial need as determined by FAFSA,
- (3) were Pell-eligible during their undergraduate education, and
- (4) were first-generation college students or participants in the Law and Leadership Institute program as high school students.

Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the Michael E. Moritz College of Law or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Michael E. Moritz College of Law or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Thomas (Tommy) M. Davis III Endowed Scholarship Fund

The Thomas (Tommy) M. Davis III Endowed Scholarship Fund was established February 22, 2019, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Thomas M. Davis Jr., MD (BA 1978, MD 1983) and Marilyn Zangardi Davis (BS 1982). Effective August 21, 2025, the fund description shall be revised.

The annual distribution from this fund provides scholarships to students who graduated from New Albany High School in New Albany, Ohio or Upper Arlington High School in Upper Arlington, Ohio. If no students meet the selection criteria, the scholarship(s) will be open to graduates from other central Ohio high schools. Recipients shall be selected by Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest-ranking official in Student Financial Aid or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation, may modify the purpose of this fund. The University and the Foundation shall consult the highest-ranking official in Student Financial Aid or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Captain Nick Rozanski Memorial Scholarship Fund

The Captain Nick Rozanski (BA 1999) Memorial Scholarship Fund was established November 4, 2016, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, established with gifts from the Nick Rozanski Memorial Foundation. Effective August 21, 2025, the fund description shall be revised.

The annual distribution from this fund provides scholarship support for students participating in the Military Community Advocate Program (or student veteran if the program no longer exists) who are enrolled in the College of Arts and Sciences. If no students meet the selection criteria, the scholarship(s) will be open to all military-connected students who are enrolled in the college. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the Office of Military and Veteran Services, in consultation with the college and Student Financial Aid. The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the Office of Military and Veterans Services or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the Office of Military and Veteran Services or his/her designee to identify a similar purpose consistent with the original intent of the donor. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Dr. Carlton Triolo-Sapp Fund

The Dr. Carlton Triolo-Sapp Fund was established August 22, 2024, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Dr. Carlton M. Triolo-Sapp (PhD 1999) and Michael Triolo-Sapp. Effective August 21, 2025, the fund description shall be revised.

The annual distribution from this fund shall be used at the discretion of the highest ranking official in the College of Social Work. Expenditures shall be approved in accordance with the then current guidelines and procedures established by the college.

If at any time the gifted principal balance reaches the then current minimum for a restricted endowed fund, the annual distribution shall provide one or more scholarship(s) to students who are enrolled in the College of Social Work. First preference will be given to students who are the first in their immediate family to attend college. Second preference will be given to students who are interested in working in the advocacy field in any of the following areas: civil rights/social justice, healthcare or Medicaid/Medicare reform. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Social Work or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Social Work or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

Dr. Robert E. Williams Endowed Dentistry Scholarship Fund

The Dr. Robert E. Williams Endowed Dentistry Scholarship Fund was established January 31, 2014, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from Dr. Robert E. Williams and Mrs. Carolyn A. Williams. Effective August 21, 2025, the fund description shall be revised.

The annual distribution from this fund shall be used to provide one-year scholarship(s) to students enrolled in the College of Dentistry with preference given to students who graduated from high school in the state of Ohio. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Dentistry or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donors that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donors named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Dentistry or his/her designee to identify a similar purpose consistent with the original intent of the donors. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Ohio State University Alumni Association, Inc. Scholarship Endowment Fund

The Ohio State University Alumni Association, Inc. Scholarship Endowment Fund was established July 8, 2005, by the Board of Trustees of The Ohio State University with gifts from the Alumni Association's affinity fund. The description was revised May 14, 2010. Effective August 21, 2025, the fund description shall be further revised.

The annual distribution from this fund shall provide undergraduate scholarships to currently enrolled students at any of The Ohio State University campuses not receiving freshman recruiting scholarships (i.e. Maximus and Morrill Programs) with preference given based on academic performance and financial need. The scholarship may be renewed based upon continued superior academic performance and financial need.

The University may modify any selection criteria should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy. Scholarships will be awarded by Student Financial Aid.

In any given year that the endowment distribution is not fully used for its intended purpose, the unused portion should be held in the distribution account to be used in subsequent years and only for the purposes of the endowment, or reinvested in the endowment principal at the discretion of the director of Student Financial Aid.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

The endowment established herein should benefit the University in perpetuity. Should unforeseen circumstances arise in the future so that the need for this endowment ceases to exist, then another use as nearly aligned with the original intent of the contribution as good conscience and need dictate shall be designated by the University's Board of Trustees. In making this alternate designation, the Board shall seek advice from the director of Student Financial Aid.

The Honorable Robert M. Duncan Scholarship Fund

The Honorable Robert M. Duncan Scholarship Fund was established September 6, 2002, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from the Honorable Robert M. Duncan (B.S.Ed., 1948; J.D., 1952; Ph.D., 1979 - honorary) from Columbus, Ohio. Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested by the Foundation, under the rules and regulations adopted by the Foundation's Board of Directors, with the right to invest and reinvest as occasion dictates.

The annual income shall be used to fund a scholarship for an outstanding first-year student entering The Michael E. Moritz College of Law who, by virtue of their background and accomplishments, will contribute to the intellectual and social diversity of the entering class. Special consideration will be given to students who, because of their social and educational backgrounds and life experiences, have the potential to bring new perspectives to the study of law and the legal profession. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

It is the desire of the donors that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused income, then another use shall be designated by the Foundation Board in consultation with the dean of the Moritz College of Law in order to carry out the desire of the donor.

The Marie Catherine Elliott '47 Scholarship Fund

The Marie Catherine Elliott '47 Scholarship Fund was established September 2, 2016, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from Benjamin Henry, son of Marie C. Elliott (Shively). Effective August 21, 2025, the fund description shall be revised.

Marie Shively was born on a small farm in Fairfield County, near Sugar Grove, Ohio. She attended Ohio University (BS 1943) on an academic scholarship and later supported herself through The Ohio State University (MA 1947). College education provided Marie the opportunities to have a fulfilling career and to support and provide for her family. Recognizing its value, Marie encouraged and provided for a college education for her family. This scholarship is to acknowledge and honor Marie's recognition of the empowerment and benefits that a college education offers and to provide for others to achieve success and fulfillment through higher education.

The annual distribution from this fund shall be used to provide one or more scholarships to undergraduate students enrolled in the College of Engineering who did not enter college directly out of high school, maintain a minimum grade point average of 3.0 on a 4.0 scale and demonstrate financial need. Scholarships can be renewed as long as the recipients meet the selection criteria. If no students meet the selection criteria, non-renewable scholarship(s) may be awarded to undergraduate students enrolled in the college. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

The highest ranking official in the College of Engineering or his/her designee has the discretion to hold all or a portion of the unused distribution in the distribution fund to be used in subsequent years, and/or reinvest all or a portion of the unused distribution in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. Should the University units referenced in this endowment restructure in the future, the terms of the endowment shall apply to their successors in interest. The University and the Foundation may modify the purpose of this fund, in consultation with the donor named above. In accordance with Ohio Revised Code, if the purpose of the fund becomes unlawful, impracticable, impossible to achieve, or wasteful, the University and Foundation may modify the purpose of this fund. The University and the Foundation shall consult the highest ranking official in the College of Engineering or his/her designee. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Barbara Eng and Anna Eng Artistic Swimming Athletic Scholarship Fund

The Barbara Eng and Anna Eng Synchronized Swimming Athletic Scholarship Fund was established September 2, 2016, by the Board of Trustees of The Ohio State University, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with a gift from Barbara Eng (BS 1969, MS 1971) Phoenixville, Pennsylvania. Effective August 21, 2025, the fund name and description shall be revised.

The annual distribution from this fund shall supplement the grant-in-aid costs of an undergraduate student-athlete who is a member of the artistic swimming team. Scholarship recipients shall be selected by the director of the Department of Athletics, in consultation with Student Financial Aid.

The University may modify any criteria used to select scholarship recipients should the criteria be found, in whole or in part, to be contrary to federal or state law or University policy.

In any given year that the endowment distribution is not fully used for its intended purpose, the unused portion should be reinvested in the endowment principal.

The investment and management of and expenditures from all endowment funds shall be in accordance with University policies and procedures, as approved by the Board of Trustees. As authorized by the Board of Trustees, a fee may be assessed against the endowment portfolio for the University's costs of development and fund management.

It is the desire of the donor that the endowment established herein should benefit the University in perpetuity. The University and the Foundation reserve the right to modify the purposes of this fund, however, (1) in consultation with the donor named above, or (2) if such purposes become unlawful, impracticable, impossible to achieve, or wasteful, provided that such fund shall only be used for the University's charitable purposes. In seeking such modification, the University and the Foundation shall consult the director of the Department of Athletics. Modifications to endowed funds shall be approved by the University's Board of Trustees and the Foundation's Board of Directors, in accordance with the policies of the University and Foundation.

The Fred Kaufmann Memorial Scholarship Fund

The Fred Kaufmann Memorial Scholarship Fund was established April 7, 2000, in accordance with the guidelines approved by the Board of Directors of The Ohio State University Foundation, with gifts from Stephen E. Kaufmann (B.S.I.S.E. '81), in memory of his father. Effective August 21, 2025, the fund description shall be revised.

All gifts are to be invested by the Foundation, under the rules and regulations adopted by the Foundation Board of Directors, with the right to invest and reinvest as occasion dictates.

The annual distribution will provide need-based scholarships for outstanding undergraduates who are United States citizens or permanent residents and majors in either the Department of Civil, Environmental and Geodetic Science (formerly the Department of Civil and Environmental Engineering and Geodetic Science), Aerospace Engineering or Aviation. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the College of Engineering. Scholarship recipients, the number of recipients, and amount of each scholarship shall be determined in accordance with the then current guidelines and procedures for scholarship administration established by the college, in consultation with Student Financial Aid.

It is the desire of the donor that this fund should benefit the University in perpetuity. If the need for this fund should cease to exist or so diminish as to provide unused distribution, then another use shall be designated by the Foundation Board as recommended by the highest ranking official in the College of Engineering or his/her designee in order to carry out the desire of the donor.

APPENDIX VIII



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

August 13, 2025 – Talent, Compensation and Governance Committee Meeting

Members Present:

Jeff M.S. Kaplan
Elizabeth P. Kessler
Gary R. Heminger

Reginald A. Wilkinson
Tomislav B. Mitevski
Juan Jose Perez

Kara J. Trott
John W. Zeiger (ex officio)

Members Present via Zoom: N/A

Members Absent: N/A

PUBLIC SESSION

The Talent, Compensation and Governance Committee of The Ohio State University Board of Trustees convened on Wednesday, August 13, 2025, virtually and in person in the Mount Leadership Room at Longaberger Alumni House on the Columbus campus. Committee Chair Jeff Kaplan called the meeting to order at 1:00 p.m.

Items for Action:

1. Approval of Minutes: No changes were requested to the July 2, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.
2. Resolution No. 2026-36: Amendment to the Bylaws of the Board of Trustees:

Synopsis: Amendment to the Bylaws of the Board of Trustees related to Ohio Senate Bill 1, the Advance Ohio Higher Education Act, and organizational changes to the Academic Affairs and Student Life Committee.

WHEREAS Ohio Senate Bill 1 (SB1), the Advance Higher Education Act, took effect on June 27, 2025; and

WHEREAS SB1 prohibits student trustees from serving as voting members on the full Board of Trustees and from attending Board executive sessions, but student trustees may continue to serve on Board committees, as their input and perspectives deepen the Board's understanding of the student experience; and

WHEREAS the university has reorganized research operations such that the Enterprise for Research, Innovation and Knowledge now reports to the Executive Vice President and Provost, such that all of these operations may be addressed by the Board's Academic Affairs and Student Life Committee, rather than in a separate Research, Innovation and Strategic Partnerships Committee; and

WHEREAS these developments require amending Board Bylaw 3335-1-02 to reflect the changes to student trustee authority and Board committee standing and authority:



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NOW THEREFORE

BE IT RESOLVED, That the Board of Trustees hereby adopts the attached amendment to Board Bylaw 3335-1-02.

(See Appendix XXIII for background information, page 735)

3. Resolution No. 2026-37: Ratification of Committee Appointments FY2026:

BE IT RESOLVED, That the Board of Trustees hereby approves that the ratification of committee appointments for Fiscal Year 2026 are as follows:

Academic Affairs & Student Life:

Reginald A. Wilkinson, Chair
Elizabeth A. Harsh, Vice Chair
Elizabeth P. Kessler

Jeff M.S. Kaplan
Michael F. Kiggin
Bradley R. Kastan

Kara J. Trott

Patrick C. Arp

Phillip Popovich (faculty member)

Eric Bielefeld (faculty member)

Stefanie Sanford

John W. Zeiger (ex officio)

Athletics:

Gary R. Heminger, Chair
Michael F. Kiggin, Vice Chair
Elizabeth P. Kessler

Jeff M.S. Kaplan
Pierre Bigby
Bradley R. Kastan

George A. Skestos

Patrick C. Arp

John W. Zeiger (ex officio)

Finance & Investment:

Tomislav B. Mitevski, Chair
Pierre Bigby, Vice Chair
Gary R. Heminger

Michael F. Kiggin
George A. Skestos

Kendall C. Buchan

Amy Chronis

Kent M. Stahl

John W. Zeiger (ex officio)

Legal, Audit, Risk & Compliance:

Elizabeth P. Kessler, Chair
Bradley R. Kastan, Vice Chair
Michael F. Kiggin

Juan Jose Perez

Patrick C. Arp

Amy Chronis

John W. Zeiger (ex officio)

Master Planning & Facilities:

Juan Jose Perez, Chair
George A. Skestos, Vice Chair
Elizabeth A. Harsh

Reginald A. Wilkinson
Pierre Bigby
Bradley R. Kastan

Kendall C. Buchan

Robert H. Schottenstein

Keith Myers

John W. Zeiger (ex officio)

Talent, Compensation & Governance:

Jeff M.S. Kaplan, Chair
Elizabeth P. Kessler, Vice Chair
Gary R. Heminger

Reginald A. Wilkinson
Tomislav B. Mitevski

Juan Jose Perez

John W. Zeiger (ex officio)

Wexner Medical Center:

Leslie H. Wexner, Chair

Gary R. Heminger

Tomislav B. Mitevski

Juan Jose Perez

George A. Skestos

Kara J. Trott

Kendall C. Buchan

Robert H. Schottenstein

Stephen D. Steinour

Cindy Hilsheimer

Amy Chronis

Hirofumi Fujita

John W. Zeiger (ex officio, voting)

Walter E. Carter Jr (ex officio, voting)

Ravi V. Bellamkonda (ex officio, voting)

Michael Papadakis (ex officio, voting)

John J. Warner (ex officio, voting)



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Action: Upon the motion of Mr. Kaplan, seconded by Dr. Wilkinson, the foregoing resolutions were adopted by majority roll-call vote, with the following members present and voting: Mr. Kaplan, Ms. Kessler, Mr. Heminger, Dr. Wilkinson, Mr. Mitevski, Mr. Perez, Ms. Trott and Mr. Zeiger.

EXECUTIVE SESSION

It was moved by Mr. Kaplan and seconded by Mr. Heminger that the committee recess into executive session to discuss business-sensitive trade secrets and personnel matters regarding the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Kaplan, Ms. Kessler, Mr. Heminger, Dr. Wilkinson, Mr. Mitevski, Mr. Perez, Ms. Trott and Mr. Zeiger.

The committee entered into executive session at 1:05 p.m. and adjourned at 3:25 p.m.

APPENDIX IX



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

August 19, 2025 – Wexner Medical Center Board Meeting

Members Present:

Gary R. Heminger
Tomislav B. Mitevski
Juan Jose Perez
George A. Skestos
Kara J. Trott

Robert H. Schottenstein
Cindy Hilsheimer
Amy Chronis
Hiroyuki Fujita

John W. Zeiger (ex officio)
Walter E. Carter Jr. (ex officio)
Ravi V. Bellamkonda (ex officio)
John J. Warner (ex officio)

Members Present via Zoom:

Stephen D. Steinour (arr. 1:03 p.m.) Michael Papadakis (ex officio)

Members Absent:

Leslie H. Wexner

PUBLIC SESSION

The Wexner Medical Center Board convened for its 55th meeting on Tuesday, August 19, 2025, in person at Longaberger Alumni House on Ohio State's Columbus campus. Board Secretary Jessica A. Eveland called the meeting to order at 12:59 p.m.

Item for Action:

1. **Approval of Minutes:** No changes were requested to the May 20, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.

Items for Discussion:

2. **Chief Executive Officer's Report:** Wexner Medical Center Chief Executive Officer John Warner reviewed the medical center's performance in the recently released *U.S. News & World Report* "Best Hospital" rankings. OSUWMC is nationally ranked in nine of 15 adult specialties and recognized as "High Performing" in 17 of 22 procedures and conditions. It remains the No. 1 hospital in central Ohio and No. 2 in the state, behind only the Cleveland Clinic.

Dr. Warner then updated the Board on the ongoing activation of the new hospital tower, the construction of Outpatient Care Powell and partnerships throughout the region to enhance access to the health system's services. He closed by highlighting engagement by medical center team members in the 2025 Central Ohio Heart Walk and Pelotonia.

(See Attachment XIV for background information, page 395)

3. **James Cancer Hospital Report:** This is the first Wexner Medical Center Board meeting since Chief Executive Officer Kimryn Rathmell joined Ohio State at the end of May. She introduced herself to the Board, reviewed her background and thanked her leadership team for their work and support.



Dr. Rathmell recapped Pelotonia 2025, which hosted the largest number of riders ever and, for the first time, sold out a ride. She then highlighted the recent National Cancer Institute (NCI) site visit as part of the renewal process for the NCI core grant and OSUCCC-James' continued designation as a comprehensive cancer center, and the dramatic growth in radiation oncology treatment at The James. Two unique efforts also received attention: a first-of-its-kind nationwide telemedicine-enabled trial to treat patients with FGFR-positive pancreatic cancer, which will help overcome participation barriers, and a mobile lung-cancer screening unit.

(See Attachment XV for background information, page 409)

4. Wexner Medical Center Financial Report: Chief Financial Officer Richard Silveria reviewed the health system's preliminary year-end financial performance. The health system's total operating revenue was 7% ahead of budget and up 13% since last year. Robust outpatient volumes were a key driver of this growth. The medical center, by itself, also performed well, concluding the year with excess revenue 1% ahead of budget and 133.8 days cash on hand.

(See Attachment XVI for background information, page 419)

Items for Action:

5. Resolution No. 2026-01. Recommend Approval to Enter Into Professional Services and Enter Into Construction Contracts:

APPROVAL TO ENTER INTO PROFESSIONAL SERVICES CONTRACTS
BRAIN AND SPINE HOSPITAL – LOWER-LEVEL RENOVATION
DOAN HALL – PET/CT REPLACEMENT
OUTPATIENT CARE EAST – CLINIC RENOVATIONS & RELOCATIONS

APPROVAL TO ENTER INTO PROFESSIONAL SERVICES AND CONSTRUCTION CONTRACTS
EAST HOSPITAL – CHILLER & COOLING TOWER REPLACEMENT
POLARIS MEP UPDATES
600 ACKERMAN – SPECIALTY PHARMACY EXPANSION

Synopsis: Authorization to enter into/increase professional services and construction contracts, as detailed in the attached materials, is proposed.

WHEREAS in accordance with the attached materials, the University desires to enter into professional services contracts for the following projects; and

	Prof. Serv. Approval Requested	Total Requested	
Brain and Spine Hospital – Lower- Level Renovation	\$0.3M	\$0.3M	Auxiliary funds
Doan Hall – PET/CT Replacement	\$0.4M	\$0.4M	Auxiliary funds
Outpatient Care East – Clinic Renovations & Relocations	\$1.1M	\$1.1M	Auxiliary funds

WHEREAS in accordance with the attached materials, the University desires to enter into professional services contracts and enter into construction contracts for the following projects; and



	Prof. Serv. Approval Requested	Construction Approval Requested	Total Requested	
East Hospital – Chiller & Cooling Tower Replacement	\$1.2M	\$5.8M	\$7.0M	Auxiliary funds
Polaris MEP Updates	\$0.8M	\$6.6M	\$7.4M	Auxiliary funds
600 Ackerman – Specialty Pharmacy Expansion	\$1.2M	\$14.0M	\$15.2M	Auxiliary funds

NOW THEREFORE BE IT RESOLVED, That the Wexner Medical Center Board hereby approves and proposes that the professional services and construction contracts for the projects listed above be recommended to the University Board of Trustees for approval.

BE IT FURTHER RESOLVED, That the President and/or Senior Vice President for Business and Finance be authorized to enter into professional services and construction contracts for the projects listed above in accordance with established University and State of Ohio procedures, with all actions to be reported to the Board at the appropriate time.

(See Attachment XVII for background information, page 425)

6. Resolution No. 2026-02, Ratification of Committee Appointments FY2026:

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves that the ratification of appointments to the Quality and Professional Affairs Committee for FY2026 are as follows:

Quality and Professional Affairs Committee

Juan Jose Perez, Chair
George A. Skestos
Ravi Bellamkonda
Michael Papadakis
John J. Warner
Jay M. Anderson
Eric Bourekas
Carol Bradford
Stacy Brethauer
David E. Cohn
Scott A. Holliday
Kami J. Maddocks
Elizabeth Seely
Deana Sievert
Corrin Steinhauer
Andrew M. Thomas

7. Resolution No. 2026-03, The Ohio State University Wexner Medical Center Clinical Quality Management, Patient Safety and Patient Experience Plan:

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital, is proposed.



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WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 outlines assessment and improvement of processes in order to deliver safe, effective, optimal patient care and services in an environment of minimal risk for inpatients and outpatients of the University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital; and

WHEREAS the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 was approved by the Quality Leadership Council on May 28, 2025; and

WHEREAS the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 was approved by the University Hospitals Medical Staff Administrative Committee on July 9, 2025; and

WHEREAS on July 22, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the Clinical Quality Management, Patient Safety and Patient Experience Plan for FY26 for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital as outlined in the attached document.

(See Attachment XVIII for background information, page 431)

8. Resolution No. 2026-04, The James Cancer Hospital Quality, Safety and Experience Council Plan:

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the annual review of The James Quality, Safety and Experience Council Plan for FY26 for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS The James Quality, Safety, and Experience Council Plan for FY26 outlines assessment and improvement of processes in order to deliver safe, effective, optimal patient care and services in an environment of minimal risk for inpatients and outpatients of The James; and

WHEREAS the annual review of The James Quality, Safety and Experience Council Plan for FY26 was approved by The James Quality, Patient Safety, and Reliability Committee on April 23, 2025; and

WHEREAS the annual review of The James Quality, Safety and Experience Council Plan for FY26 was approved by The James Medical Staff Administration Committee on May 16, 2025; and



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WHEREAS on July 22, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of The James Quality, Safety and Experience Council Plan for FY26:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves The James Quality, Safety and Experience Council Plan for FY26 as outlined in the attached document.

(See Attachment XIX for background information, page 457)

9. Resolution No. 2026-05, Plan for Patient Care Services - OSU Wexner Medical Center:

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the plan for patient care services for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and The Ohio State University Wexner Medical Center East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the plan for inpatient and outpatient care services describes the integration of clinical departments and personnel who provide care and services to patients at University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital; and

WHEREAS the annual review of the plan for patient care services was approved by the University Hospital Medical Staff Administrative Committee on May 14, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the plan for patient care services:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the plan for patient care services for the Ohio State University Hospitals, including University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital and Ohio State East Hospital as outlined in the attached Plan for Patient Care Services.

(See Attachment XX for background information, page 476)

10. Resolution No. 2026-06, Plan for Patient Care Services - James Cancer Hospital:

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the annual review of the plan for patient care services for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and



THE OHIO STATE UNIVERSITY

WHEREAS The James plan for patient care services describes the integration of clinical departments and personnel who provide care and services to patients at The James; and

WHEREAS the annual review of the plan for patient care services was approved by The James Medical Staff Administrative Committee on April 18, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the plan for patient care services:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the plan for patient care services for The James as outlined in the attached Plan for Patient Care Services.

(See Attachment XXI for background information, page 488)

11. Resolution No. 2026-07, Scope of Care - New Albany Ambulatory Surgery Center:

Synopsis: Approval of the annual review of the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the scope of care describes services related to elective outpatient procedures at The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany; and

WHEREAS ON June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the scope of care for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany.

(See Attachment XXII for background information, page 504)

12. Resolution No. 2026-08, Scope of Care – Dublin Ambulatory Surgery Center:

Synopsis: Approval of the annual review of the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the scope of care describes services related to elective outpatient procedures at The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin; and

WHEREAS ON June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the scope of patient care services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin:

NOW THEREFORE



THE OHIO STATE UNIVERSITY

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the scope of care for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin.

(See Attachment XXIII for background information, page 513)

13. Resolution No. 2026-09, Patient Complaint and Grievance Management – Wexner Medical Center:

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the review of the Patient Complaint and Grievance Management policy for FY26 for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS in order to promote patient satisfaction, the Wexner Medical Center is committed to resolving any patient complaints and grievances that may arise in a timely and effective manner, and as set forth in the attached Patient Complaint and Grievance Management policy; and

WHEREAS the review of the Patient Complaint and Grievance Management policy was approved by the Ohio State University Hospitals Medical Staff Administrative Committee on June 11, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the Patient Complaint and Grievance Management policy, including the delegation of the responsibility for reviewing and resolving grievances to the Ohio State University Hospitals Grievance Committee:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the Patient Complaint and Grievance Management policy for the OSU Wexner Medical Center, including delegation of the responsibility for reviewing and resolving grievances to the Ohio State University Hospitals Grievance Committee.

(See Attachment XXIV for background information, page 522)

14. Resolution No. 2026-10, Patient Complaint and Grievance Management – James Cancer Hospital:

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
THE ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the review of Patient Complaint and Grievance Management policy for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and



THE OHIO STATE UNIVERSITY

WHEREAS in order to promote patient satisfaction, The James is committed to resolving any patient complaints and grievances that may arise in a timely and effective manner; and as set forth in the attached Patient Complaint and Grievance Management policy; and

WHEREAS the review of the Patient Complaint and Grievance Management policy was approved by The James Medical Staff Administrative Committee on June 20, 2025:

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the Patient Complaint and Grievance Management policy, including delegation of the responsibility for reviewing and resolving grievances to The James Grievance Committee:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the Patient Complaint and Grievance Management policy, including delegation of the responsibility for reviewing and resolving grievances to The James Grievance Committee.

(See Attachment XXV for background information, page 528)

15. Resolution No. 2026-11, Approval of the Direct Patient Care Services Contracts and Patient Impact Service Contracts Evaluation – Wexner Medical Center:

OHIO STATE UNIVERSITY HOSPITALS d/b/a OSU WEXNER MEDICAL CENTER

Synopsis: Approval of the annual review of the direct patient care service contracts and patient impact service contracts for the hospitals at the Ohio State University Hospitals d/b/a OSU Wexner Medical Center, including: Ohio State University Hospital, Ohio State Richard M. Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the Ohio State University Hospitals direct patient care services contracts and patient impact service contracts are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for inpatient and outpatient care at University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital; and

WHEREAS the annual review of these contracts was approved by the Ohio State University Hospital Medical Staff Administrative Committee on June 11, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the direct patient care service contracts and patient impact service contracts for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the annual review of the direct patient care service contracts and patient impact service contracts for University Hospital, Ohio State Ross Heart Hospital, Ohio State Harding Hospital, and Ohio State East Hospital as outlined in the attached University Hospitals Contracted Services Annual Evaluation Report.

(See Attachment XXVI for background information, page 534)



THE OHIO STATE UNIVERSITY

16. Resolution No. 2026-12, Approval of the Direct Patient Care Services Contracts and Patient Impact Service Contracts Evaluation – James Cancer Hospital:

THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER
ARTHUR G. JAMES CANCER HOSPITAL AND
RICHARD J. SOLOVE RESEARCH INSTITUTE

Synopsis: Approval of the annual review of the direct patient care services contracts and patient impact service contracts for the Ohio State Comprehensive Cancer Center — James Cancer Hospital and Solove Research Institute, is proposed.

WHEREAS the mission of The James is to eradicate cancer from individuals' lives by generating knowledge and integrating groundbreaking research with excellence in education and patient-centered care; and

WHEREAS The James direct patient care services contracts and patient impact service contracts are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for inpatient and outpatient care at The James; and

WHEREAS the annual review of these contracts was approved by The James Medical Staff Administrative Committee on June 20, 2025; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the annual review of the direct patient care service contracts and patient impact service contracts for The James:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the annual review of the direct patient care service contracts and patient impact service contracts for The James as outlined in the attached The James Contracted Services Annual Evaluation Report.

(See Attachment XXVII for background information, page 544)

17. Resolution No. 2026-13, Contracted Services The Ohio State University Ambulatory Surgery Center Outpatient Care New Albany:

Synopsis: Approval of the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the contracted services are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for the mission of The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany:

NOW THEREFORE



THE OHIO STATE UNIVERSITY

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care New Albany.

(See Attachment XXVIII for background information, page 554)

18. Resolution No. 2026-14, Contracted Services The Ohio State University Ambulatory Surgery Center Outpatient Care Dublin:

Synopsis: Approval of the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin, is proposed.

WHEREAS the mission of the Ohio State University Hospitals is to improve people's lives through the provision of high-quality patient care; and

WHEREAS the contracted services are evaluated annually to review the scope, nature, and quality of services provided to clinical departments and personnel who provide care and services for the mission of The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin; and

WHEREAS on June 24, 2025, the Quality and Professional Affairs Committee recommended that the Wexner Medical Center Board approve the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin:

NOW THEREFORE

BE IT RESOLVED, That the Wexner Medical Center Board hereby approves the annual review of the contracted services for The Ohio State University Ambulatory Surgery Center — Outpatient Care Dublin.

(See Attachment XXIX for background information, page 557)

Action: Upon the motion of Mr. Perez, seconded by Dr. Warner, the Wexner Medical Center Board recommended these items for approval by roll-call vote with the following members present and voting: Mr. Heminger, Mr. Mitevski, Mr. Perez, Mr. Skestos, Ms. Trott, Mr. Schottenstein, Mr. Steinour, Ms. Hilsheimer, Ms. Chronis, Dr. Fujita, Mr. Zeiger, President Carter, Dr. Bellamkonda, Mr. Papadakis and Dr. Warner.

EXECUTIVE SESSION

It was moved by Mr. Schottenstein and seconded by Dr. Warner that the Wexner Medical Center Board recess into executive session to consider business-sensitive trade secrets and quality matters required to be kept confidential.

A roll-call vote was taken, and the Board voted to go into executive session with the following members present and voting: Mr. Heminger, Mr. Mitevski, Mr. Perez, Mr. Skestos, Ms. Trott, Mr. Schottenstein, Mr. Steinour, Ms. Hilsheimer, Ms. Chronis, Dr. Fujita, Mr. Zeiger, President Carter, Dr. Bellamkonda, Mr. Papadakis and Dr. Warner.

The Wexner Medical Center Board entered executive session at 1:40 p.m. and adjourned at 4:21 p.m.

The Ohio State University Wexner Medical Center CEO Report



June 4 - August 20, 2025, Board of Trustees Meetings
ATTACHMENT XIV

Aug. 19, 2025

John J. Warner, MD
CEO, The Ohio State University Wexner Medical Center
Executive Vice President at Ohio State



U.S. News & World Report “Best Hospitals”

BEST
HOSPITALS
& WORLD REPORT
U.S. News

RANKED IN
9 SPECIALTIES
2025-2026



**Nationally
Ranked**
9 of 15
Adult Specialties

**Regionally
Ranked**
No. 2 in Ohio
No. 1 in Columbus

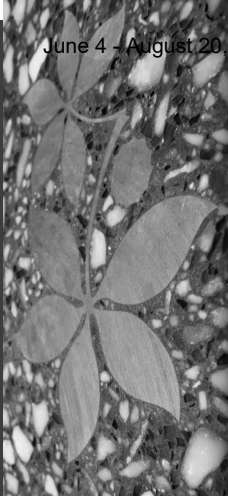
**High
Performing**
4 Adult Specialties
17 of 22 Procedures & Conditions

Top 35 Nationally Ranked Adult Specialties:

- Ear, Nose and Throat (No. 15)
- Rehabilitation (No. 22)
- Urology (No. 28)
- Pulmonology and Lung Surgery (No. 35)
- Cancer (No. 35)

Programs of Distinction

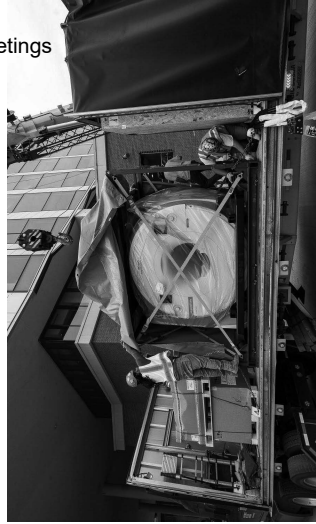




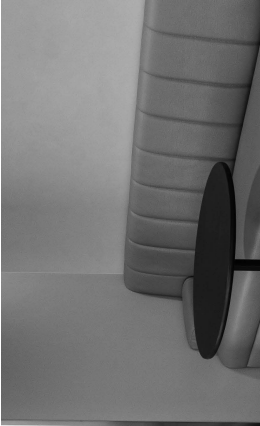
Floor 1: State-of-the-Art MRIs



399

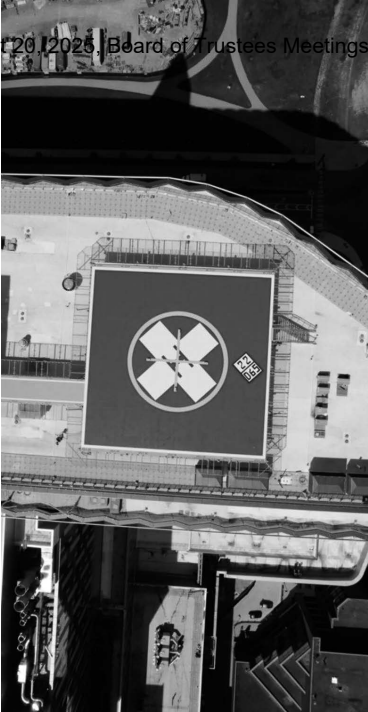


Floor 4: Surgical Services



The Helipad

June 4 - August 20, 2025 | Board of Trustees Meetings



Floors 22-24: Maternity Care



402



Floor 2: Amenities for Patients and Visitors



Buckeye Team Member Training

June 4 - August 20, 2025, Board of Trustees Meetings

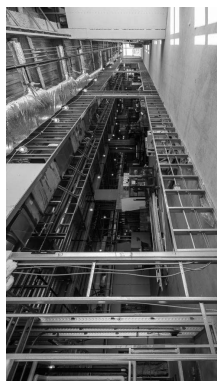


Outpatient Care Powell

- 200,000 square feet
- Two-story Ambulatory Health Center complete with:
 - Urgent Care
 - Imaging
 - Endoscopy
 - Outpatient Rehab/PT
 - Cancer services, including infusion
- Five-story Medical Office Building
- 55% complete and scheduled to open Summer 2026



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER



Caring for the Community



KIPP
**COMMUNITY HEALTH &
WELLNESS CENTER**



**HILLIARD RECREATION
& WELLNESS CENTER**



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

2025 Central Ohio Heart Walk

June 4 - August 20, 2025 Board of Trustees Meetings



O THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER



2025 Pelotonia Ride Weekend

OSUCCC – James Wexner Medical Center Board Presentation

August 19, 2025

W. Kimryn Rathmell, MD, PhD

Chief Executive Officer

James Cancer Hospital and Solove Research Institute



The James





Introduction



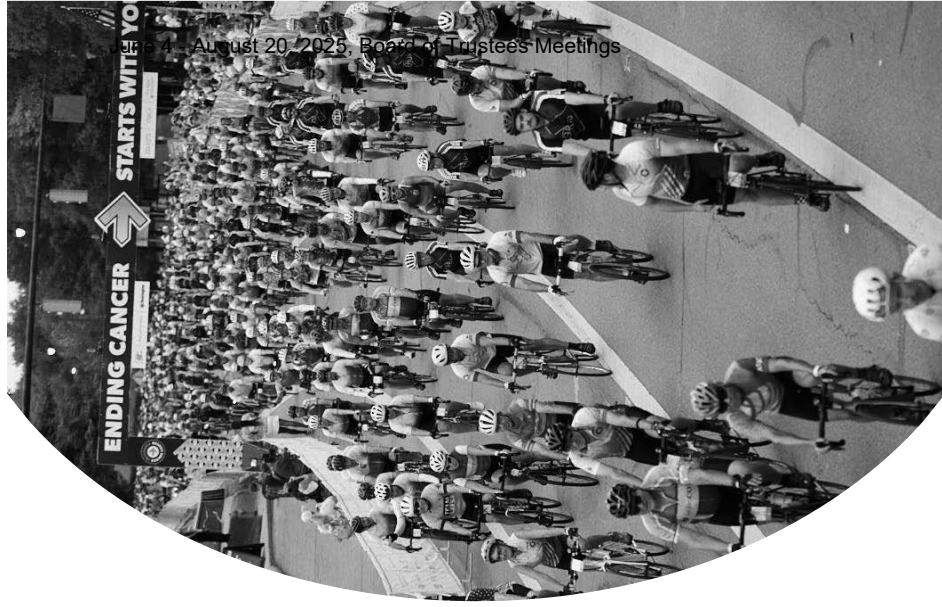
The Leadership Team Creating a Cancer-Free World



Pelotonia 2025

- 7500 Riders - largest number ever
- 24-mile route **Sold Out**
- First time ever a route **Sold Out**
- Incredible community support
- First Pelotonia Hike happens October 4 in Nelsonville

The James



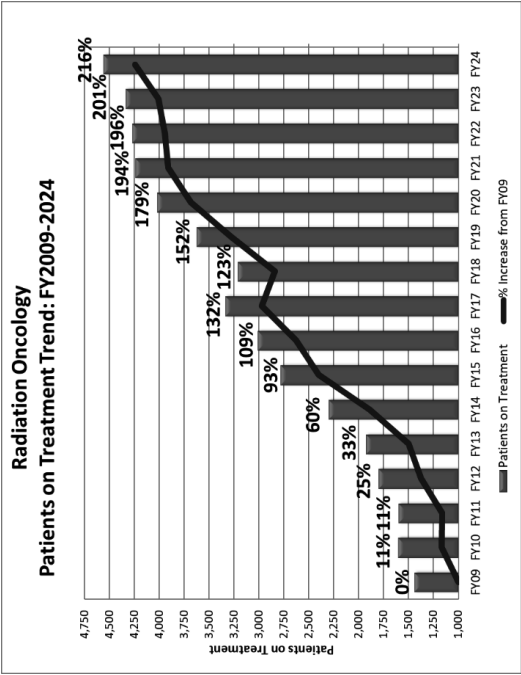
Successful NCI Support Grant Site Visit

Scored in the **Exceptional** range for the 4th time in a row



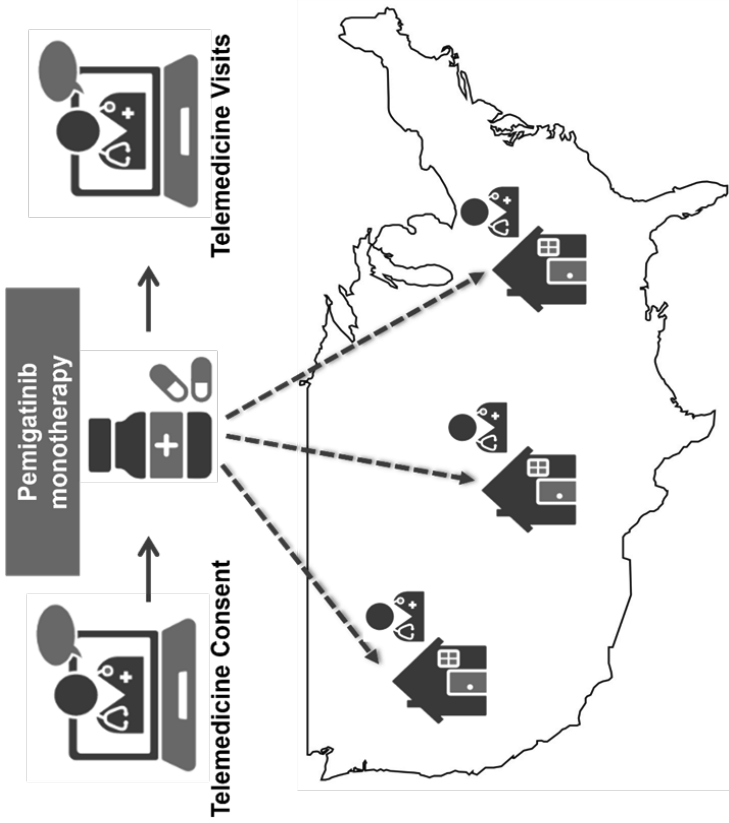
Radiation Oncology Success

Explosive growth since FY09, with double-digit growth in the last year



First-of-its-kind Nationwide telemedicine-enabled trial to treat patients with FGFR-positive pancreatic cancer

- Up to **40 adults** will be enrolled
- Telehealth allows **patients nationwide** to participate **without the burden and cost of** travelling to The James
- Team hopes to develop a **network** of national telemedicine trials



The James

OSU Framework for Ultra-Rare FGFR Mutant Pancreas Cancer Overcomes Barriers

Patient Barriers to Clinical Trials		Physician Barriers to Clinical Trials	
OSU Framework for Ultra-Rare FGFR Mutant Pancreas Cancer Overcomes Barriers		OSU Framework for Ultra-Rare FGFR Mutant Pancreas Cancer Overcomes Barriers	
✓	No placebo; FDA approved drug with limited toxicities	✓	No additional work beyond standard of care
✓	Keep your local, trusted doctor; no travel required	✓	Proven benefit for other FGFR mutant cancers
✓	No additional financial burden; drug provided at no cost	✓	Trial resources provided by OSU

Lung Screening Mobile Unit



The James hopes to **help increase the detection of lung cancer early** before it advances, **significantly improving survival rates** — up to 90% for stage 1A cases.



“It’s absolutely fantastic, because there are a lot of people that live down in this area that are maybe a little shy on medical attention and wouldn’t necessarily have the option of even doing something like that because it’s just not here, until Ohio State started coming down,” he says. **“They’re doing that. And it’s a godsend.”**

The James





Thank You

Connect with us on social media:



The James



cancer.osu.edu

ATTACHMENT XVI



**Wexner Medical Center Board
Financial Report
Public Session**

August 19, 2025



Preliminary FY25 Year-End Financials

The Ohio State University Health System

Consolidated Statement of Operations

For the YTD ended: June 30, 2025

(in thousands)

	Actual	Budget	Act-Bud Variance	Budget % Var	Prior Year	PY % Var
OPERATING STATEMENT						
Total Operating Revenue	5,035,323	4,712,845	322,478	6.8%	4,444,042	13.3%
Operating Expenses						
Salaries and Benefits	2,003,957	1,948,966	(54,991)	-2.8%	1,867,090	-7.3%
Resident/Purchased Physician Services	259,697	256,454	(3,243)	-1.3%	224,229	-15.8%
Supplies/Pharmaceuticals/Other	2,045,536	1,838,083	(207,453)	-11.3%	1,722,512	-18.8%
Depreciation	259,959	252,881	(7,078)	-2.8%	231,473	-12.3%
Interest	50,719	50,027	(692)	-1.4%	41,362	-22.6%
Total Expense	4,619,868	4,346,411	(273,457)	-6.3%	4,086,666	-13.0%
Gain (Loss) from Operations (pre MCI)	415,455	366,434	49,021	13.4%	357,376	16.3%
Medical Center Investments	(270,547)	(237,560)	(32,987)	-13.9%	(235,433)	-14.9%
Income from Investments	108,314	54,946	53,368	97.1%	92,051	17.7%
Other Gains (Losses)	56,523	37,656	18,867	50.1%	71,299	-20.7%
Excess of Revenue over Expense	\$ 309,745	\$ 221,476	\$ 88,269	39.9%	\$ 285,293	8.6%
Margin Percentage	6.2%	4.7%	1.5%	30.9%	6.4%	-0.2%
EBIDA	\$ 620,423	\$ 524,384	\$ 96,039	18.3%	\$ 558,128	11.2%
EBIDA Margin Percentage	12.3%	11.1%	1.2%	10.6%	12.6%	-0.3%

The Ohio State University Wexner Medical Center

Combined Statement of Operations

For the YTD ended: June 30, 2025

(in thousands)

	Actual	Budget	Act-Bud Variance	Budget % Var	Prior Year	PY % Var
OPERATING STATEMENT						
Total Operating Revenue	6,757,638	6,351,643	405,994	6.4%	6,007,922	12.5%
Operating Expenses						
Salaries and Benefits	3,550,181	3,476,460	(73,721)	-2.1%	3,282,948	-8.1%
Resident/Purchased Physician Services	259,697	256,454	(3,243)	-1.3%	224,229	-15.8%
Supplies/Pharmaceuticals/Other	2,502,502	2,196,009	(306,494)	-14.0%	2,087,548	-19.9%
Depreciation	264,895	257,542	(7,353)	-2.9%	251,662	-5.3%
Interest	50,925	50,027	(898)	-1.8%	49,312	-3.3%
Total Expense	6,628,200	6,236,492	(391,708)	-6.3%	5,895,700	-12.4%
Gain (Loss) from Operations	129,438	115,151	14,286	12.4%	112,222	15.3%
Income from Investments	118,215	65,643	52,572	80.1%	102,206	15.7%
Other Gains (Losses)	51,748	33,259	18,489	55.6%	62,841	-17.7%
Excess of Revenue over Expense	\$ 299,401	\$ 214,053	\$ 85,348	39.9%	\$ 277,269	8.0%
Margin Percentage	4.4%	3.4%	1.0%	31.5%	4.6%	-0.2%
EBIDA	\$ 615,221	\$ 521,622	\$ 93,598	17.9%	\$ 578,243	6.4%
EBIDA Margin Percentage	9.1%	8.2%	0.9%	10.9%	9.6%	-0.5%

* Combined Medical Center includes Health System, OSUP, and College of Medicine.
** This statement does not conform to Generally Accepted Accounting Principles. Different accounting methods are used in each of these entities and no eliminating entries are included.



The Ohio State University Wexner Medical Center

Combined Balance Sheet

As of: June 30, 2025

(in thousands)

	June 2025	June 2024	Change
<u>Assets</u>			
Cash	\$ 1,592,376	\$ 1,476,652	\$ 115,724
Net Patient Receivables	839,052	756,178	82,874
Other Current Assets	239,877	218,438	21,440
Assets Limited as to Use	842,180	958,622	(116,442)
Property, Plant & Equipment - Net	4,040,368	3,706,478	333,891
Other Assets	632,215	610,379	21,836
Total Assets	\$ 8,186,069	\$ 7,726,747	\$ 459,322
<u>Liabilities & Net Position</u>			
Current Liabilities	\$ 696,691	\$ 477,234	\$ 219,457
Other Liabilities	425,145	426,301	(1,156)
Total Debt	1,348,084	1,438,011	(89,927)
Net Position	5,716,149	5,385,201	330,948
Liabilities and Net Position	\$ 8,186,069	\$ 7,726,747	\$ 459,322
Days Cash on Hand	133.8	151.7	(17.9)
Net Days in Accounts Receivable	52.7	54.3	1.6
Debt to Capital	19.1%	21.1%	2.0%

* Combined Medical Center includes Health System, OSUP, and College of Medicine.
** This Balance sheet is not intended to conform to Generally Accepted Accounting Principles. Different accounting methods are used in each of these entities and no eliminating entries are included.





Thank You

Wexnermedical.osu.edu

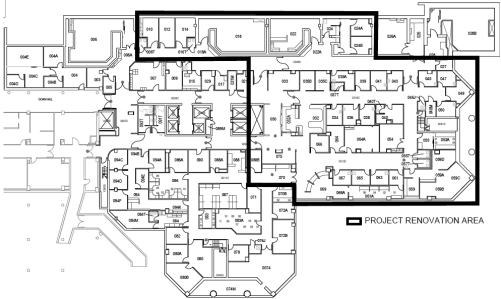
Project Data Sheet for Board of Trustees Approval

Brain and Spine Hospital – Lower-Level Renovation

OSU-230598 (REQ ID# Jam230040)

Project Location: Brain and Spine Hospital (0372)

• Approval Requested and Amount	
Professional services	\$0.3M
Total requested	\$0.3M
• Project Budget	
Professional services	TBD
Construction w/contingency	TBD
Total project budget	TBD
• Project Funding	
Auxiliary funds	
• Project Schedule	
BoT professional services approval	08/25
Design	TBD
BoT construction approval	TBD
Construction	TBD
Facility opening	TBD



- **Project Delivery Method**
Construction Manager at Risk
- **Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- **Project Scope**
 - The project will assess ways to optimize the ground floor of the Brain and Spine Hospital to support nuclear pharmacy, James diagnostic/treatment spaces and imaging services.
 - This project includes infrastructure and support space improvements for new LINAC and SPECT-CT equipment installations.
 - Total project cost will be validated during design.
- **Approval Requested**
 - Approval is requested to enter into professional services contracts.

-
- **project team**
University project manager: Brown, Vanessa
AE/design architect: BHDP
CM at Risk or Design Builder: Messer Construction

Project Data Sheet for Board of Trustees Approval

Doan Hall - PET/CT Replacement

OSU-250112 (REQ ID# JAM250012)

Project Location: Doan Hall (0089)

- Approval Requested and Amount**

Professional services	\$0.4M
Total requested	\$0.4M

- Project Budget**

Professional services	\$0.4M
Construction w/contingency	TBD
Total project budget	TBD

- Project Funding**

Auxiliary funds	
-----------------	--

- Project Schedule**

BoT professional services approval	08/25
Design	09/25 – 05/26
BoT construction approval	02/26
Construction	06/26 – 03/27
Facility opening	05/27

- Project Delivery Method**

Construction Manager at Risk	
------------------------------	--

- Planning Framework**

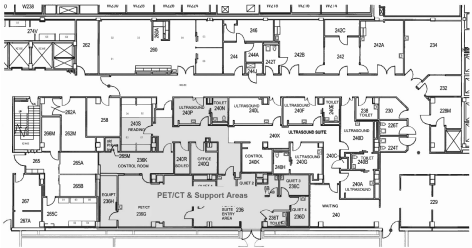
○ This project is included in the FY26 Capital Plan.	
--	--

- Project Scope**

○ This project will support the installation of a new PET/CT machine in the Nuclear Medicine Department in Doan Hall.	
○ Renovations to existing space will provide expanded support areas to accommodate the higher capacity and operational needs of the new equipment.	
○ Total project budget and construction schedule to be validated during design.	

- Approval Requested**

○ Approval is requested to enter into professional services contracts.	
--	--



- project team**

University project manager: Dolly, Mitchell	
AE/design architect: TBD	
CM at Risk or Design Builder: TBD	

Project Data Sheet for Board of Trustees Approval

Outpatient Care East – Clinic Renovations & Relocations

OSU-255228 (REQ ID# WMC240003)

Project Location: Outpatient Care East (0837)

- **Approval Requested and Amount**

Professional services	\$1.1M
Total requested	\$1.1M
- **Project Budget**

Professional services	\$1.1M
Construction w/contingency	TBD
Total project budget	TBD
- **Project Funding**

Auxiliary funds
- **Project Schedule**

BoT professional services approval	08/25
Design	09/25 – 08/26
BoT construction approval	TBD
Construction	TBD
Facility opening	TBD



- **Project Delivery Method**

Construction Manager at Risk
- **Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- **Project Scope**
 - The project expands, renovates, and relocates healthcare services at Outpatient Care East, encompassing primary care, new optometry services, advanced urgent care, and non-oncology infusion spaces.
 - Total project cost will be validated during design.
- **Approval Requested**
 - Approval is requested to enter into professional services contracts.

-
- **project team**

University project manager: Radabaugh, Alexandra
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

East Hospital - Chiller and Cooling Tower Replacement

OSU-255136 (REQ ID# WMC240003)

Project Location: East Hospital - Tower (0397)

- Approval Requested and Amount**

Professional services	\$1.2M
Construction w/contingency	\$5.8M
Total requested	\$7.0M
- Project Budget**

Professional services	\$1.2M
Construction w/contingency	\$5.8M
Total project budget	\$7.0M
- Project Funding**

Auxiliary funds
- Project Schedule**

BoT professional services approval	08/25
BoT construction approval	08/25
Design	08/25 – 03/26
Construction	03/26 – 05/27
Facility opening	05/27
- Project Delivery Method**

Construction Manager at Risk
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - To address aging infrastructure, this project will replace the two main chillers, pumps and associated infrastructure, along with the cooling tower located on the west side of the facility.
 - The units that are being replaced are part of the redundant infrastructure serving the hospital, replacements will be staged with cooling unit replacement to occur during off-peak season.
- Approval Requested**
 - Approval is requested to enter into professional services and construction contracts.



-
- project team**

University project manager: Hyde, Carrie
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

Polaris MEP updates

OSU-255690 (REQ ID# WMC240003)

Project Location: Polaris Pkwy, 2001 (0836)

- Approval Requested and Amount**

Professional services	\$0.8M
Construction w/contingency	\$6.6M
Total requested	\$7.4M
- Project Budget**

Professional services	\$0.8M
Construction w/contingency	\$6.6M
Total project budget	\$7.4M
- Project Funding**

Auxiliary funds
- Project Schedule**

BoT professional services approval	08/25
BoT construction approval	08/25
Design	09/25 – 05/26
Construction	06/26 – 02/27
Facility opening	02/27
- Project Delivery Method**

General Contracting
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - The project will update MEP infrastructure, including emergency electrical power in support of the overall building and cell therapy modular units. Updates will provide increased capacity for future expansion of the building.
- Approval Requested**
 - Approval is requested to enter into professional services and construction contracts.



-
- project team**

University project manager: Whitmore, Steven
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

600 Ackerman - Specialty Pharmacy Expansion

OSU-240182 (REQ ID# WMC240001)

Project Location: Ackerman Rd, 600 (2435)

Approval Requested and Amount

Professional services	\$1.2M
Construction w/contingency	\$14.0M
Total requested	\$15.2M

Project Budget

Professional services	\$1.2M
Construction w/contingency	\$14.0M
Total project budget	\$15.2M

Project Funding

Auxiliary funds

Project Schedule

Design	04/24 – 10/25
BoT professional services approval	08/25
BoT construction approval	08/25
Construction	11/25 – 05/27
Facility opening	06/27

Project Delivery Method

Construction Manager at Risk

Planning Framework

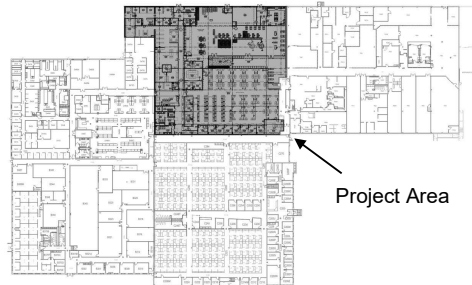
- This project is included in the FY24 and FY26 Capital Investment Plans.

Project Scope

- This project will renovate approximately 30,000 SF in the 600 Ackerman building to accommodate the growth of the Specialty Pharmacy space and services to meet the demand of the patient population.
- The scope includes increasing the dispensing pharmacy from 1,800 SF to 10,000 SF, adding automation equipment, and additional storage capabilities in the form of freezers and coolers.
- Equipment costs, which are included in the total project budget, are estimated to be \$2.8M.

Approval Requested

- Approval is requested to enter into professional services and construction contracts.



project team

University project manager: Lively, Sarah
AE/design architect: BDTAID
CM at Risk or Design Builder: The Ruhlin Company



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

QUALITY LEADERSHIP COUNCIL

**The Ohio State University Wexner Medical Center
Clinical Quality Management, Patient Safety, &
Patient Experience Plan**

FY 2026

July 1, 2025 - June 30, 2026

The Ohio State University Wexner Medical Center

Clinical Quality Management, Patient Safety, & Patient Experience Plan

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Ambition, Mission, Vision and Values

Ambition: To be a top (Honor Roll) academic health center driving breakthrough healthcare solutions to improve people's lives and the communities in which we live.

Mission: To improve health in Ohio and across the world through innovations in research and transformation in research, education, patient care and community engagement.

Vision: By pushing the boundaries of discovery and knowledge, we will solve significant health problems and deliver unparalleled care

Values: Inclusiveness, Determination, Empathy, Sincerity, Ownership and Innovation

Definition

The Clinical Quality Management, Patient Safety and Patient Experience Plan is the health system approach to the systematic assessment and improvement of process design and performance aimed at improving quality of care, patient safety, and patient experience.

The approach to clinical quality management, patient safety, and patient experience is leadership-driven and involves significant staff and provider engagement. The activities within the health system are multi-disciplinary and rooted in the system's ambition, mission, vision, and values. The plan embodies a culture of continuously measuring, assessing, and initiating changes to improve outcomes. The health system employs the following principles which support the Institute of Medicine's six aims of care (Safe, Timely, Effective, Efficient, Equitable and Patient Centered). These principles are:

- **Customer Focus:** Knowledge and understanding of internal and external customer needs and expectations.
- **Leadership & Governance:** Dedication to continuous improvement instilled by leadership and the Board.
- **Education:** Ongoing development and implementation of a curriculum for quality, safety & service for all staff, employees, clinicians, patients, and learners.
- **Everyone is involved:** All members have mutual respect for the dignity, knowledge, and potential contributions of others. Everyone is engaged in improving the processes in which they work.
- **Data Driven:** Decisions are based on knowledge derived from data.
- **Process Improvement:** Analysis of processes for redesign and variance reduction using a scientific approach.
- **Continuous:** Measurement and improvement are ongoing.
- **Safety Culture:** A culture that is open, honest, transparent, collegial, team-oriented, accountable and non-punitive when system failures occur.
- **Personalized Health Care:** Incorporate evidence-based medicine in patient centric care that considers the patient's health status, genetics, cultural traditions, personal preferences, values family situations and lifestyles.

The Plan was developed in accordance with The Joint Commission (TJC) accreditation standards and the Center for Medicare & Medicaid Services (CMS) Conditions of Participation outlining a

Quality Assurance and Performance Improvement (QAPI) program. In addition to the principles outlined above, the following will also serve as fundamental components of the plan.

Consistent Level of Care

Certain elements of the OSUWMC Clinical Quality Management, Patient Safety, & Patient Experience Plan assure that patient care standards for the same or similar services are comparable in all areas throughout the health system. For example,

- Policies, procedures and services provided are not payer driven
- Application of a single standard for physician credentialing
- Health system monitoring tools to measure processes
- Standardize and unify health system policies and procedures that promote patient centered, high quality, and safe care

Performance Transparency

The OSUWMC Medical and Administrative leadership, in conjunction with the Board of Trustees, has a strong commitment to transparency of performance as it relates to clinical quality, patient safety, and patient experience performance. As supported by the long-range quality plan, the organization is committed to providing transparency to our patients and communities regarding our performance.

Performance data are shared internally with faculty and staff through a variety of methods. The purpose of providing data internally is to assist faculty and staff in having real-time performance results and to use those results to drive change and improve performance when applicable.

Online performance scorecards have been developed to cover a variety of clinical quality, safety and patient experience metrics. When applicable, on-line scorecards provide the ability to “drilldown” on the data by discharge service, department and nursing unit. In some cases, password authentication also allows for practitioner-specific data to be viewed by Department Chairs and various Quality and Administrative staff. Transparency of information will be provided within the limits of the Ohio law that protects attorney client privilege, quality inquiries and reviews, as well as peer review.

Confidentiality

Confidentiality is essential to the quality management and patient safety process. All records and proceedings are confidential and are to be marked as such. Written reports, data, and meeting minutes are to be maintained in secure files. Access to these records is limited to appropriate administrative personnel and others as deemed appropriate by legal counsel. As a condition of staff privilege and peer review, it is agreed that no record, document, or proceeding of this program is to be presented in any hearing, claim for damages, or any legal cause of action. This information is to be treated for all legal purposes as privileged information. This is in keeping with the Ohio Revised Code 121.22 (G)-(5) and Ohio Revised Code 2305.251.

Scope/Purpose

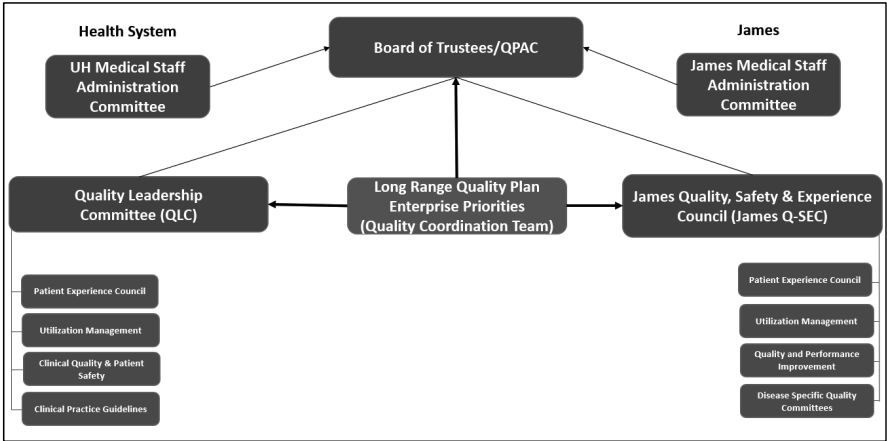
The Clinical Quality Management, Patient Safety & Patient Experience Plan includes all inpatient and outpatient facilities in The OSU Wexner Medical Center (OSUWMC) and appropriate entities across the continuum of care and in any clinical setting. The execution of the Clinical Quality Management, Patient Safety & Patient Experience Plan will demonstrate measurable improvements in health outcomes and the value of patient care provided within the OSUWMC.

As part of the Quality Assurance and Performance Improvement (QAPI program), the organization provides oversight for contracted services. The contracts are reviewed annually by the Medical Staff Administrative Committee (MSAC) and then forwarded to the Quality and Professional Affairs Committee of the governing body for review and approval.

Objectives

- Continuously monitor, evaluate, and improve outcomes and sustain improved performance.
- Implement reliable system changes that will improve patient care and safety by assessing, identifying, and reducing risks within the organization and responding accordingly when undesirable patterns or trends in performance are identified, or when events requiring intensive analysis occur.
- Assure optimal compliance with accreditation standards, state, federal and licensure regulations.
- Develop, implement, and monitor adherence to evidenced-based practice guidelines and companion documents in accordance with best practice to standardize clinical care and reduce practice variation.
- Improve patient experience and perception of treatment, care and services by identifying, evaluating, and improving performance based on patient needs, expectations, and satisfaction.
- Improve value by providing the best quality of care at the minimum cost possible. Incorporate value metrics, specifically the cost of care, into quality data and discussions where appropriate.
- Provide a mechanism by which the governance, medical staff and health system staff members are educated in quality management principles and processes.
- Provide appropriate levels of data transparency to both internal and external customers.
- Create a level of accountability for all system-wide quality improvement initiatives at the dyad/triad leadership level and assure processes involve an interdisciplinary teamwork approach.
- Improve processes to prevent patient harm.
- Improve clinical documentation to accurately reflect the severity of illness for the patients in which we provide care.

Structure for Quality Oversight



The Quality Leadership Council serves as the single, multidisciplinary quality and safety oversight committee for the OSUWMC. In accordance with the Long-Range Quality Plan (Appendix A), The Quality Leadership Council utilizes criteria (Appendix B) to determine priorities for the health system that are reported in the Quality & Safety Priorities (Appendix C). Given the James Cancer Hospital has a separate provider number with a requirement for a distinct QAPI program, they have a specific substructure that ultimately reports to QPAC (Appendix D).

Committees

Medical Center Board

The Medical Center Board is accountable to The Ohio State University Board of Trustees through the President and Executive Vice President (EVP) for Health Sciences and is responsible for overseeing the quality and safety of patient care throughout the Medical Center including the delivery of patient services, quality assessment, improvement mechanisms, and monitoring achievement of quality standards and goals.

The Medical Center Board receives clinical quality management, patient safety and patient experience reports, and provides resources and support systems for clinical quality management, patient safety and patient experience functions, including medical/health care error occurrences and actions taken to improve patient safety and service. Board members receive information regarding the responsibility for quality care delivery or provision, and the Hospital's Clinical Quality Management, Patient Safety and Patient Experience Plan. The Medical Center Board ensures all caregivers are competent to provide services.

Quality Professional Affairs Committee (QPAC)

Composition: The committee shall consist of no fewer than four voting members of the university Wexner medical center board, appointed annually by the chair of the university Wexner medical center board, one of whom shall be appointed as chair of the committee. The chief executive officer of the Ohio state university health system; chief medical officer of the medical center; the director of medical affairs of the James; the medical director of credentialing for the James; the chief of the medical staff of the university hospitals; the chief of the medical staff of the James; the associate dean of graduate medical education; the chief quality and patient safety officer; the chief nurse executive for the OSU health system; and the chief nursing officer for the James shall serve as ex-officio, voting members. Other members as appointed by the chair of the university Wexner medical center board, in consultation with the chair of the quality and professional affairs committee.

Function:

The QPAC shall be responsible for the following specific duties:

- Reviewing and evaluating the patient safety and quality improvement programs of the university Wexner medical center;
 - Overseeing all patient care activities in all facilities that are a part of the university Wexner medical center, including, but not limited to, the hospitals, clinics, ambulatory care facilities, and physicians' office facilities;
 - Monitoring quality assurance performance in accordance with the standards set by the university Wexner medical center;
 - Monitoring the achievement of accreditation and licensure requirements;
 - Reviewing and recommending to the university Wexner medical center board changes to the medical staff bylaws and medical staff rules and regulations;
 - Reviewing and approving clinical privilege forms;
 - Reviewing and approving membership and granting appropriate clinical privileges for the credentialing of practitioners recommended for membership and clinical privileges by the university hospitals medical staff administrative committee and the James medical staff administrative committee;
 - Reviewing and approving membership and granting appropriate clinical privileges for the expedited credentialing of such practitioners that are eligible by satisfying minimum approved criteria as determined by the university Wexner medical center board and are recommended for membership and clinical privileges by the university hospitals medical staff administrative committee and the James medical staff administrative committee;
 - Reviewing and approving reinstatement of clinical privileges for a practitioner after a leave of absence from clinical practice;
 - Conducting peer review activities and recommending professional review actions to the university Wexner medical center board;
 - Reviewing and resolving any petitions by the medical staff for amendments to any rule, regulation or policy presented by the chief of staff on behalf of the medical staff pursuant to the medical staff bylaws and communicating such resolutions to the university hospitals medical staff administrative committee and the James medical staff administrative committee for further dissemination to the medical staffs; and
 - Such other responsibilities as assigned by the chair of the university Wexner medical center board.
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Medical Staff Administrative Committees (MSACs)

Composition: Refer to Medical Staff Bylaws and Rules and Regulations

Function: Refer to Medical Staff Bylaws and Rules and Regulations

The organized medical staff, under the direction of the Medical Director and the MSAC(s) for each institution, implements the Clinical Quality Management, Patient Safety and Patient Experience Plan throughout the clinical departments.

The MSAC(s) reviews reports and recommendations related to clinical quality management, efficiency, patient safety and service quality activities. This committee has responsibility for evaluating the quality and appropriateness of clinical performance and service quality of all individuals with clinical privileges. The MSAC(s) reviews corrective actions and provides authority within their realm of responsibility related to clinical quality management, patient safety, efficiency, and service quality activities.

Quality Leadership Council (QLC)

Composition: Refer to Medical Staff Bylaws and Rules and Regulations

Function: Refer to Medical Staff Bylaws and Rules and Regulations

The QLC is responsible for designing and implementing systems and initiatives to enhance clinical care, outcomes and patient experience throughout the integrated health care delivery system. The QLC serves as the oversight council for the Clinical Quality Management, Patient Safety and Patient Experience plan. Quality improvement activities within the Quality Accountability Team will be reported up to the QLC to ensure alignment of priorities for system- wide quality improvement projects and to provide consistent interventions (toolkits) to all stakeholders in the system.

Clinical Practice Guideline Committee (CPGC)

Composition: The CPGC consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Information Technology, Pharmacy, Nursing, and other allied health professionals. An active member of the medical staff chairs the committee. The CPGC reports to QLC and shares pertinent information with the Medical Staff Administrative Committees.

Function:

- Develop and update evidence-based clinical practice guidelines and best practices to support the delivery of patient care that promotes high quality, safe, efficient, effective, and patient centered care.
- Develop and implement Health System-specific resources and tools to support evidence-based guideline recommendations and best practices to improve patient care processes, reduce variation in practice, and support health care education.
- Develop measures to evaluate guideline use, processes, and outcomes of care.

Clinical Quality and Patient Safety Committee (CQPSC)

Composition: The CQPSC consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Information Technology, Nursing, Pharmacy, Laboratory, Respiratory Therapy, Diagnostic Testing and Risk Management. An active member of the Medical Staff chairs the Committee. The committee reports to QLC and additional committees as deemed applicable.

The primary role of the CQPSC is to ensure that OSUWMC is compliant with the Joint Commission and CMS Requirements for Participation.

Function:

- Creates a culture of safety which promotes organizational learning and minimizes individual blame or retribution for reporting or involvement in a medical/health care error
- Assure optimal compliance with patient safety-related accreditation standards
- Proactively identifies risks to patient safety and initiates actions to reduce risk with a focus on process and system improvement
- Oversees completion of proactive risk assessment as required by TJC
- Oversees education & risk reduction strategies as they relate to Sentinel Event Alerts from TJC
- Provides oversight for clinical quality management committees
- Evaluates and, when indicated, provides recommendations to improve clinical care and outcomes
- Ensures actions are taken to improve performance whenever an undesirable pattern or trend is identified
- Receive reports from committees that have a potential impact on the quality & safety in delivering patient care

Patient Experience Council(s)

Composition: The Patient Experience Councils consists of executive, physician, and nursing leadership spanning the inpatient and outpatient care settings. The University Hospitals Council is co-chaired by the Chief Nurse Executive for the Health System, The Chief Administrative Officer for the Hospitals Division, and Chief Quality and Patient Safety Officer. The committee reports to the QLC and reports out to additional committees as applicable. The James Patient Experience Council reports to the James Quality, Patient Safety and Experience Council which then reports to QPAC. The Council's key strategic initiatives center on empathy, trust, and personal connections as well as leveraging technology to enhance communication with patients and families.

Function:

- Create a culture and environment that delivers an unparalleled patient experience consistent with the OSU Medical Center's mission, vision and values focusing largely on service quality.
 - Set strategic goals and priorities for improving the patient experience to be implemented by area specific patient experience councils and teams.
 - Serve as a communication hub reporting out objectives and performance to the system.
 - Serve as a coordinating body for subcommittees working on specific aspects of the patient experience.
 - Measure and review voice of the customer information in the form of Patient and Family Experience Advisor Program and related councils, patient satisfaction data, comments, letters, and related measures.
 - Monitor publicly reported and other metrics used by various payers to ensure optimal reimbursement.
 - Collaborate with other departments to reward and recognize faculty and staff for service excellence performance.
-

Practitioner Evaluation Committee (PEC)

Composition: The Practitioner Evaluation Committee (PEC) (Appendix E) is the Peer Review committee that provides medical leadership in overseeing the Peer Review process. The PEC is co-chaired by the CQPSO and a CMO appointee. The committee is composed of the Chair of the Clinical Quality and Patient Safety Committee, physicians, and advanced practice licensed health care providers from various business units & clinical areas as appointed by the CMO & Physician in Chief at the James. The Medical Center CMO & Physician-in-Chief at the James serves Ex- Officio. In FY24, a subcommittee of PEC will be established to review OPPE outliers and to report these concerns to PEC.

Function:

- Provide leadership for OSUWMC clinical quality improvement processes.
- Provide clinical expertise to the practitioner peer review process thorough and timely review of clinical care and/or patient safety issues referred to the PEC.
- Advises the CMO & Director of Medical Affairs at the James regarding action plans to improve the quality and safety of clinical care at the OSUWMC.
- Develop follow up plans to ensure action is successful in improving quality and safety.
- Monitor OPPE reports (via subcommittee) to identify outliers in the faculty prior to their recredentiaing review every three years.
- Establish Peer Review Process Policy to clearly define the scope, methods, and timing of peer review events.

Sentinel Event Team

Composition: The OSUWMC Sentinel Event Team (SET) includes an Administrator, the Chief Quality and Patient Safety Officer, the Administrative Director for Quality & Patient Safety, a member of the Physician Executive Council, a member of the Nurse Executive Council, representatives from Quality and Operations Improvement and Risk Management and other areas as necessary.

Function:

- Approves & makes recommendations on sentinel event determinations and teams, and action plans as received from the Sentinel Event Determination Group,
- Evaluates findings, recommendations, and approves action plans of all root cause analyses.

The Sentinel Event Determination Group (SEDG)

The SEDG is a sub-group of the Sentinel Event Team and determines whether an event will be considered a sentinel event, a significant event or a non-event. SEDG has the authority to assign the Root Cause Analysis (RCA) Executive Sponsor, RCA Workgroup Leader, RCA Workgroup Facilitator, and recommends the Workgroup membership to the Executive Sponsor. When the RCA is presented to the Sentinel Event Team, the RCA Workgroup Facilitator will attend to support the members.

Composition: The SEDG voting membership includes the CQPSO or designee, Director of Risk Management, and Quality Director of respective business unit for where the event occurred (or their designee). Additional guests attend as necessary.

Clinical Quality & Patient Safety Sub-Committees

Composition: For the purposes of this plan, Quality & Patient Safety Sub-Committees will refer to any standing committee or sub-committee functioning under the Quality Oversight Structure. Membership on these committees will represent the major clinical and support services throughout the hospitals and/or clinical departments. These committees report, as needed, to the appropriate oversight committee(s) defined in this Plan.

Function: Serve as the central resource and interdisciplinary work group(s) for the continuous process of monitoring and evaluating the quality and services provided throughout a hospital, clinical department, and/or a group of similar clinical departments.

Quality Improvement (QI) Teams/Work Groups

The QI Teams serve as the functional arm of Quality and Patient Safety to implement specific quality improvement initiatives within the Health System. The teams leverage the triad/dyad leaders across the system to establish a clear level of accountability for quality improvement activities. The councils use data provided by ACE to identify and prioritize processes and tactics to improve a specific outcome or priority. The teams may develop implementation toolkits consistent with best practice. These toolkits decrease variation in how quality improvement efforts are undertaken across the system for common issues such as falls, hospital acquired infections, and patient safety indicators. QI Team members are responsible for the successful implementation and maintenance of these QI efforts within their areas of responsibility.

Composition: Co-chaired by the Chief Quality and Patient Safety Officer and the Senior Director of Quality and Patient Safety. The teams consist of multidisciplinary leaders across the system and selected business units, nursing, pavilion, as well as educational and administrative leaders.

Function:

- System-wide implementation of quality improvement efforts for specific quality opportunities impacting a broad patient population.
 - QI Teams are not intended to replace any service line or business unit level quality committee or activity but are intended to align QI efforts across the system for specific opportunities.
 - Priorities are established based on current performance and identified gaps in performance when compared to industry leaders; data is provided from the ACE and quality teams.
 - QI Teams are tasked with creating a system-wide QI plan to improve performance to include a standardized toolkit for implementation.
 - The team coordinates with ACE to develop process measures, adherence reports, and outcome reporting for the project.
 - After implementation, council leaders are responsible for ongoing surveillance of process adherence and outcomes for their respective units.
 - QI teams report priorities, progress, and results to the QLC as appropriate.
-
-

Roles and Responsibilities

Executive Vice President/CEO

The EVP leads all seven health science colleges and the Wexner Medical Center Enterprise which includes seven hospitals, a nationally ranked college of medicine, 20-plus research institutes, multiple ambulatory sites, an accountable care organization and a health plan. Additionally, the EVP serves as the Chief Executive Officer for Wexner Medical Center and serves in an ex-officio role for the Wexner Board of Trustees, as well as being the Chairman for the Quality and Professional Affairs committee which is a Board committee.

Chief Operating Officer (COO)

The COO for the Medical Center is responsible for providing leadership and oversight for the overall Clinical Quality Management, Patient Safety and Patient Experience Plan across the OSUWMC.

Chief Clinical Officer (CCO)

The CCO for the Medical Center is responsible for facilitating the implementation of the overall Clinical Quality Management, Patient Safety & Patient Experience Plan at OSUWMC. The CCO is responsible for facilitating the implementation of the recommendations approved by the various committees under the Quality Leadership Committee (QLC).

Chief Quality and Patient Safety Officer (CQPSO)

The CQPSO reports to the Chief Operating Officer and provides oversight and leadership for the OSUWMC in the conceptualization, development, implementation and measurement of the OSUWMC approach to quality, patient safety and patient experience.

Senior Director, Quality and Safety

The Senior Director of Quality and Safety works in dyad partnership with the CQPSO to provide oversight and leadership for the OSUWMC in the conceptualization, development, implementation, and measurement of the OSUWMC approach to quality, patient safety, and patient experience.

Associate Chief Quality and Patient Safety Officers

The Associate Chief Quality and Patient Safety Officers support the CQPSO in the development, implementation, and measurement of OSUWMC's approach to quality, safety, and patient experience.

Medical Director/Director of Medical Affairs

Each business unit Medical Director is responsible for the review, implementation and oversight of the Clinical Quality Management, Patient Safety & Patient Experience Plan.

Associate Medical Directors

The Associate Medical Directors assist the CQPSO in the oversight, development, and implementation of the Clinical Quality Management, Patient Safety & Patient Experience Plan as it relates to the areas of quality, safety, evidence-based medicine, clinical resource utilization and service.

Chief Administrative Officers – Acute Care Division/Post-Acute and Home-Based Care Division/Outpatient and Ambulatory Division/Clinical and Physician Network

The OSUWMC Chief Administrative Officers are responsible to the Board for implementation of the Clinical Quality Management, Patient Safety & Patient Experience Plan for their respective divisions.

Business Unit Executive Directors

The OSUWMC staff, under the direction of the Health System Chief Administrative Officer and Hospital Administration, implements the program throughout the organization. Hospital Administration provides authority and supports corrective actions within its realm for clinical quality management, patient safety, and patient experience activities.

Clinical Department Chief and Division Directors:

Each department chairperson and division director are responsible for ensuring the standards of care and service are maintained within their department/division. In addition, department chairpersons/division directors may be asked to implement recommendations from the Clinical Quality Management, Patient Safety and Patient Experience Plan, or participate in corrective action plans for individual physicians, or the division/department as a whole.

Medical Staff

Medical staff members are responsible for achieving the highest standard of care and services within their scope of practice. As a requirement for membership on the medical staff, members are expected and must participate in the functions and expectations set forth in the Clinical Quality Management, Patient Safety, & Patient Experience Plan. In addition, members may be asked to serve on quality management committees and/or quality improvement teams.

House Staff Quality Forum (HQF)

The House Staff Quality Forum (HQF) is comprised of representatives from each Accreditation Council for Graduate Medical Education (ACGME) program. HQF has Executive Sponsorship from the CQPSO and the Associate CQPSO.

The purpose of the HQF is to provide post-graduate trainees with an opportunity to participate in clinical quality, patient safety and patient experience-related initiatives while incorporating the perspective of the frontline provider. HQF will work on quality, safety and patient experience related projects and initiatives that are aligned with the health system goals and will report to the Clinical Quality and Patient Safety committee. The Chair HQF will serve as a member of the Leadership Council.

Nursing Quality

The primary responsibility of the Nursing Quality and Evidence-Based Practice (EBP) Department is to monitor and evaluate performance of the nursing staff in support of organizational quality, safety and patient experience goals, submit required data to the National Database for Nursing Quality Indicators (NDNQI), review benchmark data and identify opportunities for improvement, use the literature to guide recommended changes to nursing practice and policy, coordinate and facilitate nursing quality improvement initiatives, facilitate participation/collaboration with system-wide patient safety activities, and use EBP and research to improve both the delivery and outcomes of personalized nursing care.

Nursing Quality team members serve as internal consultants for the development and evaluation of quality improvement, patient safety, and EBP activities. The department maintains human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

Hospital Department Directors

Each department director is responsible for ensuring the standards of care and service are maintained or exceeded within their department. Department directors are responsible for implementing, monitoring, and evaluating activities in their respective areas and assisting medical staff members in developing appropriate mechanisms for data collection and evaluation. In addition, department directors may be asked to implement recommendations from the Clinical Quality Management, Patient Safety and Patient Experience Plan or participate in corrective action plans for individual employees or the department as a whole. Department directors provide input regarding committee memberships and serve as participants on quality management committees and/or quality improvement teams.

Health System Staff

Health System staff members are responsible for ensuring the standards of care and services are maintained or exceeded within their scope of responsibility. The staff is involved through formal and informal processes related to clinical quality improvement, patient safety and patient experience efforts, including but not limited to:

- Reporting events, including near misses or “good catches” via the internal Patient Safety Reporting System (PSRS)
- Suggesting processes to improve quality, safety and service
- Monitoring activities and processes, such as patient complaints and patient satisfaction
- Participating in focus groups
- Attending staff meetings
- Participating in efforts to improve quality and safety including Root Cause Analysis and Proactive Risk Assessments

Quality and Operations Improvement

The primary responsibility of the Quality and Operations Improvement team is to coordinate and facilitate clinical quality management and patient safety activities throughout the Health System. The primary responsibility for the implementation and evaluation of clinical quality management and patient safety activities resides in each department/program; however, the quality and operations improvement staff also serve as an internal consultant for the development and evaluation of quality management and patient safety activities. The team maintains human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

The department is comprised of five main functions (Appendix F):

1. Patient Safety
 2. Quality Outcomes Management
 3. Quality Program Reporting
 4. Provider Engagement / Peer Review
-

Patient Experience

The primary responsibility of the Patient Experience team is to coordinate and facilitate a service-oriented approach to providing healthcare throughout the Health System. This is accomplished through both strategic and program development as well as through managing operational functions within the Health System. The implementation and evaluation of service-related activities resides in each department/program; however, the Patient Experience staff also serves as an internal consultant for the development and evaluation of service quality activities as well as a representative of the “voice of the patient” throughout the organization by reflecting or providing patient feedback to shape decision making.

The Patient Experience Department maintains human and technical resources for interpreter services, information desks, patient relations, pastoral care, team facilitation, survey management, and performance improvement. The department also oversees the Patient and Family Experience Advisor Program which is a group of current/former patients, or their primary caregivers, who have had experiences at any OSU facility. These individuals are volunteers who serve as advisory members on committees and workgroups, complete public speaking engagements and review materials.

Approach to Clinical Quality, Patient Safety & Patient Experience Management Systematic Approach/Model to Process Improvement

The OSUWMC embraces change and innovation as one of its core values. Organizational focus on process improvement and innovation is embedded within the culture using a general Process Improvement Model that includes:

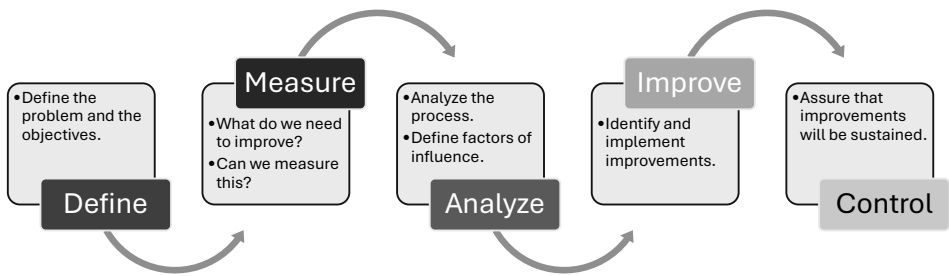
1. An organizational expectation that the entire workforce is responsible for enhancing organizational performance and;
2. Active involvement of multidisciplinary teams and committees focused on improving processes.

With the increased organizational emphasis on utilizing metric-driven approaches to reducing unintended medical errors, eliminating rework, and enhancing the efficiency/effectiveness of our work processes, the DMAIC methodology will be instrumental as a tool to help focus our process improvement efforts.

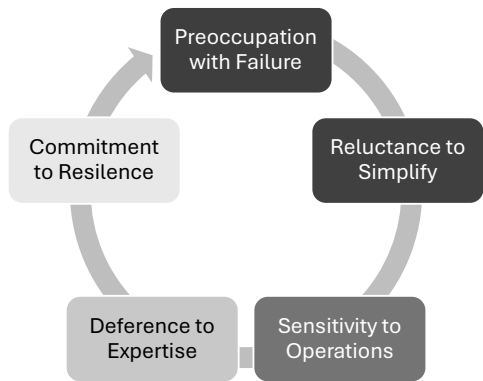
Determining Priorities

The OSUWMC has a process in place to identify and direct resources toward quality management, patient safety, and patient experience activities. The OSUWMC criteria are approved and reviewed by QLC and the Medical Center Board. The prioritization criteria are reevaluated annually according to the mission and strategic plan of the OSUWMC. The leaders may also set performance improvement priorities and reevaluate on an ad hoc basis in response to unusual or urgent events.

DMAIC Roadmap



High Reliability Organization Principles



Data Measurement and Assessment

Determination of Data Needs

The OSUWMC data needs are determined according to improvement priorities and surveillance needs. The OSUWMC collects data for monitoring important processes and outcomes related to patient care and the OSUWMC functions. In addition, each department is responsible for identifying quality indicators specific to their area of service. The quality management committee of each area is responsible for monitoring and assessing the data collected.

Collection/Measurement

Data, including patient demographic and clinical information, are systematically collected throughout the OSUWMC through various mechanisms including:

- Administrative and clinical registries and databases
- Retrospective and concurrent medical record review (e.g., infection surveillance)
- Reporting systems (e.g., patient safety reporting system)
- Surveys (i.e. patients, families, and staff)

Assessment

Statistical methods such as control charts, g-charts, confidence intervals, and trend analysis are used to identify undesirable variance, trends, and opportunities for improvement. The data is compared to previous performance, and external benchmarks. Accepted standards of care and aspirational performance targets are used to establish metrics and goals. Annual goals are established to evaluate performance. Where appropriate, OSUWMC has adopted the philosophy of setting multi-year aspirational targets. Annual targets are set as steps to achieve the aspirational goal.

Surveillance

The OSUWMC systematically collects and assesses data in different areas to monitor and evaluate the quality and safety of services, including measures related to accreditation and other requirements. Data collection also functions as a surveillance system for timely identification of undesired variations or trends in quality indicators. Other mechanisms by which data may be obtained are outlined in the graphic below.

Benchmark data

Both internal and external benchmarking provides value to evaluating performance.

Internal Benchmarking: Internal benchmarking uses processes and data to compare OSUMCs performance to itself overtime. Internal benchmarking provides a gauge of improvement strategies within the organization.

External Benchmarking: OSUWMC participates in various database systems, clinical registries and focused benchmarking projects to compare performance with that of peer institutions. Vizient, The US News & World Report, National Database of Nursing Quality Indicators, and The Society of Thoracic Surgery are examples of several external organizations that provide benchmarking opportunities.

External Reporting Requirements

There are several external reporting requirements related to quality, safety, and service. These include regulatory, governmental, payer, and specialty certification organizations. An annual report is given to the Compliance Committee to ensure all regulatory requirements are met.

Methods for Monitoring



Communication of Data/Performance

Metric Headquarters (Metric HQ)

Quality and patient safety related data are collected to monitor key processes and outcomes related to care delivery and according to improvement priorities and surveillance needs. For example, Metric HQ is an internal set of dashboards for visualizing quality and safety data. This serves as a single source of truth across the organization. Additional data sets are available from IHIS reports and/or the Analytics Center of Excellence for specific initiatives as needed and at the requested frequency.

Specific data within Metric HQ is available at the system, business unit, and unit level. Additional process measure data as leading indicators for established outcomes or priorities are also included to help target improvement efforts.

Vital Signs of Performance

The Vital Signs of Performance is an online dashboard available to everyone in the Medical Center with a valid user account that shows Mortality, Length of Stay, Patient Safety Indicators, and Readmission data over time. The data can be displayed at the health system, business unit, clinical service, and nurse station level.

Patient Satisfaction Dashboard

The Patient Satisfaction dashboard consists of patient experience indicators and comments gathered from surveys after discharge or visit to a hospital or outpatient area. The dashboard covers performance in areas such as overall experience, physician communication, nurse communication, responsiveness, and environment. It also measures process indicators, such as joint physician-nurse rounding and nurse leader rounding, as well as serves as a resource for best practices. The information contained on the dashboard is shared in various forums with staff, clinicians, administration, including the Boards.

Frequency of Data Collection

Dashboards are automatically refreshed daily without the need for manual refresh processes. Data collection frequency through other reports and/or data sets occurs at the timeframes designated for each specific initiative. Project and departmental teams set the data collection plan and frequency that meets their project's goals and objectives.

Performance Based Physician Quality & Credentialing

Performance-based credentialing ensures processes that assist to promote the delivery of quality and safe care by physicians and advanced practice licensed health care providers. Both Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE) occur. Focused Professional Practice Evaluation (FPPE) is utilized on 3 occasions: initial appointment, when a Privileged Practitioner requests a new privilege, and for cause when questions arise regarding the practitioner's ability to provide safe, high quality patient care. Ongoing Professional Practice Evaluation (OPPE) is performed on an ongoing basis (every 6 months).

Profiling Process

- Data gathering from multiple sources
- Report generation and indicator analysis
- Department chairs (division directors as well) have online access 24/7 to physician profiles for their ongoing review
 - Individual physician access to their profiles 24/7
- Discussion at Credentialing Committee
- Final Recommendation & Approval:
 - Medical Staff Administrative Committees
 - Medical Director
 - Hospital Board

Service-Specific Indicators

Several of the indicators are used to profile each physician's performance. The results are included in a physician profile which is reviewed with the department chair as part of credentialing process.

The definition of service/department specific indicators is the responsibility of the director/chair of each unit. The performance in these indicators is used as evidence of competence to grant privileges in the re-appointment process. The clinical departments/divisions are required to collect the performance information as necessary related to these indicators and report that information to the Department of Quality & Operations Improvement.

Purpose of Medical Staff Evaluation

- To monitor and evaluate medical staff performance ensuring a competent medical staff
- To integrate medical staff performance data into the reappointment process and create the foundation for high quality care, safe, and efficacious care
- To provide periodic feedback and inform clinical department chairs of the comparative performance of individual medical staff
- To identify opportunities for improving the quality of care

Conflict of Interest

Any person, who is professionally involved in the care of a patient being reviewed, should not participate in peer review deliberations and voting. A person is professionally involved if they are responsible for patient care decision making either as a primary or consulting professional and/or have a financial interest (as determined by legal counsel) in the case under review.

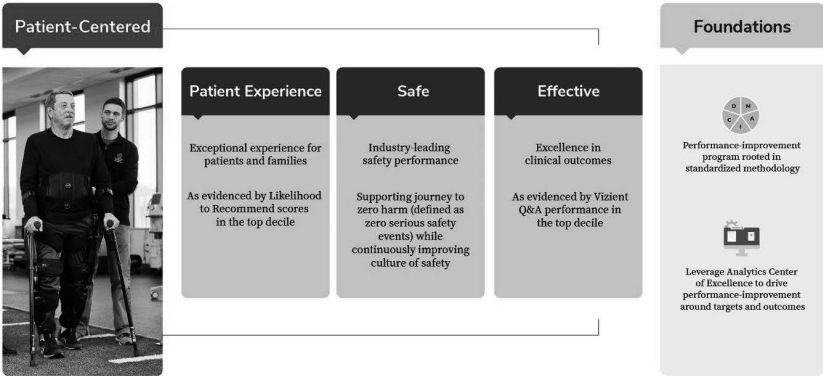
Persons who are professionally involved in the care under review are to refrain from participation except as requested by the appropriate administrative or medical leader. During peer review evaluations, deliberations, or voting, the chairperson will take steps to avoid the presence of any person, including committee members, professionally involved in the care under review. The chairperson of a committee should resolve all questions concerning whether a person is professionally involved. In cases where a committee member is professionally involved, the respective chairperson may appoint a replacement member to the committee.

Participants and committee members are encouraged to recognize and disclose, as appropriate, a personal interest or relationship they may have concerning any action under peer review.

Annual Approval and Continuous Evaluation

The Clinical Quality Management, Patient Safety & Patient Experience Plan is approved by the QLC, the Medical Staff Administrative Committees, and the Medical Center Board on an annual basis. The annual evaluation includes a review of the program activities and an evaluation of the effectiveness of the structure.

Appendix A: Long Range Quality Plan



Appendix B: Prioritization Criteria

The following criteria are used to prioritize clinical value enhancement initiatives to ensure the appropriate allocation of resources.

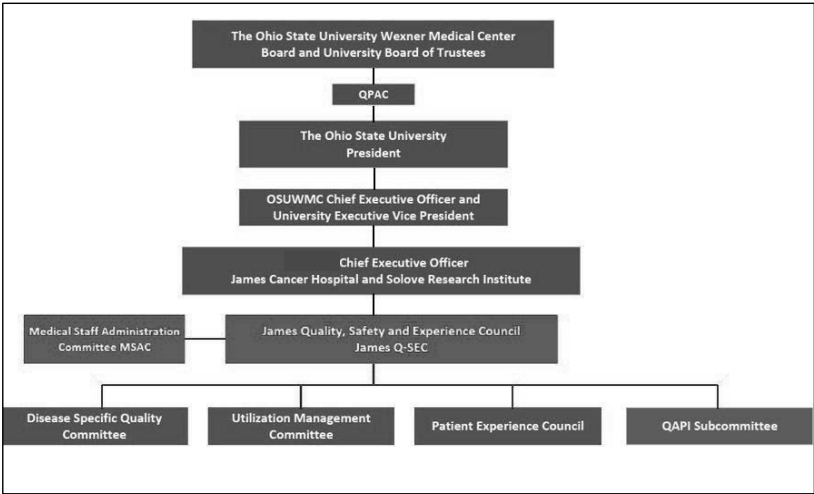
1. Ties to strategic initiatives and is consistent with hospital's mission, vision, and values
2. Reflects areas for improvement in patient safety, appropriateness, quality, and/or medical necessity of patient care (e.g., high risk, serious events, problem-prone)
3. Has considerable impact on our community's health status (e.g., morbidity/mortality rate)
4. Addresses patient experience issues (e.g., access, communication, discharge)
5. Reflects divergence from benchmarks
6. Addresses variation in practice
7. Is a requirement of an external organization
8. Represents significant cost/economic implications (e.g., high volume)

Appendix C: FY26 Priorities/Metrics

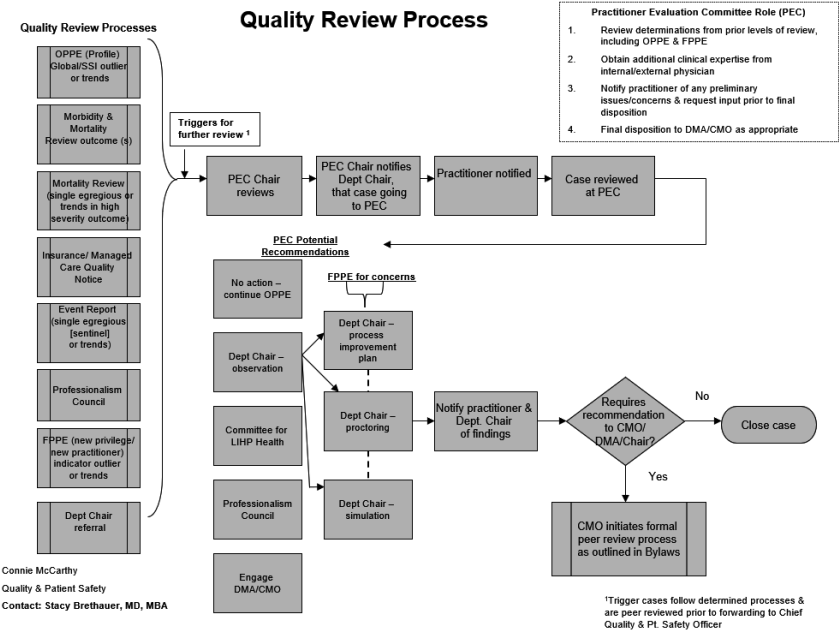
Board Endorsed FY26 Quality & Safety Priorities

- Mortality
- Patient Experience (Likelihood to Recommend)
- Central Line Associated Blood Stream Infection (CLABSI)
- Falls with Injury
- Serious Safety Event Rate
- Execute on HRO

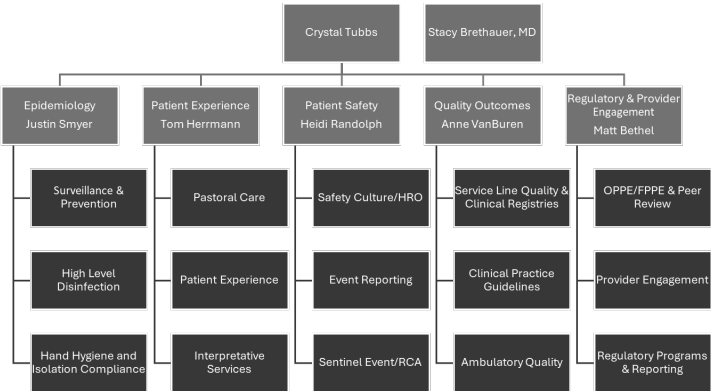
Appendix D: Quality Structure for The James Cancer Hospital & Solove Research Institute



Appendix E: Quality Review Process & Physician Performance Based Profile



Appendix F: Quality & Operations Improvement Organizational Chart



Approvals

MSAC: 5/16/2025

QPAC:

Wexner Medical Center Board:

The James Cancer Hospital Quality, Safety and Experience Council Plan

The Ohio State University
James Cancer Hospital and
Solove Research Institute
The Comprehensive Cancer Center
(The James and CCC)

Fiscal Year 2026
July 1, 2025, through June 30, 2026

The James



The James Cancer Hospital Quality, Safety and Experience Council Plan

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Attachment A: James Quality, Safety, and Experience Council Structure

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The James Cancer Hospital & Solove Research Institute

The James Quality, Safety and Experience Council Plan

Mission, Vision, and Values:

Mission: To eradicate cancer from individuals' lives by creating knowledge and integrating groundbreaking research with excellence in education and patient-centered care.

Vision: Creating a cancer-free world. One person, one discovery at a time.

Values: Excellence, Collaborating as One University, Integrity and Personal Accountability, Openness and Trust, Diversity in People, and Ideas, Change and Innovation, Simplicity in Our Work, Empathy, Compassion, and Leadership.

The James' model of patient-centered care is enhanced by the teaching and research programs. Patient service, both directly and indirectly, provides the foundation for teaching and research programs. This three-part mission and a staff dedicated to its fulfillment, distinguish The Arthur G. James Cancer Hospital and Richard J. Solove Research Institute as a Comprehensive Cancer Center and as one of the nation's premier cancer treatment centers.

Definition:

The James Quality, Safety, and Experience Council Plan (hereinafter The Plan) of The James Cancer Hospital and Solove Research Institute is our organization-wide approach to systematic assessment of process design and performance improvement targeting quality of care, patient safety, and patient experience. The Plan serves to provide direction for how clinical care and activities are to be designed to enrich patient outcomes, reduce harm, and improve value-added care and service to the cancer patient population.

Scope:

As a Prospective-Payment-System-exempt (PPS-exempt) hospital, which serves as the clinical care delivery-arm of an NCI-designated Comprehensive Cancer Center, The James has a unique opportunity to ensure value-added services and research expertise are provided to our patients, families, and the community – both nationally and internationally. The Plan encompasses all clinical services. Through close partnership with the Comprehensive Cancer Center, The Plan includes quality and patient safety goals for process improvements related to functions and processes involving both the Cancer Center and the hospital and ambulatory clinics/treatment areas.

With a close partnership within OSUWMC, The Plan provides oversight of the clinical contracted services and serves as a component of The Quality Assessment and Performance Improvement (QAPI) requirements from the Center for Medicaid and Medicare Services. These services are evaluated on an annual basis by The James Quality, Safety and Experience Council (Q-SEC), The James Quality Assessment and Performance Improvement (QAPI) Subcommittee, The James Medical Staff Administrative Committee (MSAC), and then forwarded each year to the Quality and Professional Affairs Committee (QPAC) as a part of the governing body, to ensure quality and safety of care is provided to all James' patients.

Purpose:

The purpose of the Plan is to provide guidance for the resources and processes available to ensure measurable improvements to patient care are occurring. The James recognizes the vital importance of creating and maintaining a safe environment for all patients, visitors, employees, and others within the organization to bring about personalized care through evidence-based medicine.

Objectives:

The central objectives of The James Quality, Safety and Experience Council Plan are to:

1. Provide guidance for monitoring and evaluation of effort(s) in clinical care to sustain high performance and improved outcomes for all patients.
2. Evaluate and recommend evidence-based system changes to improve patient care and safety by assessing, identifying, and reducing risk within the organization when undesirable patterns or trends in performance are identified, or when events requiring intensive analysis occur.
3. Assure overall program meets or exceeds accreditation standards, state, federal and licensure regulations.
4. Provide information for adherence to evidence-based practice guidelines to standardize clinical care and reduce practice variation.
5. Improve patient satisfaction and perception of treatment, care, and services by continuously identifying, evaluating, and improving performance based on needs, expectations, and satisfaction results.
6. Enhance the patient experience by providing safe and high-quality care at the best value.
7. Provide education to the governance, faculty and staff regarding quality management principles and processes for improving systems.
8. Provide appropriate levels of data transparency.
9. Assure quality and patient safety processes developed involve trans-disciplinary teamwork.
10. Provide process improvement initiatives to clinical systems to prevent or eliminate patient harm.

Structure for Quality Oversight:

The James Quality, Safety and Experience Council (Q-SEC) serves as the primary entity within The James to develop annual goals which are consistent with goals from the Health System. However, these goals are designed specifically for The James to target and focus on the cancer patient population and cancer research agendas.

Governance and Committees:

Governing Body

The Wexner Medical Center Board is the governing body, responsible to The Ohio State University Board of Trustees, for operation, oversight, and coordination of the Wexner Medical Center and The James Cancer Hospital. The Wexner Medical Center Board is composed of sixteen voting members, plus an additional group of university and medical center senior leaders who serve in ex-officio roles. The Quality & Professional Affairs Committee (QPAC) reports to the Wexner Medical Center Board and is responsible for, among other things, annually reviewing and evaluating The James Quality Safety, and Experience Council Plan, along with goals and process improvements made for improved patient safety and quality programs, QPAC is also responsible for granting clinical privileges for the credentialing of practitioners. The Board of Trustees and its committees meet throughout the year with focused agendas and presentations.

The Quality and Professional Affairs Committee (QPAC):

Composition:

This committee consists of no fewer than four voting members of the University Wexner Medical Center Board of Trustees. Members are appointed each year by the Chair of the OSUWMC Board, and one of these shall be assigned as the Chair of the committee. The CEO of the OSU Health System; CMO of the University Medical Center; CMO of The James; the Medical Director of Credentialing for The James; the Chief of Medical Staff of the University hospitals; the Chief of Medical Staff for The James; the Associate Dean of Graduate Medical Education; the Chief Quality and Patient Safety Officer; The Chief Nurse Executive for the OSU Health System; and the Chief Nursing Officer for The James serve in ex-officio, voting positions. Other members as may be appointed by The Chair of the OSUWMC board, in consultation with the Chair of Quality and Professional Affairs committee.

Function:

The Quality and Professional Affairs Committee (QPAC) shall be responsible for the following specific duties:

1. Reviewing and evaluating the Quality and Patient Safety programs of OSUWMC.
2. Overseeing all patient care activity in all facilities as a part of OSUWMC, including but not limited to, hospitals, clinics, ambulatory care, and physician office facilities.
3. Monitoring quality assurance performance in accordance with the standards set by OSUWMC.
4. Monitoring the achievement of accreditation and licensure requirements.
5. Reviewing and then recommending to the OSUWMC board changes to the medical staff bylaws and medical staff rules and regulations.
6. Reviewing and approving clinical privilege forms.
7. Reviewing and approving membership, as well as granting appropriate clinical privileges for the credentialing of practitioners, recommended for membership and clinical privileges by the hospital's Medical Staff Administrative Committees (MSAC).
8. Reviewing and approving membership and granting appropriate clinical privileges for the expedited credentialing of such practitioners that are eligible by satisfying the minimum approved criteria which is determined by the OSUWMC board and recommended for membership and clinical privileges to the MSACs of OSUWMC and The James.
9. Reviewing and approving the reinstatement of clinical privileges for a practitioner after a leave of absence from clinical practice.
10. Conducting Peer Review activities and recommending professional review actions to the OSUWMC board.
11. Reviewing and resolving any petitions by the medical staff for amendments to any rule, regulation or policy presented by the Chief of Staff on behalf of the medical staff pursuant to the medical staff bylaws and communicating such resolutions to the hospital's MSACs.
12. Such other responsibilities as assigned by the Chair of the OSUWMC Board.

The James Medical Staff Administrative Committee (MSAC)

Composition:

Refer to Medical Staff Bylaws and Rules and Regulations

Function:

Refer to Medical Staff Bylaws and Rules and Regulations

The organized medical staff, under the direction of the Director of Medical Affairs/Chief Medical Officer, implements The Plan throughout the clinical departments. The James MSAC reviews reports, and makes recommendations related to clinical quality management, patient safety, and service quality activities. This Committee has responsibility for evaluating the quality and appropriateness of clinical performance and service

quality of all individuals with clinical privileges. The James MSAC reviews corrective actions and provides authority within their realm of responsibility related to clinical quality management, patient safety, and service quality activities.

The James Quality, Safety and Experience Council (Q-SEC)

Composition:

The James Quality, Safety and Experience Council (Q-SEC) consists of representatives from Medical Staff, Administration, Advanced Practice Providers, Quality and Patient Safety, Clinical Outcomes, Analytics Center of Excellence, Nursing, Operations Improvement, and Patient Experience (Attachment A). Membership varies due to the fluency of ongoing quality initiatives and is subject to change. This Council reports to Executive Leadership and The James Medical Staff Administrative Committee (MSAC).

Function:

- Create a culture which promotes organizational learning and recognition of clinical quality (improving outcomes) and patient safety (reducing harm).
- Develop and sustain a culture of safety which strives to embed Just Culture principles in the follow-up of healthcare errors.
- Assure compliance with patient safety-related accreditation standards.
- Proactively identify risks to patient safety and creates a call-to-action to reduce risk with a focus on process and system improvement.
- Oversee education and risk reduction strategies as they relate to Sentinel Event Alerts from The Joint Commission.
- Evaluate standards of care and evidence-based practices and provide recommendations to improve clinical care and outcomes.
- Ensure actions are taken to improve performance whenever an undesirable pattern or trend is identified.
- Receive reports from disease specific committees that have a potential impact on the quality & safety in delivering patient care such as, but not limited to, Apheresis, BMT and Acute Leukemia, Cell Therapy, Lymphoma, Sickle Cell, Radiation Oncology, Translational Research, Patient Experience, Grievance Committee, Utilization Management Committee, and Infection Prevention Committees.
- Receive reports from Shared Services as they represent the metrics for quality and safety of care for the cancer patient population.
- Maintain follow-up on Shared Services action plans as necessary for improving metrics for quality and safety of care for the cancer patient population.

The James Quality, Safety and Experience Council QAPI Sub-Committee

Composition:

The James Quality, Safety and Experience QAPI Sub-Committee refers to the sub-committee functioning under the quality oversight structure of The James Quality, Safety and Experience Council (Q-SEC). The term QAPI refers to Quality Assessment and Performance Improvement. Membership on this sub-committee represents the major clinical and support services throughout the hospitals and/or clinical departments, as well as members from The James Quality, Safety and Experience Council. The QAPI Sub-committee will identify department barriers requiring escalation to The James Quality, Safety and Experience Council (Q-SEC), or as defined by The Plan.

Function:

Serves as the central resource and interdisciplinary work group for the continuous process of monitoring and evaluating the quality and services provided throughout a hospital, clinical department, and/or a group of similar clinical departments.

- Conducts department reviews for services provided by The James and services received from Wexner Medical Center, including process/patient safety metrics and PSRS events reviews.
- Receive and review reports from Shared Services as they present quality and safety of care metrics for the cancer patient population.
- Maintain continuous follow-up on Shared Services action plans for improving metrics for quality and safety of care for the cancer patient population.

The James Human Experience Strategic Steering Council

Composition:

The James Human Experience Strategic Steering Council consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Nursing, Nutrition Services, Environmental Services, Communications, and the Patient Experience Department. The James Human Experience Strategic Steering Council has a liaison member connected to The James Quality, Safety and Experience Council (Q-SEC).

Function:

- Create a culture and environment to deliver exceptional patient experience consistent with the mission, vision and values focused on service quality.
- Measure and review voice of the customer information in the form of patient satisfaction, comments, letters, and related measures.
- Recommend system goals and expectations for consistent patient experience.
- Provides guidance and oversight into patient experience improvement efforts ensuring effective deployment and accountability throughout the system.
- Communicates the work of the Council throughout the organization.

The James Utilization Management Committee (JUMC)

Composition:

The James Utilization Management Committee (JUMC) is co-chaired by the Associate Chief Medical Officer of the Care Continuum and the Director of Patient Care Resource Management. Committee membership will include James Physician Advisors and Emergency Department Physician Advisors, physician members of the medical staff, representatives from the Patient Care Resource Management (PCRM) Department, Administration, Finance, Advance Practice Professionals, Providers, Quality and Safety, Revenue Cycle and Compliance, Nursing and Service Line Administration. Other departments in The James will be invited to join meetings as necessary when opportunities have been identified for improvement and input. JUMC members will not include any individual who has a financial interest in any hospital in the health system. No JUMC member will be included in the review process for a case when that member has direct responsibility for patient care in the case being reviewed.

Function:

The JUMC has a responsibility to establish and implement The James Utilization Management Plan. The JUMC implements procedures for reviewing the efficient utilization of care and services, including, but not limited to admissions, continued stays, readmissions, over and under-utilization of services, the efficient scheduling of services, appropriate stewardship of hospital resources, access and throughput and timeliness of discharge planning. Any quality or utilization opportunities identified by the JUMC through utilization review activities are

acted upon by the committee or referred to the appropriate entity for resolution. The JUMC provides education on care and utilization issues to all health care professionals and medical staff at The James.

Practitioner Evaluation Committee (PEC)

Composition:

The Practitioner Evaluation Committee (PEC) is the medical staff peer review committee that provides leadership in overseeing the peer review process. The PEC is composed of the Chair of the Clinical Quality and Patient Safety Committee, medical staff, and advanced practice providers from various business units and clinical areas as appointed by the Chief Medical Officer (CMO) of the Health System and the Director of Medical Affairs/Chief Medical Officer.

Function:

- Provide leadership for the provider clinical quality improvement processes.
- Provide clinical expertise to the practitioner peer review process by thorough and timely review of clinical care and/or patient safety issues referred to the PEC.
- Provide advice and support to the Director of Medical Affairs/CMO at The James regarding action plans to improve the quality and safety of clinical care.
- Provide input to the Director for Advanced Practice Providers when there is an APP Peer Review completed.
- Develop follow up plans to ensure action is successful in improving quality and patient safety.

Health System Information Systems Steering Team (HSISST)

Composition:

The HSISST is a multidisciplinary team chaired by the Chief Medical Information Officer of OSUWMC.

Function:

The HSISST oversees information technology for both The James and OSUWMC. The team is responsible for oversight of information technology and processes currently in place, as well as reviewing replacement and/or introduction of new systems, and related policies/procedures. Individual team members are charged with responsibility to communicate and receive input from their various communities of interest on relevant topics discussed at committee meetings and other forums.

Sentinel Event Committee and Sentinel Event Determination Group (SEDG):

Composition:

The Sentinel Event Team includes membership from both The James and the OSUWMC. Membership from The James includes: the Executive Director Medical Affairs/Chief Medical Officer, the Quality Medical Director for The James, the Quality Medical Director for Perioperative services, and the Director of Quality & Patient Safety and Nursing Quality Director. Members from the Medical Center include: an Administrator, Chief Medical Officer, Chief Quality Officer, Associate Chief Quality and Patient Safety Officer, Associate Executive Director of Quality & Safety, a member of the Physician Executive Council, Quality and Operations Improvement, and Medication Safety Officer. Members from Risk Management are also included.

The Sentinel Event Determination Group (SEDG) is a sub-group of the Sentinel Event Team which is comprised of quality leaders from The James and OSUWMC and are chaired by the Health System Chief Quality Officer. The SEDG membership includes the CQO, Associate CQO, Director of Risk Management, James Quality Medical Director, Directors of Quality & Patient Safety and Nursing Quality Directors of respective business units. The SEDG meets weekly to review sentinel events and significant events. Once an event is determined to be a

significant or sentinel event, SEDG members assign a Root Cause Analysis (RCA) Team who includes Executive Sponsor, RCA Workgroup Leader, and RCA Workgroup Facilitator. The James Director of Quality and Patient Safety serves as the executive sponsor for the RCA, and receives the input from SEDG, collaborates with facilitators and physician leaders to finalize the team membership, initiate team charters, and ensure that team meetings and action plans are completed in accordance with requirements to satisfy regulatory compliance.

Function:

Approve and make recommendations on sentinel event determinations and teams, and action plans as received from the Sentinel Event Determination Group. Results of a sentinel event, significant event or near-miss information are considered confidential according to Ohio Revised Code Section 2305.25 and are not externally reported or released.

The James Continuous Quality Improvement Teams

Composition:

For the purposes of this plan, Quality Improvement Teams are considered as ad-hoc committees, disease specific workgroups, performance improvement teams, taskforces, etc., that function under the quality oversight structure and are time-limited in nature, as well as the new Health System groups that will report up to Q-SEC (an example is the Hospital Acquired Infection group). Continuous Quality Improvement teams are comprised of owners or participants in the process under study. The process may be clinical or non-clinical. The members fill the following roles: team leader, Process Engineer or facilitator, physician advisor, administrative sponsor, and technical experts.

Function:

Improve current practice or processes using traditional continuous process improvement tools such as rapid cycle improvements, LEAN principles and DMAIC/DMADV/PDCA.

Roles and Responsibilities

The management of clinical quality, patient safety and excellence are responsibilities of all faculty, staff, and volunteers.

Chief Executive Officer (CEO)

The CEO for The James reports to the OSUWMC Chief Executive Officer and is responsible for providing leadership and oversight for the overall functions within The James. The CEO has authority over the James Quality, Safety and Experience Council Plan and collaborates with all employees and medical staff to ensure safe care is delivered to our patients to achieve quality outcomes for each encounter.

Director of Medical Affairs/Chief Medical Officer (CMO)

The Director of Medical Affairs is the Chief Medical Officer for The James Cancer Hospital who provides leadership and strategic direction for the faculty, medical staff, and other providers to ensure the delivery of high quality, cost-effective health care consistent with The James mission. The CMO has oversight of the medical staff's responsibilities for progress towards goals and process improvements. The CMO is a member of The James Medical Staff Administrative Committee (MSAC) and is the medical director for provider credentialing within The James.

Quality Medical Director

The James Quality Medical Director reports to the Chief Medical Officer and is responsible for assisting the Quality Department with medical review for all patient safety and quality outcomes. This physician also works

collaboratively with the health system quality medical directors and the Chief Quality and Patient Safety Officer in determining sentinel and significant events, as well as reporting events, when necessary, through the peer review process. The Quality Medical Director is a member of both the James Quality, Safety and Experience Council and a member of The James Medical Staff Administrative Committee (MSAC).

Medical Director

Each business unit Medical Director is responsible for reviewing the recommendations from The Plan and implementing quality goals and plans, along with maintaining oversight in their clinical areas.

Medical Staff

Medical staff members are responsible for achieving the highest standard of care and services within their scope of practice. As a requirement for membership on the medical staff, members are expected to and must participate in the functions and expectations set forth in The Plan. In addition, members serve on quality management/patient safety committees and/or continuous quality improvement teams throughout the year.

Executive Director, Clinical Services

The James Executive Director for Clinical Services provides leadership and oversight of The Plan and works collaboratively with the OSUWMC Quality Leadership Council (QLC) initiatives. The Executive Director is integral to the establishment and implementation of The Plan, organization-wide quality goals, and performance improvement achievements.

Chief Nursing Officer

The James CNO reports to the Executive Director of Clinical Services to work and provide senior leadership within the nursing structure to influence the nursing process and practices. The CNO ensures the overall James Quality, Safety and Experience Council Plan is utilized to assist with the development, implementation, and initiation of The James Nursing Strategic Plan. The CNO has oversight of the nursing shared governance model and the nursing leadership which establishes and implements annual nursing-sensitive goals.

Nursing Leadership

The Chief Nursing Officer, as well as the Associate Chief Nursing Officer(s), and Directors of Nursing are responsible to implement, maintain oversight, and incorporate opportunities and goals identified in collaboration with the OSUWMC- QLC Committee.

Nursing directors and managers are to implement recommendations or participate in action plans for individual employees or the department. They provide input regarding committee memberships, and serve as participants in the departmental, hospital and Health System quality/patient safety committees. Clinical Nurse Specialists (CNS) support quality improvement initiatives by providing leadership in the application and use of evidence-based practice. The James nursing staff is responsible for providing the highest standard of care and services within their scope of practice.

Quality and Patient Safety Leadership

The Sr. Director of Quality and Patient Safety, Director for Quality and Patient Safety, and the Director of Clinical Outcomes collaborate directly with the executive leaders as well as with the directors and managers of all areas to evaluate, plan and improve on patient safety and quality outcomes. In addition, the Directors have leadership oversight of quality improvement goals, patient safety improvements, and facilitates team(s) charged for implementation of annual hospital level goals.

The James Quality and Patient Safety Department

The primary responsibilities of The James Quality and Patient Safety Department are to:

- Track and trend quality events, including Sentinel Events.
- Coordinate and facilitate clinical quality management for improved outcomes.
- Monitor patient safety incidents and work with the management teams for elimination or reduction of risk/harm to patients.
- Improve patient care services by assuring the voice of the patient is heard throughout The James.
- Assist managers with evaluations of situations by utilizing Just Culture algorithm and training.

While primary responsibility for the implementation and evaluation of clinical quality, patient safety, and service activities resides within each department/program, The James Quality and Patient Safety staff also serve as internal consultants for the development, evaluation, and on-going monitoring of those activities. The James Quality and Patient Safety Department, James Quality and Clinical Outcomes team including The James Operations Improvement staff, and the Analytics Center of Excellence (ACE) staff, maintain human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

Hospital Management Team

Each associate executive director, all service line administrators, department directors and managers are responsible to ensure the standards of care and service are maintained or exceeded within their department(s), and are responsible for implementing, monitoring, and evaluating activities in their areas and assisting clinical staff members in developing appropriate mechanisms for data collection and evaluation. Department directors, managers and/or assistant managers participate in action plans for individual employees or the department. All department directors/managers provide input regarding committee memberships and serve as participants on quality management/patient safety committees and/or quality improvement teams. Managers and staff are engaged through formal and informal processes related to quality improvement and clinical patient safety efforts, including but not limited to:

- Suggesting process improvements and reporting medical/health care events and near misses.
- Implementing evidence-based practices.
- Monitoring and responding to activities and processes, such as patient complaints and patient satisfaction.
- Participating in audits, observations and peer-to-peer review and feedback; and,
- Participating in efforts to improve patient outcomes and enhance patient safety.

The James Patient Experience/Guest Services Department

The primary responsibility of The James Patient Experience and Guest Services Department is to coordinate and facilitate a service-oriented approach to providing healthcare. This is accomplished through both strategic program developments and managing operational functions. The Patient Experience staff serves as an internal consultant for the development and evaluation of service-quality activities. The Department maintains human and technical resources for interpreter services, information desks, patient relations, team facilitation, and use of performance improvement tools, data collection, statistical analysis, and reporting. The Department also oversees the Patient/Family Advisor Program consisting of current and former patients, or their primary caregivers, who have had experiences at any James facility. These individuals are volunteers who serve on committees and workgroups, as Advisory Council members, complete public speaking engagements, and review

materials. Lastly, the department supports system-wide Volunteer efforts, aligning credentialed adult and student volunteers with service opportunities within the medical center.

Philosophy of Patient Care Services

The James provides innovative and patient-focused comprehensive cancer care and services which include the following:

- A mission statement that outlines the relationship between patient care, research, and teaching.
- Long-range, strategic planning conducted by leadership to determine the services to be provided.
- Establishing annual goals and objectives consistent with the hospital mission, and which are based on a collaborative assessment of patient/family and the community's needs.
- Provision of services appropriate to meet the needs of patients.
- Ongoing evaluation of services provided such as: performance assessment and improvement activities, budgeting, and staffing plans.
- Integration of services through the following: continuous quality improvement teams; clinical interdisciplinary quality programs; performance assessment and improvement activities; communications through management operations meetings, nursing shared governance structure, Medical Staff Administrative Committee, administrative staff meetings; participation in OSUWMC and OSU governance structures, special forums; and leadership and employee education/development.
- Maintaining competent patient care leadership and staff by providing education and ongoing competency reviews which are focused towards identified patient care needs.
- Respect for each patient's rights and decisions is an essential component in the planning and provision of care.
- Utilizing the Relationship Based Care principles which encompasses building a caring and healing environment for patients, families and staff by developing caring and therapeutic relationships with the patients/families, colleagues, self and the larger community.
- Embracing the principles of a Just Culture and honoring a Culture of Safety for all team members, faculty, and staff.

The IOM *10 Rules for Redesign* are guiding principles for the provision of safe and quality care. These are:

1. ***Care is based on continuous caring and healing relationships.*** Patients should receive care whenever they need it and, in many forms, not just face-to-face visits. This implies that the health care system must be always responsive, and access to care should be provided over the Internet, by telephone, and by other means in addition to in-person visits.
2. ***Care is customized according to patient needs and values.*** The system should be designed to meet the most common types of needs but should have the capability to respond to individual patient choices and preferences.
3. ***The patient is the source of control.*** Patients should be given the necessary information and the opportunity to exercise the degree of control they choose over health care decisions that affect them. The system should be able to accommodate differences in patient preferences and encourage shared decision making.
4. ***Knowledge is shared and information flows freely.*** Patients should have unfettered access to their own medical information and clinical knowledge. Clinicians and patients should communicate effectively and share information.

5. **Decision making is evidence-based.** Patients should receive care based on the best available scientific knowledge. Care should not vary illogically from clinician to clinician or from place to place.
6. **Safety is a system property.** Patients should be safe from injury caused by the care system. Reducing risk and ensuring safety require greater attention to systems that help prevent and mitigate errors.
7. **Transparency is necessary.** The system should make available to patients and their family's information that enables them to make informed decisions when selecting a health plan, hospital, or clinical practice, or when choosing among alternative treatments. This should include information describing the system's performance on safety, evidence-based practice, and patient satisfaction.
8. **Needs are anticipated.** The system should anticipate patient needs, rather than simply react to events.
9. **Waste is continuously decreased.** The system should not waste resources or patient time.
10. **Cooperation among clinicians is a priority.** Clinicians and institutions should actively collaborate and communicate to ensure an appropriate exchange of information and coordination of care.

Following these principles, The James has instituted the following guidelines as the approach to quality, safety, and experience services:

- **Customer Focus:** Knowledge and understanding of internal and external customer needs and expectations.
- **Leadership & Governance:** Dedication to continuous improvement instilled by leadership and the Board.
- **Education:** Ongoing development and implementation of curricula for quality, safety, and reliability for all faculty, staff, volunteers, and students.
- **Involvement:** All team members must have mutual respect for the dignity, knowledge, and contributions of others. Everyone is engaged in the improvement of processes where they work.
- **Data-driven decision making:** Decisions for quality, safety, and reliability are based on the knowledge derived from data.
- **Continuous Process Improvement:** Analysis of processes for design, redesign and to reduce variations are accomplished by use of an approach using science and LEAN/DMAIC/PDCA. Measures and improvements are ongoing.
- **Just Culture:** Our framework of quality, safety, and reliability services are based on a culture that is open, honest, transparent, collegial, team-oriented, accountable, and non-punitive when system failures have occurred.
- **Personalized Health Care:** Begins with developing a therapeutic relationship with the patient and family and incorporating evidence-based medicine which considers the patient's health status, genetics, cultural tradition, personal preferences, and values family and lifestyle situations.
- **Reducing Health Disparities:** Ongoing commitment to make health care disparities an organizational quality and safety priority by assessing, identifying trends in data, developing, and implementing action plans, and communicating progress to key stakeholders.

Consistent Level of Care

Certain elements of The Plan help to ensure patient care standards for the same or similar services are comparable in all areas. These elements include, but are not limited to:

- Policies and procedures and services provided are not payer driven and are standardized to promote high quality and safe care.
- Application of a single standard for physician credentialing.
- Cancer care delivery is based upon nationally recognized standards of care from the National Comprehensive Cancer Network (NCCN).

- Use of monitoring tools to measure processes in areas of the Health System and The James.

Performance Transparency

The James Medical and Administrative leadership have a long-standing and strong commitment to transparency of performance as it relates to clinical quality, safety, and service performance.

Performance data is shared internally with faculty and staff through a variety of methods. Providing data internally assists faculty and staff in obtaining real-time performance results and enables faculty and staff to use those results to drive change and improve performance. Transparency of the information provided is within the limits of the Ohio law that protects attorney–client privilege, quality inquiries and reviews, as well as peer review. Current quality data is shared on The James internal intranet site. The Analytics Center of Excellence team works with many departments and partners with other reporting groups to build and enhance quality and safety dashboards, as well as display other important metrics to build on the equation of value for our patients.

Confidentiality

Confidentiality is essential to the quality management and patient safety process. All records and proceedings are confidential and are to be marked as such. Written reports, data, and meeting minutes are to be maintained in secure files. Access to these records is limited to appropriate administrative personnel and others, as deemed appropriate by legal counsel. As a condition of staff privilege and peer review, it is agreed that no record, document, or proceeding of this program is to be presented in any hearing, claim for damages, or any legal cause of action. This information is to be treated for all legal purposes as privileged information, keeping aligned with Ohio Revised Code 121.22 (G)-(5) and Ohio Revised Code 2305.251.

Conflict of Interest

A person is professionally involved if they are responsible for patient care decision making, either as a primary or consulting professional, and/or have a financial interest (as determined by legal counsel) in a case under review. Persons who are professionally involved in the care under review are to refrain from participation except as requested by the appropriate administrative or medical leader. During peer review evaluations, deliberations, or voting, the chairperson will take steps to avoid the presence of any person, including committee members, professionally involved in the care under review. The chairperson of the committee should resolve all questions concerning whether a person is professionally involved. In cases where a committee member is professionally involved, the respective chairperson may appoint a replacement member to the committee. Participants and committee members are encouraged to recognize and disclose, as appropriate, a personal interest or relationship they may have concerning any action under peer review.

Priority Criteria

The following criteria are used to prioritize clinical value enhancement initiatives and continuous quality improvement opportunities, to ensure the appropriate allocation of resources.

1. Ties to strategic initiatives consistent with the hospital's mission, vision, and values.
2. Reflects areas for improvement in patient safety, appropriateness, quality, and/or medical necessity of patient care (e.g., high-risk, serious events, problem-prone).
3. Has a considerable impact on our community's health status (e.g., morbidity/mortality rate).
4. Address patient experience issues (e.g., access, communication, discharge).
5. Reflects divergence from benchmarks.
6. Addresses variation in practice.
7. Required by an external organization.

8. Represents significant cost/economic implications (e.g., high volume).

Determining Priorities

The James has a process in place to identify and direct resources toward quality management, patient safety, and service excellence activities. The prioritization criteria are reevaluated annually according to the mission and strategic plan. The leaders set performance improvement priorities and reevaluate annually in response to unusual or urgent events. Whenever possible, NCI, ADCC, or other appropriate cancer specific benchmarks are utilized to compare performance metrics for The James, to assist with determination of priorities each year to improve performance.

Design and Evaluation of New Processes

New processes are designed and evaluated according to the organizational mission, vision, values, and priorities, and are consistent with sound business practices.

The design or re-design of a process may be initiated by:

- Surveillance data indicating undesirable variance.
- Patients, staff, or payers perceived need to change a process.
- Information from within the organization and from other organizations about potential risks to patient safety, including the occurrence of sentinel events.
- Review and assessment of data and/or review of available literature to confirm the need and/or by evidence-based practices.

Data Measurement and Assessment

Determination of Needs

Data needs are determined according to improvement priorities and surveillance needs. The James Quality and Patient Safety departments and Analytics Center of Excellence collect and report data for monitoring important processes and outcomes related to patient care. In addition, each department is responsible for identifying quality indicators specific to their area of service. The quality management committee of each area is responsible for monitoring and assessment of the data collected. Quality and safety monitoring is on-going and reviewed by The James Quality, Safety and Experience Council (Q-SEC) annually.

External Reporting Requirements

The reporting requirements related to quality, safety, and service. These include regulatory, governmental, payer, and specialty certification organizations.

Collection of Data

Data, including patient demographic and diagnosis, are systematically collected by various mechanisms including but not limited to:

- Administrative and clinical databases
- Retrospective and concurrent medical record review
- Reporting systems (e.g., patient safety and patient satisfaction)
- Surveys (e.g., patients, families, and staff)
- External (e.g., Vizient, CDC-NHSN, NDNQI, CMS, or other vendors)

Assessment of Data

Statistical methods are used to identify undesirable variance, trends, and opportunities for improvement. The data are compared to the previous performance, external benchmarks, and accepted standards of care to establish goals and targets. Annual goals are established to evaluate performance.

Surveillance System

The James systematically collects and assesses data in different areas to monitor and evaluate the quality and safety of services, including measures related to accreditation and other requirements. Data collection also functions as a surveillance system for timely identification of undesired variations or trends in quality indicators.

The James Key Performance Indicator Scorecard

Patient Safety is the highest priority for all faculty and staff at The James. As a crucial element to caring for our patients, there is an on-going process of monitoring safety events and any untoward trends from patient care. The James Key Performance Indicator Scorecard (hereinafter The Scorecard) is a portal consisting of various dashboards with key performance indicators related to events considered potentially preventable, and which cause a level of harm to the patient. The Scorecard covers areas such as mortality, falls, hospital acquired infections, hospital-acquired pressure ulcers, as well as additional indicators such as patient satisfaction, readmissions, and length of stay.

This information is shared in various quality forums with the medical staff, clinicians, James's administration, and senior staff, and The Quality and Professional Affairs Committee (QPAC) at the Wexner Medical Board. The indicators to be included in The Scorecard are reviewed each year to represent the priorities of the Quality and Patient Safety program. The Patient Safety program evaluates opportunities each month at The James Quality, Safety and Experience Council (Q-SEC), as well as monthly at the Medical Staff Administrative Committee (MSAC). Safety goals are reviewed annually and adjusted as necessary by the use of event trending, regulatory changes, needs identified from the culture of safety surveys and/or national cancer benchmarks.

The James Patient Satisfaction Dashboard

The Patient Satisfaction dashboard is a set of patient experience indicators gathered from surveys after discharge or visit to a system-based clinic or hospital. The dashboard displays performance in areas such as physician communication, nursing responsiveness, admitting, and discharging efficiencies and quality in addition to other service categories. The information from this dashboard is shared in forums with staff, clinicians, administration, including the Board. Performances on these indicators serve as annual goals for leaders and members of clinical and patient experience teams.

Quality and Patient Safety Staff Education

Education is identified as a key principle for providing safe, high-quality care, and excellent service for our patients. There is on-going development and implementation of a curriculum for quality, safety and service for all staff, employees, clinicians, patients, and students. There are a variety of forums and venues utilized to enhance the education surrounding quality and patient safety including, but not limited to:

- Online videos
- Newsletters
- Classroom forums
- Simulation training
- Computerized Based Learning Modules (e-learning/CBLs)

- Curriculum Development within College of Medicine
- Websites (internal SharePoint and external OSUMC)
- Patient Safety/Quality Lesson's Learned and Patient Safety Alerts

The James Benchmark Data

Both internal and external benchmarking provide value when evaluating performance.

Internal Benchmarking

Internal benchmarking uses processes and data to compare The James performance to itself over time and provides a gauge of improvement strategies within the organization.

External Benchmarking

The James participates in various database systems and focused benchmarking projects to compare performance with that of cancer hospital - peer institutions. The James Cancer Hospital utilizes and joins other comprehensive cancer centers for benchmarking such as C4QI (Comprehensive Cancer Center Consortium for Quality Improvement) and ADCC (Alliance of Dedicated Cancer Centers), National Cancer Institute (NCI). Also, The James participates in national benchmarking efforts through the following, but not limited to, The Vizient's Clinical Database (CDB), The US News and World Report, Ohio Department of Health, Press Ganey, National Database of Nursing Quality Indicators (NDNQI), Centers for Disease Control – National Healthcare Safety Network (NHSN), The American College of Surgeons (ACoS) and others.

Performance Based Provider Quality & Credentialing

Performance based credentialing ensures processes that assist with promoting the delivery of quality and safe care by physicians and advanced practice licensed health care providers. Both Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE) occur. Focused Professional Practice Evaluation (FPPE) is utilized on three occasions: initial appointment, when a Privileged Practitioner requests a new privilege, and for cause when questions arise regarding the practitioner's ability to provide safe, high quality patient care. Ongoing Professional Practice Evaluation (OPPE) is performed on an ongoing basis (every 6 months).

Profiling Process:

- Data gathering from multiple sources.
- Report generation and indicator analysis.
- Profile review meetings with department chairs.
- Discussion at Credentialing Committee
- Final recommendation & approval:
- Medical Staff Administrative Committees
- Medical Director
- Hospital Board

Service-Specific Indicators

Indicators are used to profile each physician's performance. The results are included in a physician profile, which is reviewed with the department chair as part of the credentialing process. The definition of service/department-specific indicators is the responsibility of the director/chair of each unit. The performance of these indicators is used as evidence of competence to grant privileges in the re-appointment process. The clinical departments/divisions are required to collect the performance information related to these indicators and report that information to the Department of Quality and Operations Improvement.

The Medical Staff Evaluation is multi-purpose:

- To appoint quality medical staff.
- To monitor and evaluate medical staff performance.
- To integrate medical staff performance data into the reappointment process and create the foundation for high quality care.
- To provide periodic feedback and inform clinical department chairs of the comparative performance of individual medical staff.
- To identify opportunities for improving quality of care.

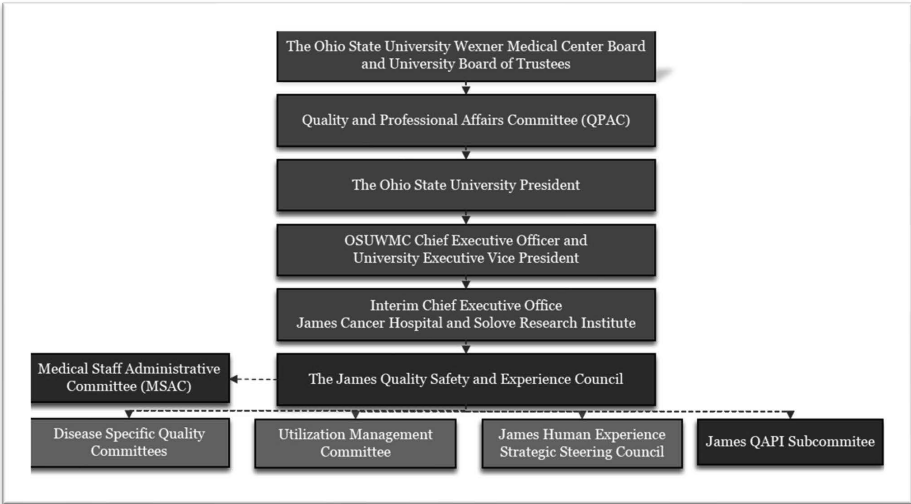
Annual and Ongoing Evaluations

The James Quality Safety, and Experience Council Plan is approved annually by The James Quality, Safety and Experience Council (Q-SEC), the Medical Staff and Committee (MSAC), The Quality and Professional Affairs Committee (QPAC), and the Wexner Medical Center Board.

Enterprise-Wide Alignment and Strategic Plan

The James Quality, Safety and Experience Plan has been developed in alignment with the OSUWMC Enterprise-Wide Long Range Quality Plan (Attachment B). The Long-Range Quality Plan focuses on the foundations and three pillars of patient centered care that have been deemed priorities by the OSUWMC Quality Leadership Council (QLC).

Attachment A: The James Quality, Safety and Experience Council Structure



Attachment B: Long Range Quality Plan

Long-Range Quality Plan

World-class care for every person, every time

Demonstrated by a decrease in preventable harm, as indicated by the serious safety event rate.

Exceptional Care

Safe

Industry-leading safety performance

Supporting journey to zero harm (as evidenced by a reduction in preventable harm as measured by the serious safety event rate)

Patient-centered

Exceptional experience for patients and families

As evidenced by Likelihood to Recommend scores in the top decile

Effective

Excellence in clinical outcomes

As evidenced by Vizient Q&A performance in the top decile

High reliability is the foundation of everything we do

Performance-improvement program rooted in standardized methodology

Leverage Analytics Center of Excellence to drive performance-improvement around targets and outcomes

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ATTACHMENT XX



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Approvals:

MSAC- 5/14/2025

QPAC- 6/24/2025

Wexner Medical Center Board –

TITLE: THE OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER (INCLUDING UNIVERSITY HOSPITAL, RICHARD M. ROSS HEART HOSPITAL, BRAIN AND SPINE HOSPITAL, DODD REHABILITATION HOSPITAL, HARDING HOSPITAL, AND EAST HOSPITAL) HOSPITAL PLAN FOR PROVIDING PATIENT CARE

University Hospital, Richard M. Ross Heart Hospital, Brain and Spine Hospital, Dodd Rehabilitation Hospital, Harding Hospital, and East Hospital (hereafter referred to as the Hospitals) plan for patient care services describes the integration of departments and personnel who provide care and services to patients based on the Hospitals' mission, vision, shared values and goals. The plan encompasses both inpatient and outpatient services of the Hospitals.

OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER (OSUWMC) MISSION, VISION AND VALUES

Mission Statement:

To improve health in Ohio and across the world through innovations and transformation in research, education, patient care, and community engagement.

Vision Statement:

By pushing the boundaries of discovery and knowledge, we will solve significant health problems and deliver unparalleled care.

Values:

Inclusiveness, Determination, Empathy, Sincerity, Ownership and Innovation

The mission, vision and values statements, developed by our staff members, physicians, governing body members and administration team members, complements and reflects the unique role the hospitals fulfill within The Ohio State University.

PHILOSOPHY OF PATIENT CARE SERVICES

In collaboration with the community, the Hospitals will provide innovative, personalized, and person centered care through:

- a) A mission statement that outlines the synergistic relationship between patient care, research, and education;
- b) Long-range strategic planning with medical center leadership to determine the services to be provided; including, but not limited to essential services as well as special areas of concentration;
- c) Establishing annual goals and objectives consistent with the mission, which are based on a collaborative assessment of needs;
- d) Planning and design conducted by medical center leadership, which involves the potential communities to be served;
- e) Provision of services that are appropriate to the scope and level required by the patients to be served based on assessment of need;
- f) Ongoing evaluation of services provided through formalized processes; e.g., performance assessment and improvement activities, budgeting and staffing plans;
- g) Integration of services through the following mechanisms: continuous quality improvement teams; clinical interdisciplinary quality programs; performance assessment and improvement activities; communications through management team meetings, administrative staff meetings, special forums, and leadership and employee education/development;
- h) Maintaining competent patient care leadership and staff by providing education designed to meet identified needs;

- i) Respect for each patient's rights and decisions as an essential component in the planning and provision of care; and,
- j) Staff member behaviors that reflect a philosophical foundation based on the values of The Ohio State University Wexner Medical Center.

THE HOSPITAL LEADERSHIP

The Hospital leadership is defined as the governing board, CEO/Executive Vice President, administrative staff, physicians and nurses in appointed or elected leadership positions. The Hospital leadership is responsible for the framework of planning health care services provided by the organization based on the hospital's mission and for developing and implementing an effective planning process that allows for defining timely and clear goals.

The planning process includes a collaborative assessment of our customer and community needs, defining a long range strategic plan, developing operational plans, establishing annual operating budgets and monitoring compliance, establishing annual capital budgets, monitoring and establishing resource allocation and policies, and ongoing evaluation of the plans' implementation and success. The planning process addresses both patient care functions (e.g. patient rights, patient assessment, patient care, patient and family education, coordination of care, and discharge planning) and organizational support functions (e.g. information management, human resource management, infection control, quality and safety, the environment of care, and the improvement of organizational performance).

The Hospital leadership works collaboratively with all operational and clinical managers and leaders to ensure integration in the planning, evaluation, and communication processes within and between departments to enhance patient care services and support. This occurs informally on a daily basis and formally via interdisciplinary leadership meetings. The leadership involves department heads in evaluating, planning and recommending annual budget expenses and capital objectives, based on the expected resource needs of their departments. Department leaders are held accountable for managing and justifying their budgets and resource utilization. This includes, but is not limited to identifying, investigating and budgeting for new technologies and resources which are expected to improve the delivery of patient care and services.

Other leadership responsibilities include:

- a) Communication of the organization's mission, vision, goals, objectives and strategic plans across the organization;
- b) Ensuring appropriate and competent direction, management and leadership of all services and/or departments;
- c) Collaborating with community leaders and organizations to ensure services are designed to be appropriate for the scope and level of care required by the patients and communities served;
- d) Supporting the patient's continuum of care by integrating systems and services to improve efficiencies and care from the patient's viewpoint and diversity, equity and inclusion;
- e) Ensuring staffing resources are available to appropriately and effectively meet the needs of the patients served and to provide a comparable level of care to patients in all areas where patient care is provided;
- f) Ensuring the provision of a uniform standard of patient care throughout the organization;
- g) Providing appropriate job enrichment, employee development and continuing education opportunities which serve to promote retention of staff and to foster excellence in care delivery and support services;
- h) Establishing standards of care that all patients can expect and which can be monitored through the hospital's quality assurance and performance improvement (QAPI) process;

- i) Approving the organizational plan to prioritize areas for improvement, developing mechanisms to provide appropriate follow up actions and/or reprioritizing in response to untoward and unexpected events;
- j) Implementing an effective and continuous program to improve patient safety;
- k) Appointing appropriate committees, task forces, and other forums to ensure interdepartmental collaboration on issues of mutual concerns and requiring interdisciplinary input; and,
- l) Supporting patient rights and ethical considerations.

ROLE OF THE CHIEF NURSING OFFICER

The Chief Nursing Officer is responsible for the practice of nursing by ensuring consistency in the standard of nursing practice across the clinical settings. The CNO supports and facilitates an interdisciplinary team approach to the overall delivery of care to patients, families, and the community. This includes creating an environment in which collaboration is valued and excellence in clinical care, education, and research is promoted and achieved. The CNO leads quality, safety, and innovation initiatives in partnership with the Hospital Executive Directors.

The CNO is responsible for developing and driving the nursing strategic plan to deliver excellent patient care. The role will include responsibility for nursing performance improvement, program management, business operations, budgets, resource utilization, financial stewardship and maintenance of the professional contracts with the Ohio State University Nursing Organization and the International Association of Machinists and Aerospace Workers. The CNO ensures the vision, strategic direction, and the advancement of the profession of nursing at OSUWMC.

ROLE OF THE ASSOCIATE CHIEF NURSING OFFICER

The Associate Chief Nursing Officer (ACNO) is a member of the Nursing Executive Leadership team. The ACNO works collaboratively with both the CNO and Executive Director of their business entities. The ACNO has the authority and responsibility for directing the activities related to the provision of nursing care in those departments defined as providing nursing care to patients.

The ACNO is responsible to plan, develop, implement, and oversee programs and projects designed to evaluate and improve clinical quality, safety, resource utilization and operations in all areas staffed by nurses. The role includes implementation of patient care services strategies to support efficiency, clinical effectiveness, clinical operations and quality improvement with interdisciplinary team members. The ACNO works with teams to develop projects, programs and implement system changes that promote care coordination across the health care continuum.

FUNCTIONS OF NURSING LEADERSHIP

The Chief Nursing Officer and ACNOs ensure the following functions are addressed:

- a) Evaluating patient care programs, policies, and procedures describing how patients' nursing care needs are assessed, evaluated and met throughout the organization;
- b) Developing and implementing the plan for the provision of patient care through evidence-based practice and nursing research;
- c) Participating with leaders from the governing body, management, medical staff and clinical areas in organizational decision-making, strategic planning and in planning and conducting performance improvement activities throughout the organization;
- d) Implementing an effective, ongoing program to assess, measure and improve the quality of nursing care delivered to patients; developing, approving, and implementing standards of nursing practice,

- standards of patient care, and patient care policies and procedures that include current research/literature findings that are evidence based;
- e) Participating with organizational leaders to ensure that resources are allocated to provide a sufficient number of qualified nursing staff to provide patient care;
 - f) Ensuring that nursing services are available to patients on a continuous, timely basis.

DEFINITION OF PATIENT SERVICES, PATIENT CARE AND PATIENT SUPPORT

Patient Services are limited to those departments that have direct contact with patients. Patient services occur through organized and systematic throughput processes designed to ensure the delivery of appropriate, safe, effective and timely care and treatment. The patient throughput process includes those activities designed to coordinate patient care before admission, during the admission process, in the hospital, before discharge and at discharge. This process includes:

- **Access in:** emergency process, admission decision, transfer or admission process, registration and information gathering, placement;
- **Treatment and evaluation:** full scope of services; and,
- **Access out:** discharge decision, patient/family teaching and counseling, arrangements for continuing care and discharge.

Patient Care encompasses the recognition of disease and health, patient teaching, patient advocacy, spirituality and research. The full scope of patient care is provided by professionals who are charged with the additional functions of patient assessment and planning patient care based on findings from the assessment. Providing patient services and the delivery of patient care requires specialized knowledge, judgment, and skill derived from the principles of biological, chemical, physical, behavioral, psychosocial and medical sciences. As such, patient care and services are planned, coordinated, provided, delegated, and supervised by professional health care providers who recognize the unique physical, emotional and spiritual (body, mind and spirit) needs of each person. Under the auspices of the Hospitals, medical staff, registered nurses and allied health care professionals function collaboratively as part of an interdisciplinary, personalized patient-focused care team to achieve positive patient outcomes.

Competency for patient caregivers is determined in orientation and at least annually through performance evaluations and other department specific assessment processes. Credentialed providers direct all medical aspects of patient care as delineated through the clinical privileging process and in accordance with the Medical Staff By-Laws. Registered nurses support the medical aspect of care by directing, coordinating, and providing nursing care consistent with statutory requirements and according to American Nurses Association Nursing Scope and Standards of Practice book as well as hospital-wide policies and procedures. Allied health care professionals provide patient care and services in keeping with their licensure requirements and in collaboration with physicians and registered nurses. Unlicensed staff may provide aspects of patient care or services at the direction of and under the supervision of licensed professionals.

Nursing Care (nursing practice) is defined as competently providing all aspects of the nursing process in accordance with Chapter 4723 of the Ohio Revised Code (ORC), which is the law regulating the Practice of Nursing in Ohio. The law gives the Ohio Board of Nursing the authority to establish and enforce the requirements for licensure of nurses in Ohio. This law also defines the practice of both registered nurses and licensed practical nurses. All of the activities listed in the definitions, including the supervision of nursing care, constitute the practice of nursing and therefore require the nurse to have a current valid license to practice nursing in Ohio.

Patient Support is provided by a variety of individuals and departments which might not have direct contact with patients, but which support the integration and continuity of care provided throughout the continuum of care by the hands-on care providers.

SCOPE OF SERVICES / STAFFING PLANS

Each patient care service department has a defined scope of service approved by the hospital's administration and medical staff, as appropriate. The scope of service includes:

- the types and age ranges of patients served;
- methods used to assess and meet patient care needs (includes services most frequently provided such as procedures, etc.);
- the scope and complexity of patient care needs (such as most frequent diagnosis);
- support services provided directly or through referral contact;
- the extent to which the level of care or service meets patient need (hours of operation if other than 24 hours a day/7 days a week and method used for ensuring hours of operation meet the needs of the patients to be served with regard to availability and timeliness);
- the availability of necessary staff (staffing plans) and;
- recognized standards or practice guidelines, when available (the complex or high level technical skills that might be expected of the care providers).

Additional operational details and staffing plans may also be found in department policies, procedures and operational/performance improvement plans.

Staffing plans for patient care service departments are developed based on the level and scope of care provided, the frequency of the care to be provided, and a determination of the level of staff that can most appropriately (competently and confidently) provide the type of care needed. Nursing units are staffed to accommodate a projected average daily patient census. Unit management (including nurse manager and/or charge nurse) reviews patient demands to plan for adequate staffing. Staffing can be increased or decreased to meet patient needs. When the number of patients is high or the need is great, float staff assist in providing care. When staff availability is projected to be low, the unit manager and director may request temporary agency nurses. The Ohio State University Wexner Medical Center follows the Staffing Guidelines set by the American Nurses Association. In addition, we utilize staffing recommendations from various specialty nursing organizations, including: ENA, ANCC, AACN, AORN, ASPN, NDNQI, AWHONN, and others.

The Administrative Team, in conjunction with the budget and performance measurement process, reviews all patient care areas staffing and monitors ongoing regulatory requirements. Each department staffing plan is formally reviewed during the budget cycle and takes into consideration workload measures, utilization review, employee turnover, performance assessment, improvement activities, and changes in customer needs/expectations. A variety of workload measurement tools may be utilized to help assess the effectiveness of staffing plans.

STANDARDS OF CARE

Patients of the Hospitals can expect that:

- 1) Staff will do the correct procedures, treatments, interventions, and care following the policies, procedures, and protocols that have been established. Efficacy and appropriateness of procedures, treatment, interventions and care provided will be demonstrated based on patient assessments/reassessments, standard practice, and with respect for patient's rights and confidentiality.
- 2) Staff will provide a uniform standard of care and services throughout the organization.
- 3) Staff will design, implement and evaluate systems and services for care delivery (assessments, procedures, treatments, interventions) which are consistent with a personalized health care focus and which will be delivered:

- a. With compassion, courtesy, respect and dignity for each individual without bias using a patient centered approach;
- b. In a manner that best meets the individualized needs of the patient;
- c. Coordinated through interdisciplinary collaboration, to ensure continuity and seamless delivery of care to the greatest extent possible; and,
- d. In a manner that maximizes the efficient use of financial and human resources, streamlines processes, decentralizes services, enhances communication, supports technological advancements and maintains patient safety.

Patient Assessment:

Individual patient care requirements are determined by assessments (and reassessments) performed by qualified health professionals. Each service within the organization providing patient care has defined the scope of assessment provided. This assessment (and reassessment) of patient care needs continues throughout the patient's contact with the hospital.

Coordination of Care:

Patients are identified who require discharge planning to facilitate continuity of medical care, social determinant needs, and/or other care to meet identified needs. Discharge planning is timely, is addressed at a minimum during initial assessment as well as during discharge planning processes and can be initiated by any member of the interdisciplinary team. Case Managers coordinate patient care between multiple delivery sites and multiple caregivers; collaborate with physicians and other members of the care team to assure appropriate treatment plan and discharge care.

STANDARDS OF COMPETENT PERFORMANCE/STAFF EDUCATION

All employees receive an orientation consistent with the scope of responsibilities defined by their job description and the patient population to whom they are assigned to provide care. Ongoing education (such as in-services) is provided within each department. In addition, the Educational Development and Resource Department provides annual mandatory education and provides appropriate staff education associated with performance improvement initiatives and regulatory requirements. Performance appraisals are conducted at least annually between employees and managers to review areas of strength and to identify skills and expectations that require further development.

CARE DELIVERY MODEL

The care delivery model is guided by the following goals:

- The patient and family will experience the benefits of the AACN Synergy model for patient care. This model is driven by the core concept that the patient and family needs influence the competencies and characteristics of the nursing care provided. The benefits include enhanced quality of care, improved service, appropriate length of hospitalization and minimized cost.
- Hospital employees will demonstrate values and behaviors consistent with the OSUWMC Buckeye Spirit set of core values. The philosophical foundation reflects a culture of inclusiveness, sincerity, determination, ownership, empathy and innovation.
- Effective communication will impact patient care by ensuring timeliness of services, utilizing staff resources appropriately, and maximizing the patient's involvement in his/her own plan of care.
- Configuring departmental and physician services to accommodate the care needs of the patient in a timely manner will maximize quality of patient care and patient satisfaction.
- The Synergy professional nursing practice model is a framework which reflects our underlying philosophy and vision of providing care to patients based on their unique needs and characteristics. Aspects of the professional model support:

- (1) matching nurses with specific skills to patients with specific needs to ensure “safe passage” to achieve the optimal outcome of their hospital stay;
 - (2) the ability of the nurse to establish and maintain a therapeutic relationship with their patients;
 - (3) the presence of an interdisciplinary team approach to patient care delivery. The knowledge and expertise of all caregivers is utilized to restore a patient to the optimal level of wellness based on the patient’s definition;
 - (4) physicians, nurses, pharmacists, respiratory therapists, case managers, dietitians and many other disciplines collaborate and provide input to patient care.
- The patient and family will be involved in establishing the plan of care to ensure services that accommodate their needs, goals and requests.
 - Streamlining the documentation process will enhance patient care.

PATIENT RIGHTS AND ORGANIZATIONAL ETHICS

Patient Rights

In order to promote effective and compassionate care, the Hospitals’ systems, policies, and programs are designed to reflect an overall concern and commitment to each person’s dignity. All Hospital employees, physicians and staff have an ethical obligation to respect and support the rights of every patient in all interactions. It is the responsibility of all employees, physicians and staff of the Hospitals to support the efforts of the health care team, while ensuring that the patient’s rights are respected. Each patient (and/or family member as appropriate) is provided a list of patient rights and responsibilities upon admission and copies of this list are posted in conspicuous places throughout the Hospitals.

Organizational Ethics

The Hospitals have an ethics policy established in recognition of the organization’s responsibility to patients, staff, physicians and the community served. General principles that guide behavior are:

- Services and capabilities offered meet identified patient and community needs and are fairly and accurately represented to the public.
- Adherence to a uniform standard of care throughout the organization, providing services only to those patients for whom we can safely care for within this organization. The Hospitals do not discriminate based age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, protected veteran status or any other basis under the law.
- Patients will be billed only for care and services provided.

Biomedical Ethics

A biomedical ethical issue arises when there is uncertainty or disagreement regarding medical decisions, involving moral, social, or economic situations that impact human life. A mechanism is in place to provide consultation in the area of biomedical ethics in order to:

- improve patient care and ensure patient safety;
- clarify any uncertainties regarding medical decisions;
- explore the values and principles underlying disagreements;
- facilitate communication between the attending physician, the patient, members of the treatment team and the patient’s family (as appropriate); and,
- mediate and resolve disagreements.

INTEGRATION OF PATIENT CARE, ANCILLARY AND SUPPORT SERVICES

The importance of a collaborative interdisciplinary team approach, which takes into account the unique knowledge, judgment and skills of a variety of disciplines in achieving desired patient outcomes, serves as a foundation for integration. See Appendix A for a listing of ancillary and support services.

Open lines of communication exist between all departments providing patient care, patient services and support services within the hospitals, and as appropriate with community agencies to ensure efficient, effective and continuous patient care. Functional relationships between departments are evidenced by cross-departmental Performance Improvement initiatives as well as the development of policies, procedures, protocols, and clinical pathways and algorithms.

To facilitate effective interdepartmental relationships, problem solving is encouraged at the level closest to the problem at hand. Staff is receptive to addressing one another's issues and concerns and work to achieve mutually acceptable solutions. Supervisors and managers have the responsibility and authority to mutually solve problems and seek solutions within their spans of control; positive interdepartmental communications are strongly encouraged. Employees from departments providing patient care services maintain open communication channels and forums with one another, as well as with service support departments to ensure continuity of patient care, maintenance of a safe patient environment and positive outcomes.

CONSULTATIONS AND REFERRALS FOR PATIENT SERVICES

The Hospitals provide services as identified in the Hospital Plan for Providing Patient Care to meet the needs of our community. Patients whose assessed needs require services not offered are transferred to the member hospitals of The Ohio State University Wexner Medical Center or another quality facility (e.g., Nationwide Children's Hospital) in a timely manner after stabilization. Safe transportation is provided by air or ground ambulance with staff and equipment appropriate to the required level of care. Physician consultation occurs prior to transfer to ensure continuity of care. Referrals for outpatient care occur based on patient need.

INFORMATION MANAGEMENT PLAN

The overall goal for information management is to support the mission of The Ohio State University Wexner Medical Center. Specific information management goals related to patient care include:

- Develop and maintain an integrated information and communication network linking research, academic and clinical activities.
- Develop computer-based patient records with integrated clinical management and decision support.
- Support administrative and business functions with information technologies that enable improved quality of services, cost effectiveness, and flexibility.
- Build an information infrastructure that supports the continuous improvement initiatives of the organization.
- Ensure the integrity and security of the Hospital's information resources and protect patient confidentiality.

PATIENT CARE ORGANIZATIONAL IMPROVEMENT ACTIVITIES

All departments are responsible for following the Hospitals' Quality Assurance and Performance Improvement (QAPI) plan. Departments utilize the QAPI plan and cascade the hospital's goals to service line quality plans to ensure proper alignment to support the overall hospital quality goals.

PLAN REVIEW

The Hospital Plan for Providing Patient Care will be reviewed regularly by the Hospitals' leadership to ensure the plan is adequate, current and that the Hospitals are in compliance with the plan. Interim adjustments to the overall plan are made to accommodate changes in patient population, redesign of the care delivery systems or processes that affect the delivery, level or amount of patient care required.

Appendix A: Scope of Services: Patient Ancillary and Support Services

Other hospital services that support the comfort and safety of patients are coordinated and provided in a manner that ensures direct patient care and services are maintained in an uninterrupted, efficient, and continuous manner. These support and ancillary services will be fully integrated with the patient care departments of the Hospitals:

DEPARTMENT	SERVICE
BEHAVIORAL EMERGENCY RESPONSE TEAM (BERT)	Expert team that provides innovative and quality care to patients with complex behavioral symptoms while working collaboratively with staff through consultation, education, and early intervention
CARDIAC PROCEDURAL	Cardiac procedural areas include both cardiac catheterization and electrophysiology. Procedures may be diagnostic or interventional.
CARDIOVASCULAR IMAGING SERVICES	Diagnostic and therapeutic procedures in cardiac MR/CT, Nuclear Medicine, Echocardiography, Vascular Imaging Stress Test. Cardiovascular Imaging Services can be provided at inpatient, outpatient, and emergency locations.
CARE MANAGEMENT	As part of the health care team, provides personalized care coordination and resource management with patients and families.
CENTRAL STERILE SUPPLY (CSS)	Responsible for supporting all instrument cleaning and sterilization needs across the organization. In addition, CSS is responsible for providing case carts to the operating rooms which contain all of the instrumentation and disposable supply needs for each surgical case.
CHAPLAINCY AND CLINICAL PASTORAL EDUCATION	Assists patients, their families and hospital personnel in meeting spiritual needs through professional pastoral and spiritual care and education.
CLINICAL ENGINEERING	Routine equipment evaluation, maintenance, and repair of electronic equipment owned or used by the hospital; evaluation of patient owned equipment.
CLINICAL INFORMATICS	A subset of IT services that focuses on appropriately integrating the clinical care provided to the patient into the Electronic Health Record (EHR) through the specialized knowledge of clinical care and informatics. Additionally, direct work with the clinicians occurs through this team to ensure the EHR is adopted and aligns with the clinical work occurring in the organization and provides an accurate depiction of the patients' clinical course while being cared for in the organization.
CLINICAL LABORATORY	Responsible for pre-analytic, analytic and post-analytic functions on clinical specimens in order to obtain information about the health of a patient as pertaining to the diagnosis, treatment, and prevention of disease; assisting care providers with clinical information related to patient care, education, and research.
COMMUNICATIONS AND MARKETING	Responsible for developing strategies and programs to promote the organization's overall image and specific products and services to targeted internal and external audiences. Handles all media relations, advertising, internal communications, special events and publications.
DECEDENT AFFAIRS	Provide support to families of patients who died & assist them with completing required disposition decisions. Ensure notification of the CMS designated Organ Procurement Agency (OPO) – Lifeline of Ohio (Lifeline). Promote & facilitate organ/eye/tissue donation by serving as the OSU hospital Lifeline Liaison. Analyze data provided by Lifeline regarding organ/tissue/eye donation.
DIAGNOSTIC TRANSPORTATION	Provision of on-site transportation services for patients requiring diagnostic, operative or other ancillary services.
DIALYSIS	Dialysis is provided for inpatients of the medical center within a dedicated unit unless the patient cannot be moved. In those instances, bedside dialysis will be administered.

DEPARTMENT	SERVICE
EARLY RESPONSE TEAM (ERT)	Provides timely diagnostic and therapeutic intervention before there is a cardiac or respiratory arrest or an unplanned transfer to the Intensive Care Unit. Consists of a Critical Care RN and Respiratory Therapist who are trained to help patient care staff when there are signs that a patient's health is declining.
EDUCATION, DEVELOPMENT & RESOURCES	Provides and promotes ongoing development and training experiences to all member of the OSUWMC community; provides staff enrichment programs, organizational development, leadership development, orientation and training, skills training, continuing education, competency assessment and development, literacy programs and student affiliations.
ENDOSCOPY	Provides services to patients requiring a nonsurgical review of their digestive tract.
ENVIRONMENTAL SERVICES	Provides routine housekeeping and quality monitoring of such. Additional services upon request: extermination, wall cleaning, etc.
EPIDEMIOLOGY	Enhance the quality of patient care and the work environment by minimizing the risk of acquiring infection within the hospital setting.
FACILITIES OPERATIONS	Provide oversight, maintenance and repair of the building's life safety, fire safety, and utility systems. Provide preventative, repair and routine maintenance in all areas of all buildings serving patients, guests, and staff. This would include items such as electrical, heating and ventilation, plumbing, and other such items. Also providing maintenance and repair to basic building components such as walls, floors, roofs, and building envelope. Additional services available upon request.
FISCAL SERVICES	Works with departments/units to prepare capital and operational budgets. Monitors and reports on financial performance monthly.
HUMAN RESOURCES	Serves as a liaison for managers regarding all Human Resources information and services; assists departments with restructuring efforts; provides proactive strategies for managing planned change within the Health System; assists with Employee/Labor Relations issues; assists with performance management process; develops compensation strategies; develops hiring strategies and coordinates process for placements; provides strategies to facilitate sensitivity to issues of cultural diversity; provides HR information to employees, and establishes equity for payroll.
INFORMATION SYSTEMS	Work as a team assisting departments to explore, deploy and integrate reliable, state of the art Information Systems technology solutions to assist in the provision and documentation of care and services and to manage change of such systems.
MATERIALS MANAGEMENT	Routinely stocks supplies in patient care areas, distributes linen. Sterile Central Supply, Storeroom - upon request, distributes supplies/equipment not stocked on units.
MEDICAL INFORMATION MANAGEMENT	Maintains patient records serving the needs of the patient, provider, institution, and various third parties to health care.
NUTRITION SERVICES	Provides nutrition care and food service for Medical Center patients, staff, students, and visitors. Clinical nutrition assessment, care plan development, and consultation are available in both inpatient and outpatient settings. The Department provides food service to inpatients and selected outpatient settings in addition to operating a variety of retail café locations and acts as a liaison for vending and sub-contracted food services providers. Serve as dietetic education preceptors.
PATIENT ACCESS SERVICES	Coordinates registration/admissions with nursing management.
PATIENT EXPERIENCE	Develops programs for support of patient relations and customer service, and includes front-line services such as information desks.
PATIENT FINANCIAL SERVICES	Provides financial assistance upon request from patient/family. Also responsible for posting payments from patients and insurance companies among others to a patient's bill for services.

DEPARTMENT	SERVICE
PATIENT FLOW DEPARTMENT	Monitors and supports all admissions, discharges, and transfers across OSUWMC. Ensures timely, safe, and individualized access to all patients and families through collaboration with the healthcare team.
PERIOPERATIVE SERVICES	Perioperative Services include preoperative, intraoperative and postoperative care.
PHARMACY	Provides comprehensive pharmaceutical care through operational and clinical services. Responsible for medication distribution via central and satellite pharmacies, as well as 797 compliant IV compounding room and automated dispensing cabinets. Some of the many clinical services include pharmacokinetic monitoring, renal and hepatic dose adjustments, and patient education. Specialist pharmacists also round with patient care teams to optimize medication regimens and serve as the team's primary medication information resource.
QUALITY AND OPERATIONS IMPROVEMENT	Provides an integrated quality management program and facilitates continuous quality improvement efforts throughout the medical center.
RADIOLOGIC SERVICES	Diagnostic and therapeutic procedures in MR, CT, X-ray, Fluoroscopy, Interventional Radiology, Ultrasonography. Radiologic Services can be provided at inpatient, outpatient, and emergency locations.
RESPIRATORY THERAPY	Provide all types of respiratory therapeutic interventions and diagnostic testing, by physician order, mainly to critically ill adults and neonates, requiring some type of ventilator support, bronchodilator therapy, or pulmonary hygiene, due to chronic lung disease, multiple trauma, pneumonia, surgical intervention, or prematurity. Provides pulmonary function testing and diagnostic inpatient and outpatient testing to assess the functional status of the respiratory system. Bronchoscopy and other diagnostic/interventional pulmonology procedures are performed to diagnose and/or treat abnormalities that exist in the airways, lung parenchyma or pleural space.
REHABILITATION SERVICES	Physical therapists, occupational therapists, speech and language pathologists, and recreational therapists evaluate and develop a plan of care and provide treatment based on the physician's referral. The professional works with each patient/family/caregiver, along with the interdisciplinary medical team, to identify and provide the appropriate therapy/treatment and education needed for the established discharge plan and facilitates safe and timely movement through the continuum of care.
RISK MANAGEMENT	Protect resources of the hospital by performing the duties of loss prevention and claims management. Programs include: Risk Identification, Risk Analysis, Risk Control, Risk Financing, Claims Management and Medical-Legal Consultation.
SAFETY and EMERGENCY PREPAREDNESS	Manages programs related to general safety, life safety and emergency preparedness. Maintains compliance with regulatory agencies including, The Joint Commission, Centers for Medicare and Medicaid Services, Ohio Department of Health, State Fire Marshal, Environmental Protection Agency and other authorities having jurisdiction over hospital operations.
SECURITY	Provides a safe and secure environment for patients, visitors, and staff members by responding to all emergencies such as workplace violence, fires, bomb threats, visitor/staff/patient falls, Code Blues (cardiac arrests) in public places, internal and external disasters, armed aggressors, or any other incident that needs an emergency response.
SOCIAL WORK SERVICES	Social Work services are provided to patients/families to meet their medically related social and emotional needs as they impact on their medical condition, treatment, recovery and safe transition from one care environment to another. Social workers provide psychosocial assessment and intervention, crisis intervention, financial counseling, discharge planning, health education, provision of material resources

DEPARTMENT	SERVICE
	and linkage with community agencies. Consults can be requested by members of the treatment team, patients or family members.
VOLUNTEER SERVICES	Volunteer Services credential and place volunteers to fill departmental requests. Volunteers serve in wayfinding, host visitors in waiting areas, serve as patient / family advisors, and assist staff.
WOUND CARE	Wound Care includes diagnosis and management for skin impairments.

ATTACHMENT XXI

The James



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

Approvals:
MSAC: April 18, 2025
QPAC: June 24, 2025
Wexner Medical Center Board:

Title: Arthur G. James Cancer Hospital and Richard J. Solove Research Institute Plan for Patient Care Services

The Plan for Providing Patient Care Services is described herein. The Plan is based on the mission, vision, values, and goals. The plan encompasses both inpatient and outpatient services delivered by the teams who provide comprehensive care, treatment, and services to patients with cancer diagnoses and their loved ones. The plan encompasses both inpatient and outpatient services of the hospital.

The Mission, Vision, and Values:

Mission: To eradicate cancer from individuals' lives by creating knowledge and integrating ground-breaking research with excellence in education and patient-centered care.

Vision: Create a cancer-free world, one person, and one discovery at a time.

Values: World class, empowered, compassionate, accountable, respectful, and expert.

At The James, no cancer is routine. Our researchers and oncologists study the unique genetic makeup of each patient's cancer, understand what drives it to develop, and then deliver the most advanced and targeted treatment for the individual patient. The James' patient centered, and relationship-based care is enhanced by our teaching and research programs. Our mission, and staff are dedicated to the fulfillment and success and distinguishes The Arthur G. James Cancer Hospital and Richard J. Solove Research Institute as one of the nation's premier comprehensive cancer centers.

Philosophy of Patient Care Services

The James Cancer Hospital and Solove Research Institute, in collaboration with the community, provides innovative and patient-focused multi-disciplinary cancer care through:

- Maintaining a mission which outlines the synergistic relationship between patient care, research, and teaching.
- Developing a long-range strategic plan with input from hospital leaders to determine the services and levels of care to be provided.
- Establishing annual goals and objectives consistent with the hospital mission and

strategic plan, which are based on a collaborative assessment of patient/family and community needs.

- Planning and designing from the hospital leadership, involving the communities served.
- Providing individualized care, treatment, and services appropriate to the scope and level required by each patient based on professional assessments of need.
- Evaluating ongoing services provided through formalized processes such as: performance assessment and improvement activities, budgeting, and staffing plans.
- Integrating services through the following mechanisms: continuous quality improvement teams; clinical interdisciplinary quality programs; communications through management and operations meetings, Division of Nursing shared governance structure, Medical Staff Administrative Committee, administrative staff meetings, participation in Ohio State University Wexner Medical Center (OSUWMC) governance structures, special forums, leadership and employee education and professional/development.
- Maintaining competent patient care leadership and staff by providing education designed to meet identified needs.
- Respecting each patient's rights and their decisions as an essential component in the planning and provision of care.
- Assuring every staff member demonstrates behaviors which reflect the philosophical foundation based on the values of The James Cancer Hospital and Solove Research Institute.

Hospital Leadership

The hospital leadership is defined as the governing Board of Trustees, the University President, Executive Vice President/Chief Executive Officer, administrative staff, faculty, physicians, nurses, clinical, and operational leaders in both appointed and elected positions. The hospital's leadership team is responsible for producing a framework to plan health care services which are to be provided by the organization, based on the hospital's mission and strategic planning. These responsibilities include developing and implementing a planning process that allows for defining timely and clear goals.

The planning process also includes an assessment of our customer and community needs. This process begins with:

- Developing a long-range strategic plan.
- Developing annual operational plans.
- Establishing annual operating and capital budgets, and monitoring compliance.
- Establishing resource allocations and policies.

- Ongoing evaluation of every plan's implementation and ongoing success.

The planning process addresses both patient care functions (patient: rights, assessment, care, safety, patient and family education, coordination of care, and discharge planning) and organizational support functions (information management, human resource management, infection control, quality, the environment of care, and the improvement of organization performance).

The hospital leadership team works collaboratively with all operational and clinical leaders to ensure integration of planning, evaluation, and communication processes within and between departments, to enhance patient care services and support. This occurs informally, daily, and formally, via multi-disciplinary leadership meetings. The leadership team works with each department manager to evaluate, plan, and recommend annual budget expenses and capital objectives, based on the expected resource needs of the department. Department leaders are accountable for managing, justifying their budgets and resource utilization. This includes, but is not limited to identifying, investigating, budgeting for modern technologies, and resources that are expected to improve the delivery of patient care and services.

Other leadership responsibilities include but are not limited to:

- Communicating the organization's mission, vision, goals, objectives, and strategic plans across the organization.
- Ensuring appropriate, competent management and leadership of all services and/or departments.
- Collaborating with community leaders and organizations to ensure services are designed to be appropriate for the scope and level of care required by the patients and communities served.
- Supporting the continuum of care by integrating systems and services to improve efficiencies and care from a patient's viewpoint.
- Ensuring staff resources are available and competent to effectively meet the needs of the patients and to provide a high level of care to patients in all clinical areas.
- Ensuring the provision of uniform standards of patient care are delivered throughout the continuum of care in accordance with each respective disciplines' approved standards of practice and organizational policy/procedure.
- Providing appropriate job enrichment, employee development, continuing education opportunities that serve to promote retention of staff and to foster excellence in care delivery and support services.
- Establishing standards of care for all patients, and which can be monitored through the hospital's performance assessment and improvement plan.
- Approving the organizational plan to prioritize areas for improvement, developing mechanisms to provide appropriate follow up actions and/or reprioritizing in response to unexpected events.
- Implementing an effective and continuous program to monitor and improve patient safety.

- Appointing appropriate committees, task forces, and other forums to ensure interdepartmental collaboration on issues of mutual concerns and requiring interdisciplinary input.
- Supporting patient rights and ethical considerations.
- Support of evidence-based practice (EBP) to drive patient care decision-making.

Role of the Executive Director of Clinical Services, and the Chief Nursing Officer

The Executive Director of Clinical Services, and the Chief Nursing Officer are members of the Executive Leadership Team who has the requisite authority and responsibility for directing activities related to the provision of care, treatment and services in those departments defined as providing care to patients.

The Executive Director of Clinical Services ensures the following functions are addressed:

- Evaluating patient care programs, policies, and procedures which describe how patients' care needs are assessed, evaluated, and met throughout the organization.
- Implementing the plan for the provision of patient care.
- Participating with leaders from the governing body, medical staff, and clinical areas in organizational decision-making. Strategic planning and conducting performance improvement activities through the organization.
- Implementing an effective, ongoing program to assess, measure and improve the quality of care and safe outcomes of care provided for patients.
- Participating with organizational leaders to ensure that resources are allocated to provide enough qualified and competent staff to provide patient care.
- Ensuring services are available to patients on a continuous, timely basis.
- Reviewing the plan for the providing patient care services on an annual basis.

The Chief Nursing Officer (CNO) ensures the following functions are addressed:

- Implementing standards of nursing practice, standards of patient care, patient care policies, and procedures that include current research and evidence-based practice.
- Supports and facilitates a multi-disciplinary team approach to the overall delivery of care to patients, families, and the community.
- Promotes relationship-based care (RBC), leads quality, safety, and innovation initiatives in partnership with the Executive Director of Clinical Services.
- Responsible for driving nursing strategic plan to deliver excellent patient care.
- Responsible for nursing performance improvement, program management, business operations, budgets, resource, utilization, and maintenance of the professional contract with the Ohio State University Nursing Organization (OSUNO).

Definition of Patient Services, Patient Care, Nursing Care, and Patient Support

Patient Services

Defined as those departments and care providers with direct contact with patients. These services occur through organized and systematic through-put processes designed to ensure the delivery of appropriate, safe, effective, and timely care and treatment. The patient through-put process includes those activities designed to coordinate patient care before admission, during the admission process, in the hospital, in the ambulatory exam or treatment clinics before discharge and at discharge. This process includes:

- Access in emergency process, admission decision, transfer or admission process, registration and information gathering, placement in the appropriate care areas.
- Treatment and evaluation: full scope of service from the care service department.
- Access out: discharge decision, patient/family education, counseling, arrangements for continuing care, and discharge.

Patient Care:

Encompasses the recognition of disease, health, and patient education, which allows the patient to participate in their care, advocacy, and spirituality. The full scope of patient care is provided by professionals who perform the functions of assessing, planning patient care based on information gathered from the assessment, as well as past medical history, social history, and other pertinent findings. Patient care and services are planned, coordinated, provided, delegated, and supervised by professional health care providers who recognize the unique physical, emotional, and spiritual (body, mind, and spirit) needs of each person. Under the auspices of the hospital medical staff, registered nurses, and allied health professionals function collaboratively as part of an interdisciplinary, patient-focused care team to achieve positive patient outcomes and personalized care.

Competency is determined during the initial orientation period and at least annually through performance evaluations and other department specific assessment processes. Physicians direct all aspects of a patient's medical care as delineated through the clinical privileging process and in accordance with the Medical Staff By-Laws. Registered Nurses support the medical aspect of care by assessing, directing, coordinating, providing nursing care consistent with statutory requirements, according to the organization's approved Nursing Standards of Practice and hospital-wide policies and procedures. Allied health professionals provide patient care and services keeping within their licensure requirements and in collaboration with physicians and registered nurses. Unlicensed staff may provide aspects of patient care or services at the direction of and under the supervision of licensed professionals.

Nursing Care and Practice:

Defined as competently providing all aspects of the nursing process in accordance with Chapter 4723 of the Ohio Revised Code (ORC), which is the law regulating the Practice of Nursing in Ohio. This law gives the Ohio Board of Nursing the authority to establish and enforce the requirements for licensure of nurses in Ohio. This law defines the practice of both registered nurses and licensed practical nurses. All activities listed in the definitions, including the supervision of nursing care, constitute the practice of nursing and therefore require the nurse to have a current valid license to practice nursing in Ohio.

Patient Support:

Provided by individuals and departments which may not have direct contact with patients, but which support the integration and continuity of care provided throughout the continuum of care by the direct care providers.

Scope of Services and Staffing Plans

Each patient care service department has a defined scope of service approved annually by administration and medical staff, as appropriate. The scope of service includes:

- The type and age ranges of patients served.
- Methods used to assess and meet patient care needs (including services most frequently provided such as procedures, medication administration, surgery, etc.).
- The scope and complexity of patient care needs.
- The appropriateness, clinical necessity, and timeliness of support services provided directly or through referral contact.
- The extent to which the level of care or service meets patient needs, hours of operation if other than 24 hours a day/7days a week, and a method used to ensure hours of operation meet the needs of the patients to be served regarding availability and timeliness.
- The availability of necessary staff.
- Recognized standards or practice guidelines.

Staffing plans for patient care service departments are developed based on the level and scope of care provided, the frequency of the care to be provided, determination of the level and mix of staff that can most appropriately, competently, and confidently provide the type of care needed. Patient care units are staffed to accommodate a projected average daily patient census based on historical data.

Unit management (including nurse manager, assistant nurse manager, charge nurse or the administrative nursing supervisor (ANS)) provide 24/7 on-site oversight and review the

demand for patient care to plan for adequate staffing. Staffing can be increased or decreased to meet patient needs or changes in volume. When the census is high or the need is great, float/resource staff are available to assist in providing care.

Administrative leaders, in conjunction with budget and performance measurements, review staffing within all patient care areas and monitor ongoing regulatory requirements. Each department staffing plan is formally reviewed during the budget cycle and takes into consideration workload measures, utilization review, employee turnover, performance assessment, improvement activities, and changes in patient needs or expectations. A variety of workload measurement tools are utilized to help assess the effectiveness of staffing plan.

Standards of Care

Individualized health care at The James is the integrated practice of medicine and support of patients based upon the individual's unique biology, behavior, and environment. It is envisioned we will utilize gene-based information to understand each person's individual requirements for the maintenance of their health, prevention of disease, and therapy tailored to their genetic uniqueness. The direction of personalized health care is to be predictive and preventive.

Patients of The James Cancer Hospital and Solove Research Institute can expect that:

- Hospital staff provide the correct procedures, treatments, interventions, and care. The efficacy and appropriateness of care will be demonstrated based on patient assessment and reassessments, evidence-based practices, and achievement of desired outcomes.
- Hospital leadership staff design, implement and evaluate care delivery systems and services which are consistently focused on patient-centered care that is delivered with compassion, respect, and dignity for everyone, without bias, and in a manner that best meets the individual needs of the patients and their support system.
- Staff provide a uniform standard of care and service throughout the organization.
- Patient care is coordinated through interdisciplinary collaboration to ensure continuity and seamless delivery of care to the greatest extent possible.
- Efficient use of finances, human resources, streamlined processes, enhanced communication, and supportive technological advancements all while focused on quality of care and patient safety.

Patient Assessment:

The care requirements of the Individual patient and their support system are determined

by on-going assessments performed by qualified health professionals. Each service providing patient care within the organization has a defined scope of assessment provided. This assessment and reassessment of patient care needs continues throughout the continuum and the patient's contact.

Coordination of Care:

Staff provide patient discharge planning to facilitate continuity of medical care and/or other care to meet identified needs. Discharge planning is timely, addressed during initial assessment and/or upon admission, as well as during the discharge planning process, and can be initiated by any member of the multidisciplinary team. Registered nurses, patient care resource managers, advanced practice nurses, and social workers coordinate and maintain close contact with the healthcare team members to finalize an individualized discharge plan.

The medical staff is assigned by clinical department or division. Each clinical department has an appointed chair responsible for a variety of administrative duties, including development and implementation of policies that support the provision of departmental services, maintaining the proper number of qualified, and competent personnel needed to provide care.

Care Delivery Model

Individualized, patient-focused care is the model in which teams deliver care for similar cancer patient populations, intricately linking the physician and other caregivers for optimal communication and service delivery. Personalized patient-focused care is guided by the following principles:

- The patient and their support system will experience the benefits of individualized care that integrates skills of all care team members. These benefits include enhanced quality of care, improved service, appropriate length of hospitalization, value-based cost related to quality outcomes, and patient safety.
- Hospital employees will demonstrate behaviors consistent with the philosophy of personalized health care. This philosophical foundation reflects a culture of collaboration, enthusiasm, and mutual respect.
- Effective communication will impact patient care by ensuring timeliness of services, utilizing staff resources appropriately, and maximize the patient's involvement in their own plan of care.
- Configuring departmental and physician services to accommodate the care needs of the patient in a timely manner will maximize quality of patient care and patient satisfaction.
- Primary nursing characteristics, such as relationship-based care, conceptual framework supporting the professional practice model are used to reflect the guiding philosophy and vision of providing individualized care.
- The patient and their support system will be involved in establishing the plan

of care to ensure services that accommodate their needs, goals, and requests.

Patient Rights and Organizational Ethics

Patient Rights:

To promote effective and compassionate care, systems, processes, policies, and programs are designed to reflect an overall concern and commitment to each person's dignity and privacy. All hospital employees, physicians, and staff have an ethical obligation to respect and support the rights of every patient in all interactions. It is the responsibility of all employees, physicians, and staff to support the efforts of the health care team, to ensure the patient's rights are respected. Each patient (and/or their support system) is given a list of patient rights and responsibilities upon admission and copies of this list are posted in conspicuous places throughout the hospital.

Organizational Ethics:

The James utilizes an ethics policy to articulate the organization's responsibility to patients, staff, physicians, and community served. General guiding principles include:

- Services and capabilities offered meet identified patient and community needs and are fairly and accurately represented to the public.
- The hospital adheres to a uniform standard of care throughout the organization, providing services to those patients for whom we can safely provide care. The James does not discriminate based upon age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or source of payment.
- Patients are only billed for care and services received.

Biomedical Ethics:

A biomedical ethical issue arises when there is uncertainty or disagreement regarding medical decisions involving moral, social, or economic situations that impact human life. A mechanism is in place to provide consultation in biomedical ethics to:

- Improve patient care and ensure patient safety.
- Clarify any uncertainties regarding medical decisions.
- Explore the values and principles of underlying disagreements.
- Facilitate communication between the attending physician, the patient, members of the treatment team, and the patient's family or support system (as appropriate).
- Mediate and resolve disagreements.

Integration of Patient Care and Support Services

A collaborative, interdisciplinary team approach, that considers the unique knowledge, judgment, and skills is utilized. A variety of disciplines are involved to achieve the desired

patient outcomes and serves as a foundation for integration of patient care. Continual process improvement initiatives support effective integration of hospital and health system policies, procedures, protocols, and relationships between departments. See appendix A (Page 11) for a listing of support services.

An open line of communication exists between all departments providing patient care, patient services, support services within the hospital, and as appropriate with community agencies to ensure efficient, effective, and continuous patient care. To facilitate effective interdepartmental relationships, problem solving is encouraged at the level closest to the problem. The staff is receptive to addressing one another's issues and concerns and work to achieve mutually acceptable solutions. Supervisors and managers have the responsibility and authority to mutually solve problems and seek solutions within their scope. Positive interdepartmental communications are strongly encouraged. Direct patient care services maintain open communication with each other in alignment with organizational Code of Conduct, as well as with service support departments to ensure continuity of patient care, maintenance of a safe patient environment, and positive outcomes.

Consultations and Referrals for Patient Services

The James provides services as identified in this plan to meet the needs of our community. Patients with assessed needs requiring services not offered at The James are transferred in a timely manner after stabilization; and/or transfers are arranged with another quality facility.

Safe transportation is provided by air or ground ambulance with staff and equipment appropriate to the required level of care. Physician consultation occurs prior to transfer to ensure continuity of care. Referrals for outpatient care occur based on patient need.

Information Management Plan

The overall goal for information management is to support the mission of The James. Specific information management goals related to patient care and include:

- Ensuring the integrity and security of the hospital's information resources and protect patient confidentiality.
- Developing and maintaining an integrated information, communication network linking research, academic and clinical activities.
- Developing and updating computer-based patient records with integrated clinical management and decision support.
- Supporting administrative and business functions with information

technologies that enable improved quality of services, cost effectiveness, and flexibility.

- Building an information infrastructure that supports continuous improvement of the organization.

Patient Organization Improvement Activities

All departments participate in the hospital’s plan for improving organizational performance.

Plan Review

The hospital’s plan for providing patient care is reviewed regularly by leadership to ensure the plan is adequate, current and compliance is maintained with the plan. Interim adjustments to the plan are made as necessary to accommodate changes in patient population, care delivery systems, processes that affect the delivery, and level of patient care required.

Appendix A: Scope of Services for Ancillary and Support Services

Other hospital services that support the comfort and safety of patients are coordinated and provided in a manner that ensures direct patient care and services are maintained in an uninterrupted, efficient, and continuous manner. These support services will be fully integrated with the patient services departments of the hospital:

Department	Service
Cancer Diagnostic Center	Offers a platform for expert evaluation and access to the appropriate diagnostic testing so that a timely and precise cancer diagnosis can be made from the beginning. The center is staffed by a team of oncology-trained advanced practice providers and nurses. Starting with initial consultation, the team will manage each patient’s entire diagnostic journey. This includes identifying and prioritizing the patient’s needs and concerns and coordinating the appropriate testing and evaluation. If cancer is confirmed, the team will schedule the patient with the appropriate James multidisciplinary, subspecialized cancer team based on his or her type of cancer.
Central Sterile Supply	Coordinates the comprehensive cleaning, decontamination, assembly and dispensing of surgical instruments, equipment, and supplies needed for regular surgical procedures in related departments.
Chaplaincy and Clinical Pastoral Education	Assist patients, their support system, and hospital personnel in meeting spiritual needs through professional pastoral and spiritual care and education.

Clinical Engineering	Routine equipment evaluation, maintenance, and repair of electronic equipment, evaluation of patient owned equipment.
Cell Therapy Laboratory	Responsible for the processing, cryopreservation, and storage of cells for patients undergoing bone marrow or peripheral blood stem cell transplantation or receiving CAR-T therapy.
Clinical Call Center	Nurse-run telephone triage department that receives and manages telephone calls for established James patients outside normal business hours. The call center operates 24 hours a day and seven days of the week inclusive of holidays.
Communications and Marketing	Responsible for developing strategies and programs to promote the organization's overall image, brand, reputation, and specific products and services to targeted internal and external audiences. Manages all media relations, advertising, internal communications, special events, digital and social properties, collateral materials, and publications for the hospital.
Decedent Affairs	Provide support to the support system of patients who have died and assist them with completing required disposition decisions. Ensure notification of the CMS designated Organ Procurement Agency – Lifeline of Ohio (Lifeline). Promote and facilitate organ/eye/tissue donation by serving as the OSU Hospital Lifeline Liaison. Analyze data provided by Lifeline regarding organ/tissue/eye donation.
Diagnostic Testing Areas	Provide tests based on verbal, electronic, or written consult requests. Final reports are included in the patient record.
Early Response Team (ERT)	Provide timely diagnostic and therapeutic intervention before there is a cardiac or respiratory arrest or an unplanned transfer to the Intensive Care Unit. The team is comprised of rapid response RNs trained in ACLS and Respiratory Therapist who are trained to assist patient care staff when there are signs that a patient's health is declining.
Educational Development and Resources	Provide and promote ongoing development and training experiences to all members of The James Cancer Hospital community, provide staff enrichment programs, organizational development, leadership development, orientation and training, skills training, continuing education, competency assessment and development, literacy programs and student affiliations.
Endoscopy	Provide services to patients requiring a nonsurgical review of their digestive tract.
Environmental Services (EVS)	Provide housekeeping/cleaning and disinfecting of all areas of the hospital, including ORs, patient rooms, and nursing unit environments.
Epidemiology	Enhance the quality of patient care and the work environment by minimizing the risk of acquiring infection within the hospital and ambulatory settings.
Facilities Operations	Provide oversight, maintenance and repair of the building's life safety, fire

	safety, and utility systems. Provides preventative, repair, and routine maintenance in all areas of all buildings serving patients, guests, and staff.
Financial Services	Support leaders in preparation and management of capital and operational budgets; provide comprehensive patient billing services and collaborates with patients and payers to facilitate meeting all payer requirements for payment.
Human Resources (HR)	Serve as a liaison for managers regarding all human resources information and services; assist departments with restructuring efforts; provide proactive strategies for managing planned change within the health system; assist with Employee/Labor Relations issues; assists with performance management process; develops compensation strategies; develop hiring strategies and coordinates process for placements; provide strategies to facilitate sensitivity to issues of cultural diversity; provide human resources information to employees, and established equity for payroll.
Immediate Care Center (ICC)	Patients are evaluated for symptom management related to their disease, or treatment of their disease, and any acute needs requiring evaluation by an advanced practice provider (APP), subsequent treatments, and/or supportive care infusion therapy. Patient visits may include diagnostic, interpretive analysis, and minor invasive procedures. Referrals to other physicians, home care and hospice agencies, dieticians etc. are made by our APPs in collaboration with the primary team.
Information Systems	Support departments to evaluate information technology needs, deploy and integrate reliable, state-of-the-art information systems technology solutions to manage change.
Laboratory Services	Responsible for performing testing on patient specimens to obtain information about the health of patient as pertaining to the diagnosis, treatment, and prevention of disease. Laboratory reports are included in the patient record.
Materials Management	Supply, stock, and monitor PAR levels in patient care areas.
Medical Information Management (MIM)	Maintain patient records serving the needs of the patient, provider, institution and various third parties to health care in the inpatient and ambulatory setting.
Nutrition Services	Provide nutritional care and food service to The James inpatient and ambulatory site patients, staff, and visitors. Clinical nutrition assessment and consultation services are available in both inpatient and outpatient settings.
Pathology	Pathology receives, triages, and accessions gross (macroscopic) examination of all complexity of surgical resections and biopsies. Final reports are included in the patient record.
James Patient Access Services (JPAS)	Coordinate registration/admissions.

Patient Care Resource Management (PCRM) and Social Services	Provide personalized care coordination and resource management. with patients and their support systems. Provide discharge planning, coordination of external agency contacts for patient care needs and crisis intervention and support for patients and their support system. Provide services upon phone/consult request of physician, nurse or the patient or patient support system.
Patient Education	Provide educational resources that facilitate patient learning and encourage the patient to take an active role in their care. These resources are evidence- based, comply with national standards for health literacy/plain language/accessibility and meet Joint Commission and organizational standards. Based on their assessment, clinicians use patient education resources to assist in patient and caregiver understanding and to reinforce the learning provided during their hospital stay or clinic visit.
Patient Experience	Develop programs for support of patient relations and customer service and information desk. Volunteers do wayfinding, host visitors in waiting areas, serve as patient/family advisors and advocates, and assist staff. Volunteer Services serves as a liaison for the Service Board auxiliary, which annually grants money to department-initiated projects, enhancing the patient and family experience.
Perioperative Services	Provide personalized care of the patient receiving surgical services, from pre-anesthesia through recovery, for the ambulatory and inpatient surgical patients.
Pharmacy	Patient care services are delivered via specialty practice pharmacists and clinical generalists. Each practitioner promotes optimal medication use and assists in achieving the therapeutic goals of the patients.
Operations Improvement/Process Engineers	Operations Improvement Process Engineers utilize industrial engineering knowledge and skills, as well as LEAN and Six Sigma methods to provide internal consulting, coaching, and training services for all departments across all parts of The James Cancer Hospital to develop, implement, and monitor more efficient, cost-effective business processes and strategies.
Observation Unit	Provide additional bed capacity to expand care for oncology patients needing a non-inpatient level of care.
Pulmonary Diagnostics Lab	Provide services to patients requiring an evaluation of the respiratory system including pulmonary function testing, bronchoscopy, and other diagnostic/interventional pulmonary procedures.
Quality and Patient Safety	Provide integrated quality management and facilitate continuous quality improvement efforts throughout the hospital. Focus on the culture of safety and work with teams to provide information on trends and improvement opportunities.
Radiation Oncology	Responsible for clinical care related to the application of radiation treatments and radiation safety which include, but is not limited to photon, proton, gamma knife, and brachytherapy.

Radiology Services	Provide state-of-the-art radiological diagnostic and therapeutic testing and treatment. Services offered by the Radiology Imaging Department range from general radiography and fluoroscopy to new and advanced interventional procedures, contrast imaging, which include, but not limited to CT, MRI, IVP, etc., in which contrast agents are administered by IV certified radiology technologists.
Rehabilitation Services	Physical therapists, occupational therapists, speech and language pathologists and recreational therapists, evaluate, formulate a plan of care, and provide treatment based on physician referral and along with the interdisciplinary medical team for appropriate treatment and education needed for the established discharge plan.
Respiratory Therapy (RT)	Provide respiratory therapeutic interventions and diagnostic testing, by physician order including ventilator support, bronchodilator therapy, and pulmonary hygiene.
Safety	Hospital safety personnel handle issues associated with regulations, such as EPA, OSHA, and fire safety.
Security	Provide a safe and secure environment for patients, visitors, and staff members by responding to emergencies such as workplace violence, fires, bomb threats, internal and external disasters, armed aggressors, or any other incident that requires emergency response.
Social Work Services	Social Work Services are provided to patients/families to meet their medically related social and emotional needs as they impact their medical condition, treatment, recovery, and safe transition from one care environment to another. Social workers provide psychosocial assessment and intervention, crisis intervention, financial counseling, discharge planning, health education, provision of material resources and linkage with community agencies. Members of the treatment team can request consults for patients, or their support system.
Staff Development and Education	Provide and promote ongoing employee development and training related to oncology care, provides clinical orientation, and continuing education of staff.
Transfer Center	Coordinate with inpatient units and ancillary departments to ensure patient flow efficiency and timely access for patients who seek care. Provide transparency real-time across the Medical Center on capacity and all ADT (Admission, Discharge, and Transfer) activity. Timely and accurate patient placement based on level of care and service line is expedited through a capacity management technology platform.
Transportation	Supply patients with a secure and proficient transport within the Wexner Medical Center by transferring patients between rooms/floors within the hospital, taking patients to and from test sites, and discharging patients to Dodd Rehabilitation Center, on-site hospice, and the morgue.
Wound Care	Wound care services including but are not limited to the diagnosis and

	management for skin impairments, on-going wound management, treatment, and prevention.
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OSU AMBULATORY SURGERY CENTER
Scope of Care – Outpatient Care New Albany
Clinical Departments

Approved By:

X *Jessett A. Heard* 5/23/25

Dr. J. Heard, MD, MBA
Medical Director, Ambulatory Peri-Operative Services

X *Sheryl Burtch* 5.23.25

Sheryl Burtch, DNP, MA, RN, NEA-BC
Sr. Director, Peri-Operative Services

Department/ Patient Care Unit Name: The Ohio State University Ambulatory Surgery Center – Outpatient Care New Albany. The Center is an Ambulatory Surgery Center which provides services related to elective outpatient procedures.

Types (and age range) of patients served:

- 18 or more years of age.
- Patients aged 13 to 17 with the following requirements please follow below approval process:
 1. Treating physician has admitting privileges at an age-appropriate inpatient center
 2. Permission from Medical Director or Designee
 3. Minimum Height/ Weight requirements: 5'0" and 100 pounds. Variance shall require medical director (or designee) approval.
 4. All patients will have an anesthesia evaluation, either CompPAC or OPAC. Variance shall require medical director (or designee) approval.
 5. Pediatric BMI limit is 40.0.

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Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

6. An accompanying responsible adult, preferably the custodial parent or legal guardian, must remain present in the building. A custodial parent or legal guardian must be available by phone during the surgery admission. For the Extended Recovery Unit, an accompanying responsible adult must remain present in the building overnight with the patient.
- Physical Status:
- ASA I-II.
 - ASA III without signs or symptoms of uncontrolled or decompensated conditions.
 - ASA IV without signs or symptoms of uncontrolled or decompensated conditions.
 - ASA IV patients may not have straight Local without Anesthesia care; they may have MAC or General Anesthesia at the discretion of the Anesthesiologist.
 - General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Procedure Length

- Procedures requiring more than 6 hours of total OR time will need prior authorization by the Medical Director or designee.
- Patients anticipated to have an extended PACU length of stay will need prior authorization by the Medical Director or designee.
- These cases will be scheduled no later than the first case in a physician's block and will be scheduled to end by 3:00pm.

DNR:

- For patient admitted to the surgery center with an active DNR order, the advance directive should be discussed with the patient and/or their family members or caregivers, the surgeon/proceduralist and anesthesia providers to determine whether the do-not-resuscitate orders are suspended or maintained for the surgery or procedure. **Ideally, this should occur before the day of surgery, after the ComPAC or OPAC visit has been completed.**
- Suspending a DNR will be in accordance with the OSUWMC policy for surgery center patients.

< <https://osumc.policytech.com/docview/?app=pt&source=unspecified&docid=118044>>

Malignant Hyperthermia:

Patients with a personal or family history of MH must be reviewed by the Medical Director or Designee.

Morbid Obesity OR's:

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Patients will be considered with identified criteria - Variance shall require medical director (or designee) approval.

- All patients must have current height & weight in IHIS before scheduled at the ASC.
- Patients with BMI > 40.0 may not be performed in the prone position if anesthetized and unable to move themselves into that position.
- Patients with BMI > 45.0 may not be performed in the lateral position if anesthetized and unable to move themselves into that position.
- Patients with a BMI 45.0-55.0 will be considered for general anesthesia, needing review and final approval from the medical director or designee. If BMI is greater than 55.0, procedure planned should require minimal sedation. Elective conversion to General Anesthesia will not be an option. If General Anesthesia conversion is an anticipated option, the surgery/procedure should not be scheduled at the ASC.
- No patient with BMI > 65.0 will be accepted at the ASC.
- No pediatric (age < 18 years) patient with BMI > 40.0 will be accepted at the ASC.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Morbid Obesity Endoscopy

- Patients with BMI > 45 may not have conscious/moderate sedation
- Patients with BMI between 45-55 will need review and final approval from the medical director or designee.
- Endoscopy patient BMI limit is 55.0 regardless of positioning.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Hemodialysis:

Hemodialysis patients cannot have procedure/surgery and hemodialysis scheduled on the same day. Either the date of procedure/surgery or dialysis must be changed if they are scheduled for the same day. Variance shall require medical director (or designee) approval.

Ambulation:

Patients must be able to ambulate with minimal assistance including ability to stand up and pivot to cart.

- Procedures will not be performed with patient's personal medical equipment (i.e. wheelchairs).

Anesthesia:

General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Difficult Airway:

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Patients with a history of difficult airway / intubation must complete a ComPAC or OPAC evaluation and be approved by the Medical Director or Designee.

Pacemakers / Defibrillators:

- Patients with isolated pacemakers must have the device evaluated by their Cardiologist within twelve (12) months prior to Date of Service. Documentation of interrogation must be readily available.
- Patients with pacemakers will not be considered for ESWL procedures without OSU Pacer Clinic personnel on site throughout the surgical procedure.
- Patients with AICD's are considered for MAC Anesthesia/conscious sedation only. Patients must be evaluated by their cardiologist within six (6) months prior to Date of Service. Documentation of interrogation must be readily available and there should be no change in patient's clinical status since last cardiac evaluation. If placing a magnet would deprogram the AICD, these patients would not be candidates for the ASC.

Reference:

Crossley, George H. et al "The Heart Rhythm Society (HRS)/American Society of." *Heart Rhythm* 8.7 (2011): 1114-140. Print.
Michael, Platonov A., MD, Anne Gillis, MD, and Katherine M. Kavanagh, MD. "Pacemakers, Implantable Cardioverter/Defibrillators." *Journal of Endourology* 22.2 (2008): 243-47. Print.

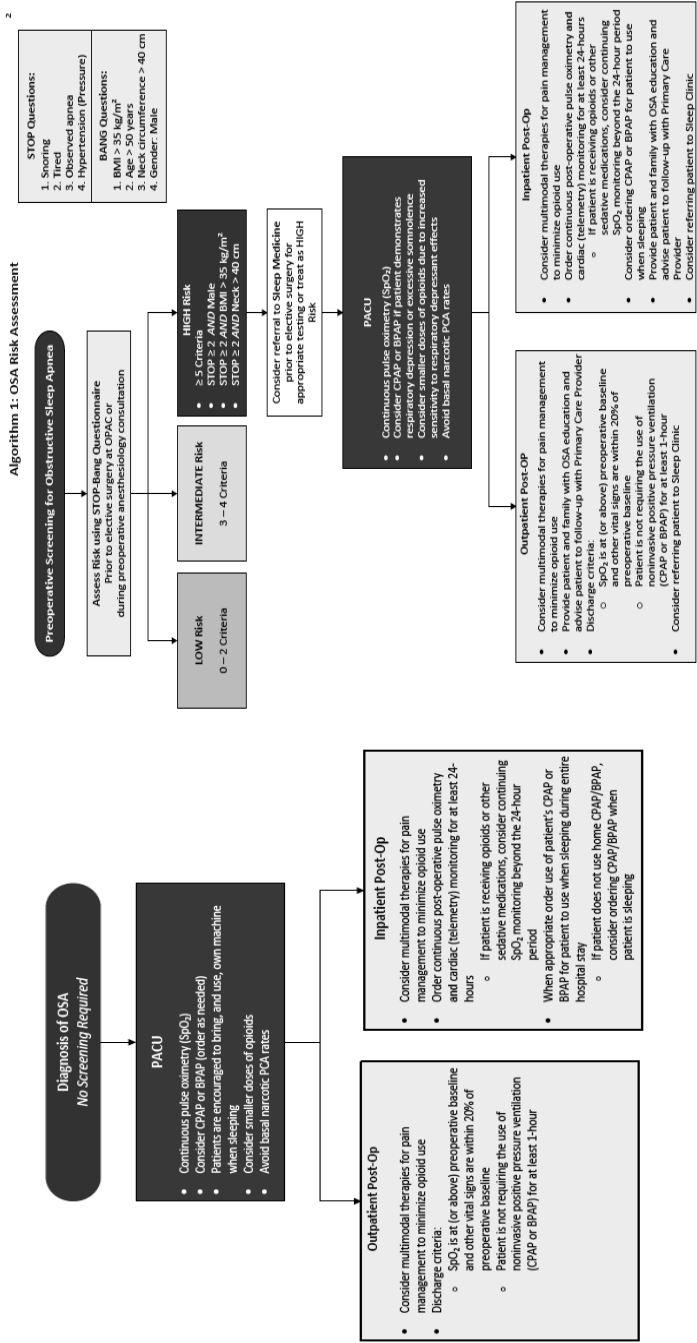
Obstructive Sleep Apnea:

- Anesthesiology services will evaluate the appropriateness of outpatient procedures/surgery, given the patient's OSA history, the proposed procedure and the patient's co-morbidities.
- Patients with known diagnosis of OSA that have optimized co-morbid medical conditions will be considered.
 - Patients with a presumed diagnosis of OSA based on screening (STOP Bang) questionnaire, and with optimized co-morbid conditions, will be considered for the OSC if postoperative pain can be managed predominantly with non-opioid analgesia.

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Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

Reference:

Stein, E., Das, A., Guertin, M., Dalton, R., Springer, A., Rogers, B., & Heavener, D. (2021). *Perioperative assessment and management of obstructive sleep apnea (OSA): OSU WMC Clinical Practice Guideline*. <https://onesource.osumc.edu/sites/ebm/Documents/Guidelines/ObstructiveSleepApnea>



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Isolation Patients/ Infection Prevention:

Patients requiring isolation precautions (droplet, airborne) as defined by medical center guidelines will need approval by the Medical Director or Designee.

Patients requiring contact isolation precautions may be considered as defined by medical center guidelines using appropriate PPE.

Patients with wounds that are bleeding or draining will have sites contained with an occlusive dressing and treated with standard precautions.

Management of MRSA in Ambulatory Surgical Facilities. (n.d.). Management of MRSA in Ambulatory Surgical Facilities. Retrieved from <http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2010/Jun7%282%29/Pages/61.aspx>

Guide to Infection Prevention In Outpatient Settings: Minimum Expectations for Safe Care. (n.d.). CDC.Gov. Retrieved from

Pregnancy:

- No patient with a known pregnancy may be treated at the ASC.
- All patients of childbearing age with female reproductive organs will submit a urine pregnancy test on the day of surgery. Every attempt will be made to collect urine specimen. If the patient is unable to void, refuses to void, or the patient's legal guardian refuses the pregnancy test, a pregnancy test waiver consent form may be signed by the patient or the patient's legal guardian after a discussion of risks and signature from the anesthesiologist and attending proceduralist.

Developmental Disabilities/Special Needs:

The ASC will be provided an updated History & Physical that includes diagnosis of specific conditions/ syndromes. Along with the H&P, the "Functional Ability Assessment" will be completed. All Developmentally Disabled/ Special Needs patients require Anesthesia approval prior to scheduling.

Toxicology Screen:

All patients who appear to be intoxicated and who test positive on Date of Service for methamphetamines, amphetamines, cocaine &/or alcohol will have their procedure cancelled. Patients testing positive for other drugs will be evaluated on an individual basis.

Preoperative Evaluation:

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Date Last Reviewed: 6/24/24

Patients may undergo pre-operative testing according to the current Pre-Anesthetic Testing Algorithm. Complete pre-operative services are available by a CompAC or OPAC appointment.
Accompanying Adult:

Patients who have undergone minor, superficial procedures **without sedation** may be discharged at the discretion of their admitting physician. If the procedure performed involves the hand, eye, or foot & impairs their visual acuity, or hand/ foot dexterity to the degree that they cannot operate a motor vehicle, the patient will not be permitted to drive when discharged.

All other patients will require an accompanying adult (18 or more years of age) to provide patient transportation upon discharge. The ASC will recommend that the adult representative remain at the ASC throughout the procedure. Patients will be made aware that the absence of an accompanying adult may result in their procedure being cancelled. Patients found to be without transportation after their procedure will be discharged according to current medical center policy.

Scope and complexity of patient's care needs:

Four operating rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing the following specialties: General Surgery, Colorectal, Gynecology, Ophthalmology, Plastic Surgery and Urology. Four endoscopy procedure rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing from Gastroenterology, Hepatology and Nutrition (GHN), General Surgery and open access referrals.

The Center is staffed from 0600AM-to 1700PM Monday through Friday, primarily for adult patients requiring surgical intervention under local anesthesia, conscious sedation, monitored anesthesia care, regional anesthesia or general anesthesia.

Patients are admitted to the Center on an ambulatory basis. Patients are required to have the ability to understand and carry out their discharge instructions or have a responsible adult which will assist them in fulfilling these needs.

All procedures performed at the Ambulatory Surgery Center are part of the Core Privileges approved by Ohio State University Wexner Medical Center.

The following types of procedures are not performed at the Center:

- Are associated with the risk of extensive blood loss.
- Require major or prolonged invasion of body cavities.
- Directly involve major blood vessels.
- Are an emergency or life threatening in nature.
- Noted on the CMS Inpatient Only List. This list will be reviewed and updated annually.

Methods used to assess and meet patient's care needs:

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Date Last Reviewed: 6/24/24

Care of all patients experiencing surgical intervention is based on the nursing process and standards from AORN, ASPSN, SGNA and other National Peri-operative organizations supporting the service lines of the Center. Preoperatively, the RN verifies the patient, identifies the patient's special needs, completes a patient assessment and develops a plan of care. Intra-operatively, the RN implements the patient's plan of care and documents on the appropriate medical records (e.g.: Op-Time and hospital approved documents).

Methods used to determine the appropriateness, clinical necessity and timeliness of support services provided directly or through referral

The Circulating RN works collaboratively with the proceduralists, surgeons, anesthesiologists, PACU RN, and the Pre-op Holding RN in assessing, prioritizing and meeting the patient's individual needs. Based on the scheduled procedure and communication with the physician/surgeon and anesthesia, specific patient concerns regarding safety, infection control, positioning, and psychosocial needs are anticipated and met (e.g.: preparation of OR environment for latex allergy patient, isolation protocols implemented, limitation of patients range of motion, need for an interpreter or caregiver for MR/DD patients). The continued need for support is communicated to the receiving unit via the oral transfer report and IHIS documentation. A collaborative effort to improve this communication is ongoing. The success of this method is determined by the achievement of positive patient outcomes, reflected by PI monitors and retrospective chart reviews.

In the event of an identified patient need to receive services not provided at the ASC, the patient will be transferred to the Wexner Medical Center for subsequent evaluation.

Standards of practice/ practice guidelines, when available

The Ambulatory Surgery Center provides services related to elective outpatient procedures in the fields of General Surgery, GYN, Gynecology, Ophthalmology, Plastic Surgery, Urology, and Vascular at 6100 N. Hamilton Road, Westerville Ohio 43081. The OSUWMC Board of Directors, the OSUWMC Medical Staff, in conjunction with the Ambulatory Executive Director, Ambulatory Medical Director, Senior Director, Associate and Administrative Directors & Nurse Manager assess, plan, implement, and evaluate the delivery of care and services. The Ambulatory leadership team is responsible for ensuring that the delivery of care provided is consistent with the mission, standards, and policies established for patient care. The Ambulatory leadership team promotes an environment that fosters empowerment through active participation in strategic planning and development of processes that ensure adequacy of services and resources to meet the current and projected community needs, policy establishment, and professional growth.

The objective of The Ohio State University Ambulatory Surgery Center is to deliver excellent surgical, procedural, and anesthesia services to those we serve in accordance with the standards set forth by The Joint Commission, CMS Conditions of Participations for Hospitals and The Vision and Mission statements of The Ohio State University Wexner Medical Center. The Scope of Care is designed to provide appropriate care and services for all patients in a timely manner.

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Date Last Reviewed: 6/24/24

Utilizing a multi-disciplinary approach in the delivery of patient care, our services promote continuous quality and performance improvement activities provided in an environment where collaboration and multi-disciplinary approaches to problem identification and resolution are the expectation. Important criteria and thresholds are measured and continuously monitored through our Quality and Performance Improvement process to optimize patient outcomes and assure the highest level of satisfaction for all our customers. Results of our Quality and Performance Improvement activities are used to improve patient outcomes enhance our services and our staff performance.

Understanding that the provision of health care services is dynamic and fluid; the Scope of Care will be **reviewed at least annually** and revised as needed to reflect the changing patient needs, community changes, and or facility needs and initiatives.

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Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

OSU AMBULATORY SURGERY CENTER
Scope of Care – Outpatient Care Dublin
Clinical Departments

Approved By:

X *Garrett A. Heard* 5/23/25

Dr. Heard, MD, MBA
Medical Director, Ambulatory Peri-Operative Services

X *Sheryl Burch* 5.23.25

Sheryl Burch, DNP, MA, RN, NEA-BC
Sr. Director, Peri-Operative Services

Department/ Patient Care Unit Name: The Ohio State University Outpatient Care Dublin - Ambulatory Surgery Center. The Center is an Ambulatory Surgery Center of OSUWMC which provides services related to elective outpatient procedures.

Types (and age range) of patients served:

- 18 or more years of age.
- Patients aged 13 to 17 with the following requirements please follow below approval process:
 1. Treating physician has admitting privileges at an age-appropriate inpatient center
 2. Permission from Medical Director or Designee
 3. Minimum Height/ Weight requirements: 5'0" and 100 pounds. Variance shall require medical director (or designee) approval.
 4. All patients will have an anesthesia evaluation, either CompPAC or OPAC. Variance shall require medical director (or designee) approval.
 5. Pediatric BMI limit is 40.0.

Approved: July 2022
Date Last Revised: 3/8/2023 Date
Last Reviewed: 6/24/2024

6. An accompanying responsible adult, preferably the custodial parent or legal guardian, must remain present in the building. A custodial parent or legal guardian must be available by phone during the surgery admission. For the Extended Recovery Unit, an accompanying responsible adult must remain present in the building overnight with the patient.

Physical Status:

- ASA I-II.
- ASA III without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV patients may not have straight Local without Anesthesia care; they may have MAC or General Anesthesia at the discretion of the Anesthesiologist.
- General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Procedure Length

- Procedures requiring more than 6 hours of total OR time will need prior authorization by the Medical Director or designee.
- Patients anticipated to have an extended PACU length of stay will need prior authorization by the Medical Director or designee.
- These cases will be scheduled no later than the first case in a surgeon's block and will be scheduled to end by 3:00pm

DNR:

- For patient admitted to the surgery center with an active DNR order, the advance directive should be discussed with the patient and/or their family members or caregivers, the surgeon/proceduralist and anesthesia providers to determine whether the do-not-resuscitate orders are suspended or maintained for the surgery or procedure. **Ideally, this should occur before the day of surgery, after the CompPAC or OPAC visit has been completed.**
- Suspending a DNR will be in accordance with the OSUWMC policy for surgery center patients.

< <https://osumc-policytech.com/docview/?app=pt&source=unspecified&docid=118044>>

Malignant Hyperthermia:

Patients with a personal or family history of MH must be reviewed by the Medical Director or Designee.

Morbid Obesity OR's:

Patients will be considered with identified criteria - Variance shall require medical director (or designee) approval.

- All patients must have current height & weight in IHIS before scheduled at the ASC.
- Patients with BMI > 40.0 may not be performed in the prone position if anesthetized and unable to move themselves into that position.

Date Last Revised: 3/8/2023

Date Last Reviewed:

- Patients with BMI > 45.0 may not be performed in the lateral position if anesthetized and unable to move themselves into that position.
- Shoulder patients must have a BMI ≤ 45.
- Patients with a BMI 45.0-55.0 will be considered for general anesthesia, needing review and final approval from the medical director or designee. If BMI is greater than 55.0, procedure planned should require minimal sedation. Elective conversion to General Anesthesia will not be an option. If General Anesthesia conversion is an anticipated option, the surgery/procedure should not be scheduled at the ASC.
- No patient with BMI > 65.0 will be accepted at the ASC.
- No pediatric (age < 18 years) patient with BMI > 40.0 will be accepted at the ASC.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Morbid Obesity Endoscopy

- Patients with BMI > 45 may not have conscious/moderate sedation
 - Patients with BMI between 45-55 will need review and final approval from the medical director or designee.
 - Endoscopy patient BMI limit is 55.0 regardless of positioning.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Hemodialysis:

Hemodialysis patients cannot have surgery and hemodialysis scheduled on the same day. Either the date of surgery or dialysis must be changed if they are scheduled for the same day. Variance shall require medical director (or designee) approval.

Ambulation:

Patients must be able to ambulate with minimal assistance including ability to stand up and pivot to cart

- Procedures will not be performed with patient's personal medical equipment (i.e. wheelchairs)
- Physical Therapy will be available for patients in Extended Recovery for total joint procedures.

Anesthesia:

General and MAC Anesthesia will be administered by providers from Department of Anesthesiology. Conscious sedation will be administered by any individual provider credentialed to do so.

Difficult Airway:

Patients with a history of difficult airway / intubation must complete a CompAC or OPAC evaluation and approved by the Medical Director or Designee.

Date Last Revised: 3/8/2023

Date Last Reviewed:

Pacemakers / Defibrillators:

- Patients with isolated pacemakers must have the device evaluated by their Cardiologist within twelve (12) months prior to Date of Service. Documentation of interrogation must be readily available.
- Patients with pacemakers will not be considered for ESWL procedures without OSU Pacer Clinic personnel on site throughout the surgical procedure.
- Patients with AICD's are considered for MAC Anesthesia/conscious sedation only. Patients must be evaluated by their cardiologist within six (6) months prior to Date of Service. Documentation of interrogation must be readily available and there should be no change in patient's clinical status since last cardiac evaluation. If placing a magnet would deprogram the AICD, these patients would not be candidates for the ASC.

Reference:

Crossley, George H. et al "The Heart Rhythm Society (HRS)/American Society of." *Heart Rhythm* 8.7 (2011): 1114-140. Print.
Michael, Platonov A., MD, Anne Gillis, MD, and Katherine M. Kavanagh, MD. "Pacemakers, Implantable Cardioverter/Defibrillators." *Journal of Endourology* 22.2 (2008): 243-47. Print.

Obstructive Sleep Apnea:

- Anesthesiology services will evaluate the appropriateness of outpatient procedures/surgery, given the patient's OSA history, the proposed procedure, and the patient's co-morbidities.
- Patients with known diagnosis of OSA that have optimized co-morbid medical conditions will be considered.
 - Patients with a presumed diagnosis of OSA based on screening (STOP Bang) questionnaire, and with optimized co-morbid conditions, will be considered for the OSC if postoperative pain can be managed predominantly with non-opioid analgesia.

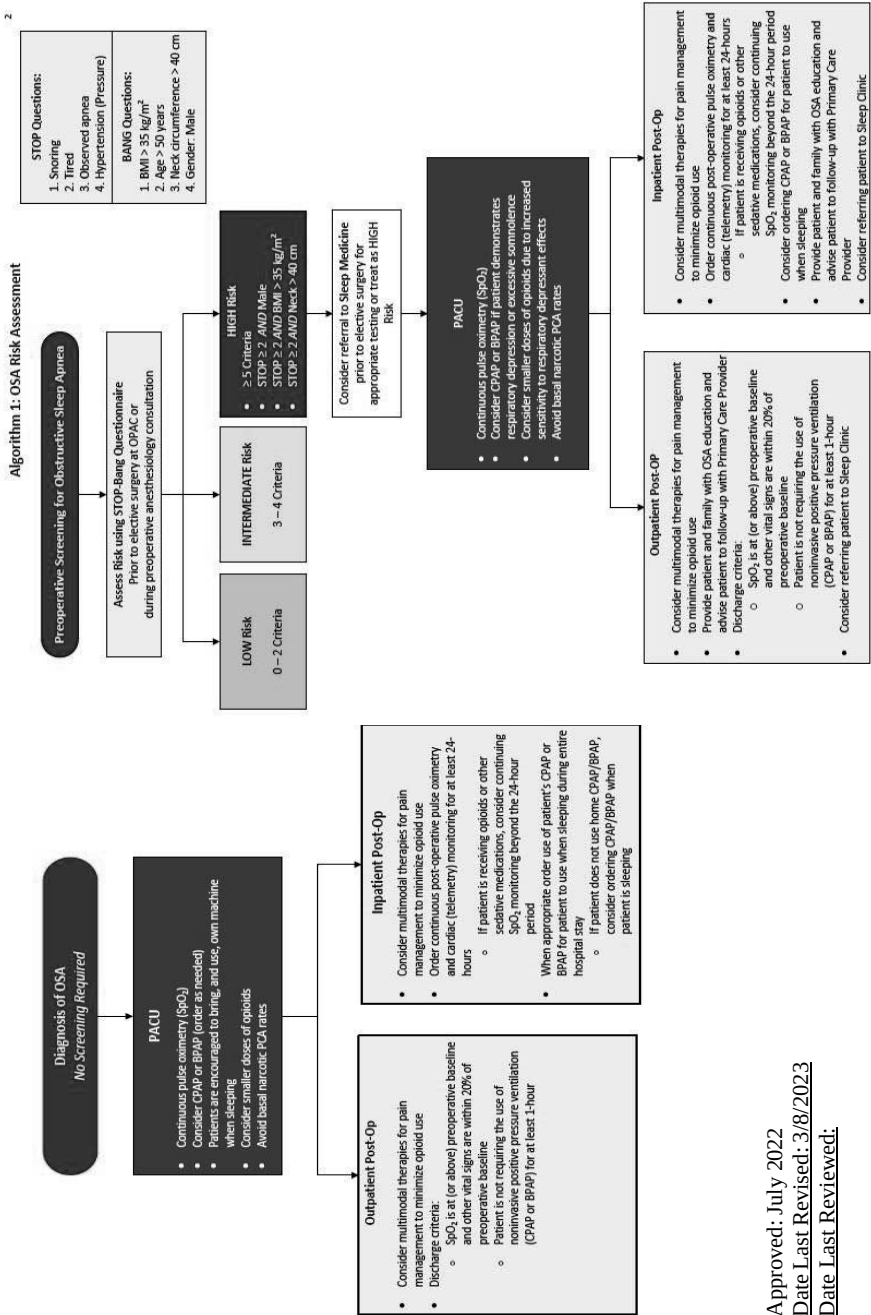
Approved: July 2022

Date Last Revised: 3/8/2023

Date Last Reviewed:

Reference:

Stein, E., Das, A., Guertin, M., Dalton, R., Springer, A., Rogers, B., & Heavener, D. (2021). *Perioperative assessment and management of obstructive sleep apnea (OSA): OSU WMC Clinical Practice Guideline*. <https://onesource.osumc.edu/sites/ebm/Documents/Guidelines/Guidelines/ObstructiveSleepApnea>



Approved: July 2022
Date Last Revised: 3/8/2023
Date Last Reviewed:

Isolation Patients/ Infection Prevention:

Patients requiring isolation precautions (droplet, airborne) as defined by medical center guidelines will need approval by the Medical Director or Designee.

Patients requiring contact isolation precautions may be considered as defined by medical center guidelines using appropriate PPE.

Patients with wounds that are bleeding or draining will have sites contained with an occlusive dressing and treated with standard precautions.

Management of MRSA in Ambulatory Surgical Facilities. (n.d.). *Management of MRSA in Ambulatory Surgical Facilities*. Retrieved from <http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2010/Jun7%282%29/Pages/61.aspx>

Guide to Infection Prevention In Outpatient Settings: Minimum Expectations for Safe Care. (n.d.). *CDC.Gov*. Retrieved from

Pregnancy:

- No patient with a known pregnancy may be treated at the ASC.
- All patients of childbearing age with female reproductive organs will submit a urine pregnancy test on the day of surgery. Every attempt will be made to collect urine specimen. If the patient is unable to void, refuses to void, or the patient's legal guardian refuses the pregnancy test, a pregnancy test waiver consent form may be signed by the patient or the patient's legal guardian after a discussion of risks and signature from the anesthesiologist and attending proceduralist.

Developmental Disabilities/Special Needs:

The ASC will be provided an updated History & Physical that includes diagnosis of specific conditions/ syndromes. Along with the H&P, the "Functional Ability Assessment" will be completed. All Developmentally Disabled/ Special Needs patients require Anesthesia approval prior to scheduling.

Toxicology Screen:

All patients who appear to be intoxicated and who test positive on Date of Service for methamphetamines, amphetamines, cocaine &/or alcohol will have their procedure cancelled. Patients testing positive for other drugs will be evaluated on an individual basis.

Preoperative Evaluation:

Patients may undergo pre-operative testing according to the current Pre-Anesthetic Testing Algorithm. Complete pre-operative services are available by a ComPAC or OPAC appointment.

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Date Last Reviewed:

Accompanying Adult:

Patients who have undergone minor, superficial procedures **without sedation** may be discharged at the discretion of their admitting physician. If the procedure performed involves the hand, eye, or foot & impairs their visual acuity, or hand/ foot dexterity to the degree that they cannot operate a motor vehicle, the patient will not be permitted to drive when discharged.

All other patients will require an accompanying adult (18 or more years of age) to provide patient transportation upon discharge. The ASC will recommend that the adult representative remain at the ASC throughout the procedure. Patients will be made aware that the absence of an accompanying adult may result in their procedure being cancelled. Patients found to be without transportation after their procedure will be discharged according to current medical center policy.

Scope and complexity of patient's care needs:

Six operating rooms located on the second floor of The Ohio State University Outpatient Care Dublin Ambulatory Surgery Center servicing the following specialties: Urology, Vascular, Otolaryngology, Hand & Upper Extremity, Orthopaedic Joints, Orthopaedic Spine, Endoscopy and Interventional Radiology, Pain Management, and Podiatry. Six endoscopy procedure rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing from Gastroenterology, Hepatology and Nutrition (GHN), and open access referrals. The Center is staffed from 0600AM-4o 1700PM Monday through Friday, primarily for adult patients requiring surgical intervention under local anesthesia, conscious sedation, monitored anesthesia care, regional anesthesia or general anesthesia.

Patients are admitted to the ASC on an ambulatory basis. The patients are required to have the ability to understand and carry out their discharge instructions or have a responsible adult which will assist them in fulfilling these needs.

All procedures performed at the Ambulatory Surgery Center are part of the Core Privileges approved by Ohio State University Wexner Medical Center.

The following types of procedures are not performed at the Center:

- Are associated with the risk of extensive blood loss.
- Require major or prolonged invasion of body cavities.
- Directly involve major blood vessels.
- Are an emergency or life threatening in nature
- Noted on the CMS Inpatient Only List. This list will be reviewed and updated annually.

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Date Last Revised: 3/8/2023

Date Last Reviewed:

Methods used to assess and meet patient's care needs:

Care of all patients experiencing surgical intervention is based on the nursing process and standards from AORN, ASPSN, SGNA and other National Peri-operative organizations supporting the service lines of the Center. Preoperatively, the RN verifies the patient, identifies the patient's special needs, completes a patient assessment and develops a plan of care. Intra-operatively, the RN implements the patient's plan of care and documents on the appropriate medical records (e.g.: Op-Time and hospital approved documents).

Methods used to determine the appropriateness, clinical necessity and timeliness of support services provided directly or through referral

The Circulating RN works collaboratively with the proceduralists, surgeons, anesthesiologists, PACU RN, and the Pre-op Holding RN in assessing, prioritizing and meeting the patient's individual needs. Based on the scheduled procedure and communication with the physician/surgeon and anesthesia, specific patient concerns regarding safety, infection control, positioning, and psychosocial needs are anticipated and met (e.g.: preparation of OR environment for latex allergy patient, isolation protocols implemented, limitation of patients range of motion, need for an interpreter or caregiver for MR/DD patients). The continued need for support is communicated to the receiving unit via the oral transfer report and IHIS documentation. A collaborative effort to improve this communication is ongoing. The success of this method is determined by the achievement of positive patient outcomes, reflected by PI monitors and retrospective chart reviews.

In the event of an identified patient need to receive services not provided at the ASC, the patient will be transferred to the Wexner Medical Center for subsequent evaluation.

Standards of practice/ practice guidelines, when available

The Ambulatory Surgery Center provides services related to elective outpatient procedures in the fields of Urology, Vascular, Otolaryngology, Hand & Upper Extremity, Orthopaedic Joints, Orthopaedic Spine, Endoscopy and Interventional Radiology, Pain Management, and Podiatry in Outpatient Care at Dublin Ambulatory Surgery Center - 6700 University Blvd, Dublin, Ohio 43016. The OSUWMC Board of Directors, the OSUWMC Medical Staff, in conjunction with the Ambulatory Executive Director, Ambulatory Medical Director, Senior Director, Associate and Administrative Directors, & Nurse Manager assess, plan, implement, and evaluate the delivery of care and services. The Ambulatory leadership team is responsible for ensuring that the delivery of care provided is consistent with the mission, standards, and policies established for patient care. The Ambulatory leadership team promotes an environment that fosters empowerment through active participation in strategic planning and development of processes that ensure adequacy of services and resources to meet the current and projected community needs, policy establishment, and professional growth.

The objective of the Outpatient Care Dublin Ambulatory Surgery Center is to deliver excellent surgical, procedural, and anesthesia services to those we serve in accordance with the standards set forth by The Joint Commission, CMS Conditions of Participations for Hospitals and The

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Date Last Reviewed:

Vision and Mission statements of The Ohio State University Wexner Medical Center. The Scope of Care is designed to provide appropriate care and services for all patients in a timely manner.

Utilizing a multi-disciplinary approach in the delivery of patient care, our services promote continuous quality and performance improvement activities provided in an environment where collaboration and multi-disciplinary approaches to problem identification and resolution are the expectation. Important criteria and thresholds are measured and continuously monitored through our Quality and Performance Improvement process to optimize patient outcomes and assure the highest level of satisfaction for all our customers. Results of our Quality and Performance Improvement activities are used to improve patient outcomes enhance our services and our staff performance.

Understanding that the provision of health care services is dynamic and fluid; the Scope of Care will be **reviewed at least annually** and revised as needed to reflect the changing patient needs, community changes, and/or facility needs and initiatives.

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Date Last Reviewed:

ATTACHMENT XXIV



Policy Name: Patient Complaint and Grievance
Management 03-28

Applies to:

☒ OSU Wexner Medical Center [University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital, Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services]	☒ Ambulatory Surgery Centers [New Albany, Dublin]	☒ Arthur G. James Cancer Hospital and Richard J. Solove Research Institute and Outreach Sites
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Policy Objective

The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) is committed to promptly resolving complaints at the first level of contact whenever possible.

The purpose of this policy is to provide guidelines for staff to respond and manage complaints and grievances; and to define the process for responding to grievances according to The Joint Commission and CMS Hospital Conditions of Participation.

The Ohio State University Wexner Medical Center Board has delegated the responsibility for review and resolution of all grievances received from patients of University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital (Ross Hospital), Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services and Ambulatory Surgery Centers to the OSU Wexner Medical Center Grievance Committee and Arthur G. James and Richard J. Solove Research Institute (The James) Grievance Committee for grievances received from patients of the James Cancer Hospital and Outreach Sites.

The Patient Experience Department is responsible for supporting the complaint management process and assuring patients are adequately educated regarding their rights to register complaints and concerns.

In order to achieve the highest level of satisfaction possible, and to provide protection of their rights, patients will be encouraged to report concerns.

Concerns from patients, families, visitors, or other members of the community will be received courteously, treated seriously, and dealt with promptly. The act of voicing concern will not jeopardize the care a patient is currently receiving, nor any future access to appropriate care.

It is expected that the OSUWMC and The James staff will respond to patient concerns promptly and offer reasonable and appropriate solutions.

Definitions

Term	Definition
Staff Present	1. Includes any hospital staff present at the time of the complaint or who can quickly be at the patients location (i.e. nursing, administration, nursing supervisors, patient advocate, etc.) to resolve the patient's complaint.
Complaint	1. A clinical care issue that is verbally conveyed by a patient or the patient's representative to staff and generally resolved within forty eight (48) <u>twenty-four (24)</u> hours. 2. A complaint regarding discrimination on the basis of <u>race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits)</u> age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, veteran status or ability to pay, unless unable to resolve within forty-eight (48) hours. 3. A complaint such as not having a qualified interpreter available for a patient, patients spouse, family, and/or partner, even if the patient does not require an interpreter.

	4. Minor service complaints such as housekeeping, bedding, billing issues and food. 5. Complaints regarding property loss. 6. Privacy and HIPAA complaints, unless unable to be resolved within forty-eight (48) hours
Grievance	1. Any written complaint received from a patient or the patient's representative regarding clinical care, whether from an inpatient, outpatient or released/discharged patient. An e-mail or facsimile (fax) will be considered to be "written". 2. Verbal complaints about clinical care that are not resolved by staff at the time of the complaint, generally within forty-eight (48), and made by a patient or the patient's representative. 3. All verbal or written complaints regarding: • Abuse, neglect, patient harm; • Hospital compliance with CMS Hospital Conditions of Participation (CoP); and • Medicare Beneficiary Billing complaints related to rights and limitations provided by 42CFR§489. 4. Any complaint that the patient, or their representative, requests be handled as a formal grievance. 5. Any complaint where a written response from the hospital is requested by the patient or their representative. 6. Post-discharge complaints, made by a patient or their representative, related to clinical care or services during a stay shall be considered grievances, unless the complaint would have routinely been handled by staff generally within forty-eight (48) hours had the communication occurred during the stay or visit. In this instance, the communication will be considered a complaint.

Policy Details

1. Staff Reporting Complaints via the Hospital's Intranet Site (MyTools)
 1. Staff members are encouraged to enter non-clinical complaints directly into the Complaint Management Database on the hospital's intranet site, MyTools.
 2. The Complaint Management Database provides a mechanism for tracking and reporting complaint data, as well as coordinating timely follow-up.
 3. All verbal or written complaints regarding quality of care issues, abuse, neglect or patient harm shall be entered into the Patient Safety Reporting System for appropriate investigation and follow-up.
2. Patients or Visitors Reporting Complaints via Telephone
 1. Complaints about care delivered at University Hospital, Ross Hospital, Dodd Rehabilitation and Brain and Spinal Hospital, ~~or Ambulatory or the Specialty Primary Care Network~~ may be directed to the Patient Experience Department at 1-614-293-8944.
 2. Complaints about care delivered at The James may be directed to James Patient Experience at 1-614- 293-8609.
 3. Complaints about care delivered at East Hospital and Outpatient Care East may be directed to East Patient Experience at 1-614- 257-2310.
 4. Complaints about care delivered at Harding Hospital may be directed to Harding Patient Experience at 1-614-688-8941.
 5. After regular business hours, complaints may be escalated to the Hospital Administrative Manager or Nursing Supervisor for each location.
3. Procedures for Complaints
 1. All clinical care complaints handled within ~~forty-eight (48) hours~~ should be referred to the attending physician or manager for appropriate follow-up and entered in the Complaint Management Database.
 2. All non-clinical complaints should be referred to the appropriate department manager for follow-up.
 3. Patient Experience will forward all issues regarding property loss to the Property Loss Committee and enter the issue into the Complaint Management Database.
 4. Privacy and HIPAA complaints will be forwarded to the HIPAA Privacy Officer.
 5. When complaints cannot be immediately resolved by the staff member to whom they were reported, the complaint should be reported to the supervisor or manager for resolution and entered into the Complaint Management Database.
 6. Patient Experience staff will act as a liaison for the patient by representing their interests and facilitating communication with appropriate individuals within the Medical Center.
 7. Any complaints under the protected classes (race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, or veteran status) will be sent over to the Ohio State University Civil Rights Compliance Office of Institutional Equity (OIE) for further collaborative review in accordance with the university Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies.

CRCOOIE will serve as the primary contact for any further investigation outside of the OSUWMC/The James complaint process.

4. Procedures for Grievances
 1. When notified, Patient Experience or the appropriate manager will respond and investigate grievances regarding patients who are currently located within the hospital setting.
 2. Situations that endanger (e.g. neglect or abuse) the patient should be addressed immediately by the appropriate staff member.
 3. When appropriate, Risk Management may initiate a review of a grievance.
 4. Patient Experience will serve as the primary liaison to the patient, and may consult Risk Management as needed.
 5. If the grievance is from a written source, or reported after the patient has left the facility, Patient Experience will initiate contact with the complainant.
 6. Clinical Care Grievances
 - a. Clinical care grievances should be entered in the Patient Safety Reporting System, in accordance with the Patient Safety & Event Reporting 04-05.
 - b. Following initial contact with the complainant, Patient Experience will address the grievance between the patient, or their representative, and the appropriate hospital representatives based on the nature of the grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 7. Non-Clinical Care Grievances
 - a. Non-clinical grievances should be entered into the Complaint Management Database.
 - b. Following initial contact with the complainant, Patient Experience will facilitate communication and dialogue between the patient, or their representative, and the appropriate hospital representatives based on the nature of the non-clinical care grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 8. Typically, a grievance will be considered resolved when the patient is satisfied with the actions taken on their behalf.
 - a. However, there may be situations where the Hospital has taken appropriate and reasonable actions on the patient's behalf in order to resolve the patient's grievance and the patient or the patient's representative remains unsatisfied with the Hospital's actions. In these situations, the Hospital may consider the grievance to be closed.
 - b. Patient Experience must maintain documentation of its efforts and demonstrate compliance with this policy.
 9. A written response to all grievances shall be submitted to the patient, or their representative, by the Patient Experience representative or other appropriate individual within seven (7) business days regarding the disposition of the grievance.
 - a. Included in the written response will be:
 - i. The name of the hospital;
 - ii. The steps taken on behalf of the patient to investigate and resolve the grievance;
 - iii. The results of the grievance process; and
 - iv. The date of completion.
 - b. All grievance response letters will be mailed to the patient's or patient's representative's home address unless otherwise indicated.
 - c. If the grievance is received via email, the response may be sent via email.
 10. There may be complications or circumstances, which will not allow every grievance to be resolved during the seven (7) day timeframe.
 - a. If a response will take longer than seven (7) business days, the patient should be contacted by Patient Experience and advised that the hospital is still working to resolve the grievance.
 - b. The patient or the patient's representative should be contacted a minimum of every fourteen (14) business days by Patient Experience until the grievance is responded to in writing.
 - c. If the grievance is not resolved within 30 days, it must be reviewed by the OSU Wexner Medical Center Grievance Committee or The James Grievance Committee.
 11. A copy of the written response shall be retained by Patient Experience.
 12. Any grievances under the protected classes (age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, FACE, COLOR, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) gender, sexual-orientation, pregnancy, or veteran status) will be sent over to the Office of Institutional Equity Ohio State University Civil Rights Compliance Office for further collaborative review in accordance with the university

Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies. ~~OSUWMC~~ will serve as the primary contact for any further investigation outside of the OSUWMC/The James grievance process.

5. Reporting Complaints via Patient Satisfaction Surveys

1. Information obtained from patient satisfaction surveys will not be considered a grievance, except:
 - a. If an identified patient writes or attaches a written complaint on the survey and requests resolution (i.e. requests an act or response), then the complaint shall be considered a grievance.
 - b. If an identified patient writes or attaches a written complaint on the survey and does not request resolution, then the hospital shall treat this as a grievance if the hospital would usually treat such a complaint a grievance.
2. Patient Experience will work collaboratively with the patient, or their representative, and the appropriate business unit to resolve the grievance when resolution has been requested by the patient.

6. Grievance Committees

1. The Ohio State University Wexner Medical Center Board has delegated oversight of the grievance management process to the Grievance Committees of the OSU Wexner Medical Center and the James Cancer Hospital to review and resolve the grievances of the hospital where the patient is receiving care.
2. The OSU Wexner Medical Center Grievance Committee is comprised of the Wexner Medical Center Chief Quality Officer, Chief Clinical Officer and the hospital Chief Executive Officer or their respective designees to review and resolve the grievances the hospital receives.
3. The James Grievance Committee is comprised of the James Executive Director of Patient Services, James Chief Medical Officer, Chief Nursing Officer, Director of James Quality and Patient Safety, Director of Patient Experience, or their respective designees to review and resolve grievances the hospital receives.
4. The OSU Wexner Medical Center and The James Hospital Grievance Committees functions to:
 - a. Facilitate grievance resolution when necessary;
 - b. Review grievances quarterly to evaluate effectiveness of the resolution process;
 - c. Complete an OSU Wexner Medical Center and James Cancer Hospital annual summary report for presentation to the Ohio State University Wexner Medical Center Board;
 - d. Submit patterns and trends to the Quality and Patient Safety Department for possible incorporation into a hospital performance improvement plan; and
 - e. Recommend operational modifications to senior hospital leadership in the event an immediate correction is necessary as a result of a patient grievance.
7. Complaints and grievances entered in the OSUWMC/The James Patient Advocacy Reporting System (PARS) may be analyzed for patterns related to professionals' behavior and performance. Refer to the Patient Advocacy Reporting System policy.

Resources

Related Policies

Affirmative Action and Equal Employment Opportunity
Non-Discrimination, Harassment, and Sexual Misconduct
Patient Advocacy Reporting System
Patient Rights and Responsibilities 03-23
Patient Safety & Event Reporting 04-05

Related References

CFR §482.13 (a)(2)

Staff Reporting Resources on MyToolsOneSource

Complaint Management Database Patient
Safety Reporting System

Patient Reporting Resources

Patients may choose to go directly to one of the reporting agencies listed below:

The Ohio Department of Health (ODH)

<http://www.odh.ohio.gov/contactus.aspx>

Complaints – Healthcare Facilities and Nursing Homes 246 North High Street

Columbus, Ohio 43215

Toll Free: 1-800-342-0553

E-Mail: HCComplaints@odh.ohio.gov

The Ohio Department of Health

Complaints – Health Care Facility Complaint Hotline Toll

Free: 1-800-669-3534

KePRO Inc.

<http://www.ohiokepro.com/aboutus/contacts.aspx> Ohio

KePRO Rock Run Center, Suite 100

5700 Lombardo Center

Seven Hills, Ohio 44131 Phone: 1-216-447-9604 E-

Mail: webmaster@ohiokepro.com

The Joint Commission

<http://www.jointcommission.org> Office

of Quality Monitoring

1 Renaissance Boulevard Oakbrook

Terrace, Illinois 60181

Office of Quality Monitoring Toll Free: 1-800-444-6610

To File a Complaint: <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/> <http://www.jointcommission.org/report-a-complaint.aspx>

U.S. Department of Health and Human Services- Office for Civil Rights Region V- Ohio

<http://www.hhs.gov/ocr> Office

for Civil Rights

233 N. Michigan Avenue, Suite 240

Chicago, Illinois 60601

Phone: (800) 368-1019/312-886-2359

To File a Complaint: <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

Ohio Department of Mental Health & Addiction Services

<http://mha.ohio.gov/>

Ohio Department of Mental Health 30 E. Broad Street, 36th Floor Columbus,

Ohio 43215

Phone: 1-614-466-2596

E-Mail: questions@mha.ohio.gov [Contact Us](#)

For Information about Client Rights and Resources: <http://mha.ohio.gov/Default.aspx?tabid=157>

Disability Rights Ohio

<http://www.disabilityrightsohio.org> 50–

W. Broad Street, Suite 1400 200 Civic

Center Drive, Suite 300

Columbus, Ohio 43215-5923

Phone: 1-614-466-7264

For Assistance: <http://www.disabilityrightsohio.org/get-help-now> [Get Help Now](#)

Patient Experience

For further questions regarding the hospital's policy on Patient Complaint Management, please contact either:

James Cancer Hospital Patient Experience

Phone: 1-614-293-8609 Toll Free: 1-866-993-8609
E-Mail: James.PatientExperience@osumc.edu

University Hospital and Ambulatory Surgery Center Patient Experience Phone:
1-614-293-8944

East Hospital Patient Experience Phone:

1-614-257-2310

Harding Hospital Patient Experience
Phone: 1-614-688-8941

Contacts

Office	Telephone
Patient Experience: University Hospital	614-293-8944
Patient Experience: East Hospital	614-257-2310
Patient Experience: The James	614-293-8609

History

<i>The Ohio State University Wexner Medical Center</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. UH Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/13/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/26/2021, <u>3/29/2022</u>	

<i>Arthur G. James Cancer Hospital and Richard J. Solove Research Institute</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. The James Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/15/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/21/2021, <u>3/29/2022</u>	



Policy Name: Patient Complaint and Grievance
Management 03-28

Applies to:		
☒ OSU Wexner Medical Center [University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital, Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services]	☒ Ambulatory Surgery Centers [New Albany, Dublin]	☒ Arthur G. James Cancer Hospital and Richard J. Solove Research Institute and Outreach Sites

Policy Objective

The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) is committed to promptly resolving complaints at the first level of contact whenever possible.

The purpose of this policy is to provide guidelines for staff to respond and manage complaints and grievances; and to define the process for responding to grievances according to The Joint Commission and CMS Hospital Conditions of Participation.

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Complaint	1. A clinical care issue that is verbally conveyed by a patient or the patient's representative to staff and generally resolved within forty eight (48) twenty-four (24) hours. 2. A complaint regarding discrimination on the basis of <u>race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits)</u> age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, veteran status or ability to pay , unless unable to resolve within forty-eight (48) hours. 3. A complaint such as not having a qualified interpreter available for a patient, patients spouse, family, and/or partner, even if the patient does not require an interpreter.

	4. Minor service complaints such as housekeeping, bedding, billing issues and food. 5. Complaints regarding property loss. 6. Privacy and HIPAA complaints, unless unable to be resolved within forty-eight (48) hours
Grievance	1. Any written complaint received from a patient or the patient's representative regarding clinical care, whether from an inpatient, outpatient or released/discharged patient. An e-mail or facsimile (fax) will be considered to be "written". 2. Verbal complaints about clinical care that are not resolved by staff at the time of the complaint, generally within forty-eight (48), and made by a patient or the patient's representative. 3. All verbal or written complaints regarding: • Abuse, neglect, patient harm; • Hospital compliance with CMS Hospital Conditions of Participation (CoP); and • Medicare Beneficiary Billing complaints related to rights and limitations provided by 42CFR§489. 4. Any complaint that the patient, or their representative, requests be handled as a formal grievance. 5. Any complaint where a written response from the hospital is requested by the patient or their representative. 6. Post-discharge complaints, made by a patient or their representative, related to clinical care or services during a stay shall be considered grievances, unless the complaint would have routinely been handled by staff generally within forty-eight (48) hours had the communication occurred during the stay or visit. In this instance, the communication will be considered a complaint.

Policy Details

1. Staff Reporting Complaints via the Hospital's Intranet Site (MyTools)
 1. Staff members are encouraged to enter non-clinical complaints directly into the Complaint Management Database on the hospital's intranet site, MyTools.
 2. The Complaint Management Database provides a mechanism for tracking and reporting complaint data, as well as coordinating timely follow-up.
 3. All verbal or written complaints regarding quality of care issues, abuse, neglect or patient harm shall be entered into the Patient Safety Reporting System for appropriate investigation and follow-up.
2. Patients or Visitors Reporting Complaints via Telephone
 1. Complaints about care delivered at University Hospital, Ross Hospital, Dodd Rehabilitation and Brain and Spinal Hospital, ~~or Ambulatory or the Specialty Primary Care Network~~ may be directed to the Patient Experience Department at 1-614-293-8944.
 2. Complaints about care delivered at The James may be directed to James Patient Experience at 1-614- 293-8609.
 3. Complaints about care delivered at East Hospital and Outpatient Care East may be directed to East Patient Experience at 1-614- 257-2310.
 4. Complaints about care delivered at Harding Hospital may be directed to Harding Patient Experience at 1-614-688-8941.
 5. After regular business hours, complaints may be escalated to the Hospital Administrative Manager or Nursing Supervisor for each location.
3. Procedures for Complaints
 1. All clinical care complaints handled within ~~forty-eight (48) hours~~ should be referred to the attending physician or manager for appropriate follow-up and entered in the Complaint Management Database.
 2. All non-clinical complaints should be referred to the appropriate department manager for follow-up.
 3. Patient Experience will forward all issues regarding property loss to the Property Loss Committee and enter the issue into the Complaint Management Database.
 4. Privacy and HIPAA complaints will be forwarded to the HIPAA Privacy Officer.
 5. When complaints cannot be immediately resolved by the staff member to whom they were reported, the complaint should be reported to the supervisor or manager for resolution and entered into the Complaint Management Database.
 6. Patient Experience staff will act as a liaison for the patient by representing their interests and facilitating communication with appropriate individuals within the Medical Center.
 7. Any complaints under the protected classes (race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, or veteran status) will be sent over to the Ohio State University Civil Rights Compliance Office of Institutional Equity (OIE) for further collaborative review in accordance with the university Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies.

CRCOOIE will serve as the primary contact for any further investigation outside of the OSUWMC/The James complaint process.

4. Procedures for Grievances
 1. When notified, Patient Experience or the appropriate manager will respond and investigate grievances regarding patients who are currently located within the hospital setting.
 2. Situations that endanger (e.g. neglect or abuse) the patient should be addressed immediately by the appropriate staff member.
 3. When appropriate, Risk Management may initiate a review of a grievance.
 4. Patient Experience will serve as the primary liaison to the patient, and may consult Risk Management as needed.
 5. If the grievance is from a written source, or reported after the patient has left the facility, Patient Experience will initiate contact with the complainant.
 6. Clinical Care Grievances
 - a. Clinical care grievances should be entered in the Patient Safety Reporting System, in accordance with the Patient Safety & Event Reporting 04-05.
 - b. Following initial contact with the complainant, Patient Experience will address the grievance between the patient, or their representative, and the appropriate hospital representatives based on the nature of the grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 7. Non-Clinical Care Grievances
 - a. Non-clinical grievances should be entered into the Complaint Management Database.
 - b. Following initial contact with the complainant, Patient Experience will facilitate communication and dialogue between the patient, or their representative, and the appropriate hospital representatives based on the nature of the non-clinical care grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 8. Typically, a grievance will be considered resolved when the patient is satisfied with the actions taken on their behalf.
 - a. However, there may be situations where the Hospital has taken appropriate and reasonable actions on the patient's behalf in order to resolve the patient's grievance and the patient or the patient's representative remains unsatisfied with the Hospital's actions. In these situations, the Hospital may consider the grievance to be closed.
 - b. Patient Experience must maintain documentation of its efforts and demonstrate compliance with this policy.
 9. A written response to all grievances shall be submitted to the patient, or their representative, by the Patient Experience representative or other appropriate individual within seven (7) business days regarding the disposition of the grievance.
 - a. Included in the written response will be:
 - i. The name of the hospital;
 - ii. The steps taken on behalf of the patient to investigate and resolve the grievance;
 - iii. The results of the grievance process; and
 - iv. The date of completion.
 - b. All grievance response letters will be mailed to the patient's or patient's representative's home address unless otherwise indicated.
 - c. If the grievance is received via email, the response may be sent via email.
 10. There may be complications or circumstances, which will not allow every grievance to be resolved during the seven (7) day timeframe.
 - a. If a response will take longer than seven (7) business days, the patient should be contacted by Patient Experience and advised that the hospital is still working to resolve the grievance.
 - b. The patient or the patient's representative should be contacted a minimum of every fourteen (14) business days by Patient Experience until the grievance is responded to in writing.
 - c. If the grievance is not resolved within 30 days, it must be reviewed by the OSU Wexner Medical Center Grievance Committee or The James Grievance Committee.
 11. A copy of the written response shall be retained by Patient Experience.
 12. Any grievances under the protected classes (age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, face, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) gender, sexual-orientation, pregnancy, or veteran status) will be sent over to the Office of Institutional Equity Ohio State University Civil Rights Compliance Office for further collaborative review in accordance with the university

Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies. ~~OSUWMC~~ will serve as the primary contact for any further investigation outside of the OSUWMC/The James grievance process.

5. Reporting Complaints via Patient Satisfaction Surveys

1. Information obtained from patient satisfaction surveys will not be considered a grievance, except:
 - a. If an identified patient writes or attaches a written complaint on the survey and requests resolution (i.e. requests an act or response), then the complaint shall be considered a grievance.
 - b. If an identified patient writes or attaches a written complaint on the survey and does not request resolution, then the hospital shall treat this as a grievance if the hospital would usually treat such a complaint a grievance.
2. Patient Experience will work collaboratively with the patient, or their representative, and the appropriate business unit to resolve the grievance when resolution has been requested by the patient.

6. Grievance Committees

1. The Ohio State University Wexner Medical Center Board has delegated oversight of the grievance management process to the Grievance Committees of the OSU Wexner Medical Center and the James Cancer Hospital to review and resolve the grievances of the hospital where the patient is receiving care.
2. The OSU Wexner Medical Center Grievance Committee is comprised of the Wexner Medical Center Chief Quality Officer, Chief Clinical Officer and the hospital Chief Executive Officer or their respective designees to review and resolve the grievances the hospital receives.
3. The James Grievance Committee is comprised of the James Executive Director of Patient Services, James Chief Medical Officer, Chief Nursing Officer, Director of James Quality and Patient Safety, Director of Patient Experience, or their respective designees to review and resolve grievances the hospital receives.
4. The OSU Wexner Medical Center and The James Hospital Grievance Committees functions to:
 - a. Facilitate grievance resolution when necessary;
 - b. Review grievances quarterly to evaluate effectiveness of the resolution process;
 - c. Complete an OSU Wexner Medical Center and James Cancer Hospital annual summary report for presentation to the Ohio State University Wexner Medical Center Board;
 - d. Submit patterns and trends to the Quality and Patient Safety Department for possible incorporation into a hospital performance improvement plan; and
 - e. Recommend operational modifications to senior hospital leadership in the event an immediate correction is necessary as a result of a patient grievance.
7. Complaints and grievances entered in the OSUWMC/The James Patient Advocacy Reporting System (PARS) may be analyzed for patterns related to professionals' behavior and performance. Refer to the Patient Advocacy Reporting System policy.

Resources

Related Policies

Affirmative Action and Equal Employment Opportunity
Non-Discrimination, Harassment, and Sexual Misconduct
Patient Advocacy Reporting System
Patient Rights and Responsibilities 03-23
Patient Safety & Event Reporting 04-05

Related References

CFR §482.13 (a)(2)

Staff Reporting Resources on MyToolsOneSource

Complaint Management Database Patient
Safety Reporting System

Patient Reporting Resources

Patients may choose to go directly to one of the reporting agencies listed below:

The Ohio Department of Health (ODH)

<http://www.odh.ohio.gov/contactus.aspx>

Complaints – Healthcare Facilities and Nursing Homes 246 North High Street

Columbus, Ohio 43215

Toll Free: 1-800-342-0553

E-Mail: HCComplaints@odh.ohio.gov

The Ohio Department of Health

Complaints – Health Care Facility Complaint Hotline Toll

Free: 1-800-669-3534

KePRO Inc.

<http://www.ohiokepro.com/aboutus/contacts.aspx> Ohio

KePRO Rock Run Center, Suite 100

5700 Lombardo Center

Seven Hills, Ohio 44131 Phone: 1-216-447-9604 E-

Mail: webmaster@ohiokepro.com

The Joint Commission

<http://www.jointcommission.org> Office

of Quality Monitoring

1 Renaissance Boulevard Oakbrook

Terrace, Illinois 60181

Office of Quality Monitoring Toll Free: 1-800-444-6610

To File a Complaint: <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/> <http://www.jointcommission.org/report-a-complaint.aspx>

U.S. Department of Health and Human Services- Office for Civil Rights Region V- Ohio

<http://www.hhs.gov/ocr> Office

for Civil Rights

233 N. Michigan Avenue, Suite 240

Chicago, Illinois 60601

Phone: (800) 368-1019/312-886-2359

To File a Complaint: <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

Ohio Department of Mental Health & Addiction Services

<http://mha.ohio.gov/>

Ohio Department of Mental Health 30 E. Broad Street, 36th Floor Columbus,

Ohio 43215

Phone: 1-614-466-2596

E-Mail: questions@mha.ohio.gov [Contact Us](#)

For Information about Client Rights and Resources: <http://mha.ohio.gov/Default.aspx?tabid=157>

Disability Rights Ohio

<http://www.disabilityrightsohio.org> 50–

W. Broad Street, Suite 1400 200 Civic

Center Drive, Suite 300

Columbus, Ohio 43215-5923

Phone: 1-614-466-7264

For Assistance: <http://www.disabilityrightsohio.org/get-help-now> [Get Help Now](#)

Patient Experience

For further questions regarding the hospital's policy on Patient Complaint Management, please contact either:

James Cancer Hospital Patient Experience

Phone: 1-614-293-8609 Toll Free: 1-866-993-8609
E-Mail: James.PatientExperience@osumc.edu

University Hospital and Ambulatory Surgery Center Patient Experience Phone:
1-614-293-8944

East Hospital Patient Experience Phone:
1-614-257-2310

Harding Hospital Patient Experience
Phone: 1-614-688-8941

Contacts

Office	Telephone
Patient Experience: University Hospital	614-293-8944
Patient Experience: East Hospital	614-257-2310
Patient Experience: The James	614-293-8609

History

<i>The Ohio State University Wexner Medical Center</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. UH Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/13/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/26/2021, <u>3/29/2022</u>	

<i>Arthur G. James Cancer Hospital and Richard J. Solove Research Institute</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. The James Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/15/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/21/2021, <u>3/29/2022</u>	



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Hospitals Administration
Accreditation

168 Doan Hall
410 W 10th Ave
Columbus, OH 43210
617-293-9700 Phone
wexnermedical.osu.edu

CONTRACTED SERVICES EVALUATION
COMPLETED: CALENDAR YEAR 2024

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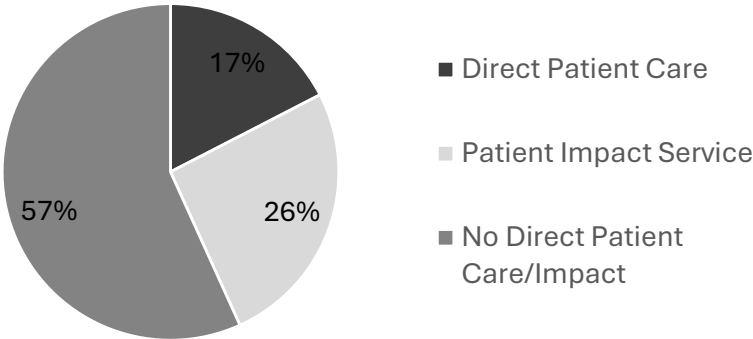
OVERVIEW

Annually, The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) complete an evaluation for contracted services. Evaluations are completed for compliance with The Joint Commission's (TJC) Leadership standard – LD.04.03.09 – which states 'Care, treatment, and services provided through contractual agreement are provided safely and effectively' and the Centers for Medicaid and Medicare Services' (CMS) Condition of Participation - 482.12(e) – which states 'The governing body must be responsible for services furnished in the hospital whether or not they are furnished under contracts. The governing body must ensure that a contractor of services (including one for shared services and joint ventures) furnishes services that permit the hospital to comply with all applicable conditions of participation and standards for the contracted services.

Evaluations are completed for contracts that fall into direct patient care or patient impact service. Direct Patient Care Service is defined as 'Health care that involves the examination of patients, treatment of patients, and/or preparation for diagnostic tests and procedures, including services used in the clinical management/diagnosis of the patient'. Patient Impact Service is defined as 'Suppliers of services that effect a patient's environment, typically in the hospital room'. Evaluations are not completed for contracts falling into the supply (suppliers of goods) or no direct patient care impact (suppliers of business services that the hospital and/or clinic use to help manage a specific part of their business but do not have a direct impact on the patient) as these are monitored through normal supply chain processes per policy: [Contract Evaluation Policy](#).

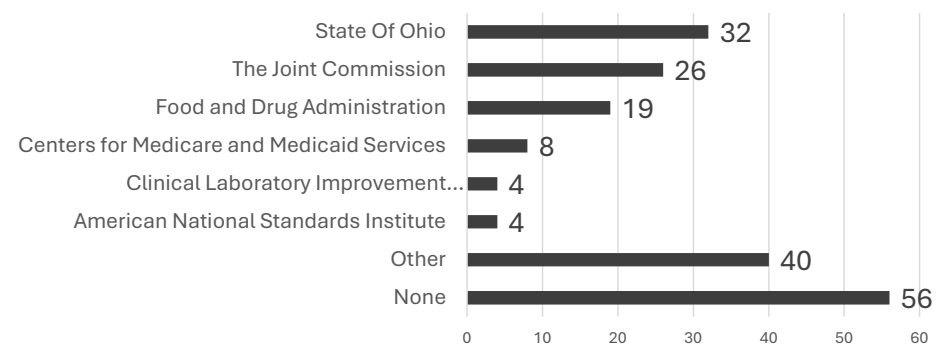
Operational owners were identified and asked to complete a Qualtrics survey for each contract under their oversight. Questions on the survey included overall satisfaction, accrediting bodies, metrics being collected, and if follow up was needed by Supply Chain or Legal Services.

CONTRACTS BY CATEGORY



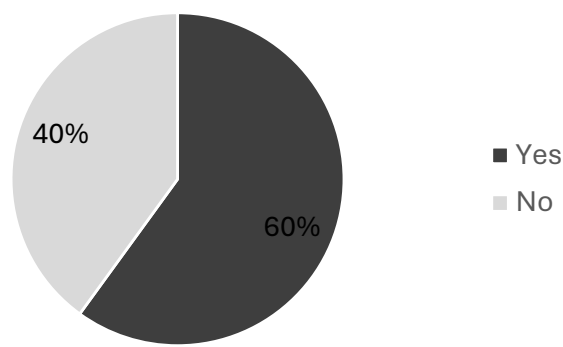
For calendar year 2024, completed evaluations totaled 155. The overall evaluation completion rate (56%) is a 22% increase from 2023 (46%). The remaining incomplete evaluations have been escalated to leadership for follow-up.

REGULATION OF CONTRACTED SERVICES



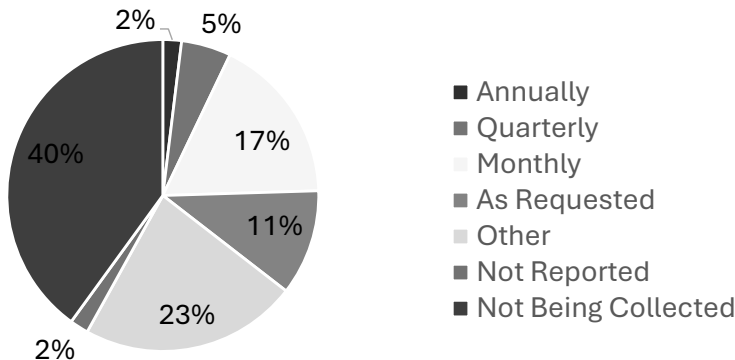
Other regulatory bodies included the Art Therapy Credentials Board, Board of Embalmers and Funeral Directors, Ohio Board of Pharmacy, and local health departments.

COMPLIANCE ACTIVITIES



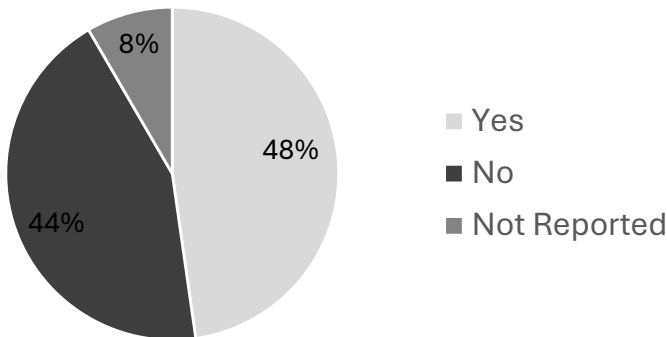
Per the Contract Evaluation policy, operational owners of direct patient care services contracts shall provide and attest to maintain position descriptions, assure licensure, registration, or certification requirements, provide orientation, provide competency assessments, provide and certify on-going education, conduct performance appraisals, and conduct competency evaluations. A secondary review is underway for questions in this section with a “No” response to determine if that answer is appropriate based on the type of service provided (e.g. Otis Elevator).

DATA COLLECTION



Due to the number and variety of contracts, data collection methods and time periods vary across the enterprise. Operational owners are tasked with determining the best method and time period to optimize evaluation of each contract. As shown in the above chart, data collection is largely monthly or another method determined by the operational owner and vendor. Follow up with contract owners will include emphasis on The Joint Commission LD. 04.03.09, element of performance 6 requirement that “Leaders monitor contracted services by evaluating these services in relation to the hospital’s expectations.”

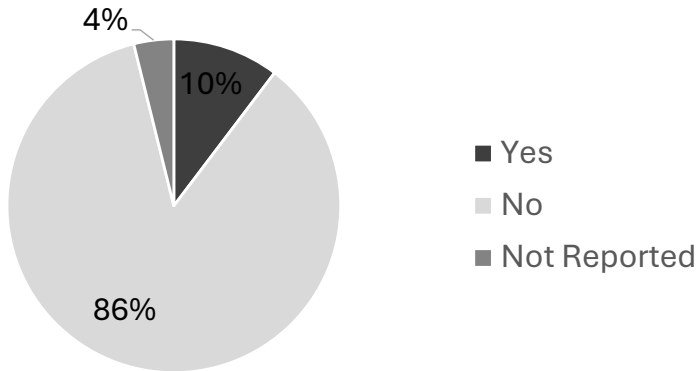
IMPROVEMENTS MADE WITHIN THE PAST YEAR



Overall, 44% of respondents reported improvements within the past year, which is an increase of 6 percentage points from 2023. Improvements included online training modules, forced feedback

technology, increased staffing, improved traffic lane devices, reduced computer crashes, increased coverage rates, and inclusion into a work order database.

FOLLOW UP NEEDED



The most requested follow-up was assistance with receiving quality data and improving performance of the vendor. A list of the departments that requested follow-up is listed in Appendix A.

BETWEEN PROVIDER NUMBERS

OSUWMC purchases and evaluated twenty (20) services from The James. Those services include but are not limited to Chaplaincy, High Level Disinfection and Ambulatory Sterilization, and Laboratory Services.

The James purchases and evaluated fifteen (15) services from OSUWMC. Those services include but are not limited to Clinical Engineering, Credentialing, and Medical Information Management.

Follow-up was not requested for any of the services provided between provider numbers.

CONCLUSION

Compliance activities and data collection is taking place for most contracts with oversight from a regulatory body. Efforts continue to standardize the reporting cadence and type of data being collected.

Almost half of the respondents reported improvements within the past year which represented a significant increase from last year's evaluation.

Follow up has been requested for a small portion of the contracts evaluated.

APPENDIX A – DEPARTMENTS REQUESTING FOLLOW UP

Department	Vendor/Contractor	Reason for Request
Environmental Services	Vernon, Inc	Would like quality data from the vendor
Environmental Services	Stericycle, Inc	Would like quality data from the vendor
Ross Admin	Johnson & Johnson Healthcare Systems	Not specified—have reached out for further clarification
Central Processing Area	ARUP	Not specified—have reached out for further clarification
Central Processing Area	GeneDX, Inc	Not specified—have reached out for further clarification
Central Processing Area	Fred Hutch Cancer Center	Not specified—have reached out for further clarification
Central Processing Area	Eurofins Viracor	Not specified—have reached out for further clarification
Central Processing Area	Emory University	Not specified—have reached out for further clarification
Facilities Operation & Development	Geiger Brothers	Multiple equipment issues due to poor maintenance
Women & Infants	Nationwide Children's Hospital	Need to renegotiate contract to a lower price
Comprehensive Transplant Center	Acelis Connected Health Supplies	Inaccuracies in the documentation of the VAD equipment that has been disseminated to patients. Turnaround time for improvements has been poor and unclear workflow process despite regular requests from OSU. Which has not been clarified despite multiple requests.
Respiratory Therapy	Linde Gas North America	Contract clarification needed: the contract is for Linde, but OSU liquid gas is Messer. Unaware of their regulatory responsibilities and any QA they do.
Laboratory Compliance	Quest Diagnostics Care360 Data Exchange Technology Software	Not sure what service this contract is providing and if still needed (over 10 years old)
Space and Facilities Planning MC	Rezod, LLC	Not specified—have reached out for further clarification
Patient Experience	Soloinstight	Product has not lived up to what was described at the time of purchase despite improvements. “World class visitor management system” has not been realized.

APPENDIX B – VENDOR IMPROVEMENTS FROM 2023 EVALUATIONS

Vendor/Contractor	Improvement(s) made.
3M / Solventum / KCI	Better tracking of equipment and savings for the Medical Center
Agiliti Health, Inc.	Workflow changes with pick up of discontinued rental beds from the hallways. Less beds being left in the hallways and brought to storage. Bed rental workflow has been improved with less beds being left in the hallways. They are helping to bring beds in the storage location.
Aidin	Enhanced reporting and access
ASIST Translations Inc.	We have received no complaints about interpreters from this agency so far, this fiscal year which is an improvement over last year and a demonstration that they take our feedback into account about their interpreters and performance.
Aya	Established governance model, contractual metrics and reporting cadence during FY25 based on work in FY24.
Barclay Water Management, Inc	Addition of point of use filter sales to service
Cap City Hotels	The hotel team implemented a new strategy to support the ease of ordering meals for the guests. The increase in communication has helped guests' awareness and enjoyment of the meals.
Carl Zeiss Meditec, Inc	Vendor provided a server upgrade. Lead to increased speed of the product.
Catholic Diocese of Columbus	We've been working on the priest documentation practices and they have shown tremendous improvement.
CBORD (Platform for all IT interfaces and data for Nutrition Services)	As an enabling project for the new hospital, we are upgrading our systems to cloud based and upgraded capabilities. All retail cash registers and kiosks upgraded in February 2025 and new patient modules will upgrade in fall of '25.
Chapter	Increased Medicare in network enrollment
Chem Aqua, Inc	Created onsite operator services as part of service package
Cisco	We are migrating to new version that will allow some additional automation in our phone space
Collective Medical Technologies, Inc.	We are still in the 6-month pilot phase and are working the vendor on enhancements to the dashboard data (e.g., view data by month of the year, ensure we can view all patients, ensure metrics are updating for the patient subset).
College of American Pathologists	Yearly updates to templates as needed.
Commercial Parts & Services of Ohio, Inc	Increased staffing and participate in asset spec collection procedures for work order system
Connexall USA, Inc	Significant upgrade and ability to work with Rauland Enterprise nurse call
Consensus Medical Systems, Inc	Application Upgrade
Day Funeral Service	Day Funeral Service and OSUWMC Morgue/Autopsy Services have agreed to improve communication regarding infant disposition and catalog any infant remains being placed in our crypt at Silent Home Cemetery. We agreed on parameters for when infant remains will be encrypted. We also clarified the process of opening and closing the crypt for mothers claiming the remains after being encrypted.
Deaf Services Center	DSC has significantly improved on rate of coverage, in the previous year they were able to cover only about 50% of our requests, this year they are now at

	75-80%. this is specifically crucial when it comes to CART services which we do not have a secondary service for.
Donald Asa Mason	He has effectively aligned himself with the responsibilities of the contract chaplain and has taken on additional shifts, which support the team's needs.
EC2 Software Solutions, LLC	Upgrade to version of software they provide (NMIS)
EDM Xpress Cleaning Solutions, LLC	Increased staffing
Epic	Numerous upgrades and updates
FB Olentangy Suite, LLC	Team has employed additional security and is continuing to explore opportunities to improve guest safety and satisfaction.
Fresco Food Group, LLC	Menu changes for guest satisfaction
GE Healthcare IITS USA Corp	Application Upgrade
Indus Riverside Hotel, LLC	The vendor has brought in additional refrigeration units, and is willing to update their in-house dining menu to best accommodate our mutual guests. Hotel team purchased additional refrigeration units to support guests that have outstanding hardships and have been willing to update their menu for the guests of the program. They continue to be an asset to the patient population.
Intuitive Surgical INC	Intuitive released their next generation robot, DV5 system. This system has forced feedback technology to give surgeon haptics while operating, better imaging, better ergonomics, more integrated technology in the vision tower, and additional case level data on instrument usage.
J&J Coatings	Assisted in difficult repairs, improved service. Saved us hundreds of thousands of dollars in restoring doors instead of replacing
Jennifer Gebhart	Initiated and facilitated new program Everyday Practices for Resiliency Series
Johnson Controls, Inc	Johnson Controls has provided access to one of their private documentation platforms to obtain random test reports and documentation not required by TJC but needed for setting up testing that is required. Added more team members to my monthly meeting group to provided quick answers and more enhanced communication. Changed some formats of documentation processes at my direct request to ensure easier recognition/review by TJC.
Lane Champa	Helped expand musician performances to James Outpatient Care
Language Line Solutions	We have expanded our usage and utilization of language line services to include translation services as well as on site interpreting services and they have been very responsive to any negative encounter feedback we have sent.
Laurel Health Care Company (direct bill agreement)	The Laurel Health Care Company has made a number of investments in enhancing the care provided at their SNFs. In May 2025, the Laurels invested in hiring their own phlebotomists and switching lab services to Ohio State University. This has allowed for more reliable and quicker lab results (same day) for the SNF. The Laurels has also introduced new remote monitoring technology at the bedside to identify changes in patient vital signs.
Leica Microsystems	Bug fixes

Amergis	We've seen excellent progress in partnership with our coding vendor, focusing on improvements in quality, risk adjustment capture, and overall alignment with our organizational goals, particularly around Vizient and US News & World Report rankings. <u>Quality Improvements and Accuracy Gains</u> The vendor has demonstrated steady improvement in coding accuracy, compliance, and alignment with documentation standards. Through targeted audits, coder feedback loops, and educational efforts, there has been a consistent improvement in coding accuracy and query compliance. The vendor has shown a strong commitment to ensuring queries are clinically supported, guideline-compliant, and effectively address documentation gaps. These efforts have contributed to a reduction in denials related to DRG downgrades and an overall improvement in coding integrity. <u>Risk Adjustment Capture Progress</u> The vendor has actively supported our initiatives to enhance risk adjustment capture by ensuring accurate documentation and coding of high-impact chronic conditions and comorbidities, including sepsis, respiratory failure, chronic kidney disease (CKD), malnutrition, and heart failure. They've provided strong support in aligning documentation practices with risk-adjusted models, including Vizient and Elixhauser frameworks, and have contributed to better risk-adjusted mortality and reliability scores. <u>Impact on Organizational Goals</u> These combined efforts have positively impacted our quality metrics and supported improvements in our Vizient Quality Scores and US News rankings. The vendor has shown responsiveness in addressing feedback, identifying opportunities for improvement, and aligning their work with our strategic priorities. <u>Next Steps</u> While the progress has been positive, we will continue to work with the vendor to refine documentation practices further, address emerging coding challenges, and maintain momentum in reducing query volumes and denials. We'll also focus on expanding targeted education on high-impact DRGs. In summary, the vendor has been a valuable partner in supporting our goals for documentation and coding integrity. Their work has contributed to measurable improvements in our quality outcomes, and I look forward to building on this foundation in the months ahead.
MCG	Annual upgrades
Medline	Medline has partnered with OSUWMC to make improvements to their kits which includes size/type of dressing and a change to the type of gloves in the standard kit.
MGC Diagnostic	Improved and installed Ascent software. Provided clinical education for staff and have been available for additional improvements and clinical questions
Michael Lester	Helped expand musician performances to James Outpatient Care
Midwest Elevators	Improved communication and perform PMs on time.
Nexxspan	This vendor was brought onboard for the Tower project and was able to provide the products needed for a large and complicated project.

Ohio Medical Transportation, Inc.	Labor Efficiency and improved revenue cycle collections.
ONCO, Inc	EHR Integration
One Lamda, Inc.	Timely response for any queries.
Pharmacy	Qlik Dashboard
Plunkett's Pest Control	Send service reports at each call
Pro-Flow Plumbing and Drain Cleaning	Inclusion into the work order database for metric recording
Provation	Documentation of advanced procedures; documentation of research procedures; Maintenance of ICD-10 & CPT codes relevant to CMS
Riverview Hotel LLC	Has redefined hotel shuttle operations to increase availability.
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CONTRACTED SERVICES EVALUATION
COMPLETED: CALENDAR YEAR 2024

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COMPLIANCE ACTIVITIES

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BETWEEN PROVIDER NUMBERS

CONCLUSION

APPENDIX A – DEPARTMENTS REQUESTING FOLLOW UP

APPENDIX B – VENDOR IMPROVEMENTS FROM 2023 EVALUATIONS

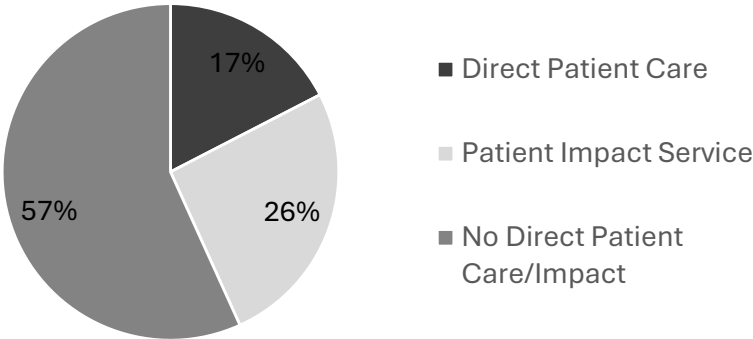
OVERVIEW

Annually, The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) complete an evaluation for contracted services. Evaluations are completed for compliance with The Joint Commission's (TJC) Leadership standard – LD.04.03.09 – which states 'Care, treatment, and services provided through contractual agreement are provided safely and effectively' and the Centers for Medicaid and Medicare Services' (CMS) Condition of Participation - 482.12(e) – which states 'The governing body must be responsible for services furnished in the hospital whether or not they are furnished under contracts. The governing body must ensure that a contractor of services (including one for shared services and joint ventures) furnishes services that permit the hospital to comply with all applicable conditions of participation and standards for the contracted services.

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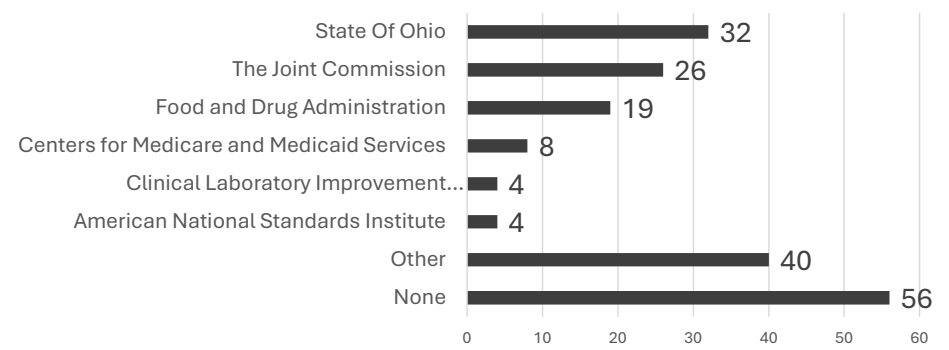
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CONTRACTS BY CATEGORY



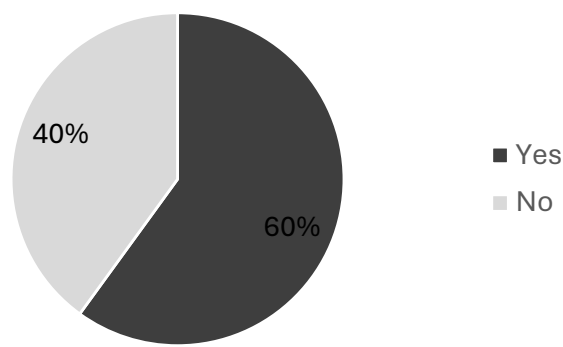
For calendar year 2024, completed evaluations totaled 155. The overall evaluation completion rate (56%) is a 22% increase from 2023 (46%). The remaining incomplete evaluations have been escalated to leadership for follow-up.

REGULATION OF CONTRACTED SERVICES



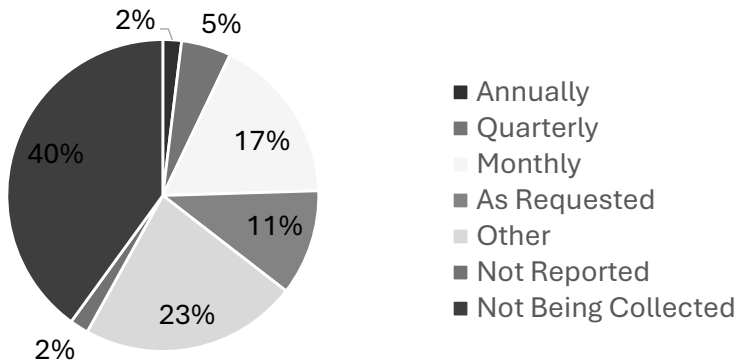
Other regulatory bodies included the Art Therapy Credentials Board, Board of Embalmers and Funeral Directors, Ohio Board of Pharmacy, and local health departments.

COMPLIANCE ACTIVITIES



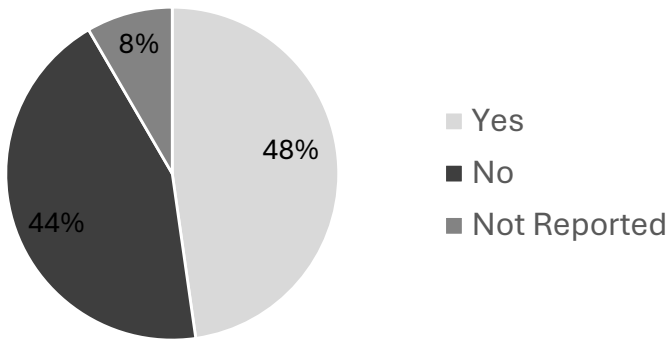
Per the Contract Evaluation policy, operational owners of direct patient care services contracts shall provide and attest to maintain position descriptions, assure licensure, registration, or certification requirements, provide orientation, provide competency assessments, provide and certify on-going education, conduct performance appraisals, and conduct competency evaluations. A secondary review is underway for questions in this section with a “No” response to determine if that answer is appropriate based on the type of service provided (e.g. Otis Elevator).

DATA COLLECTION



Due to the number and variety of contracts, data collection methods and time periods vary across the enterprise. Operational owners are tasked with determining the best method and time period to optimize evaluation of each contract. As shown in the above chart, data collection is largely monthly or another method determined by the operational owner and vendor. Follow up with contract owners will include emphasis on The Joint Commission LD. 04.03.09, element of performance 6 requirement that “Leaders monitor contracted services by evaluating these services in relation to the hospital’s expectations.”

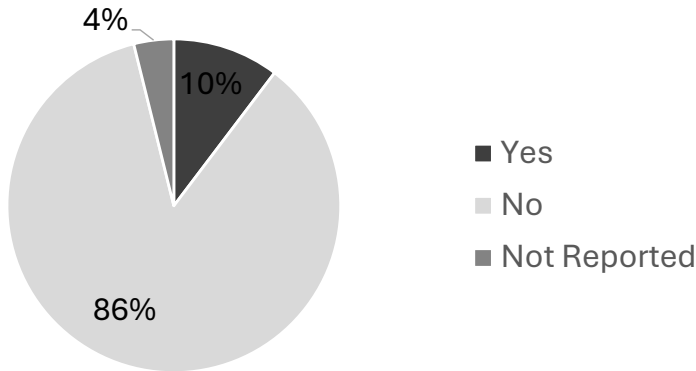
IMPROVEMENTS MADE WITHIN THE PAST YEAR



Overall, 44% of respondents reported improvements within the past year, which is an increase of 6 percentage points from 2023. Improvements included online training modules, forced feedback

technology, increased staffing, improved traffic lane devices, reduced computer crashes, increased coverage rates, and inclusion into a work order database.

FOLLOW UP NEEDED



The most requested follow-up was assistance with receiving quality data and improving performance of the vendor. A list of the departments that requested follow-up is listed in Appendix A.

BETWEEN PROVIDER NUMBERS

OSUWMC purchases and evaluated twenty (20) services from The James. Those services include but are not limited to Chaplaincy, High Level Disinfection and Ambulatory Sterilization, and Laboratory Services.

The James purchases and evaluated fifteen (15) services from OSUWMC. Those services include but are not limited to Clinical Engineering, Credentialing, and Medical Information Management.

Follow-up was not requested for any of the services provided between provider numbers.

CONCLUSION

Compliance activities and data collection is taking place for most contracts with oversight from a regulatory body. Efforts continue to standardize the reporting cadence and type of data being collected.

Almost half of the respondents reported improvements within the past year which represented a significant increase from last year's evaluation.

Follow up has been requested for a small portion of the contracts evaluated.

APPENDIX A – DEPARTMENTS REQUESTING FOLLOW UP

Department	Vendor/Contractor	Reason for Request
Environmental Services	Vernon, Inc	Would like quality data from the vendor
Environmental Services	Stericycle, Inc	Would like quality data from the vendor
Ross Admin	Johnson & Johnson Healthcare Systems	Not specified—have reached out for further clarification
Central Processing Area	ARUP	Not specified—have reached out for further clarification
Central Processing Area	GeneDX, Inc	Not specified—have reached out for further clarification
Central Processing Area	Fred Hutch Cancer Center	Not specified—have reached out for further clarification
Central Processing Area	Eurofins Viracor	Not specified—have reached out for further clarification
Central Processing Area	Emory University	Not specified—have reached out for further clarification
Facilities Operation & Development	Geiger Brothers	Multiple equipment issues due to poor maintenance
Women & Infants	Nationwide Children's Hospital	Need to renegotiate contract to a lower price
Comprehensive Transplant Center	Acelis Connected Health Supplies	Inaccuracies in the documentation of the VAD equipment that has been disseminated to patients. Turnaround time for improvements has been poor and unclear workflow process despite regular requests from OSU. Which has not been clarified despite multiple requests.
Respiratory Therapy	Linde Gas North America	Contract clarification needed: the contract is for Linde, but OSU liquid gas is Messer. Unaware of their regulatory responsibilities and any QA they do.
Laboratory Compliance	Quest Diagnostics Care360 Data Exchange Technology Software	Not sure what service this contract is providing and if still needed (over 10 years old)
Space and Facilities Planning MC	Rezod, LLC	Not specified—have reached out for further clarification
Patient Experience	Soloinstight	Product has not lived up to what was described at the time of purchase despite improvements. “World class visitor management system” has not been realized.

APPENDIX B – VENDOR IMPROVEMENTS FROM 2023 EVALUATIONS

Vendor/Contractor	Improvement(s) made.
3M / Solventum / KCI	Better tracking of equipment and savings for the Medical Center
Agiliti Health, Inc.	Workflow changes with pick up of discontinued rental beds from the hallways. Less beds being left in the hallways and brought to storage. Bed rental workflow has been improved with less beds being left in the hallways. They are helping to bring beds in the storage location.
Aidin	Enhanced reporting and access
ASIST Translations Inc.	We have received no complaints about interpreters from this agency so far, this fiscal year which is an improvement over last year and a demonstration that they take our feedback into account about their interpreters and performance.
Aya	Established governance model, contractual metrics and reporting cadence during FY25 based on work in FY24.
Barclay Water Management, Inc	Addition of point of use filter sales to service
Cap City Hotels	The hotel team implemented a new strategy to support the ease of ordering meals for the guests. The increase in communication has helped guests' awareness and enjoyment of the meals.
Carl Zeiss Meditec, Inc	Vendor provided a server upgrade. Lead to increased speed of the product.
Catholic Diocese of Columbus	We've been working on the priest documentation practices and they have shown tremendous improvement.
CBORD (Platform for all IT interfaces and data for Nutrition Services)	As an enabling project for the new hospital, we are upgrading our systems to cloud based and upgraded capabilities. All retail cash registers and kiosks upgraded in February 2025 and new patient modules will upgrade in fall of '25.
Chapter	Increased Medicare in network enrollment
Chem Aqua, Inc	Created onsite operator services as part of service package
Cisco	We are migrating to new version that will allow some additional automation in our phone space
Collective Medical Technologies, Inc.	We are still in the 6-month pilot phase and are working the vendor on enhancements to the dashboard data (e.g., view data by month of the year, ensure we can view all patients, ensure metrics are updating for the patient subset).
College of American Pathologists	Yearly updates to templates as needed.
Commercial Parts & Services of Ohio, Inc	Increased staffing and participate in asset spec collection procedures for work order system
Connexall USA, Inc	Significant upgrade and ability to work with Rauland Enterprise nurse call
Consensus Medical Systems, Inc	Application Upgrade
Day Funeral Service	Day Funeral Service and OSUWMC Morgue/Autopsy Services have agreed to improve communication regarding infant disposition and catalog any infant remains being placed in our crypt at Silent Home Cemetery. We agreed on parameters for when infant remains will be encrypted. We also clarified the process of opening and closing the crypt for mothers claiming the remains after being encrypted.
Deaf Services Center	DSC has significantly improved on rate of coverage, in the previous year they were able to cover only about 50% of our requests, this year they are now at

	75-80%. this is specifically crucial when it comes to CART services which we do not have a secondary service for.
Donald Asa Mason	He has effectively aligned himself with the responsibilities of the contract chaplain and has taken on additional shifts, which support the team's needs.
EC2 Software Solutions, LLC	Upgrade to version of software they provide (NMIS)
EDM Xpress Cleaning Solutions, LLC	Increased staffing
Epic	Numerous upgrades and updates
FB Olentangy Suite, LLC	Team has employed additional security and is continuing to explore opportunities to improve guest safety and satisfaction.
Fresco Food Group, LLC	Menu changes for guest satisfaction
GE Healthcare IITS USA Corp	Application Upgrade
Indus Riverside Hotel, LLC	The vendor has brought in additional refrigeration units, and is willing to update their in-house dining menu to best accommodate our mutual guests. Hotel team purchased additional refrigeration units to support guests that have outstanding hardships and have been willing to update their menu for the guests of the program. They continue to be an asset to the patient population.
Intuitive Surgical INC	Intuitive released their next generation robot, DV5 system. This system has forced feedback technology to give surgeon haptics while operating, better imaging, better ergonomics, more integrated technology in the vision tower, and additional case level data on instrument usage.
J&J Coatings	Assisted in difficult repairs, improved service. Saved us hundreds of thousands of dollars in restoring doors instead of replacing
Jennifer Gebhart	Initiated and facilitated new program Everyday Practices for Resiliency Series
Johnson Controls, Inc	Johnson Controls has provided access to one of their private documentation platforms to obtain random test reports and documentation not required by TJC but needed for setting up testing that is required. Added more team members to my monthly meeting group to provided quick answers and more enhanced communication. Changed some formats of documentation processes at my direct request to ensure easier recognition/review by TJC.
Lane Champa	Helped expand musician performances to James Outpatient Care
Language Line Solutions	We have expanded our usage and utilization of language line services to include translation services as well as on site interpreting services and they have been very responsive to any negative encounter feedback we have sent.
Laurel Health Care Company (direct bill agreement)	The Laurel Health Care Company has made a number of investments in enhancing the care provided at their SNFs. In May 2025, the Laurels invested in hiring their own phlebotomists and switching lab services to Ohio State University. This has allowed for more reliable and quicker lab results (same day) for the SNF. The Laurels has also introduced new remote monitoring technology at the bedside to identify changes in patient vital signs.
Leica Microsystems	Bug fixes

Amergis	We've seen excellent progress in partnership with our coding vendor, focusing on improvements in quality, risk adjustment capture, and overall alignment with our organizational goals, particularly around Vizient and US News & World Report rankings. <u>Quality Improvements and Accuracy Gains</u> The vendor has demonstrated steady improvement in coding accuracy, compliance, and alignment with documentation standards. Through targeted audits, coder feedback loops, and educational efforts, there has been a consistent improvement in coding accuracy and query compliance. The vendor has shown a strong commitment to ensuring queries are clinically supported, guideline-compliant, and effectively address documentation gaps. These efforts have contributed to a reduction in denials related to DRG downgrades and an overall improvement in coding integrity. <u>Risk Adjustment Capture Progress</u> The vendor has actively supported our initiatives to enhance risk adjustment capture by ensuring accurate documentation and coding of high-impact chronic conditions and comorbidities, including sepsis, respiratory failure, chronic kidney disease (CKD), malnutrition, and heart failure. They've provided strong support in aligning documentation practices with risk-adjusted models, including Vizient and Elixhauser frameworks, and have contributed to better risk-adjusted mortality and reliability scores. <u>Impact on Organizational Goals</u> These combined efforts have positively impacted our quality metrics and supported improvements in our Vizient Quality Scores and US News rankings. The vendor has shown responsiveness in addressing feedback, identifying opportunities for improvement, and aligning their work with our strategic priorities. <u>Next Steps</u> While the progress has been positive, we will continue to work with the vendor to refine documentation practices further, address emerging coding challenges, and maintain momentum in reducing query volumes and denials. We'll also focus on expanding targeted education on high-impact DRGs. In summary, the vendor has been a valuable partner in supporting our goals for documentation and coding integrity. Their work has contributed to measurable improvements in our quality outcomes, and I look forward to building on this foundation in the months ahead.
MCG	Annual upgrades
Medline	Medline has partnered with OSUWMC to make improvements to their kits which includes size/type of dressing and a change to the type of gloves in the standard kit.
MGC Diagnostic	Improved and installed Ascent software. Provided clinical education for staff and have been available for additional improvements and clinical questions
Michael Lester	Helped expand musician performances to James Outpatient Care
Midwest Elevators	Improved communication and perform PMs on time.
Nexxspan	This vendor was brought onboard for the Tower project and was able to provide the products needed for a large and complicated project.

Ohio Medical Transportation, Inc.	Labor Efficiency and improved revenue cycle collections.
ONCO, Inc	EHR Integration
One Lamda, Inc.	Timely response for any queries.
Pharmacy	Qlik Dashboard
Plunkett's Pest Control	Send service reports at each call
Pro-Flow Plumbing and Drain Cleaning	Inclusion into the work order database for metric recording
Provation	Documentation of advanced procedures; documentation of research procedures; Maintenance of ICD-10 & CPT codes relevant to CMS
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**CONTRACTED SERVICES EVALUATION
NEW ALBANY AND DUBLIN SURGERY CENTERS
COMPLETED: CALENDAR YEAR 2023**

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CONTRACT OVERVIEW

For calendar year 2024, there were 13 services contracted between each surgery center and (DASC and NAASC) and OSUWMC.

Contracted Services
Management
Laboratory
Radiologic
Central Sterile Processing
Medical Information Management
Nutrition
Registration and Scheduling
Clinical Engineering
Legal
Pharmacy
Epidemiology
Patient Experience
Environmental Management

An evaluation of each services was completed for both DASC and NAASC. All services were reported as improving over the past year and follow up from Supply Chain or Legal services was not requested.

CONCLUSION

Overall, operational owners are monitoring the contracts within their scope.

An area of improvement would be to have performance/efficiency/quality data submitted on a more defined basis rather than as needed.

Efforts will continue to monitor, streamline, and maximize contracts across the enterprise.

ATTACHMENT XXIX



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Accreditation

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APPENDIX X



THE OHIO STATE UNIVERSITY

Board of Trustees

University Square South
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Phone (614) 292-6359
Fax (614) 292-5903
trustees.osu.edu

SUMMARY OF ACTIONS TAKEN

August 20, 2025 – Athletics Committee Meeting

Members Present:

Gary R. Heminger
Michael F. Kiggin
Elizabeth P. Kessler

Jeff M.S. Kaplan
Pierre Bigby
Bradley R. Kastan

George R. Skestos
Kendall C. Buchan
John W. Zeiger (ex officio)

Members Present via Zoom: N/A

Members Absent: N/A

PUBLIC SESSION

The Athletics Committee of The Ohio State University Board of Trustees convened on Wednesday, August 20, 2025, in person at Longaberger Alumni House on Ohio State's Columbus campus. Committee Chair Gary Heminger called the meeting to order at 7:59 a.m.

Item for Discussion:

1. **Athletics Director's Report:** Senior Vice President and Wolfe Foundation-Eugene Smith Endowed Athletics Director Ross Bjork reflected on accomplishments across the Department of Athletics over the past year. Ohio State athletics finished No. 8 in the Director's Cup standings and had its best year on record in terms of academics, fundraising, sponsorships and merchandise sales. The department has undergone an effectiveness review, which resulted in a restructuring as well as the creation of two new entities: the Center for Sports Intelligence and Strategy, and a data analytics unit. The department continues working to implement the terms of the *House* settlement and find innovative ways to adapt and lead in the changing landscape of collegiate sports.

Item for Action:

2. **Approval of Minutes:** No changes were requested to the May 15, 2025, meeting minutes; therefore, a formal vote was not required, and the minutes were considered approved.

EXECUTIVE SESSION

It was moved by Mr. Heminger and seconded by Mr. Kaplan that the committee recess into executive session to discuss business-sensitive trade secrets and to discuss personnel matters involving the appointment, employment and compensation of public employees.

A roll-call vote was taken, and the committee voted to move into executive session with the following members present and voting: Mr. Heminger, Mr. Kiggin, Ms. Kessler, Mr. Kaplan, Mr. Bigby, Mr. Kastan, Mr. Skestos, Dr. Buchan and Mr. Zeiger.

The committee entered into executive session at 8:05 a.m., and the meeting adjourned at 9:48 a.m.

APPENDIX XI

Patrick L. Green

University Distinguished Scholar and Professor
Director of the Center for Retrovirus Research
Senior Advisor at the Ohio State University
Comprehensive Cancer Center



Green is internationally recognized for his pioneering research that has significantly advanced the understanding of human T-cell leukemia viruses (HTLV) and retroviruses. Widely regarded as the preeminent researcher and worldwide leader in the structure-function relationships of HTLV proteins and their role in disease, Green has not only improved our understanding of cancer-causing retroviruses but is also applying his discoveries to the development of therapeutics and vaccines.

Green is director of the Center for Retrovirus Research and a senior advisor at The Ohio State University Comprehensive Cancer Center. The relevance of Green's work to human health has been broad and significant, especially with respect to cancer, leading to a long series of prestigious awards and scientific recognitions.

He is a Fellow of the American Association for the Advancement of Science, the American Academy of Microbiology, the American Cancer Society, and the Leukemia Society of America, among other honors. The International Retrovirology Association has recognized him for his exceptional contributions to the field of HTLV and related viruses. In 2019, he received the Dale McFarlin Award for outstanding service to the association. He was named a University Distinguished Scholar in 2009.

Peter L. Hahn

Distinguished University Professor of History

Hahn is a prominent scholar, recognized for his extensive contributions to the field of U.S. foreign policy, particularly regarding the Middle East. His work has significantly shaped the understanding of U.S. diplomatic history and international relations, earning him recognition as a leading expert in his field.

He has authored eight books, co-edited a collection of articles and published nearly 100 scholarly reviews, essays and commentaries. His research has been supported by prestigious fellowships, including from the National Endowment for the Humanities, the Fulbright Scholar Program and the Office of the Secretary of Defense. In recognition of his research achievements, Hahn received the Society for Historians of American Foreign Relations' Distinguished Service Award in 2017 and the Stuart L. Bernath Lecture Prize in 1998.



In addition to his research, during his more than 30-year tenure at Ohio State, Hahn has exemplified excellence in teaching and mentorship. He has developed and taught courses on U.S. foreign policy and modern U.S. history, including a study abroad program focusing on World War II in Europe. Hahn has mentored nearly 40 PhD students and 34 master's students, many of whom have gone on to prestigious careers. He provided 15 years of combined leadership to the College of Arts and Sciences as dean of Arts and Humanities and chair of the Department of History, and he also served as executive director of the Society for Historians of American Foreign Relations for 13 years.

Hahn served by invitation on an American Council of Learned Societies national committee of deans focused on maintaining excellence in the humanities and has lectured worldwide, including at the National Institute for Defense Studies in Japan and the Munk School of Global Affairs in Toronto. He is frequently sought by media outlets such as The New York Times, NPR and Politico.

Distinguished University Professor is a permanent, honorific title awarded annually to up to six tenure-track professors who have been at Ohio State for at least five years and have demonstrated truly exceptional records in teaching, research, scholarly or creative work and in service. Distinguished University Professors automatically become members of the President's and Provost's Advisory Committee. In addition, recipients are awarded a \$30,000 one-time grant to support their academic work. The honorees each received a surprise classroom visit from university leadership announcing the award.

Anita Hopper

Distinguished University Professor of
Molecular Genetics

Hopper's groundbreaking research has significantly advanced the understanding of transfer ribonucleic acid (tRNA) biogenesis and processing. She was the first to discover mutants that accumulate unspliced tRNAs, a finding that has paved the way for numerous biochemical assays in tRNA splicing. Her recent work has identified more than 140 novel proteins involved in tRNA intron turnover and nuclear/cytoplasmic bidirectional movement, providing new insights into tRNA biogenesis.



Throughout her career, Hopper has published more than 120 peer-reviewed papers and has been continuously funded by the National Institutes of Health since 1976. Her exceptional contributions to science have been recognized with numerous awards, including election to the National Academy of Sciences, the American Academy of Arts and Sciences, the American Academy of Microbiology and the American Association for the Advancement of Science. She received the Lifetime Achievement in Science Award from the RNA Society and received Ohio State's Distinguished Scholar Award in 2012.

In addition to her research, Hopper is a dedicated educator, having mentored dozens of postdoctoral fellows, graduate, undergraduate and high school students. Her redesigned course, Molecular Genetics 2220H, has become a cornerstone of the undergraduate program.

Hopper has also made significant contributions to the university's administration and governance. She served as chair of the Department of Molecular Genetics from 2006 to 2014 and has been an active member on several key committees, including the steering committee of the Ohio State Center for RNA Biology. She has held leadership roles in several professional organizations, including serving as president of the RNA Society and secretary of the Genetics Society of America. Her contributions have had a lasting impact on the field of RNA biology and beyond. She began her Ohio State career in 2006.

Michael Lisa

Distinguished University Professor of Physics

Michael Lisa's research bridges the boundary between the traditional fields of nuclear physics and high-energy particle physics. His experimental studies investigate collisions between very heavy atomic nuclei traveling at nearly the speed of light. His goal is to "melt" these nuclei into a "hot stew" of quarks, which are usually trapped within protons. This phenomenon, known as "quark-gluon plasma," was last seen in nature only microseconds after the Big Bang.

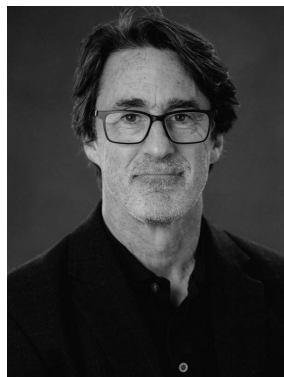
Lisa's research is responsible for seminal breakthrough discoveries. His development of azimuthally sensitive femtoscopy is a touchstone in the field, allowing for precise measurements of the size and lifetime of the fireball created in nuclear collisions. More recently, his work led to the exciting development of measuring the vorticity of the quark-gluon plasma — a way to quantify how fast this extreme fluid is swirling.

Widely recognized for his scientific contributions, Lisa received the Sambamurti Memorial Prize Lectureship from Brookhaven National Laboratory and was a Fulbright Scholar. He is a Fellow of the American Association for the Advancement of Science and the American Physical Society. In 2020 he was named a University Distinguished Scholar. He served on the U.S. Department of Energy's Nuclear Science Advisory Committee from 2016-18 and on the U.S. Nuclear Science Long Range Plan Drafting Committee from 2014-15.

He served in significant leadership positions in his field, such as Physics Analysis Coordinator and project leader for the Event Plane Detector for the STAR experiment at the Brookhaven National Laboratory. In addition, he served as the Femtoscopy working group leader at CERN (Switzerland) for four years. Currently, he is the Scientific Coordinator for the Stellar Intensity Interferometer Science Working Group for the Cherenkov Telescope Array Consortium.

Regarded as a student favorite, Lisa is known as a caring, guiding force in developing students' technical expertise and confidence. He was honored with this year's Excellence in Undergraduate Research Mentoring Award, and in 2020, he received the department's Undergraduate Teaching Award. He has been a faculty member at Ohio State since 1996.

Distinguished University Professor is a permanent, honorific title awarded annually to up to six tenure-track professors who have been at Ohio State for at least five years and have demonstrated truly exceptional records in teaching, research, scholarly or creative work and in service. Distinguished University Professors automatically become members of the President's and Provost's Advisory Committee. In addition, recipients are awarded a \$30,000 one-time grant to support their academic work. The honorees each received a surprise classroom visit from university leadership announcing the award.



Phillip Popovich

Distinguished University Professor
Chair, Department of Neuroscience

Dr. Phillip Popovich's more than 20 years of research have led to groundbreaking discoveries, including the crucial role of immune cells in regulating spinal cord injury and repair processes.

In her nomination, Carol R. Bradford, MD, MS, FACS, dean of the Ohio State College of Medicine, shared how fortunate our academic institution is to count Dr. Popovich among their most gifted faculty members.



“Dr. Popovich has had an immeasurable impact here at Ohio State and in the fields of spinal cord injury and neuroimmunology,” Dr. Bradford says. “His scientific contributions have positively impacted the lives of countless people around the globe and set him apart as a leader at Ohio State.”

Dr. Popovich is deeply honored to be named a Distinguished University Professor and is grateful to everyone who contributed to his success — his family, his research team and his mentors.

“I am truly fortunate to be surrounded by such incredible and caring people,” Dr. Popovich says. “I love what I do, and I have been super fortunate to have outstanding trainees and colleagues to help me take on big, sometimes seemingly impossible projects.”

Dr. Popovich was named a Distinguished University Scholar in 2018, which acknowledged his career scientific achievements and contributions to the research community. It also honored his work's potential impact on helping people with spinal cord injuries. He believes the Distinguished University Professor Award holds even greater meaning because it also recognizes his consistent dedication to achieving excellence as a teacher, mentor and leader.

He developed and long taught a neuroimmunology course that remains an educational centerpiece of the Neuroscience Graduate Program and has provided 17 years of consecutive lecturing in a federally funded spinal cord injury training program. Throughout his career, he has published more than 160 peer-reviewed papers and secured more than \$90 million in research funding.

“My motivation and commitment to excel in each of these roles is as great as my dedication to research distinction,” Dr. Popovich says. “This award only strengthens my commitment to excellence.”

APPENDIX XII



THE OHIO STATE UNIVERSITY

Board of Trustees

15 East 15th Avenue
Columbus, OH 43201

614-292-6359 Office
614-292-6359 Fax

trustees.osu.edu

August 20, 2025

President Walter “Ted” Carter Jr.
The Ohio State University
15 East 15th Avenue, 5th Floor
Columbus, OH 43201

Dear Ted:

As you know, the Board of Trustees annually conducts a review of the university president’s performance. This review, which covers the previous fiscal year, is an essential component of the Board’s institutional governance responsibility and a best practice in higher education. This collaborative process of setting goals and gauging progress also helps assure alignment between the Board and executive leadership as our university community continues to excel. The trustees remain grateful for your partnership in this endeavor.

At the beginning of FY25, we agreed upon five priorities to guide your and your team’s efforts over the 12 months that followed:

1. **Enhance academic excellence.** Make Ohio State the destination for a world-class student body and faculty committed to field defining research, and education that inspires the Ohio State community to serve the state, nation and world.
2. **Advance research and innovation.** Create transformational impact for the state and nation through cutting-edge research and innovation.
3. **Financial and operational stewardship.** Achieve excellence in our resource management, revenue generation and advancement to support the university’s vision and mission.
4. **The health system for Ohio.** Improve health, wellness and opportunity in Ohio through accessibility, innovation and impact.
5. **Ohio State as a workplace of choice.** Maximize individual potential and cultivate an inclusive culture to attract and retain high-performing people who execute the strategy of the organization.

After examining your FY25 self-review, the Board is in agreement that Ohio State continues to make progress in each of these areas. The ongoing development of the Education for Citizenship 2035 strategic plan presents a pathway to advance student preparation and academic excellence at Ohio State. The sustained growth of research expenditures and the institution's strong financial position are reassuring during this period of uncertainty, as are the ongoing success of the medical enterprise and our ability to recruit and retain the talented leaders, faculty and staff necessary to drive even greater levels of excellence in the future.

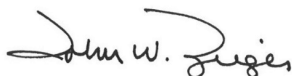
The Board is deeply appreciative of your steady leadership over the past year. You are an exceptional ambassador for the university's land-grant mission and vision, both on our campuses and throughout the communities we serve. Moreover, trustees greatly value the close working relationship we enjoy with you. We are excited to see how you capitalize on this momentum going forward.

Of particular interest to the Board during the year ahead are accelerating academic excellence, the further prioritization of investment in areas of strategic importance, implementation of the strategic plan, the successful and timely operationalization of the new inpatient hospital, and a continued focus on ensuring all areas of the university are on firm financial footing.

Pursuant to the terms of your contract, you are eligible for an annual increase of your base compensation. As part of Ohio State's Annual Merit Compensation Process, you will receive a 4.5% adjustment to your base salary in the amount of \$51,233. Additionally, you are eligible for an annual performance award for achieving mutually agreed upon performance measures. In recognition of your accomplishments — and those of the university under your leadership — you will receive an annual performance award of \$398,475, which equates to 35% of your base salary.

Thank you for your commitment to The Ohio State University. We are excited to continue working with you for the benefit of all those we serve.

Sincerely,



John W. Zeiger
Chair
Board of Trustees



Jeff M.S. Kaplan
Chair
Talent, Compensation and
Governance Committee



WALTER "TED" CARTER JR.

July 29, 2025

Members of the Board of Trustees:

I am pleased to share with you a summary of The Ohio State University's achievements for FY2025.

As we've discussed, this is a period of change and challenge for all of higher education. Ohio State has certainly been impacted by the rapidly evolving landscape at the state and federal levels. Our teams have worked diligently to manage the changes and keep our community informed.

I am proud of our efforts to keep the university moving forward in spite of the uncertainties around us. And I am especially pleased that in navigating this new landscape, we have remained grounded in our foundational mission as a land-grant institution to educate students and improve the lives of the people we serve. Ohio State is a university for all, and indeed that mission has never been more important.

As you know, I am a strong believer that times of challenge call for us not to "duck and cover," but rather rise to the occasion. The current environment is one such leadership opportunity. Higher education is being called from all corners to think differently. At Ohio State, we are proud of our history and traditions, but it's clear that "business as usual" is not the formula for success as higher education writes its next chapter.

The institutions that are willing to pivot and think of new ways to deliver on our educational mission are the ones that will succeed in this new era. As I shared during my keynote remarks at this year's Patterson Lecture, not only will the future of higher education run through America's great land-grant institutions, but one land-grant in particular is positioned to be in the driver's seat: The Ohio State University.

The landscape may be dramatically different than when I last wrote to you to share an annual review, but our enthusiasm for, and commitment to, our pursuit of a bold vision for academic excellence is stronger now than ever. We have made impressive progress toward that goal over the past year, notably through the launch of the framework for our Education for Citizenship 2035 strategic plan last fall and our subsequent work to build out the details of that plan.

I could not be more pleased with how the plan is coming together, the thoughtful feedback from our community that has informed its themes, and the eagerness of our leadership team

to begin executing on its strategies. At a time when higher education has frequently found itself at the forefront of the national dialogue, our plan will demonstrate that Ohio State is the university that “gets it,” with an ambitious new vision for educating the future workforce, improving lives and creating economic growth in every corner of the state.

Our progress to date is a great credit to your leadership and support. I continue to be deeply grateful for your partnership as we work together to define the future of higher education and set a new standard of excellence here at Ohio State.

In this memo I will review our progress on each of the priorities that the Board approved last August.

PRIORITY #1

Enhance Academic Excellence: Make Ohio State the destination for a world-class student body and faculty committed to field-defining research, and education that inspires the Ohio State community to serve the state, nation and world.

- Academic excellence is at the heart of Education for Citizenship 2035. The plan includes a commitment to defining areas of academic distinction, where Ohio State can and will lead, and delivering a signature academic experience for every student. I’m pleased with the early positive feedback we’re hearing on the themes of our plan, and look forward to sharing more details with the university community when students and faculty return to campus this fall.
- We’re already seeing momentum for one of the academic “pinnacles” defined in Education for Citizenship 2035, artificial intelligence. We’ve announced the fall launch of an AI Fluency initiative that will integrate AI into the curriculum for every student, with a goal of ensuring that all Buckeyes, no matter their major, will graduate with a rich understanding of how to ethically and responsibly use AI to advance their field. Our AI Fluency announcement has attracted significant local and national media attention and we are eager to carry the momentum into the fall.
- We welcomed the largest first-year class in our history to the Columbus campus this fall. Not only are they more numerous, they are exceptionally talented: 96 percent of the first-year class in Columbus graduated in the top quarter of their high school class, and nearly two-thirds graduated in the top 10 percent. Our four-year graduation rate in Columbus also reached a record high of 72.8 percent.
- Our enrollment success is a strong signal to me that students and families recognize our value and quality, they are excited about the experience we provide, and they are prepared to succeed here. I’m proud of the investment we make in their academic journeys, including \$525 million in financial aid that benefited more than 50,000 students. Particularly at a time when the costs of college are at the heart of the national conversation, it’s critical that we continue our commitment to affordability and accessibility.

- All of Buckeye Nation celebrated this year when our football team completed a historic playoff run to win the national title. As proud as I am of our success on the field, I am equally excited – and I know Coach Day and Athletic Director Bjork feel the same – about our exemplary success in the classroom. Data from the NCAA show that there is only one D1 football program in the country with a perfect multi-year Academic Progress Rate: The Ohio State University. Six other teams also achieved a perfect APR. I'm proud that we are fostering a culture where our student-athletes are students first.

PRIORITY #2

Advance Research & Innovation: Create transformational impact for the state and nation through cutting-edge research and innovation.

- We reported \$1.58 billion in research expenditures for FY2024, a new university record and a 9 percent increase over the previous year, keeping us in the company of the nation's most elite research institutions. The numbers are impressive, but the real impact is in the life-changing and life-saving innovations in medicine, agriculture, technology and so many other areas that our students, faculty and staff are delivering for the people of Ohio.

PRIORITY #3

Financial & Operational Stewardship: Achieve excellence in our resource management, revenue generation and advancement to support the university's vision and mission.

- While other institutions are pulling back in this period of uncertainty, Ohio State's strong financial footing has put us in a position to invest in strategic priorities that will move our vision for academic excellence forward. Thanks to positive investment performance, continued momentum in our health system, a focus on new revenue sources and progress in achieving operational efficiencies, S&P Global this year upgraded our credit rating to AA+. The rating upgrade reflects our financial stability and position as a top research institution and medical center.
- While we are pleased with our responsible stewardship of resources, our efforts to achieve efficiencies are ongoing. As one example, this year we realigned the Office of Technology and Digital Innovation into Administration and Planning, where other shared services are housed, creating opportunities for operational efficiencies and enhanced service.
- On the philanthropic side, this spring we celebrated the most ambitious fundraising campaign in Ohio State history, Time and Change. More than 814,000 unique donors contributed to this historic effort, a remarkable figure that speaks to the passion that Ohio State friends and alumni have for our work and mission. Thanks to their generosity, we are in an even stronger position to achieve our vision for excellence.

PRIORITY #4

The Health System for Ohio: Improve health, wellness and opportunity in Ohio through accessibility, innovation and impact.

- Our top-ranked Wexner Medical Center has launched a new 10-year strategic plan called “Impact 2035” that will position us as the health system for Ohio and a model for the nation during a period of rapid change in the health care industry. The plan focuses on three key components:
 - World-class care for every person, every time.
 - Relentless innovation to improve lives.
 - Being the best place to work and learn.

PRIORITY #5

Ohio State as a workplace of choice: Maximize individual potential and cultivate an inclusive culture to attract and retain high-performing people who execute the strategy of the organization.

- Talent matters, especially as we pursue an ambitious agenda for excellence. I’m pleased with the additions we have made to our leadership team over the past year – all individuals who bring impressive experience and ideas to their roles:
 - Ravi Bellamkonda as executive vice president and provost.
 - Chris Kabourek as senior vice president for administration and planning.
 - Dr. Paula Song as dean of the College of Public Health.
 - Aravind Chandrasekaran as interim dean of the business college for a two-year period.
 - Dr. Kimryn Rathmell as CEO of the Comprehensive Cancer Center and The James.
 - Lee Strang as the inaugural executive director of the Salmon P. Chase Center for Civics, Culture and Society.
 - Jennifer Schlueter as dean and director of The Ohio State University at Marion.
- Hiring great talent is only part of the equation; we must also retain excellent faculty and staff. We are working closely with Human Resources to review total compensation at Ohio State and our overall culture and working environment to make sure that we remain a destination of choice for top talent.

This has been a year of historic change for Ohio State – and also historic achievement. I'm proud of the hard work and dedication of our students, faculty and staff, and honored to serve among them. Excellence is a team sport, and we are fortunate to have the very best here at Ohio State.

The year ahead promises more change, and more opportunity. The launch of a bold Education for Citizenship plan to chart Ohio State's path forward and rewrite the narrative for public higher education could not be coming at a more important or urgent time. I appreciate the partnership and input of the Board and the entire Ohio State community as we finalize our plan and prepare it for public release.

Ohio State's future is strong, and I am fortunate to be part of it.

A handwritten signature in black ink, appearing to read "Ted Carter", with a stylized, flowing script.

Walter "Ted" Carter Jr.
President, The Ohio State University

APPENDIX XIII



THE OHIO STATE UNIVERSITY

To: Mr. Jeff M.S. Kaplan, chair, Talent, Compensation and Governance Committee

CC: Chairman John W. Zeiger, Ms. Jessica A. Eveland, Ms. Anne Garcia

From: Walter “Ted” Carter Jr., president

Date: August 20, 2025

Re: Presidential Priorities for Fiscal Year 2026

Priority No. 1: Academic Excellence. Advance the quality and reputation of Ohio State’s strong academic programs and increase students’ access to high impact internships and career preparation.

Priority No. 2: Enterprise Artificial Intelligence. Integrate AI into the undergraduate student academic experience, such that students will be best equipped to thrive in the workforce of tomorrow.

Priority No. 3: Transformative Research and Innovation. Grow the amount and impact of Ohio State research, innovation and knowledge to advance our society, serve our community and drive economic prosperity and vitality.

Priority No. 4: Operations. Realize sustainable revenue and efficiency opportunities, and further engage the Ohio State community, to support the university’s mission and strategic priorities.

Priority No. 5: Healthcare. Bolster patient safety, experience and outcomes to ensure the provision of world-class care for every patient, every time.

Priority No. 6: Talent and Culture. Make Ohio State a workplace of choice through increased employee engagement resulting in a stronger culture and improved talent experience.

APPENDIX XIV

THE OHIO STATE UNIVERSITY
College of Engineering
Proposal for a professional Master of Systems Engineering degree



College of Engineering
Department of Integrated Systems Engineering
210 Baker Systems
1971 Neil Avenue
Columbus, OH 43210-1271
614-292-6239 Phone
614-292-7852 Fax
ise.osu.edu

Vice Provost W. Randy Smith
Office of Academic Affairs
190 N Oval Mall
Columbus, OH 43210

Dear Vice Provost Smith,

This letter is in support of the proposed degree program, "Master of Systems Engineering (MSE)", led by Prof. Sandy Furterer. This is a professional degree program aimed at practicing engineers seeking to increase their systems engineering modeling, planning and decision-making skills. The proposed program will be offered fully online by the Department of Integrated Systems Engineering, the College of Engineering, and the John Glenn College of Public Affairs. The program is especially designed to serve the needs of engineers in business, industry, healthcare and government who are responsible for modeling, designing and deploying complex systems for the enterprise, products, services and system-of-systems. By offering the proposed MSE program, the Integrated Systems Engineering program will further strengthens its ties with key industries in the state of Ohio, and beyond.

I wholeheartedly support the offering of the proposed Master of Systems Engineering (MSE) program and am excited about the positive impact that it will have on the university, and on local and national industries.

Sincerely,

Farhang Pourboghraat, Professor and Chair, Integrated Systems Engineering Department
Professor, Mechanical and Aerospace Engineering Department
210 Baker Systems, 1971 Neil Avenue
Columbus, OH 43210
Email: pourboghraat.2@osu.edu
Office Phone: 614-292-3124



September 3, 2024

Vice Provost W. Randy Smith
Office of Academic Affairs
190 N. Oval Mall
Columbus, OH 43210

College of Engineering

Office of the Dean

142 Hitchcock Hall
2070 Neil Avenue
Columbus, OH 43210

614-292-2836 Phone
engineering.osu.edu

Dear Vice Provost Smith,

On behalf of the College of Engineering, I am pleased to express my full support for the proposed online Professional Master of Systems Engineering (MSE) program. This innovative degree, to be offered collaboratively by the College of Engineering's Department of Integrated Systems Engineering and the John Glenn College of Public Affairs, represents an expansion of our online and professional education offerings designed to meet the needs of our industry partners and students.

The proposed MSE degree is meticulously crafted to serve practicing engineers across various sectors, including business, industry, healthcare, and government. These professionals, tasked with modeling, designing, and deploying complex systems, will find this program particularly relevant as it equips them with advanced skills to manage and optimize enterprise systems, products, services, and system-of-systems. The curriculum has been developed with a clear focus on working professionals, informed by the outcomes of a comprehensive Market Landscape Scan conducted by Ohio State Online.

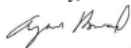
This program strengthens the ties between our Integrated Systems Engineering department and key industries in Ohio and extends our impact far beyond state borders. It positions the university as a leader in addressing the evolving demands of systems engineering nationally and globally.

The Department of Integrated Systems Engineering and the John Glenn College of Public Affairs have already provided letters of support for this program. The potential for this

program to make a lasting and positive impact on the university and the broader engineering community is significant.

I am proud to lend my wholehearted support, along with that of the College's Professional and Distance Education Programs, for the proposed Professional Master of Systems Engineering.

Sincerely,



Ayanna Howard, PhD
Dean, College of Engineering
Monte Ahuja Endowed Dean's Chair

Executive Summary

The proposed Master of Systems Engineering (MSE) degree is a professional program aimed at practicing engineers seeking to increase their systems engineering modeling, planning and decision making skills. MSE degrees are technically based programs that teach concepts, principles, tools and methods to model and manage systems engineering projects and programs in an engineering setting. These methods can be applied throughout any engineering discipline. Courses in the Master of Systems Engineering programs are designed to develop an understanding of how to manage and model complex systems, collaborate with teams of customers, stakeholders and all engineering disciplines to define and achieve systems requirements, and integrate the people, processes, and technology of complex systems. The MSE program is designed for working professionals and will be delivered completely online.

The Department of Integrated Systems Engineering (ISE) requests the approval and implementation of the proposed online professional Master of Systems Engineering (MSE) degree. It has already been unanimously approved by the Graduate Curriculum Committee in the ISE department. The appendices include: A) Course Descriptions; B) Letters of Support from the Dean of the College of Engineering, Dr. Ayanna Howard, and Robert T. Greenbaum, Professor, Glenn College of Public Affairs, C) The Masters in ISE Startup Plan; D) Access and Retention of underrepresented Groups; E) Assessment Plan; and F) Program Implementation.

I. Introduction and Overview

The College of Engineering (CoE) at The Ohio State University proposes a new professional master's degree in engineering.

a) Designation

The degree will be called the Master of Systems Engineering (MSE).

b) Rationale

The proposed degree is a professional degree at the post-baccalaureate level aimed at practicing engineers. It is not a research degree and thus the Master of Science degree is not appropriate. The title of Master of Systems Engineering is intended to convey both the technical aspects of an engineering degree and the equally important modeling and collaboration skills necessary to succeed in a complex systems domain.

The target audience for the MSE degree is engineers in business, industry, healthcare and government who have worked in the field for three to ten years who are responsible for modeling, designing and deploying complex systems for the enterprise, products, services and system-of-systems. More recent graduates will also be considered for the program based on their qualifications and experience, but the focus is on early to mid-career engineering professionals. Prospective students may be employed in either the public or private sectors (for profit or non-profit). They aspire to learn systems engineering skills that prepare them to be systems engineers and the integrator of systems in their organizations.

c) Purpose, Focus and Significance

Master of Systems Engineering degrees are technically based programs that teach methods to plan, model and deploy complex systems, projects and programs in an engineering setting for systems that focus on the enterprise, products, services and system-of-systems. MSE coursework typically includes topics such as systems engineering lifecycle management, modeling and simulation, model-based systems engineering, systems requirements engineering, decision analysis and advanced project management.

Based on the market analysis, Columbus has seen the highest number of unique job postings in the systems engineering occupations in the past 12 months compared to Cincinnati, which has seen the second highest number (followed by the Cleveland metro area). Columbus is a hotspot for jobs within the profiled occupations. The national average for an area the size of Columbus is 16,849 jobs, while there were 20,057 in Columbus in 2022.

The content for the Master of Systems Engineering degree will be provided by faculty in the College of Engineering and content area experts in the John Glenn College of Public Affairs. The delivery by distance education technology provides the ideal environment for working professionals.

Engineers who complete the MSE will be able to:

- Articulate what systems engineering (SE) is and explain the importance of maintaining SE rigor throughout a system's life cycle
- Comprehend and incorporate different concepts, principles, and tools of systems engineering in solving problems and developing balanced system solutions
- Establish collaboration among all organizational functional areas necessary for effective systems engineering application
- Apply critical thinking to execute the SE process in realistic scenarios and projects and to defend decisions and positions
- Synthesize the concepts and principles of system architecture and Model-Based Systems Engineering to apply to systems design and deployment.
- Apply the systems architecture and Model-Based Systems Engineering models to model different types of systems, including product, service, enterprise system and system-of-system.
- Apply the systems requirements engineering and analysis methods and deliverables to elicit, document, test and trace systems requirements for different types of systems, including product, service, enterprise system and system-of-systems.
- Describe key systems requirements engineering and analysis frameworks, and practices used in industry to elicit, document, test and trace systems requirements.

II. Proposed Curriculum

The proposed curriculum is a minimum of 30 semester credit hour program. Students have the flexibility of taking the curriculum on a full or part time basis. Depending upon their term of enrollment, students may complete the degree in as little as one and a half years. All students must complete the degree within four years unless the Graduate Studies Committee (formed specifically for this program) grants an

extension. Students may be awarded up to three hours of credit for previous coursework completed elsewhere.

a) The Required Core (15 credit hours):

This integrated core includes engineering courses including topics such as systems engineering lifecycle, model-based systems engineering, systems requirements engineering, simulation and advanced project management. (* indicates existing online course materials available to be adapted to the program)

- ISE 5840.02 Systems Engineering Lifecycle Foundations *
- ISE 5842.02 Model-Based Systems Engineering*
- ISE 5844.02 Systems Requirements Engineering
- ISE 6300 Simulation for System Analytics and Decision-Making*
- ISE 6801 Project Management for Engineers*

b) Electives (12 credit hours)

The elective courses provide opportunities for students to enhance their system engineering skills in areas of Lean Six Sigma, systems thinking in engineering and design, cognitive systems engineering, decision analysis, human systems integration, project management and food systems, data analytics, and engineering ethics. Students select courses from the following to full-fill the electives portion of the curriculum:

- ISE 5110 – Design of Engineering Experiments*
- ISE 5700 - Introduction to Cognitive Systems Engineering*
- ISE 5745 - Human-Centered Machine Learning
- ISE 5760 – Visual Analytics and Sensemaking*
- ISE 5810 - Lean Sigma Foundations*
- ISE 5820 – Systems Thinking in Engineering and Design
- ISE 5830 - Decision Analysis
- ISE 5870 – Resilience Engineering
- PUBAFRS 5770 - Risk & Decision Analysis in Public Affairs*
- PUBAFRS 6050 Managing Public Sector Organization*
- PUBAFRS 7550 Contract Management*
- PUBAFRS 7600 Federal Policy and Administration*

c) Capstone Course (3 credit hours)

The capstone course is a culminating experience providing students the opportunity to solve real-world challenges by utilizing skills learned from all the MSE courses, while implementing the principles of systems engineering in an organization.

- ISE 6804.02 Capstone Project in Systems Engineering (3 credits)

d) Administrative Arrangements

The MSE degree will be administered by the College of Engineering through the Professional and Distance Education Programs Office. The MSE Graduate Studies

Committee (GSC) will be established within the College to coordinate the operation of the program.

a) *Graduate Studies Committee (GSC)*

The MSE Faculty Director will act as the chair of the MSE-GSC. The MSE-GSC will consist of these voting members: the MSE Faculty Director, one representative from the John Glenn College of Public Affairs, and two Engineering faculty who teach MSE courses, the College of Engineering Director of Professional and Distance Education Programs, and the ISE Graduate Program Coordinator. The MSE-GSC will include the PDEP Program Coordinator as a non-voting member.

b) *Ohio State Online (OSO)*

The proposed program will be developed in partnership with Ohio State Online.

c) *Industry Advisory Board (IAB)*

An Industry Advisory Board will be utilized and engaged for the MSE degree to help ensure the curriculum remains relevant to the needs of industry.

d) *MSE Operations*

The Director of Professional and Distance Education Programs (PDEP) in the College of Engineering will be responsible for the overall administration of the MSE degree and day-to-day operations.

e) *Admission Eligibility Requirements*

1. Applicants who have an undergraduate degree in engineering, engineering technology, mathematics, statistics, computer science, natural sciences, or other technically oriented majors from an accredited college or university. Applicants with non-engineering undergraduate degrees may be considered, depending upon the type of non-engineering degree and years of work experience.
2. Two years of work experience in a technical, engineering or analytical position.
3. Test Scores: A GRE score is not required.
4. During the admissions process, a recommendation to enroll in the Graduate Bridge Program (to qualify for admission to the MSysE degree) will be considered for the following student populations: international applicants, applicants with a degree from a non-ABET accredited institution, or applicants who have a GPA below 3.0 from the last undergraduate or advanced degree earned.
5. Official transcript to be sent from each college or university attended.
6. A 1 – 2 page Statement of Purpose describing your career and educational goals, and a current resume.

f) Online Course Development

Faculty with expertise in the course areas will be developing the courses to teach them in an online delivery mode. The College of Engineering through the Professional and Distance Education Programs Office will provide funding for the faculty to develop the courses. For the elective courses, there are four online courses with established materials that will need to be adapted to the Carmen learning management system for an online course (asterisked above). There is one required new course that will need to be developed and put online into Carmen. There are 7 elective courses that have significant online course materials that may need to be slightly adapted for the program. There are 4 elective courses that have course materials that need to be developed in an online mode. All of the faculty have been identified and are willing to develop the coursework, most likely in Summer 2025.

IV. Evidence of Need

The College of Engineering conducted extensive research for the development of the MSE degree and has collected significant information and data providing evidence of need for the MSE degree (CoE Market Analysis for Systems Engineering jobs and programs).

a) Systems Engineering Job and Occupational Landscape

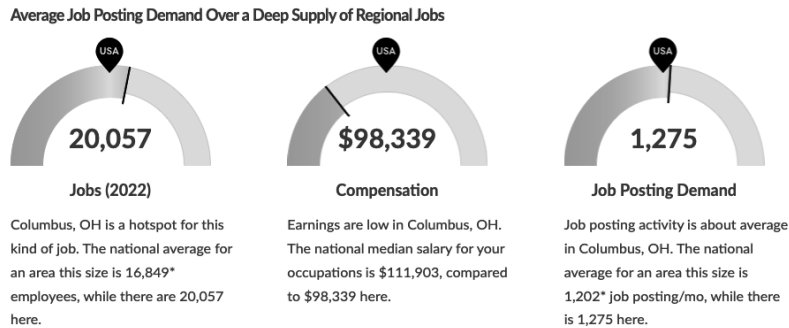
Nationally, over the 12-month period of the market analysis (March 2022 to March 2023) the top standard occupations associated with the specialized occupation of “Systems Engineer” (from the proprietary Lightcast Occupation Taxonomy) based on job postings include:

- Computer Occupations, All Other (SOC 15-1299)
- Mechanical Engineers (SOC 17-2141)
- Aerospace Engineers (SOC 17-2011)
- Software Developers (SOC 15-1252)

According to a Job Postings by Location report using Lightcast, a web-based platform that brings together national educational data, industry and occupational reports, real-time job postings, and publicly available profile and CV (curriculum vitae) information, and to which OTDI (Office of Technology and Digital Innovation) subscribes, the 59,640 unique job postings in Ohio fell behind Washington (63,242) and just ahead of Arizona (54,878). Ohio had the 14th most unique postings over the 12-month period (March 2022 to March 2023).

Based on the market analysis, Columbus has seen the highest number of unique job postings in the systems engineering occupations in the past 12 months compared to Cincinnati, which has seen the second highest number (followed by the Cleveland metro area). Columbus is a hotspot for jobs within the profiled occupations. The national average for an area the size of Columbus is 16,849 jobs, while there were

20,057 in Columbus in 2022, shown in Figure 1



*National average values are derived by taking the national value for your occupations and scaling it down to account for the difference in overall workforce size between the nation and Columbus, OH. In other words, the values represent the national average adjusted for region size.

Figure 1 Number of jobs in Columbus compared to the adjusted national average; also included are compensation and job posting demand metrics.

Projections show profiled occupation growth in Ohio over the next 10 years. **Ohio occupational growth is slightly below the adjusted national average growth rate.** Unfortunately, compensation in Ohio does not keep up with the national rates for those with these jobs in other states. The national median salary within these occupations is \$111,903 compared to Ohio’s median salary of \$95,339.

Between March 2022 and March 2023, the top companies hiring for these profiled occupations in Ohio include JPMorgan Chase, Deloitte, and General Electric. Columbus had the greatest number of unique job postings at 9,524, followed by Cincinnati and Cleveland. Information from Lightcast calls out Ohio employers with the greatest number of unique job postings within the past 12 months.

Based upon a 2021 U.S. Department of Education and National Center for Education Statistics data, 69 institutions reported 2,186 master’s degree completions in 2021. Thirty-three (33) of the 69 institutions reporting completions had programs that were classified as “distance offered”. A distance offered program is defined as a “program for which all the required coursework is able to be completed via distance education courses.” It is worth noting that although 48% of institutions classified their programs as “distance offered” they accounted for 67% of all completions in 2021 (Figure 2).

Program Overview

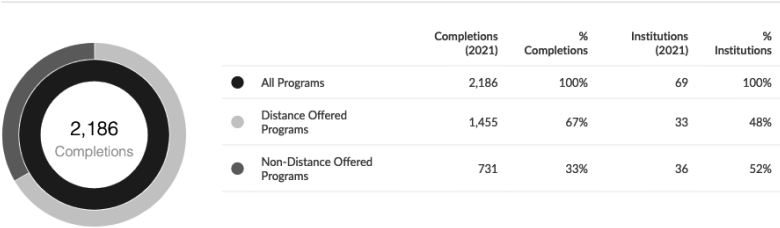


Figure 2 Program Completions

The institution reporting the most online master’s degree completions was the Naval Postgraduate School with 211 completions from their various systems engineering master's programs. The Naval Postgraduate School currently offers three resident master’s degrees and five distance learning master’s degrees. Programs that could be mapped to the profiled CIP code and counting toward the 211 distance completions in 2021 include: a Master of Science in Systems Engineering, a Master of Science in Aviation Systems Engineering, or a Master of Science in Systems Engineering Management, among others. As of 2021, the Naval Postgraduate School maintained a share of 9.7% of the total degree-completion market and a 14.5% share of the distance-degree completion market. It should be noted that students eligible to attend the Naval Postgraduate School include: U.S. Military students, international students, Department of Defense civilian employees, and a limited number of defense contractors.

John Hopkins University reported the second most online master’s degree completions in this CIP code and students eligible for their programs are not limited to specific U.S. Military personnel. Johns Hopkins reported 202 completions in 2021 and experience a 37.4% growth in completions from the previous year. Programs that could be mapped to the profiled CIP code and counting toward the 202 distance completions in 2021 include: a Master of Systems Engineering, a Master of Space Systems Engineering, a Master of Healthcare Systems Engineering, among others. As of 2021, Johns Hopkins maintained a share of 9.2% of the total degree-completion market and a 13.9% share of the distance-degree completion market.

The Master of Science in Systems Engineering at Johns Hopkins requires the completion of 30 credits. 21 of those credits are required core courses and nine are elective courses based in a specific focus area. Focus areas listed on their website include: Cybersecurity, Human Systems, Modeling and Simulation, Project Management, Software Systems. The program is positioned as being able to “keep

engineers and scientists on the leading edge of all aspects of analysis, design, integration, production, and operation of modern systems.”

V. Prospective Enrollment and Student Demand

a) Demand

Based on our marketing data we believe the MSE program will quickly enroll 10-20 students in the first year and grow to 30-50 students afterwards.

VI. Available Resources and Additional Costs

The MSE degree program will use current faculty already teaching in the ISE program, but will need to augment some areas with lecturers. Administrative support for the degree will be provided by the existing Professional and Distance Education Programs office in the college. The only additional costs required for the MSE will be compensation to faculty for development time when converting their courses into the online format

Appendix A Course Descriptions

Required Core (15 hours)

ISE 5840.02 Systems Engineering Lifecycle Foundations *

Course Description:

This course introduces the essential principles, processes, and practices associated with the application of Systems Engineering tools to the system life-cycle. Emphasis will focus on defining the problem to be solved, establishing the initial system architectures and requirements, design, verification and validation, along with the inter-disciplinary nature of systems. For Professional Masters SE.

ISE 5842.02 Model-Based Systems Engineering*

Course Description:

This course will provide an understanding of the essential concepts, practices, and applications of System Architecture, and how Systems Engineering models can be used to design and deploy a system. The students will be able to apply systems architecture and Model-Based Systems Engineering (MBSE) to model the different types of systems. For the Professional Masters Program in Systems Engr.

ISE 5844.02 Systems Requirements Engineering

Course Description:

This course will provide an understanding of the essential concepts, practices, and applications of requirements engineering and analysis used to elicit and model systems requirements. Course includes how to apply requirements engineering to elicit requirements for different types of systems. This course is for Professional Masters Program in Systems Engineering.

ISE 6300 - Simulation for System Analytics and Decision-Making*

Course Description:

Students learn how to collect data and perform input analysis, model systems using discrete-event simulation, and inform system design decision-making through defensible output analysis.

ISE 6801 Project Management for Engineers*

Course Description:

Provides foundational and advanced project management education in an interactive online learning environment as part of the Master of Global Engineering Leadership program.

ISE 6804.02 Capstone Project in Systems Engineering (3 credits)

Course Description:

The capstone course is a culminating experience providing students the opportunity to solve real-world challenges by utilizing skills learned from the MSE courses, while implementing the principles of systems engineering in an organization. This course is for Professional Masters Program in Systems Engineering.

Electives (12 credit hours)

ISE 5110 – Design of Engineering Experiments*

Course Description:

Plan and analyze experiments relevant to system design. Also, students will learn regression and alternative approaches for on-hand data analysis

ISE 5700 - Introduction to Cognitive Systems Engineering

Course Description:

Human-centered design of consumer products, web sites and complex sociotechnical systems. Topics include human-computer interaction and the design of decision support and distributed work systems.

ISE 5745 - Human-Centered Machine Learning

Course Description:

Design and analysis of ML for human users. Topics include: introductory machine learning; interactive ML; ethics in AI; human-agent interaction; human-subject research. Students not familiar with Python should enroll in an introductory python course as a pre- or co-requisite.

ISE 5760 – Visual Analytics and Sense Making*

Course Description:

Students learn about information visualization techniques that help people analyze massive amounts of digital data to combat overload and aid sensemaking with applications in retail and financial decision making, logistics, information systems, manufacturing, healthcare, energy and smart grids, cybersecurity and social networks.

Prereq: Jr, Sr, or Grad standing. Not open to students with credit for 773.01.

ISE 5810 - Lean Sigma Foundations*

Course Description:

Comprehensive foundation course that is required to complete Green and Black Belt Certification.

ISE 5820 – Systems Thinking in Engineering and Design

Course Description:

Concepts and heuristics in systems thinking and complex systems analysis and how these concepts apply to engineering and design projects.

Prereq: Sr or Grad standing, or permission of instructor. Not open to students with credit for 688.

ISE 5830 - Decision Analysis

Course Description:

Introduction to decision analysis, modern utility theory and risk modeling, Bayesian inference, value of information, multiattribute decision modeling, and application to engineering decisions under uncertainty.

ISE5870 – Resilience Engineering

Course Description:

Provides a comprehensive treatment of Resilience Engineering tools to measure, manage, and design complex systems to be resilient in the face of surprising disrupting events.

Prereq: Sr or Grad standing, or permission of instructor.

PUBAFRS 5770 - Risk & Decision Analysis in Public Affairs*

Course Description:

Today, more than ever, managers are required to make decisions in turbulent and uncertain environments. Intended for advanced undergraduates and graduate students, this course will provide a comprehensive assessment of theories and tools for decision-making in the face of risk and uncertainty. It will provide a rigorous treatment of current issues and approaches in risk analysis through both qualitative and quantitative lenses. The methodological focus of the course will be on analytical approaches and modeling methodologies to improve and enhance decision-making in the face of uncertainty. While the course focuses on issues of relevance to the public and non-profit sectors, the tools, theories and approaches learned are widely applicable to other applications and sectors. This course builds upon students' prior academic preparation in case study analysis, statistics or econometrics, and data analysis using software packages.

PUBAFRS 6050 Managing Public Sector Organization*

Course Description:

This course provides an introduction to public management, with a focus on the environment, structure and design of the organizations that public managers run. We will build from a foundation in organizational theory and consider management challenges facing organizations that carry out public purposes. We will focus on traditional public sector organizations, government funded bureaus and agencies that deliver public services directly to citizens but will also consider other organizations that operate in the public sector (e.g. nonprofits, private firms under contract). Taken together, our examination of the environment and structure of public organizations will help you diagnose the management challenges and opportunities in managing a public sector organization.

PUBAFRS 7550 Contract Management*

Course Description:

Upon completion of the course, students should understand that public officials have the responsibility to ethically acquire goods and services at the local, state and federal levels to meet the public's needs in a cost-effective manner. This requires an understanding of basic procurement principles, legal authorities, socio-economic considerations, and various procurement methods available to accomplish these responsibilities. This course provides students with practical knowledge regarding contracting for goods and services, techniques to ensure successful outcomes, and a perspective on public procurement policy and issues, providing students an understanding of the government procurement process from both the government and private industry perspectives.

PUBAFRS 7600 Federal Policy and Administration*

Course Description:

This course will provide a unique opportunity to explore U.S. federal policy and administration in the nation's capital. Students will be exposed to a range of issues that are among the most salient to understanding the complexities of the federal government. Students will further develop their foundational knowledge of institutions, including the roles of the president, Congress, and the courts in the formulation and execution of federal policy in relation to the federal bureaucracy. Students will analyze the implementation process and how work is managed in third-party governance, federalism, and the regulatory regime.

This course is designed as a graduate seminar and requires significant reading and preparation. Students will apply knowledge, use analytical tools, and research various subjects relating to the federal policy and administration. Students will systematically analyze current events while also learning practical tools such as writing effective decision memoranda for senior leadership. Students are asked to be forward leaning in identifying an issue of importance at their internship site.

APPENDIX XV

Appointments/Reappointments of Chairpersons

ADELEKE ADEEKO (extension), Acting Chair, Department of African American and African Studies, June 1, 2025, through June 30, 2025

ANIL ARYA (extension), Chair, Department of Accounting and Management Information Science, June 1, 2025, through August 14, 2025

ROGER BEEBE, Interim Chair, Department of Art, July 1, 2025, through June 30, 2026

PROSPER BOYAKA, Chair, Department of Veterinary Biosciences, July 1, 2025, through June 30, 2029

CYNTHIA COLEN, Chair, Department of Sociology, July 1, 2025, through June 30, 2029

ANDREW GLASSMAN, Chair, Department of Orthopaedic Surgery, July 1, 2025, through June 30, 2026

IAN HOWAT, Director, School of Earth Sciences, July 1, 2025, through June 30, 2029

MATTHEW KAHLE, Chair, Department of Mathematics, July 1, 2025, through June 30, 2029

DOUGLAS KARCHER, Chair, Department of Horticulture and Crop Science, July 1, 2025, through June 30, 2029

RACHEL KLEIT, Interim Director, Knowlton School of Architecture, July 1, 2025, through June 30, 2026

LAURA KUBATKO, Interim Chair, Evolution, Ecology and Organismal Biology, July 1, 2025, through December 31, 2025

MARCUS KURTZ, Chair, Department of Political Science, July 1, 2025, through June 30, 2029

SUSAN LANG-extension, Director, Center for the Study of Teaching and Writing, July 1, 2025, through June 30, 2029

STEVE LAVENDER, Acting Chair, Department of Integrated Systems Engineering, August 15, 2025, through December 31, 2025

MORGAN LIU, Chair, Department of Near Eastern Languages and Cultures, July 1, 2027, through June 30, 2028

SCOTT MCGRAW**, Chair, Department of Anthropology, July 1, 2025, through June 30, 2029

ILA NAGAR, Acting Chair, Department of Near Eastern and South Asian Languages and Cultures, July 1, 2025, through June 30, 2026

SUNNIE RUCKER-CHANG, Interim Chair, Department of African American and African Studies, July 1, 2025, through June 30, 2026

ZARINE SHAH, Interim Chair, Department of Radiology, May 5, 2025, through June 30, 2026

PATRICIA SIEBER, Chair, Department of East Asian Languages and Literatures, July 1, 2025, through June 30, 2029

RYAN SKINNER, Director, Humanities Institute, July 1, 2025, through June 30, 2029

BINAYA SUBEDI, Interim Chair, Department of Teaching and Learning, August 1, 2025, through July 31, 2026

BRYAN WARNICK, Chair, Department of Educational Studies, August 15, 2025, through August 14, 2029

TZACHI ZACH, Chair, Department of Accounting and Management Information Science, August 15, 2025, through August 14, 2029

**Reappointment

*New Hire

Faculty Professional Leaves

ASHLEY BIGHAM, Associate Professor, Knowlton School of Architecture, FPL for Fall 2025 and Spring 2026

ELIZABETH BONDS, Associate Professor, University Libraries, FPL for Fall 2025

MELVIN PASCALL, Professor, Department of Food Science and Technology, FPL for Spring 2026

MICHAEL PENNELL, Professor, College of Public Health, FPL for Spring 2026

Faculty Professional Leave Changes/Cancellations

MADHUMITA DUTTA, Associate Professor, Department of Geography, Change of FPL from Fall 2025 and Spring 2026 to Fall 2025 only

JAMES HOOD, Associate Professor, Department of Evolution, Ecology and Organismal Biology, Change of FPL from Fall 2025 and Spring 2026 to Spring 2026 only

JAY KANDAMPULLY, Professor, Department of Human Sciences, Cancellation of FPL for Fall 2025

KWAKU KORANG, Associate Professor, Department of African American and African Studies, Change of FPL from Fall 2025 and Spring 2026 to Spring 2026 only

CHUN NING LAU, Professor, Department of Physics, Change of FPL from Fall 2025 and Spring 2026 to Spring 2026 only

DESHENG LIU, Professor, Department of Geography, Change of FPL from Fall 2025 and Spring 2026 to Spring 2026 only

JANET BOX-STEFFENSMEIER, Department of Political Science, with the title of Professor Emeritus, effective June 1, 2025

LUIS CASIAN, Department of Mathematics, with the title of Professor Emeritus, effective June 1, 2025

JAMES COGDELL, Department of Mathematics, with the title of Professor Emeritus, effective June 1, 2025

NANCY ETTLINGER, Department of Geography, with the title of Professor Emeritus, effective June 1, 2025

RUSSELL FAZIO, Department of Psychology, with the title of Professor Emeritus, effective August 15, 2025

GERALD FRANKEL, Department of Materials Science and Engineering, with the title of Professor Emeritus, effective August 15, 2025

REBECCA HAIDT, Department of Spanish and Portuguese, with the title of Professor Emeritus, effective June 1, 2025

PETER CHRISTOPHER HAMMEL, Department of Physics, with the title of Professor Emeritus, effective August 15, 2025

CYNTHIA KREGER, Department of Internal Medicine, with the title of Professor-Clinical Emeritus, effective October 1, 2025

ADELE LIPARI, Department of Radiology, with the title of Associate Professor-Clinical Emeritus, effective July 1, 2025

LAURA LISBON, Department of Art, with the title of Professor Emeritus, effective June 1, 2025

DANIEL MARTIN, Department of Emergency Medicine, with the title of Professor-Clinical Emeritus, effective July 1, 2025

MARK MCCORD, Department of Civil, Environmental and Geodetic Engineering, with the title of Professor Emeritus, effective August 1, 2025

ANTOINETTE MIRANDA, Department of Teaching and Learning, with the title of Professor Emeritus, effective August 1, 2025

MARIO MIRANDA, Department of Agricultural, Environmental and Development Economics, with the title of Professor Emeritus, effective September 1, 2025

JAY INJAE MYUNG, Department of Psychology, with the title of Professor Emeritus, effective June 1, 2025

JAN NESPOR, Department of Educational Studies, with the title of Professor Emeritus, effective August 1, 2025

MARIO PERUGGIA, Department of Statistics, with the title of Professor Emeritus, effective July 1, 2025

SCOPAS POGGO, Department of African American and African Studies, with the title of Associate Professor Emeritus, effective June 1, 2025

SHARI SAVAGE, Department of Arts Administration, Education and Policy, with the title of Associate Professor Emeritus, effective August 15, 2025

CHRISTINE SAYRE, College of Nursing, with the title of Associated Faculty Emeritus, effective June 1, 2025

BARRY SHANK, Department of Comparative Studies, with the title of Professor Emeritus, effective August 15, 2025

TODD SLAUGHTER, Department of Art, with the title of Professor Emeritus, effective June 1, 2025

SHARI SPEER, Department of Linguistics, with the title of Professor Emeritus, effective June 1, 2025

MICHAEL SWARTZ, Department of Near Eastern and South Asian Languages and Cultures, with the title of Professor Emeritus, effective August 15, 2025

FERNANDO UNZUETA, Department of Spanish and Portuguese, with the title of Professor Emeritus, effective August 15, 2025

IAN WILKINSON, Department of Teaching and Learning, with the title of Professor Emeritus, effective August 1, 2025

2025/2026 Hires

COLLEGE OF ARTS AND SCIENCES

DIVISION OF NATURAL AND MATHEMATICAL SCIENCES

PROMOTION TO PROFESSOR WITH TENURE

Oshikawa, Masaki, Physics, January 1, 2026

Yeo, In-Young, School of Earth Sciences, August 15, 2025

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Whelan, Nathan, Evolution, Ecology and Organismal Biology, August 15, 2025

DIVISION OF SOCIAL AND BEHAVIORAL SCIENCES

PROMOTION TO PROFESSOR WITH TENURE

Erev, Ido, Psychology, August 15, 2025

Gray, Kurt, Psychology, August 15, 2025

Lindquist, Kristen, Psychology, August 15, 2025

PROMOTION TO PROFESSOR

Lavetti, Kurt, Economics, August 15, 2025

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Cook, Scott, Political Science, August 15, 2025

DIVISION OF SOCIAL AND BEHAVIORAL SCIENCES

CLINICAL

PROMOTION TO PROFESSOR-CLINICAL AND REAPPOINTMENT

Kraft, Nicole, School of Communication, August 15, 2025

COLLEGE OF ENGINEERING

PROMOTION TO PROFESSOR WITH TENURE

Kwon, Joseph, Chemical and Biomolecular Engineering, August 15, 2025

COLLEGE OF ENGINEERING

CLINICAL

PROMOTION TO ASSOCIATE PROFESSOR-CLINICAL

Atiq, Syedah Zahra, Computer Science and Engineering, August 20, 2025

**COLLEGE OF ENGINEERING
RESEARCH**

REAPPOINTMENT

Hagen, Joshua, Integrated Systems Engineering, September 1, 2026
Tawfik, Eslam, Electrical and Computer Engineering, August 15, 2026
Viswanathan, Gopal, Materials Science and Engineering, March 1, 2026

COLLEGE OF FOOD, AGRICULTURAL, AND ENVIRONMENTAL SCIENCES

PROMOTION TO PROFESSOR WITH TENURE

Techtmann, Stephen, Food, Agricultural and Biological Engineering, August 15, 2025
Wyatt, Kevin, School of Environment and Natural Resources, August 15, 2024

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Rober, Allison, School of Environment and Natural Resources, August 15, 2024

**COLLEGE OF LAW
CLINICAL**

REAPPOINTMENT

Cooke, Elizabeth, September 1, 2025
Jordan, Kim, August 15, 2026
Lee, Katrina, August 15, 2026

COLLEGE OF MEDICINE

PROMOTION TO PROFESSOR WITH TENURE

Burns, Timothy, Internal Medicine, June 4, 2025
Stafford, John, Internal Medicine, July 1, 2025

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Fan, Yanbo, Surgery, April 8, 2025

**COLLEGE OF MEDICINE
CLINICAL**

PROMOTION TO PROFESSOR-CLINICAL

Larry, John, Internal Medicine, May 21, 2025

**COLLEGE OF MEDICINE
RESEARCH**

REAPPOINTMENT

Alain, Gabriel, School of Health and Rehabilitation Sciences, July 1, 2026

Baker, Gretchen, School of Health and Rehabilitation Sciences, July 1, 2026

COLLEGE OF NURSING

PROMOTION TO ASSOCIATE PROFESSOR WITHOUT TENURE

Murnan, Aaron, August 15, 2025

**COLLEGE OF NURSING
CLINICAL**

Associate Professor-Clinical

Kaligotla, Lalita, August 15, 2025

COLLEGE OF PUBLIC HEALTH

PROMOTION TO PROFESSOR WITH TENURE

Song, Paula, July 9, 2025

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Haeder, Simon, August 15, 2025

MAX M. FISHER COLLEGE OF BUSINESS

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Hu, Yuheng, Accounting and Management Information Systems, August 15, 2025

SALMON P. CHASE CENTER FOR CIVICS, CULTURE, AND SOCIETY

PROMOTION TO PROFESSOR WITH TENURE

Clune, Michael, August 15, 2025

Green, Christopher, May 15, 2025

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Schoen, Brian, May 15, 2025

UNIVERSITY LIBRARIES

PROMOTION TO ASSOCIATE PROFESSOR WITH TENURE

Blocksidge, Katie, April 7, 2025

APPENDIX XVI



DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act

University Policy

Applies to: Faculty, staff, students

Responsible Office

Office of Academic Affairs

POLICY

Issued: 08/25/2025

The Ohio State University is committed to upholding equal rights, advancing institutional fairness, fostering a sense of belonging where all are valued, listening to multiple voices, engaging in civil discourse, and encouraging open-minded exploration, risk-taking, and freedom of expression. As a land-grant institution, the university takes seriously its role in promoting access, affordability, opportunity, and empowerment for all in advancement of its academic motto—"Education for Citizenship."

Ohio Revised Code (ORC) 3345.0217 of the Advance Ohio Higher Education Act requires the university's Board of Trustees to adopt, and the university to enforce, this policy, which serves to identify and clarify certain specified institutional priorities and practices relevant to the university's mission and values.

Purpose of the Policy

To comply with [ORC 3345.0217](#) of the Advance Ohio Higher Education Act.

Definitions

Term	Definition
Controversial belief or policy	Any belief or policy that is the subject of political controversy, including issues such as climate policies, electoral politics, foreign policy, diversity, equity, and inclusion programs, immigration policy, marriage, or abortion. See ORC 3345.0217(A)(1).
Intellectual diversity	Multiple, divergent, and varied perspectives on an extensive range of public policy issues. See ORC 3345.0217(A)(2).

Policy Details

- I. Diversity, Equity, and Inclusion Prohibitions Under ORC 3345.0217
 - A. Pursuant to ORC 3345.0217, the university prohibits all of the following:
 1. Any orientation or training course regarding diversity, equity, and inclusion, unless the institution submits a written request for an exception to the chancellor of higher education because the university determines the orientation or training course is exempt from that prohibition because all aspects of the orientation or course are required to do any of the following: comply with state and federal laws or regulations; comply with state or federal professional licensure requirements; or obtain or retain accreditation. The exception request must include an explanation of the circumstances and effort made by the university to comply. See the university's SB1 Compliance website for more detailed information on such exception requests.
 2. The continuation of existing diversity, equity, and inclusion offices or departments on or after June 27, 2025, the effective date of ORC 3345.0217.
 3. Establishing new diversity, equity, and inclusion offices or departments on or after June 27, 2025.
 4. Using diversity, equity, and inclusion in job descriptions.
 5. Contracting with consultants or third-parties whose role is or would be to promote admissions, hiring, or promotion on the basis of race, ethnicity, religion, sex, sexual orientation, gender identity, or gender expression.
 6. The establishment of any new institutional scholarships that use diversity, equity, and inclusion in any manner.



DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act

University Policy

Applies to: Faculty, staff, students

- a. For any institutional scholarships existing on June 27, 2025 (the effective date of ORC 3345.0217), the university must, to the extent possible, eliminate diversity, equity, and inclusion requirements. If the university is unable to do so because of donor requirements, the university may continue to offer those institutional scholarships. However, the university may not accept any additional funds for the operation of institutional scholarships that have diversity, equity, and inclusion requirements.
- B. The university may not replace any orientation, training, office, or position designated for the purpose of diversity, equity, and inclusion that is prohibited above with an orientation, training, office, or position under a different designation that serves the same or similar purposes, or that uses the same or similar means.
- C. In the event that the requirements to obtain a research grant conflict with the prohibitions listed above, the university will endeavor, to the extent possible, to comply with the prohibitions listed above while retaining eligibility for the research grant, including by consulting with legal counsel. If the university is unable to comply with the prohibitions above with respect to a research grant and chooses to pursue the grant, the university must submit a written request for an exception to the chancellor of higher education. The exception request must include an explanation of the circumstances and the effort made by the university to comply with the prohibitions while retaining eligibility for the research grant. See the university's [SBI Compliance website](#) for more detailed information on such exception requests.
- D. The prohibitions in I.A. above and the research grant requirements in I.C. above do not apply to agreements or contracts regarding any research grants entered into prior to June 27, 2025. However, those prohibitions and requirements do apply to any renewal of such agreements or contracts occurring on or after June 27, 2025.

II. Intellectual Diversity and Controversial Belief or Policy Affirmations and Requirements Under ORC 3345.0217

- A. Pursuant to ORC 3345.0217, the university:
 1. Affirms and declares that its primary function is to practice, or support the practice, discovery, improvement, transmission, and dissemination of knowledge and citizenship education by means of research, teaching, discussion, and debate. To fulfill this function, the university will ensure the fullest degree of **intellectual diversity**. This section does not apply to the exercise of professional judgment about how to accomplish intellectual diversity within an academic discipline, unless that exercise is misused to constrict intellectual diversity.
 2. Affirms and declares that faculty and staff will allow and encourage students to reach their own conclusions about all **controversial beliefs or policies** and will not seek to indoctrinate any social, political, or religious point of view. This section does not apply to the exercise of professional judgment about how to accomplish intellectual diversity within an academic discipline, unless that exercise is misused to constrict intellectual diversity.
 3. Will demonstrate intellectual diversity for course approval, approval of courses to satisfy general education requirements, student course evaluations, common reading programs, annual reviews, strategic goals for each department, and student learning outcomes. This section does not apply to the exercise of professional judgment about how to accomplish intellectual diversity within an academic discipline, unless that exercise is misused to constrict intellectual diversity.
 4. Declares that it will not endorse or oppose, as an institution, any controversial belief or policy, except on matters that directly impact the institution's funding or mission of discovery, improvement, and dissemination of knowledge. The institution may also endorse the congress of the United States when it establishes a state of armed hostility against a foreign power. This section does not include the recognition of national and state holidays, support for the Constitution and laws of the United States or the state of Ohio, or the display of the American or Ohio flag. This section does not apply to the exercise of professional judgment about whether to endorse the consensus or foundational beliefs of an academic discipline, unless that exercise is misused to take an action prohibited in II.A.5. below.
 5. Affirms and declares that it will not encourage, discourage, require, or forbid students, faculty, or administrators to endorse, assent to, or publicly express a given ideology, political stance, or view of a



DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act

University Policy

Applies to: Faculty, staff, students

social policy, nor will the institution require students to do any of those things to obtain an undergraduate or post-graduate degree. This section does not apply to the exercise of professional judgment about whether to endorse the consensus or foundational beliefs of an academic discipline, unless that exercise is misused to take an action prohibited by this section.

6. Prohibits political and ideological litmus tests in all hiring, promotion, and admissions decisions, including diversity statements and any other requirement that applicants describe their commitment to any ideology, principle, concept, or formulation that requires commitment to any controversial belief or policy.
7. Affirms and declares that no hiring, promotion, or admissions process or decision will encourage, discourage, require, or forbid students, faculty, or administrators to endorse, assent to, or publicly express a given ideology or political stance.
8. Affirms and declares that it will not use a diversity statement or any other assessment of an applicant's political or ideological views in any hiring, promotions, or admissions process or decision.
9. Affirms and declares that no process or decision regulating conditions of work or study, such as committee assignments, course scheduling, or workload adjustment policies, will encourage, discourage, require, or forbid students, faculty, or administrators to endorse, assent to, or publicly express a given ideology or political stance.
10. Affirms and declares that it will seek out invited speakers who have diverse ideological or political views.
11. Will post prominently on its website a complete list of all speaker fees, honoraria, and other emoluments in excess of five hundred dollars for events that are sponsored by the university. The information must be:
 - a. Accessible from the main page of the university's website by use of not more than three links;
 - b. Searchable by keywords and phrases; and
 - c. Accessible to the public without requiring user registration of any kind.

III. Nothing in this policy prohibits faculty or students from classroom instruction, discussion, or debate, so long as faculty members allow students to express intellectual diversity.

IV. Nothing in this policy prohibits the university from complying with any state or federal law to provide disability services or to permit student organizations, including fraternities and sororities.

PROCEDURE

Issued: 08/25/2025

- I. The university will review and respond to complaints about alleged violations of the prohibitions and requirements in this policy as set forth in the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act Policy Complaint, Investigation, Hearing, and Resolution Process *[link]*.
- II. Policy Violations
 - A. The university may enforce corrective or disciplinary action, up to and including termination or dismissal, in accordance with applicable university policies or rules for employee and student violations of this policy.
 - B. In addition, under ORC 3345.0217, the Ohio general assembly may withhold or reduce any state operating subsidy payments, state capital improvement funds, or other state appropriation to the university if the general assembly determines the university has failed to comply with the requirements established in ORC 3345.0217.



DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act

University Policy

Applies to: Faculty, staff, students

Responsibilities

Position or Office	Responsibilities
University	1. Post speaker fees/honoraria/other emoluments over \$500 for events sponsored by university as set forth in the policy. 2. Review and respond to complaints alleging violations of this policy.

Resources

University Policies, policies.osu.edu

Equal Employment Opportunity, go.osu.edu/eeo-policy

Non-Discrimination, Harassment, and Sexual Misconduct, go.osu.edu/non-discrimination-policy

Whistleblower, hr.osu.edu/wp-content/uploads/policy140.pdf

Additional Governance Documents and Guidance

Advance Ohio Higher Education Act, ORC 3345.0217, codes.ohio.gov/ohio-revised-code/section-3345.0217

Code of Student Conduct, trustees.osu.edu/bylaws-and-rules/code

DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act Policy Complaint, Investigation, Hearing, and Resolution Process, [\[link\]](#)

Faculty Rule 3335-5-04, trustees.osu.edu/bylaws-and-rules/3335-5

Ohio State Philosophy on Institutional and Leadership Statements, omc.osu.edu/key-issues/philosophy-institutional-leadership-statements

SB1 Compliance Website, compliance.osu.edu/focus-areas/sb1

Contacts

Subject	Office	Telephone	E-mail/URL
Policy questions	Office of Academic Affairs	614-292-5881	oaa.osu.edu
Policy violation complaints	University Compliance and Integrity	614-292-3251	Compliance-integrity@osu.edu compliance.osu.edu
Legal issues	Office of Legal Affairs	614-292-0611	legal.osu.edu

History

Issued: 08/25/2025 Approved by BOT, 08/20/2025, Resolution #2026-xx



Faculty Annual Review, Post-Tenure Review, and Reappointment

Interim University Policy

Applies to: Faculty

Responsible Office

Office of Academic Affairs

POLICY

Issued: 07/26/2004

Revised: 08/25/2025 (interim revision)

An annual written performance review that examines performance over the prior year and sets goals for future performance is mandated for all compensated faculty. These annual reviews must be conducted by the tenure-initiating unit (TIU) head or designee and include a written assessment, a face-to-face meeting for all probationary faculty, and an opportunity for a face-to-face meeting for all other compensated faculty members at the request of either the TIU head or designee or the faculty member.

Annual reviews of faculty serve to monitor and support progress toward tenure, promotion, reappointment, and ongoing outcomes, and are to be comprehensive and include standardized, objective, and measurable performance metrics. Written performance reviews serve to assist faculty in improving professional productivity, establish goals against which faculty performance will be assessed, determine salary increases and other resource allocations, define progress toward reappointment and/or promotion, and, in the event of poor performance, establish and explain the need for remedial steps, up to and including a post-tenure review or other disciplinary action.

Purpose of the Policy

To set forth annual performance review and reappointment procedures for compensated faculty.

PROCEDURE

Issued: 07/26/2004

Revised: 08/25/2025 (interim revision)

I. Review Process and Documentation Overview

A. Required procedures

1. The Office of Academic Affairs (OAA) requires compensated faculty across all faculty types and ranks to be reviewed annually by the TIU head or designee. The TIU head may delegate responsibility for reviews only to associate chairs/deans, vice chairs/deans, or division chairs/directors. A TIU head who delegates responsibility for reviews is accountable for the process and should maintain regular oversight of the reviews. Faculty who serve in full-time administrative positions (e.g., TIU head, dean) will be reviewed by their direct supervisor. Faculty who serve in part-time administrative appointments (i.e., anything less than 1.0 FTE) will be reviewed following the procedures described below.
2. For each faculty member under their supervision, TIU heads or designees must complete a written annual evaluation following OAA's Annual Review template [\[link\]](#). The written evaluation must include a rating for each area in which a faculty member spent at least 5% of their effort during the evaluation period, including (as applicable) teaching, research, service, clinical care, administration, and any other categories set by the TIU head and/or articulated in the unit's appointment, promotion, and tenure (APT) document. The evaluation for each area must denote at minimum whether the faculty member exceeds, meets, or does not meet expectations for that area. Student evaluations must account for at least 25% of the teaching component where applicable.



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Applies to: Faculty

3. In addition to a written assessment, annual reviews must include a face-to-face meeting between the TIU heads or designees and all probationary faculty. TIU heads or designees are to offer all other compensated faculty the opportunity for a face-to-face meeting.
4. Faculty members may provide written comments to their annual reviews in the initial review by the TIU head or designee. The TIU head or designee may respond to the comments and/or revise the written evaluation during this process before finalizing the review. Any comments and responses will be shared with the dean and provost as part of the ensuing review/appeal.
5. For faculty in colleges with multiple TIUs on the Columbus campus and the College of Food, Agricultural, and Environmental Sciences:
 - a. After a TIU head or designee has completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation with any comments and responses must be reviewed and either approved or disapproved by the college dean, and then submitted to OAA for review.
 - b. If the TIU head or designee and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
6. For faculty in colleges that are the TIU, University Libraries, and the Salmon P. Chase Center for Civics, Culture, and Society:
 - a. After the division chair/head, associate/vice dean, or designee has completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation with any comments and responses must be reviewed and either approved or disapproved by the dean/TIU head, and then submitted to OAA for review.
 - b. If the division chair/head, associate/vice dean, or other designee and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
7. For faculty with joint appointments:
 - a. The heads or designees of the joint appointment units are responsible for completing the annual review for those faculty. The heads or designees of the joint appointment units must co-author the written evaluation.
 - b. After the heads or designees have completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation must be reviewed and either approved or disapproved by the college dean of the faculty member's TIU, and then submitted to OAA for review.
 - c. If the joint appointment unit heads or designees and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
8. For faculty on regional campuses:
 - a. The regional campus dean/director or designee and the TIU head or designee are responsible for completing the annual review for compensated faculty on the regional campuses. The dean/director or designee and TIU head or designee must co-author the written evaluation.
 - b. After the regional campus dean/director or designee and TIU head or designee have completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation must be reviewed and either approved or disapproved by the college dean, and then submitted to OAA for review.
 - c. If the college dean does not agree with the co-authored written evaluation, the provost will have final decision authority.
9. If a faculty member wishes to appeal a decision in their annual review, they must submit an appeal to the college dean or designee within 14 days of the date of the written evaluation as set forth in the [OAA Policies and Procedures Handbook](#). In presenting an appeal, a faculty member must demonstrate that the final evaluation contains substantive factual error, inconsistently applies the established criteria of the TIU, or otherwise does not align with those criteria. Appeals will be reviewed by the college dean or



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Interim University Policy

Applies to: Faculty

designee, who must issue a decision in writing as to whether to approve or modify the annual review. If the college dean or designee modifies any rating in the annual review, the annual review will be automatically appealed to the provost for review and final determination. In this event, the faculty member will have 14 days from the date of the dean or designee's decision to submit any written materials to the provost that they want the provost to consider in issuing a final determination in line with the categories for appeal noted above. If the dean or designee does not modify any rating in the annual review, the review will be submitted to the provost for review only.

10. Annual reviews are to be conducted in accordance with OAA requirements, the APT documents of the TIU, and, if applicable, the APT documents of the regional campus.
 11. A post-tenure review, in accordance with [Faculty Rule 3335-5-04.5](#), will be initiated if a tenured faculty member receives a "does not meet performance expectation" rating in the same evaluative category in at least two of the past three consecutive annual reviews. A faculty member who retains tenure following a post-tenure review will be subject to an additional post-tenure review if they receive a "does not meet performance expectations" rating in any area of their annual review in the two years subsequent to a post-tenure review. The department chair, dean, or provost may require an immediate and for cause post-tenure review at any time for a faculty member who has a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation. For this purpose, for cause may not be based on a faculty member's allowable expression of academic freedom as defined by the university or Ohio law.
 12. All faculty, including those with tenure and those without, may be subject to disciplinary action for failing to meet faculty obligations pursuant to [Faculty Rule 3335-5-04.1](#).
 13. Annual reviews are to be completed by the conclusion of the term following the end of the review period. An annual review is complete when the written evaluation, following consideration of and/or response to any written comments provided by the faculty member and any face-to-face meeting, is sent to the dean. The review period must be defined in the APT document for each unit.
- B. Recommended procedures
1. OAA recommends that the annual review process for probationary faculty involve the eligible TIU faculty or a subset thereof.
 2. OAA recommends that the annual review process for associate professors involve eligible faculty or a subset thereof at least once every three years.
 3. OAA recommends that the annual review processes for probationary clinical/teaching/practice and research faculty be identical to tenure-track faculty, emphasizing review of the duties as assigned and progress toward promotion, when applicable.
 4. OAA recommends that the annual review process for compensated associated faculty being considered for reappointment involve the eligible TIU faculty or a subset thereof.
- C. Required documentation
1. Appointments, promotion, and tenure (APT) document
 - a. In alignment with the [OAA Policies and Procedures Handbook](#), each TIU's APT documents must establish standards and procedures, required documentation, and document submission deadlines for annual and Fourth-Year Reviews of tenure-track faculty, annual and Penultimate Year Reviews of faculty on clinical/teaching/practice and research appointments, and annual and reappointment reviews of compensated associated faculty.
 - b. If the TIU head wishes to delegate responsibility for reviews to associate chairs/deans, vice chairs/deans, or division chairs/directors, the delegation must be described in that TIU's APT document.
 2. Written annual review
 - a. TIU heads or their designees (and regional campus deans/directors when applicable) must use the OAA Annual Review template [\[link\]](#) to provide a narrative evaluation addressing the purposes and outcome of the annual review.



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Applies to: Faculty

- b. This written annual review must include a summary assessment of performance that denotes at minimum whether the faculty member exceeds expectations, meets expectations, or does not meet expectations in each of the following areas in which the faculty member spent 5% or more of effort during the evaluative period:
 - i. Teaching (including but not limited to classroom instruction, advising, mentoring, and new course development), and student evaluations must account for 25% of the evaluation of this area;
 - ii. Research, scholarship, or creative work plans (including but not limited to publications, creative works, and funding);
 - iii. Service;
 - iv. Clinical care;
 - v. Administration; and
 - vi. Additional areas determined by the TIU head and/or articulated in the unit's APT document.
- c. In assessing the above areas, the reviewer(s) should distill the major accomplishments in these areas, address any opportunities for improvement, summarize goals and strategies, and provide focused action steps to meet future goals and expectations, including for promotion and/or reappointment.
- d. The written annual review also must include the faculty member's projected work effort distribution for the next year, be compliant with the [Faculty Workload Guideline](#), and specify and justify any change in distribution from the year prior.
- e. The written annual review must inform faculty members of their right to review their personnel file and to submit for inclusion in the file a written comment on any material contained therein. It must also describe the appeal procedure if the faculty member disagrees with the annual review.
3. TIUs must maintain a current curriculum vitae (CV) of all compensated faculty members within that TIU. These CVs are to be kept in an accessible location where any faculty member may review them.
4. Assistant and associate professors must submit annually updated documentation of performance and accomplishments in core dossier format to the TIU head (and regional campus dean, if applicable). All other faculty must submit annually updated documentation of performance and accomplishments in CV format to the TIU head (and regional campus dean, if applicable).
5. All probationary faculty, including candidates undergoing Fourth-Year Review and mandatory tenure review, must use the university-approved P&T core dossier format to upload and format their dossiers.

II. Probationary Tenure-Track Faculty

- A. Types of reviews
 1. Mandatory reviews of probationary faculty include annual reviews, Fourth-Year Reviews, and Sixth-Year Reviews.
- B. Annual appointments
 1. Positive decisions by the TIU head are final for colleges with or without multiple TIUs and for regional campuses.
 2. In a college with multiple TIUs, each TIU head must forward a copy of the reappointment letter to the college dean. In the case of regional campus faculty, the regional campus dean/director also must receive a copy of the reappointment letter.
 3. In a college that is the TIU, the dean must forward a copy of the reappointment letter to OAA.
- C. Fourth-Year Review of probationary faculty
 1. All candidates for Fourth-Year Review must use the university-approved dossier format to upload and format their core dossiers.
 2. Timing
 - a. The Fourth-Year Review takes place for most probationary faculty in the actual fourth year of service as an assistant professor at Ohio State. An "early" Fourth-Year Review does not exist.
 - b. A TIU may not designate a review conducted in any year other than the actual fourth year as a "Fourth-Year Review," except in the circumstances stated below.



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- i. Formally approved prior service credit: The years of prior service credit are added to the years of Ohio State service to determine when the Fourth-Year Review will occur.
 - ii. Exclusion of time from the probationary period prior to the actual fourth year of service: The Fourth-Year Review is postponed by each year excluded from the tenure clock. If the Fourth-Year Review has already taken place when an exclusion of time is granted, it is not repeated.
 - iii. Extended probationary period due to a part-time appointment: The Fourth-Year Review may be postponed beyond the actual fourth year of service, but must occur at least two calendar years prior to the mandatory P&T review year.
 3. Procedures
 - a. The procedures for the Fourth-Year Review are to follow the same process as those for the Sixth-Year (mandatory) tenure review as set forth in [Faculty Rule 3335-6-04](#), with the following two exceptions:
 - i. External evaluations are optional. Department APT documents must indicate the criteria under which they will be solicited if they are not solicited in every case and who will make the decision about whether to solicit them.
 - ii. Review by the college P&T committee is optional when the TIU head and the dean agree on a positive decision to reappoint. Colleges must treat all such cases consistently. College APT documents must indicate how the college will proceed in such cases.
 - b. Should the recommendation of the campus dean/director differ from that of the TIU head or the college promotion and tenure committee, the college or divisional dean will convene a meeting with the regional campus dean/director to discuss the case. The decision of the college dean will be final.
 4. Failure to conduct Fourth-Year Review
 - a. Failure of a college to conduct a mandatory Fourth-Year Review will result in a required exclusion of time from the probationary period and must be reported as part of the college's annual update to the provost.
- D. Approval levels for reappointment after Fourth-Year Review
 1. Reappointment of Columbus campus faculty after the Fourth-Year Review requires approval by the TIU head and the college dean. The college dean makes the final decision on reappointment.
 2. Reappointment of regional campus faculty after the Fourth-Year Review requires approval by the TIU head and the college dean. The college dean makes the final decision on reappointment.
 3. Colleges are responsible for sending the candidate's dossier to University Archives for appropriate retention. Colleges must send a report of all of its decisions on reappointment to OAA.
- E. Comments process
 1. The comments process for the Fourth-Year Review generally follows the same process as that for the Sixth-Year (mandatory) tenure review as set forth in [Faculty Rule 3335-6-04](#).
 2. Promptly after a decision is reached on the first and the second levels of review respectively, the candidate is informed in writing that the faculty report and unit head's assessment letter are available and the comment process begins. Upon notice of completion of the review at each level, the candidate has ten days to provide written comments for inclusion in the dossier.
- F. Nonrenewal
 1. In the case of a TIU head recommending nonrenewal of a probationary appointment, the review must follow Fourth-Year Review procedures, subject to the relevant standards of notice set forth in [Faculty Rule 3335-6-08](#).
 2. A recommendation to terminate a probationary faculty member's appointment requires the approval of the college dean, who makes the final decision.
 3. In the case of a regional campus faculty member, a recommendation to terminate a probationary faculty member's appointment requires the approval of the regional campus dean, the TIU head, and the college dean. The college dean makes the final decision.



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Applies to: Faculty

4. In a college that is the TIU, a decision of the dean to terminate a probationary faculty member's appointment requires approval by the provost. The college is to submit one copy of the dossier to OAA for university-level review.
 5. The TIU head must ensure proper notice is given to probationary faculty who are not reappointed.
 6. The Nonrenewal of Probationary Appointment or Denial of Tenure Form must be submitted to OAA, along with a copy of the nonrenewal letter sent to the faculty member, by May 31 of the year in which the nonrenewal decision occurs.
 7. Nonrenewal usually precludes rehiring the individual (see Faculty Appointments, Tenure, and Retrenchment policy).
 - G. Withdrawing from or declining a review
 1. Faculty members who withdraw from or decline to participate in a mandatory review in any probationary year are subject to the relevant standards of notice per Faculty Rule 3335-6-08. The decision to terminate a review must be accompanied by a letter of resignation from the faculty member to the TIU head (or regional campus dean) stating the following:
 - a. the faculty member's last day of employment (no later than May 31 of the year following the review year); and
 - b. an acknowledgement from the faculty member that the decision to terminate (withdraw from or decline participation in) the review is irrevocable.
 2. This action requires that the Nonrenewal of Probationary Appointment or Denial of Tenure Form be submitted to OAA, along with a copy of the faculty member's letter, by May 31 of the year in which the decision to terminate the review occurs.
 - H. Submission deadlines
 1. Deans may establish due dates for receipt of Fourth-Year Reviews and any annual reviews with a nonrenewal recommendation in the college office.
 - I. Sixth Year Review process
 1. Mandatory reviews shall follow process as set forth under Faculty Rule 3335-6-04.
- III. Clinical/Teaching/Practice and Research Faculty
- A. Appointments
 1. The initial appointment of all clinical/teaching/practice and all research faculty is probationary regardless of academic rank at hire. The duration of the initial appointment defines the length of the probationary period.
 2. Clinical/teaching/practice faculty are to have a five-year appointment for their initial probationary contract. Appointment terms for second and subsequent contracts for clinical/teaching/practice assistant and associate professors may be for a period of at least three years and for no more than five years. Appointment terms for second and subsequent contracts for clinical/teaching/practice professors may be for a period of at least three years and no more than eight years.
 3. Research faculty may have a one- to five-year appointment for their initial and any subsequent contract.
 4. The full text of terms and conditions of clinical/teaching/practice and research faculty appointments is stated in Chapter 3335-7 of the Faculty Rules.
 5. There is no presumption of reappointment at the end of any given appointment period.
 - B. Annual renewal
 1. Positive decisions by the TIU head are final.
 2. In a college with multiple TIUs, each TIU head must forward a copy of the reappointment letter to the college dean.
 3. In a college that is the TIU, the dean must forward a copy of the reappointment letter to OAA.
 - C. Nonrenewal



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Applies to: Faculty

1. A recommendation to not renew a probationary clinical/teaching/practice or research faculty member's appointment requires the approval of both the TIU head and the college dean. The college dean makes the final decision.
2. The TIU head must ensure proper notice is given to faculty who are not reappointed.
3. The Nonrenewal of Probationary Appointment or Denial of Tenure Form must be submitted to OAA, along with a copy of the nonrenewal letter sent to the faculty member, by May 31 of the year in which the nonrenewal decision occurs.

D. Appointment renewal for probationary faculty

1. No later than the beginning of a faculty member's penultimate year of an initial appointment term, the individual must undergo a review so that the unit may determine whether it is appropriate to renew that individual's appointment for a new appointment term. The review will follow the same procedures as a review for tenure-track faculty as set forth in Faculty Rule 3335-6-03 and Faculty Rule 3335-6-04.
2. Positive decisions to reappoint clinical/teaching/practice and research faculty will be approved by OAA without review, and forwarded to the Board of Trustees (BOT) for final approval. Upon approval by the BOT, the clinical/teaching/practice or research faculty member is no longer probationary.
3. For each positive decision to reappoint to a new term, the unit must submit to OAA an original signed "cover sheet" (see Record of Review for Promotion in Academic Rank/Tenure/Reappointment Form). Only the form should be submitted. The CV, dossier, and copy of the reappointment letter should not be submitted.
4. If the individual will not be renewed, the faculty member should be so informed, subject to the relevant standards of notice set forth in Faculty Rule 3335-6-08.
5. All reappointment decisions are at the discretion of the college dean.

E. Appointment renewal for nonprobationary faculty

1. For faculty in their second and subsequent appointment term, the individual must be informed as to whether a new appointment will be extended by the end of the penultimate year of each appointment period. A faculty member not being renewed must be informed according to the relevant standards of notice set forth in Faculty Rule 3335-6-08.
2. An initial decision from the TIU head or the dean (in colleges without departments) to not reappoint the faculty member to another term requires a review by the eligible faculty, or a standing committee of the faculty, as determined and as set forth in the relevant college, school, or department APT document.
3. If the initial decision from the TIU head or the dean (in colleges without departments) is to reappoint the faculty member to another term, that decision will be final unless a more formal review is otherwise set forth in the relevant college, school, or department APT document.
4. All reappointment decisions are at the discretion of the college dean.

F. Submission deadlines

1. The dean may establish due dates for receipt of reviews in the college office.

G. Position elimination

1. If a faculty member's position is eliminated, the faculty member must be so informed. In this situation, a review is not appropriate.

IV. Associated Faculty

A. Appointments

1. Associated faculty may be appointed for up to three years. Associated faculty members on a second or subsequent three-year appointment may not be terminated mid-appointment except for cause.

B. Renewal

1. There is no presumption of reappointment at the end of a given appointment period.
2. If the position will continue, the faculty member must undergo formal reappointment review so that the unit may determine whether it is appropriate to renew that individual's appointment to fill that position.
3. Positive decisions by the TIU head are final.



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Interim University Policy

Applies to: Faculty

- C. Nonrenewal
 - 1. A decision by the TIU head not to renew an associated faculty member's appointment is final.
 - 2. The TIU head must ensure proper notice is given to associated faculty who are not reappointed.
- D. Standards of notice
 - 1. If the position will not continue, the university will, insofar as possible, observe the following standards of notice:
 - a. For an associated faculty member with a one-year or an initial multi-year appointment, not later than March 1 of the academic year, or three months in advance of the expiration of the yearly appointment term if the appointment expires during an academic year;
 - b. For an associated faculty member in the second year of an initial multi-year appointment, not later than December 15 of the second academic year of the appointment, or six months in advance of the expiration of the yearly appointment term if the appointment expires during an academic year;
 - c. No later than October 15 of the final year of a faculty member's (a) initial three-year appointment or (b) second or subsequent multi-year term appointment; and
 - d. For associated faculty with an initial three-year appointment or in subsequent multi-year term appointments, eight months in advance of the expiration of the appointment term if the appointment expires during an academic year.
 - 2. Failure to give notice does not renew a faculty member's appointment.

Responsibilities

Position or Office	Responsibilities
Board of Trustees (BOT)	Provide final approval for reappointment of clinical/teaching/practice and research faculty.
Candidates for Fourth-Year Review and Mandatory Review	- May withdraw from or decline to participate in a mandatory review in any probationary year; decision to terminate a review must be accompanied by a letter of resignation. - Submit dossier in a university-approved P&T format to TIU head.
Colleges	- Send dossiers to University Archives for appropriate retention. - Send report of all decisions on reappointment to OAA.
Deans	- Review faculty annual reviews as set forth in the policy. - Convene a meeting with the regional campus dean/director to discuss a Fourth-Year Review if the regional campus dean/director recommendation differs from that of the TIU head or the college promotion and tenure committee. - In a college that is the TIU, forward a copy of the reappointment letter to OAA. - Make final decision on reappointment of Columbus campus and regional campus faculty after the Fourth-Year Review. - Make final decision to not renew a clinical/teaching/practice or research faculty member's appointment. - Make final decision to terminate a regional campus probationary faculty member's appointment. - In a college with multiple TIUs, make final decision on a recommendation to terminate a probationary faculty member's appointment. - In a college that is the TIU, make a recommendation to the provost to not reappoint probationary tenure-track faculty.
Faculty members	Submit annually updated documentation of performance and accomplishments in CV format to the TIU head (and regional campus dean, if applicable).
Probationary Faculty	- Must use university-approved P&T core dossier format to upload and format dossiers. - Must undergo a review to determine whether an appointment renewal is appropriate no later than the beginning of the penultimate year of an initial appointment term.
Provost	- Review and make final decisions on faculty annual reviews as set forth in the policy. - Make final decision to not renew a probationary tenure-track faculty in colleges without units.
Regional campus deans/directors	- Complete reviews of regional campus faculty as set forth in the policy. - Approve recommendation to terminate regional campus probationary faculty member's appointment.



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Position or Office	Responsibilities
TIUs	1. Include in APT documents established standards and procedures, required documentation, and document submission deadlines for annual and Fourth-Year Reviews of tenure-track faculty, annual and Penultimate Year Reviews of faculty on clinical/teaching/practice and research appointments, and annual and reappointment reviews of compensated associated faculty, including defining the unit's annual review period. 2. Maintain a current CV of all tenure-track, clinical/teaching/practice, research, and associated faculty members within TIU. 3. Submit to OAA an original signed "cover sheet" for each positive decision to reappoint probationary and clinical/teaching/practice faculty.
TIU heads	1. Complete annual reviews of all compensated faculty as set forth in the policy or delegate such responsibility to associate chairs/deans, vice chairs/deans, or division chairs/directors. 2. Approve, as appropriate, reappointment of Columbus and regional campus faculty after the Fourth-Year Review. 3. Approve, as appropriate, recommendation to terminate regional campus probationary faculty member's appointment. 4. Approve, as appropriate, recommendation to not renew a clinical/teaching/practice or research faculty member's appointment. 5. In a college with multiple TIUs, forward copies of reappointment letters to college dean. 6. Forward copies of reappointment letter to regional campus dean/director in cases of regional campus faculty. 7. Make final decision on positive annual appointments of probationary faculty. 8. Ensure proper notice is given to faculty who are not reappointed.

Resources

Faculty Appointments, Tenure, and Retrenchment policy, go.osu.edu/faculty-appointments-policy
 Faculty Workload Guideline, faculty.osu.edu/faculty-support/equitable-policies/faculty-workload-guideline
 General Records Retention Schedule, go.osu.edu/retention-schedules
 OAA Annual Review Template, [\[link\]](#)
 OAA Policies, Guidelines and Forms, oaa.osu.edu/policies-guidelines-forms
 OAA Policies and Procedures Handbook, oaa.osu.edu/policies-and-procedures-handbook
 Rules of the University Faculty, trustees.osu.edu/bylaws-and-rules/university-faculty-rules

Contacts

Subject	Office	Telephone	E-mail/URL
Annual review; Fourth-Year Review; Sixth-Year Review; Reappointments	Office of Academic Affairs	614-292-5881	oaa.osu.edu

History

Issued:	07/26/2004	
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Revised:	08/30/2021	Minor Revision
Interim Revised:	08/25/2025	Renamed Faculty Annual Review, Post-Tenure Review, and Reappointment; Approved via interim university policy process and by BOT, 08/20/2025, Resolution #2026-xx



Faculty Annual Review, Post-Tenure Review, and Reappointment

Interim University Policy

Applies to: Faculty

Responsible Office

Office of Academic Affairs

POLICY

Issued: 07/26/2004

Revised: 08/30/2021 (minor 25/2025 (interim) revision)

An annual written performance review that examines performance over the prior year and sets goals for future performance is mandated for all compensated faculty. These annual reviews must be conducted by the tenure-initiating unit (TIU) head or designee and include a written assessment, a face-to-face meeting for all probationary faculty, and an opportunity for a face-to-face meeting for all other compensated faculty members at the request of either the TIU head or designee or the faculty member.

Annual reviews of faculty serve to monitor and support progress toward tenure, promotion, reappointment, and ongoing outcomes, and are to be comprehensive and include standardized, objective, and measurable performance metrics. Written performance reviews serve to assist faculty in improving professional productivity, establish goals against which faculty performance will be assessed, determine salary increases and other resource allocations, define progress toward reappointment and/or promotion, and, in the event of poor performance, establish and explain the need for remedial steps, up to and including a post-tenure review or other disciplinary action.

Purpose of the Policy

To set forth annual performance review and reappointment procedures for compensated faculty.

PROCEDURE

Issued: 07/26/2004

Revised: 08/30/2021 (minor 25/2025 (interim) revision)

I. Review Process and Documentation Overview

A. Required procedures

1. The Office of Academic Affairs (OAA) requires compensated faculty ~~at across all levels~~ faculty types and ranks to be reviewed annually by the TIU head or designee. The TIU head may delegate responsibility for reviews only to associate chairs/deans, vice chairs/deans, or division chairs/directors. A TIU head who delegates responsibility for reviews to division or section heads is accountable for the process and should maintain regular oversight of the reviews. Faculty who serve in full-time administrative positions (e.g., TIU head, dean) will be reviewed by their direct supervisor. Faculty who serve in part-time administrative appointments (i.e., anything less than 1.0 FTE) will be reviewed following the procedures described below.
2. For each faculty member under their supervision, TIU heads or designees must complete a written annual evaluation following OAA's Annual Review template [link]. The written evaluation must include a rating for each area in which a faculty member spent at least 5% of their effort during the evaluation period, including (as applicable) teaching, research, service, clinical care, administration, and any other categories set by the TIU head and/or articulated in the unit's appointment, promotion, and tenure (APT) document. The evaluation for each area must denote at minimum whether the faculty member exceeds, meets, or does not meet expectations for that area. Student evaluations must account for at least 25% of the teaching component where applicable.



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- ~~2.3.~~ In addition to a written assessment, annual reviews must include a face-to-face meeting between the TIU heads or designees and all probationary faculty. TIU heads or designees are to offer all other compensated faculty the opportunity for a face-to-face meeting.
- ~~3.~~ Faculty members may provide written comments to their annual reviews.
4. ~~The in the initial review for regional campus faculty must be conducted first at the regional campus, with an emphasis on teaching and service, and then with the TIU at the Columbus campus, with an emphasis on research, scholarly/creative activity, and service by the TIU head or designee. The TIU head or designee may respond to the comments and/or revise the written evaluation during this process before finalizing the review. Any comments and responses will be shared with the dean and provost as part of the ensuing review/appeal.~~
5. For faculty in colleges with multiple TIUs on the Columbus campus and the College of Food, Agricultural, and Environmental Sciences:
 - a. After a TIU head or designee has completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation with any comments and responses must be reviewed and either approved or disapproved by the college dean, and then submitted to OAA for review.
 - b. If the TIU head or designee and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
6. For faculty in colleges that are the TIU, University Libraries, and the Salmon P. Chase Center for Civics, Culture, and Society:
 - a. After the division chair/head, associate/vice dean, or designee has completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation with any comments and responses must be reviewed and either approved or disapproved by the dean/TIU head, and then submitted to OAA for review.
 - b. If the division chair/head, associate/vice dean, or other designee and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
7. For faculty with joint appointments:
 - a. The heads or designees of the joint appointment units are responsible for completing the annual review for those faculty. The heads or designees of the joint appointment units must co-author the written evaluation.
 - b. After the heads or designees have completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation must be reviewed and either approved or disapproved by the college dean of the faculty member's TIU, and then submitted to OAA for review.
 - c. If the joint appointment unit heads or designees and dean are not in agreement regarding the evaluation, the provost will have final decision authority.
8. For faculty on regional campuses:
 - a. The regional campus dean/director or designee and the TIU head or designee are responsible for completing the annual review for compensated faculty on the regional campuses. The dean/director or designee and TIU head or designee must co-author the written evaluation.
 - b. After the regional campus dean/director or designee and TIU head or designee have completed the annual review process, including consideration of and/or response to any written comments provided by the faculty member and after any face-to-face meeting, the written evaluation must be reviewed and either approved or disapproved by the college dean, and then submitted to OAA for review.
 - c. If the college dean does not agree with the co-authored written evaluation, the provost will have final decision authority.
9. If a faculty member wishes to appeal a decision in their annual review, they must submit an appeal to the college dean or designee within 14 days of the date of the written evaluation as set forth in the OAA



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Policies and Procedures Handbook. In presenting an appeal, a faculty member must demonstrate that the final evaluation contains substantive factual error, inconsistently applies the established criteria of the TIU, or otherwise does not align with those criteria. Appeals will be reviewed by the college dean or designee, who must issue a decision in writing as to whether to approve or modify the annual review. If the college dean or designee modifies any rating in the annual review, the annual review will be automatically appealed to the provost for review and final determination. In this event, the faculty member will have 14 days from the date of the dean or designee's decision to submit any written materials to the provost that they want the provost to consider in issuing a final determination in line with the categories for appeal noted above. If the dean or designee does not modify any rating in the annual review, the review will be submitted to the provost for review only.

- 5-10. ~~Annual reviews are to be conducted in accordance with the Appointments, Promotion, and Tenure (OAA requirements, the APT) documents of the TIU, and, if applicable, the APT documents of the regional campus.~~
 6. ~~Annual reviews for all 12/12 appointed faculty must be completed by July 1. Annual reviews for all other faculty must be completed by May 15.~~
 11. A post-tenure review, in accordance with Faculty Rule 3335-5-04.5, will be initiated if a tenured faculty member receives a "does not meet performance expectation" rating in the same evaluative category in at least two of the past three consecutive annual reviews. A faculty member who retains tenure following a post-tenure review will be subject to an additional post-tenure review if they receive a "does not meet performance expectations" rating in any area of their annual review in the two years subsequent to a post-tenure review. The department chair, dean, or provost may require an immediate and for cause post-tenure review at any time for a faculty member who has a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation. For this purpose, for cause may not be based on a faculty member's allowable expression of academic freedom as defined by the university or Ohio law.
 12. All faculty, including those with tenure and those without, may be subject to disciplinary action for failing to meet faculty obligations pursuant to Faculty Rule 3335-5-04.1.
 13. Annual reviews are to be completed by the conclusion of the term following the end of the review period. An annual review is complete when the written evaluation, following consideration of and/or response to any written comments provided by the faculty member and any face-to-face meeting, is sent to the dean. The review period must be defined in the APT document for each unit.
- B. Recommended procedures
1. OAA recommends that the annual review process for probationary faculty involve the ~~tenured eligible~~ TIU faculty or a subset thereof.
 2. OAA recommends that the annual review process for associate professors involve eligible faculty or a subset thereof at least once every three years.
 - 2-3. OAA recommends that the annual review processes for probationary clinical/teaching/practice and research faculty be similar or identical to tenure-track faculty, emphasizing review of the duties as assigned and progress toward promotion, when applicable.
 3. OAA recommends that the annual review process for faculty members with appointments that include a Memorandum of Understanding (MOU) between another unit (center, TIU, discovery theme or other) and the TIU include feedback from that other unit head.
 4. OAA recommends that the annual review process for compensated associated faculty being considered for reappointment involve the ~~tenured eligible TIU faculty of the TIU~~ or a subset thereof.
- C. Required documentation
1. Appointments, promotion, and tenure (APT) document
 - a. ~~Each~~ In alignment with the OAA Policies and Procedures Handbook, each TIU's APT documents must establish standards and procedures, required documentation, and document submission deadlines for annual and Fourth-Year Reviews of tenure-track faculty, annual and Penultimate Year



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- Reviews of faculty on clinical/teaching/practice and research appointments, and annual and reappointment reviews of compensated associated faculty.
- b. If the TIU head of a TIU with sections or divisions wishes to delegate responsibility for reviews to section associate chairs/deans, vice chairs/deans, or division heads/chairs/directors, the handling of reviews, the arrangement/delegation must be described in that TIU's TIU's APT document.
2. Final evaluation letter or other written report
 2. Written annual review
 - a. TIU heads or their designees (and regional campus deans/directors when applicable) must include a use the OAA Annual Review template [\[link\]](#) to provide a narrative evaluation addressing the purposes and outcome of the annual review, as described.
 - b. This written annual review must include a summary assessment of performance that denotes at minimum whether the faculty member exceeds expectations, meets expectations, or does not meet expectations in the second paragraph each of the following areas in which the faculty member spent 5% or more of effort during the evaluative period:
 - i. Teaching (including but not limited to classroom instruction, advising, mentoring, and new course development), and student evaluations must account for 25% of the evaluation of this policy, in the final evaluation letter or other area;
 - ii. Research, scholarship, or creative work plans (including but not limited to publications, creative works, and funding);
 - iii. Service;
 - iv. Clinical care;
 - v. Administration; and
 - vi. Additional areas determined by the TIU head and/or articulated in the unit's APT document.
 - c. In assessing the above areas, the reviewer(s) should distill the major accomplishments in these areas, address any opportunities for improvement, summarize goals and strategies, and provide focused action steps to meet future goals and expectations, including for promotion and/or reappointment.
 - a-d. The written report, which provides the results of the review in writing. A perfunctory checklist lacking narrative, evaluative content does not meet this requirement. Annual review also must include the faculty member's projected work effort distribution for the next year, be compliant with the Faculty Workload Guideline, and specify and justify any change in distribution from the year prior.
 - b-c. The final evaluation letter or other The written report annual review must also inform faculty members of their right to review their personnel file and to submit for inclusion in the file a written comment on any material contained therein. It must also describe the appeal procedure if the faculty member disagrees with the annual review.
 - e. The final evaluation letter or other written report to a probationary faculty member must also include a statement informing the faculty member of the review outcome.
 - d. At a minimum, the final evaluation letter or other written report must address the following (if applicable):
 - i. Teaching and advising;
 - ii. New course development;
 - iii. Research, scholarship, or creative work plans;
 - iv. Publications/creative works;
 - v. Funding;
 - vi. Service, including efforts to foster diversity and inclusion in the unit;
 - vii. Honors and awards; and
 - viii. Continual development.
 - e. In addressing these activities, the letter or written report should distill the major accomplishments in these areas, summarize goals and strategies, and provide focused action steps to meet future goals and



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~~expectations, including for promotion. In general, OAA recommends that the letter be no longer than 2–3 pages.~~

3. TIUs must maintain a current curriculum vitae (CV) of all ~~tenure-track, clinical/teaching/practice, research, and associated compensated~~ faculty members within that TIU. These CVs ~~should be~~ are to be kept in an accessible location where any faculty member may review them.
4. ~~Probationary Assistant~~ and associate professors must submit annually updated documentation of performance and accomplishments in core dossier format to the TIU head (and regional campus dean, if applicable). All other faculty must submit annually updated documentation of performance and accomplishments in CV format to the TIU head (and regional campus dean, if applicable).
5. All probationary faculty, including candidates undergoing Fourth-Year Review and mandatory tenure review, must use the university-approved P&T core dossier format to upload and format their dossiers.

II. Probationary Tenure-Track Faculty

A. Types of reviews

1. Mandatory reviews of probationary faculty include annual reviews, Fourth-Year Reviews, and Sixth-Year Reviews.

B. Annual appointments

1. Positive decisions by the TIU head are final for colleges with or without ~~units~~ multiple TIUs and for regional campuses.
2. ~~Unit heads~~ In a college with multiple TIUs, each TIU head must forward a copy of the reappointment letter to ~~their~~ the college dean. In the case of regional campus faculty, the regional campus dean/director ~~also must also receive a copy of the reappointment letter.~~
3. ~~Deans of colleges without units~~ In a college that is the TIU, the dean must forward a copy of the reappointment letter to OAA.

C. Fourth-Year Review of probationary faculty

1. All candidates for Fourth-Year Review must use the university-approved dossier format to upload and format their core dossiers.
2. Timing
 - a. The Fourth-Year Review takes place for most probationary faculty in the actual fourth year of service as an assistant professor at Ohio State. An “early” Fourth-Year Review does not exist.
 - b. A TIU may not designate a review conducted in any year other than the actual fourth year as a “Fourth-Year Review,” except in the circumstances stated below.
 - i. Formally approved prior service credit: The years of prior service credit are added to the years of Ohio State service to determine when the Fourth-Year Review will occur.
 - ii. Exclusion of time from the probationary period prior to the actual fourth year of service: The Fourth-Year Review is postponed by each year excluded from the tenure clock. If the Fourth-Year Review has already taken place when an exclusion of time is granted, it is not repeated.
 - iii. Extended probationary period due to a part-time appointment: The Fourth-Year Review may be postponed beyond the actual fourth year of service, but must occur at least two calendar years prior to the mandatory P&T review year.
3. Procedures
 - a. The procedures for the Fourth-Year Review are to follow the same process as those for the Sixth-Year (mandatory) tenure review as set forth in Faculty Rule 3335-6-04, with the following two exceptions:
 - i. External evaluations are optional. Department APT documents must indicate the criteria under which they will be solicited if they are not solicited in every case and who will make the decision about whether to solicit them.



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- ii. Review by the college P&T committee is optional when the TIU head and the dean agree on a positive decision to reappoint. Colleges must treat all such cases consistently. College APT documents must indicate how the college will proceed in such cases.
 - b. Should the recommendation of the campus dean/director differ from that of the TIU head or the college promotion and tenure committee, the college or divisional dean will convene a meeting with the regional campus dean/director to discuss the case. The decision of the college dean will be final.
- 4. Failure to conduct Fourth-Year Review
 - a. Failure of a college to conduct a mandatory Fourth-Year Review will result in a required exclusion of time from the probationary period and must be reported as part of the college's annual update to the provost.
- D. Approval levels for reappointment after Fourth-Year Review
 - 1. Reappointment of Columbus campus faculty after the Fourth-Year Review requires approval by the TIU head and the college dean. The college dean makes the final decision on reappointment.
 - 2. Reappointment of regional campus faculty after the Fourth-Year Review requires approval by the TIU head and the college dean. The college dean makes the final decision on reappointment.
 - 3. Colleges are responsible for sending the candidate's dossier to University Archives for appropriate retention. Colleges must send a report of all of its decisions on reappointment to OAA.
- E. Comments process
 - 1. The comments process for the Fourth-Year Review generally follows the same process as that for the Sixth-Year (mandatory) tenure review as set forth in [Faculty Rule 3335-6-04](#).
 - 2. Promptly after a decision is reached on the first and the second levels of review respectively, the candidate is informed in writing that the faculty report and unit head's assessment letter are available and the comment process begins. Upon notice of completion of the review at each level, the candidate has ten days to provide written comments for inclusion in the dossier.
- F. Nonrenewal
 - 1. In the case of a TIU head recommending nonrenewal of a probationary appointment, the review must follow Fourth-Year Review procedures, subject to the relevant standards of notice set forth in [Faculty Rule 3335-6-08](#).
 - 2. A recommendation to terminate a probationary faculty member's appointment requires the approval of the college dean, who makes the final decision.
 - 3. In the case of a regional campus faculty member, a recommendation to terminate a probationary faculty member's appointment requires the approval of the regional campus dean, the TIU head, and the college dean. The college dean makes the final decision.
 - 4. ~~In colleges without units~~ In a college that is the TIU, a decision of the dean to terminate a probationary faculty member's appointment requires approval by the provost. The college is to submit one copy of the dossier to OAA for university-level review.
 - 5. The TIU head must ensure proper notice is given to probationary faculty who are not reappointed.
 - 6. The [Nonrenewal of Probationary Appointment or Denial of Tenure Form](#) must be submitted to OAA, along with a copy of the nonrenewal letter sent to the faculty member, by May 31 of the year in which the nonrenewal decision occurs.
 - 7. Nonrenewal usually precludes rehiring the individual (see [Faculty Appointments, Tenure, and Retrenchment policy](#)).
- G. Withdrawing from or declining a review
 - 1. Faculty members who withdraw from or decline to participate in a mandatory review in any probationary year are subject to the relevant standards of notice per [Faculty Rule 3335-6-08](#). The decision to terminate a review must be accompanied by a letter of resignation from the faculty member to the TIU head (or regional campus dean) stating the following:
 - a. the faculty member's last day of employment (no later than May 31 of the year following the review year); and



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- b. an acknowledgement from the faculty member that the decision to terminate (withdraw from or decline participation in) the review is irrevocable.
 2. This action requires that the Nonrenewal of Probationary Appointment or Denial of Tenure Form be submitted to OAA, along with a copy of the faculty member's letter, by May 31 of the year in which the decision to terminate the review occurs.
- H. Submission deadlines
 1. Deans may establish due dates for receipt of Fourth-Year Reviews and any annual reviews with a nonrenewal recommendation in the college office.
- I. Sixth Year Review process
 1. Mandatory reviews shall follow process as set forth under Faculty Rule 3335-6-04.

III. Clinical/Teaching/Practice and Research Faculty

- A. Appointments
 1. The initial appointment of all clinical/teaching/practice and all research faculty is probationary regardless of academic rank at hire. The duration of the initial appointment defines the length of the probationary period.
 2. Clinical/teaching/practice faculty are to have a five-year appointment for their initial probationary contract. Appointment terms for second and subsequent contracts for clinical/teaching/practice assistant and associate professors may be for a period of at least three years and for no more than five years. Appointment terms for second and subsequent contracts for clinical/teaching/practice professors may be for a period of at least three years and no more than eight years.
 3. Research faculty may have a one- to five-year appointment for their initial and any subsequent contract.
 4. The full text of terms and conditions of clinical/teaching/practice and research faculty appointments is stated in Chapter 3335-7 of the Faculty Rules of the Faculty Rules.
 5. There is no presumption of reappointment at the end of any given appointment period.
- B. Annual renewal
 1. Positive decisions by the TIU head are final.
 2. ~~TIU heads in colleges~~ In a college with units multiple TIUs, each TIU head must forward a copy of the reappointment letter to ~~their~~ the college dean.
 3. ~~Deans of colleges without units~~ In a college that is the TIU, the dean must forward a copy of the reappointment letter to OAA.
- C. Nonrenewal
 1. A recommendation to not renew a probationary clinical/teaching/practice or research faculty member's appointment requires the approval of both the TIU head and the college dean. The college dean makes the final decision.
 2. The TIU head must ensure proper notice is given to faculty who are not reappointed.
 3. The Nonrenewal of Probationary Appointment or Denial of Tenure Form must be submitted to OAA, along with a copy of the nonrenewal letter sent to the faculty member, by May 31 of the year in which the nonrenewal decision occurs.
- D. Appointment renewal for probationary faculty
 1. No later than the beginning of a faculty member's penultimate year of an initial appointment term, the individual must undergo a review so that the unit may determine whether it is appropriate to renew that individual's appointment for a new appointment term. The review will follow the same procedures as a review for tenure-track faculty as set forth in Faculty Rule 3335-6-03 and Faculty Rule 3335-6-04.
 2. Positive decisions to reappoint clinical/teaching/practice and research faculty will be approved by OAA without review, and forwarded to the Board of Trustees (BOT) for final approval. Upon approval by the BOT, the clinical/teaching/practice or research faculty member is no longer probationary.
 3. For each positive decision to reappoint to a new term, the unit must submit to OAA an original signed "cover sheet" (see Record of Review for Promotion in Academic Rank/Tenure/Reappointment Form).



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Only the form should be submitted. The CV, dossier, and copy of the reappointment letter should not be submitted.

4. If the individual will not be renewed, the faculty member should be so informed, subject to the relevant standards of notice set forth in Faculty Rule 3335-6-08.
5. All reappointment decisions are at the discretion of the college dean.
- E. Appointment renewal for nonprobationary faculty
 1. For faculty in their second and subsequent appointment term, the individual must be informed as to whether a new appointment will be extended by the end of the penultimate year of each appointment period. A faculty member not being renewed must be informed according to the relevant standards of notice set forth in Faculty Rule 3335-6-08.
 2. An initial decision from the TIU head or the dean (in colleges without departments) to not reappoint the faculty member to another term requires a review by the eligible faculty, or a standing committee of the faculty, as determined and as set forth in the relevant college, school, or department APT document.
 3. If the initial decision from the TIU head or the dean (in colleges without departments) is to reappoint the faculty member to another term, that decision will be final unless a more formal review is otherwise set forth in the relevant college, school, or department APT document.
 4. All reappointment decisions are at the discretion of the college dean.
- F. Submission deadlines
 1. The dean may establish due dates for receipt of reviews in the college office.
- G. Position elimination
 1. If a faculty member's position is eliminated, the faculty member must be so informed. In this situation, a review is not appropriate.

IV. Associated Faculty

- A. Appointments
 1. Associated faculty may be appointed for up to three years. Associated faculty members on a second or subsequent three-year appointment may not be terminated mid-appointment except for cause.
- B. Renewal
 1. There is no presumption of reappointment at the end of a given appointment period.
 2. If the position will continue, the faculty member must undergo formal reappointment review so that the unit may determine whether it is appropriate to renew that individual's appointment to fill that position.
 3. Positive decisions by the TIU head are final.
- C. Nonrenewal
 1. A decision by the TIU head not to renew an associated faculty member's appointment is final.
 2. The TIU head must ensure proper notice is given to associated faculty who are not reappointed.
- D. Standards of notice
 1. If the position will not continue, the university will, insofar as possible, observe the following standards of notice:
 - a. For an associated faculty member with a one-year or an initial multi-year appointment, not later than March 1 of the academic year, or three months in advance of the expiration of the yearly appointment term if the appointment expires during an academic year;
 - b. For an associated faculty member in the second year of an initial multi-year appointment, not later than December 15 of the second academic year of the appointment, or six months in advance of the expiration of the yearly appointment term if the appointment expires during an academic year;
 - c. No later than October 15 of the final year of a faculty member's (a) initial three-year appointment or (b) second or subsequent multi-year term appointment; and
 - d. For associated faculty with an initial three-year appointment or in subsequent multi-year term appointments, eight months in advance of the expiration of the appointment term if the appointment expires during an academic year.



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- Failure to give notice does not renew a faculty member's appointment.

Responsibilities

Position or Office	Responsibilities
Board of Trustees (BOT)	Provide final approval for reappointment of clinical/teaching/practice and research faculty.
Candidates for Fourth-Year Review and Mandatory Review	- May withdraw from or decline to participate in a mandatory review in any probationary year; decision to terminate a review must be accompanied by a letter of resignation. - Submit dossier in a university-approved P&T format to TIU head.
Colleges	- Send dossiers to University Archives for appropriate retention. - Send report of all decisions on reappointment to OAA.
Deans	<u>Review faculty annual reviews as set forth in the policy.</u> <u>Convene a meeting with the regional campus dean/director to discuss the case a Fourth-Year Review</u> if the regional campus dean/director recommendation differs from that of the TIU head or the college promotion and tenure committee. <u>Forward in a college that is the TIU, forward</u> a copy of the reappointment letter to OAA <u>in colleges without units.</u> <u>Make final decision on reappointment of Columbus campus and regional campus faculty after the Fourth-Year Review.</u> <u>Make the final decision to not renew a clinical/teaching/practice or a research faculty member's appointment.</u> <u>Make final decision to terminate a regional campus probationary faculty member's appointment.</u> <u>Make in a college with multiple TIUs, make</u> final decision on a recommendation to terminate a probationary faculty member's appointment <u>in colleges with units.</u> <u>Make in a college that is the TIU, make</u> a recommendation to the provost to not reappoint probationary tenure-track faculty <u>in colleges without units.</u>
Faculty members	Submit annually updated documentation of performance and accomplishments in CV format to the TIU head (and regional campus dean, if applicable).
Probationary Faculty	- Must use university-approved P&T core dossier format to upload and format dossiers. - Must undergo a review <u>to determine whether an appointment renewal is appropriate</u> no later than the beginning of the penultimate year of an initial appointment term.
Provost	- Review and make final decisions on faculty annual reviews as set forth in the policy. <u>Make final decision to not renew a probationary tenure-track faculty in colleges without units.</u>
Regional campus deans/directors	<u>Complete reviews of regional campus faculty as set forth in the policy.</u> <u>Approve recommendation to terminate regional campus probationary faculty member's appointment.</u>
TIUs	- Include in APT documents established <u>standards and</u> procedures, required documentation, and document submission deadlines for annual and Fourth-Year Reviews of tenure-track faculty, annual and Penultimate Year Reviews of faculty on clinical/teaching/practice and research appointments, and annual and reappointment reviews of compensated associated faculty—<u>including defining the unit's annual review period.</u> - Maintain a current CV of all tenure-track, clinical/teaching/practice, research, and associated faculty members within TIU. <u>Submit to OAA an original signed "cover sheet" for each positive decision to reappoint probationary and clinical/teaching/practice faculty.</u>
TIU heads	<u>Provide written assessment and Complete annual reviews to of all compensated faculty.</u> <u>Include a narrative evaluation addressing the purposes of the annual review as set forth in the policy or delegate such responsibility to associate chairs/deans, vice chairs/deans, or division chairs/directors.</u> <u>Approve, as appropriate, reappointment of Columbus and regional campus faculty after the Fourth-Year Review.</u> <u>Approve, as appropriate, recommendation to terminate regional campus probationary faculty member's appointment.</u> <u>Approve, as appropriate, recommendation to not renew a clinical/teaching/practice or research faculty member's appointment.</u>



**THE OHIO STATE
UNIVERSITY**

Faculty Annual Review, Post-Tenure Review, and Reappointment

Interim University Policy

Applies to: Faculty

Position or Office	Responsibilities
	5. In a college with multiple TIUs, forward copies of reappointment letters to college dean. 6. Forward copies of reappointment letters to college regional campus dean/director in colleges with units. 7. Make final decision on positive annual appointments of probationary faculty. 8. Ensure proper notice is given to faculty who are not reappointed. 9. Conduct face-to-face meetings with all probationary faculty. 10.8. Offer compensated faculty the opportunity for a face-to-face meeting.
Units	Submit to OAA an original signed "cover sheet" for each positive decision to reappoint probationary and clinical/teaching/practice faculty.
Unit heads (in colleges with units)	1. Make recommendation of nonrenewal of probationary faculty. 2. Forward a copy of the reappointment letter to the college dean. 3. Forward a copy of the reappointment letter to the regional campus dean/director in the case of regional campus faculty.

Resources

Faculty Appointments, Tenure, and Retrenchment policy, go.osu.edu/faculty-appointments-policy

Faculty Workload Guideline, faculty.osu.edu/faculty-support/equitable-policies/faculty-workload-guideline

General Records Retention Schedule, go.osu.edu/retention-schedules

OAA Annual Review Template, [\[link\]](#)

OAA Policies, Guidelines and Forms, oaa.osu.edu/policies-guidelines-forms

OAA Policies and Procedures Handbook, oaa.osu.edu/policies-and-procedures-handbook

Rules of the University Faculty, trustees.osu.edu/bylaws-and-rules/university-faculty-rules

Contacts

Subject	Office	Telephone	E-mail/URL
Annual review; Fourth-Year Review; Sixth-Year Review; Reappointments	Office of Academic Affairs	614-292-5881	oaa.osu.edu

History

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Faculty Appointments, Tenure, and Retrenchment

Interim University Policy

Applies to: Faculty

Responsible Office

Office of Academic Affairs

POLICY

Issued: 07/20/2004

Revised: 08/25/2025 (interim revision)

Appointment decisions for continuing faculty positions must be based on criteria that reflect strong potential to advance through the faculty ranks, including attaining tenure, being promoted, and/or being reappointed.

Purpose of the Policy

To provide guidance for appointment decisions for each faculty type and to outline the university's governance documents on tenure and retrenchment as required by [Ohio Revised Code \(ORC\) 3345.454](#). [Faculty Rule 3335-5-19](#) states the general criteria governing the types of faculty titles. [Faculty Rule 3335-6](#) and [Faculty Rule 3335-7](#) describe in detail the tenure-track, clinical/teaching/practice, and research appointment types.

Definitions

Term	Definition
Joint appointment	One in which a faculty member has a compensated full-time equivalent (FTE) appointment in two or more tenure-initiating units (TIUs).

Policy Details

I. Tenure-track, Clinical/Teaching/Practice, and Research Faculty

A. Tenure

- Tenure may be earned by all tenure-track faculty members upon completion of all applicable university requirements as set forth in [Faculty Rule 3335-5-03](#), the [OAA Policies and Procedures Handbook](#), and applicable unit appointment, promotion, and tenure (APT) documents and may be achieved through multiple pathways.
- Tenured faculty must serve on appointments totaling fifty per cent or more service to the university to maintain tenure as set forth in [Faculty Rule 3335-5-19\(A\)](#).

B. Length of appointment

- Tenure-track, clinical/teaching/practice, and research faculty may be offered either a nine-month or a twelve-month appointment by the TIU. The most common schedule for a nine-month on-duty period under semesters is from August 15 to May 15, with compensation paid out over twelve months. Twelve-month appointments typically begin either July 1 or on the first day of autumn semester. Colleges with clinical practice for teaching and patient care have hiring dates throughout the year.
- In accordance with [Faculty Rule 3335-5-07](#), all full-time faculty members are to be on duty an average of 19 working days a month, with working days defined as weekdays that are not designated as university holidays.
 - Nine-month faculty members are commonly on duty for nineteen working days a month averaged over a nine-month period and do not accrue vacation. They are not expected to be on duty during breaks within a given semester, summer term, or session, nor any days between the end of the exam period and the beginning of the next semester or session.
 - Twelve-month faculty members are on duty on all working days except for the days they accrue and designate as vacation days. See [Paid Time Off policy](#).
- TIUs are to provide candidates for faculty appointments with an offer letter to sign containing, at the minimum, the proposed start date, faculty title, reappointment date, duties and responsibilities, and salary



Faculty Appointments, Tenure, and Retrenchment

University Policy

Applies to: Faculty

and compensation, including whether any compensation is subject to productivity expectations and requirements.

C. Joint appointments

1. Appointing new faculty members to a **joint appointment**

- a. TIUs considering making a joint appointment are to determine whether this is the most appropriate means of accomplishing a shared goal. Financial reasons (neither unit has the resources to make the appointment on its own) alone do not provide an optimal foundation for joint appointments. The Office of Academic Affairs (OAA) suggests not pursuing a joint appointment if there are other means (such as joint service on graduate studies committees) that will accomplish the shared goal.
 - b. TIUs making a joint appointment are to reach agreement on its terms before seeking an individual to fill the position so that these terms can be communicated clearly to candidates. These terms, modified as a consequence of negotiation with a particular candidate when appropriate, must be set forth in a memorandum of understanding (MOU) signed by the heads of the TIUs and the dean(s) of those TIUs.
 - c. Before being extended to candidates, offer letters involving joint appointments, along with the executed MOU, must be approved by OAA. A candidate must be provided with the terms of the MOU before being asked to decide on an offer. Items that must be included in the MOU include:
 - i. The TIU in which the candidate's tenure or other appointment will reside (see [Faculty Rule 3335-6-06](#)). This is the unit where the candidate will be a member of the eligible faculty for APT decisions. If it is possible for the TIU designation to be renegotiated at a subsequent time, the MOU should describe how such a negotiation would be initiated and concluded.
 - ii. What each unit will contribute to the appointment in terms of compensation; office; research space, equipment, and start-up funds; and any other relevant resources, as well as the process by which relative contributions could be changed over time.
 - iii. The defined workload associated with each part of the appointment; the process by which the defined workload associated with the different parts of the appointment can be changed; and the mechanism for resolving workload issues should it be alleged by either the joint appointee or one of the TIUs that one or both of the TIUs' expectations differ from those agreed to in the MOU.
 - iv. The annual salary decisions process and whether the TIUs agree to reach consensus on salary increases or each provide its own recommendation based on performance in areas relevant only to its part of the appointment.
 - v. In the case of an untenured faculty member, how annual reviews and the review for tenure will be conducted; whether both TIUs must agree on renewal of the appointment and ultimately on the award of tenure for the peer recommendation to be considered positive and if not, how a disagreement on renewal and tenure will be handled. If the TIUs cannot reach an agreement on this extremely important matter, then the hire is not to be made.
 - vi. In the case of a tenured faculty member, how annual reviews and reviews for promotion will be conducted and whether both TIUs must agree that promotion is warranted for the peer recommendation to be considered positive.
 - vii. The governance rights of the joint appointee in each of the TIUs sharing the joint appointee.
- #### 2. Faculty transfer into a joint appointment
- a. On occasion, a faculty member hired into a faculty position in a particular TIU seeks a joint appointment with another unit. In such cases, the two TIUs must enter into an MOU about the appointment that includes the items set forth in Policy Details I.B.1.c, including which unit will serve as the TIU, with the MOU being signed by the heads of the TIUs and the dean(s) of those TIUs and OAA. In such circumstances, OAA recommends that the faculty member and the TIUs involved observe the following process:
 - i. The faculty member consults with the head of the unit with which they want to establish a joint appointment and explain why such an appointment would benefit their academic career at The Ohio State University (university).



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- ii. The TIU head then makes a judgment about whether the joint appointment will benefit the mission of the unit as a whole and whether there are funds to cover the salary and benefits associated with the joint appointment. In making this judgment, the TIU head consults with the dean (if applicable) about the effect of this joint appointment, if any, on future hires in the unit.
 - iii. If the TIU head ascertains that the transfer would benefit the unit, the TIU head consults with the dean about whether there are funds in place to support the joint appointment. At this point, the faculty member requesting the joint appointment writes a formal letter of application to the TIU head.
 - iv. The receiving unit provides information about the faculty member to its tenured faculty and requests a vote, following hiring procedures laid out in the [Appointments, Reappointments, Promotion and Tenure web page](#), about whether the unit approves the joint appointment.
 - v. The dean and TIU head of the receiving unit decide whether to approve the appointment.
 - vi. Joint appointed faculty may vote on appointments, promotion, and tenure decisions only in their TIU.
- D. Academic appointments
 - 1. Academic appointments have 0% FTE and occur when a tenure-track, clinical/teaching/practice, or research faculty member holds an appointment in one or more academic units outside the TIU.
 - 2. TIUs must establish formal expectations for academic appointments. Academic appointments are to be discontinued when expectations are not met and when a faculty member retires from or otherwise terminates employment with the university.
- E. Changes in appointment
 - 1. Transfer of TIU
 - a. The concept of a TIU and the circumstances under which a tenure-track faculty member may be considered for transfer to a new TIU are described, along with the necessary approvals, in [Faculty Rule 3335-6-06](#).
 - b. Approval of the transfer by OAA is dependent on the establishment of mutually agreed upon arrangements between the administrators of the affected TIUs, including the deans(s), and the faculty member.
 - c. An MOU signed by all parties, including OAA, must describe in detail the arrangements of the transfer. Since normally the transferring faculty member will fill an existing vacancy in the receiving unit, the MOU will describe the resources supporting the position, including salary, provided by the receiving unit.
 - d. The review schedule of probationary tenure-track faculty is not altered by transferring to a new TIU. Requests for exceptions due to special circumstances must be submitted to OAA before the MOU is finalized.
 - 2. Transfer from tenure-track to clinical/teaching/practice or research appointments
 - a. Tenure-track faculty members who transfer to clinical or research appointments are required to resign their tenure-track positions, relinquishing tenure if applicable.
 - b. Such transfers are initiated for consideration only upon the written request of the faculty member. Clear evidence must be offered of a change in the individual's career goals and expectations, duties, and activities.
 - c. The following Faculty Rules describe the circumstances under which such a transfer may be considered and approved:
 - i. To clinical/teaching/practice, [Faculty Rule 3335-7-09](#).
 - ii. To research, [Faculty Rule 3335-7-38](#).
 - d. Transfer from a clinical/teaching/practice or research appointment to the tenure-track is not permitted (see [Faculty Rule 3335-7-10](#) and [Faculty Rule 3335-7-39](#) respectively). Clinical/teaching/practice or research faculty may apply for tenure-track positions and compete in regular national searches for such positions.
 - 3. Reduction in FTE
 - a. Involuntary reduction



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- i. Unless otherwise agreed upon by the TIU and faculty member or otherwise set forth under the faculty rules, the involuntary reduction of FTE must follow the process under [Faculty Rule 3335-5-04](#).
 - b. Tenure-track faculty
 - i. If a part-time appointment was not included in the terms of hire as stated in the offer letter, a tenure-track faculty member who desires a temporary FTE reduction or a permanent FTE reduction must consult with the TIU head.
 - ii. Tenure-track faculty are defined in [Faculty Rule 3335-5-19\(A\)](#) as holding an appointment of 50% FTE or greater. Persons with a tenure-track faculty title on an appointment of less than 50% FTE are associated faculty.
 - iii. Upon the faculty member's request, the TIU head, with the approval of the dean in colleges with TIUs, has the authority to grant a reduction in FTE.
 - c. Probationary tenure-track faculty
 - i. A reduction in FTE does not involve an automatic exclusion of time from the probationary period, even though the projected revised dates may be mentioned in the letter approving the reduction, as is often the case. Probationary tenure-track faculty whose appointment is less than full-time but not less than 50% may request an exclusion of time from the probationary period in accordance with [Faculty Rule 3335-6-03\(D\)\(1\)\(c\)](#).
 - ii. OAA does not approve exclusions of time in advance. Rather, during the second year of a faculty member's reduced appointment, OAA will approve an exclusion of time for one year. For example, a 50% FTE appointment will reflect one year of service within the probationary period upon working two academic years for a nine-month appointment or two full years for a twelve-month appointment. At the appropriate time, a letter requesting approval of the exclusion of time is forwarded by the TIU head to the dean and then OAA.
 - iii. For probationary faculty, the letter directed to the final level of approval is to include (in addition to the amount of the reduction, when it will take effect, and whether it is permanent or temporary) a projected revision of the review schedule and the projected year in which the adjusted Fourth-Year Review would fall (if the Fourth-Year Review has not already occurred).
 - d. Clinical/teaching/practice and research faculty
 - i. Clinical/teaching/practice and research faculty who wish to renegotiate their FTE during a contract period must consult with the TIU head to seek approval.
4. Twelve-month and nine-month appointment conversions
 - a. Faculty will normally convert between a twelve-month and a nine-month appointment using a 12/9 or a 9/12 salary conversion ratio. Any other arrangement requires the approval of OAA.
 - b. See the [Faculty Compensation](#) policy for information regarding a faculty member with an administrative appointment.
5. Transfer of campus
 - a. The circumstances under which a faculty member may be considered for a transfer from one campus to another are described in [Faculty Rule 3335-6-07](#).
 - b. The provost's approval of the transfer is dependent on the establishment of a mutually agreed upon financial arrangement between administrators of the affected TIUs, including the dean(s).
- F. Endowed chairs or professorships
 1. Only the Board of Trustees (BOT) can establish an endowed chair or professorship and appoint an individual to hold that position. TIUs are to defer publicity regarding the establishment of an endowed chair/professorship or the appointment of an individual to that position until action has been taken by the BOT.
- G. College distinguished professors
 1. Colleges wishing to recognize distinguished faculty members may establish distinguished professorships, the titles of which must be (college name) distinguished professor.
 2. Criteria for review and procedures for awarding such distinctions must be included in the college Pattern of Administration.



Faculty Appointments, Tenure, and Retrenchment

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H. Emeritus faculty

1. Tenure-track, clinical/teaching/practice, research, and associated faculty are eligible for consideration for emeritus status upon retirement or resignation at the age of sixty or older with ten or more years of service or at any age with twenty-five or more years of service at the university (see [Faculty Rule 3335-5-19](#) and [Faculty Rule 3335-5-36](#)). The process for recommending emeritus status to the executive vice president and OAA is to be set forth in the TIU APT document and the Faculty Rules. Various offices within the university offer perquisites to emeritus faculty, which are subject to modification and remain at the discretion of the applicable office.
2. Graduate faculty status
 - a. See the [Graduate School Handbook](#) for details on graduate faculty status when a faculty member terminates employment with or retires from the university.
3. Emeritus titles for endowed chairs/professorships
 - a. Faculty members who hold an endowed chair/professorship or an Ohio eminent professorship at the time of their retirement or resignation may continue to use the chair designation upon request by their TIU head with the approval of the dean, OAA, and Board of Trustees (BOT).
 - b. The request can only be made for a faculty member retiring from the university and from the chair/professorship, not for those who may have held the chair/professorship in the past or those simply ending a term holding the chair/professorship.
 - c. The request can only be for carrying the name of the chair/professorship with the “emeritus” designation preceding the name. No chair/professorship resources can be allocated to the individual carrying the emeritus designation.
4. Title for members of the Emeritus Academy
 - a. A faculty member who has been granted emeritus academy status may use the title academy professor during the period that such faculty is an active member of the Emeritus Academy.

I. Reemployment of retired faculty

1. For eligibility requirements and guidelines on the rehiring of faculty who have retired from the university, see the [Reemployment of Faculty and Staff policy](#).
2. Re-employment of retired faculty is not an entitlement and cannot be guaranteed. Note that faculty may be rehired into the same position at greater than 75% FTE only if the salary is not greater than 75% of the salary at the time of retirement, subject to the requirements under the [Reemployment of Faculty and Staff policy](#).
3. Use the guidelines below in Section III.G.1-3 of this policy to determine appointment classification and FTE.
4. Rehiring a retired faculty member requires approval of the TIU head, the college human resources business partner, the college dean (or campus dean/director), and OAA prior to extending an offer. Colleges must forward requests to hire a retired faculty member using the [Request to Rehire Retired Faculty/Staff Member Form](#).

J. Reemployment of tenure-track faculty following nonrenewal of appointment or denial of tenure

1. OAA must approve the rehire of a tenure-track faculty member denied reappointment or tenure. This requirement for approval applies to faculty members rehired within three years of the final day of their original tenure-track appointment. Approval will be based on the nature of the proposed appointment in relationship to the reasons for denial of reappointment or tenure.
2. A proposal to rehire a faculty member to teach or to conduct research in some capacity when unacceptable teaching or research, respectively, was a factor in the denial of reappointment or tenure is unlikely to be approved.
3. TIUs are to exercise sound judgment in considering the rehire of probationary tenure-track faculty who withdraw from a mandatory review and resign.

K. Reemployment of tenure-track faculty who have resigned

1. There may be rare circumstances when a unit is unable to retain a truly exceptional faculty member (e.g., a member of a national academy), and the unit and college wish to facilitate the faculty member's return to the university. The chair and dean may request approval from OAA, within two years of the faculty



Faculty Appointments, Tenure, and Retrenchment University Policy

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member's departure, to rehire the faculty member into a vacant position without a national search. The unit/college must not promise to rehire the faculty member in advance since intervening events could make it undesirable or not feasible to follow through on such a commitment.

II. Associated Faculty

- A. For definitions and rules regarding associated faculty, see [Faculty Rule 3335-5-19](#).
- B. Regardless of title, all associated appointments require an offer letter stating the start date and the end date, not to exceed a term of three years. Appointments carry no presumption of academic tenure or reappointment.
- C. Associated appointments do not typically require OAA approval except in instances when the individual does not have a degree beyond a baccalaureate degree (see Section II.M below).
- D. Initial appointments at senior rank require prior approval of the college dean and OAA.
- E. Renewal requires a new offer letter and a new action in the human resources (HR) system. Nonrenewal requires termination in the HR system effective on the end date as stated in the offer letter.
- F. Persons with tenure-track faculty titles employed at 50% FTE or greater, clinical/teaching/practice faculty, and research faculty cannot hold an associated faculty appointment.
- G. General concerns
 1. Appointment classification
 - a. Temporary and Regular appointment status are determined by the length of the appointment. These appointments are renewable.
 - b. Temporary:
 - i. Appointment is for one semester or less.
 - ii. While a faculty member may be appointed for back-to-back semesters, continuous consecutive back-to-back appointments should be reviewed annually to determine if a regular appointment would be more appropriate.
 - c. Regular:
 - i. Appointment is for a minimum of two semesters up to three years.
 - ii. Faculty members with a multiple-year commitment to work for only part of the year, e.g., to be the instructor of record each fall for three years in a row, would only be appointed for the period they work.
 - d. Benefit eligibility for multiple appointments will follow the principles in the Office of Human Resources [Staff Employment policy](#).
 2. FTE in semesters
 - a. In cases when associated faculty members have duties limited to formal class instruction, the FTE is determined by the number of credit hours assigned per term. The university-wide baseline for fall and spring semesters is that one three-credit course equals 0.25 FTE. This translates into approximately 10 hours/week, or 3.33 hours/week/credit hour. Compensated associated faculty teaching fewer or more than three credits will have their FTE adjusted accordingly. For example, faculty teaching one course should be appointed at 25% FTE, regardless of hiring unit. Faculty teaching more than four three-credit courses should be paid supplemental compensation for this overload. No associated faculty member should teach more than five three-credit courses in a single semester.
 - b. Using this standard, a 100% FTE lecturer or other associated faculty appointment would be distributed by credit hour across two semesters as four (4) courses equaling twelve (12) credit hours for Autumn semester and four (4) courses equaling twelve (12) credit hours for Spring semester.
 - c. Colleges and regional campuses may develop formal guidelines (written into their Patterns of Administration) for addressing types of courses that warrant a different credit-hour to FTE equivalency. This allows TIUs to address concerns about the differing amounts of time required for the preparation or evaluation of types of courses due to enrollment size, assistance from graduate teaching associates, studios, labs, one-on-one instruction, and so on, while at the same time providing a standard ensuring that all associated faculty members within a college or campus are treated equitably.



Faculty Appointments, Tenure, and Retrenchment

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- d. In cases when associated faculty members have duties beyond formal class instruction, the TIU head must adjust the FTE accordingly. For example, in a given semester a lecturer could teach three courses and be assigned 25% FTE duties in other teaching areas, such as advising, guest lecturing, or developing curriculum.
 - e. All appointment letters for associated faculty members must specify the FTE of the appointment.
 - 3. FTE in summer term
 - a. Associated faculty teaching three credits in one four-week session will be appointed at 100% FTE, in one six-week session will be appointed at 75% FTE, and in one eight-week session will be appointed at 50% FTE. A summer course may be appended to a two-semester appointment.
 - 4. Pay Period; Benefits
 - a. Associated faculty members on appointments 75% FTE or greater for two semesters or the nine-month academic year will be paid out over twelve months as a 9/12 appointment. Such appointments will be eligible for benefits, subject to the terms and conditions of the applicable university employee benefit plan, program and/or policy, during the entire twelve-month appointment, from September-August.
- H. Professional titles if less than 50% FTE
 - 1. Individuals who perform across the full range of faculty duties and responsibilities (teaching, scholarship, and service) if less than 50% FTE are given tenure-track titles.
- I. Clinical practice faculty
 - 1. Clinical practice faculty appointments are limited to the health sciences.
 - 2. These appointments are appropriate for persons who provide significant service to the university such as:
 - a. Teaching the equivalent of one or more courses.
 - b. Advising graduate students or serving on graduate committees.
 - c. Serving as a co-investigator on a clinical trial or scholarly project that entails regular interaction with unit faculty and students as part of the collaboration.
 - d. Providing necessary university affiliation so that non-university health care providers may practice in university facilities and/or engage in teaching activities.
 - 3. Such individuals may be either non-university employees or university employees compensated on a non-instructional budget.
 - 4. Clinical practice faculty (compensated)
 - a. Clinical practice appointments are appropriate for persons who teach and provide patient care for compensation at an FTE ranging from 1% - 100%.
 - 5. Clinical practice faculty (uncompensated)
 - a. 0% FTE clinical practice appointments are made for the period in which the uncompensated service is provided, not to exceed three years.
 - b. TIUs may renew uncompensated clinical practice appointments only in cases when the purpose of the appointment continues to be met.
- J. Visiting faculty
 - 1. Visiting faculty (compensated)
 - a. Fiscal or programmatic circumstances may sometimes make it appropriate to hire faculty under time-limited contracts. Visiting faculty appointments may be renewed for up to three consecutive years or given a contract for up to three years at 100% FTE. Part-time appointments may be renewed until the equivalent of three years at 100% FTE is reached.
 - b. TIUs may also use the visiting faculty title for the temporary appointment of faculty members from other institutions and for foreign national faculty members who have been awarded tenure but do not have permanent residency status.
 - c. Only TIUs may make visiting faculty appointments for temporary duties. A non-TIU unit, such as a center that wishes to appoint persons, must use an appropriate non-faculty title.
 - 2. Visiting faculty (uncompensated)



Faculty Appointments, Tenure, and Retrenchment

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Applies to: Faculty

- a. TIUs may use the visiting faculty title for the temporary appointment of faculty from other institutions who are not compensated by Ohio State, typically when the faculty member is compensated by their home institution.
- K. Adjunct faculty
 - 1. These appointments are appropriate for persons who provide significant service to the university such as:
 - a. Teaching the equivalent of one or more course.
 - b. Advising graduate students or serving on graduate committees.
 - c. Serving as a co-investigator on a research project that entails regular interaction with unit faculty and students as part of the collaboration.
 - 2. Such individuals may be either non-university employees or university employees compensated on a non-instructional budget.
 - 3. APT documents, as well as offer letters to adjunct faculty, must clearly state that adjunct appointments are:
 - a. Recommended at the discretion of the unit;
 - b. Made for periods not to exceed three years; and
 - c. Entail no commitment to renew the appointment beyond that period.
 - 4. Adjunct faculty (compensated)
 - a. Colleges may approve compensation for services provided by adjunct faculty in instances where such individual takes on exceptional responsibility.
 - 5. Adjunct faculty (uncompensated)
 - a. Adjunct appointments are made for the period in which the uncompensated service is provided, not to exceed three years. Renewal is contingent upon continued significant contributions.
- L. Lecturers
 - 1. When part-time instructors are needed for teaching, other than graduate teaching associates, the appropriate appointment is lecturer or senior lecturer.
 - 2. Colleges and the regional campuses must establish appropriate criteria and associated pay scales for differentiating lecturers from senior lecturers.
- M. Qualifications for Appointment
 - 1. While qualified faculty members are identified primarily by credentials, other factors, including but not limited to equivalent experience, may be considered by the university in determining whether a faculty member is qualified. To be a member of the faculty or be the instructor of record for college credit at the university, the faculty member must satisfy at least one of the following criteria:
 - a. Holds an academic degree that is relevant to what the faculty member is teaching and that is one level above the level at which the faculty member teaches. In terminal degree programs, faculty members possess the same level of degree.
 - b. Holds a master's degree or higher in the discipline or subfield (or if master's is in another discipline or subfield, has completed 18 graduate credit hours in the discipline or subfield in which the appointee teaches) when teaching general education courses, or other non-occupational courses.
 - 2. Exceptions to the qualification requirements set forth in Section II.M.1. include the instructor of record who:
 - a. Has completed all requirements for the terminal degree with the exception of the dissertation, all but dissertation (ABD). This exception applies for a maximum of three years, after which time the faculty member must have completed the terminal degree;
 - b. Holds an academic degree that is not above the level at which they teach but possesses a minimum threshold of special competence, experience, and expertise that uniquely qualifies the individual in their discipline and is equivalent to the degree that is otherwise required for a faculty position, as documented through a review process as determined by the TIU or college. Qualifications must be documented and approved by the appropriate chair and dean; or
 - c. Is a graduate student supervised by university faculty.
 - 3. For faculty holding less than a master's degree, the university defines the minimum threshold of equivalent experience generally as five years of professional experience or demonstrated skills in the



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same area in which the potential instructor of record will be teaching. Credentials will be the primary determinant of minimal instructional qualifications but equivalent professional experience (having a breadth and depth of experience outside the classroom, in real-world situations relevant to what the faculty is teaching) and/or industry credentials are other possible determinants. OAA has final decision-making authority to determine whether the qualification of an instructor of record whose highest degree is less than a master's degree meets the minimum threshold. Such appointments should be rare and will only be approved if it is clear that the expertise of the faculty member fulfills a specific instructional need.

PROCEDURE

Issued: 07/20/2004

Revised: 08/25/2025 (interim revision)

- I. Appointing a Faculty Member to an Endowed Chair or Professorship
 - A. Once the BOT has approved the establishment of an endowed chair/professorship, the college is to transmit a draft offer letter to OAA for approval before extending an offer to the candidate. The letter must state the effective date and length of term, not to exceed five years, at which time the appointment will be up for renewal. After OAA returns the draft offer letter to the college, the unit may extend an offer to the candidate. The candidate must acknowledge acceptance of the position in writing.
 - B. The college must follow the requirements under the [Faculty Recruitment and Selection policy](#) for such appointments and include all required documentation with the draft offer letter when making an offer to an external candidate. OAA does not require a curriculum vitae (CV) for internal candidates.
 - C. The college sends to OAA a copy of the final offer on letterhead along with the candidate's acceptance, either as a signature on the offer letter or as a separate letter.
 - D. OAA forwards the offer letter with the candidate's acceptance to the BOT for final approval.
 - E. The appointment becomes official only upon approval by the BOT.
 - F. The dean must conduct a formal review prior to submitting an individual for reappointment to an endowed position.
 - G. Appointments to endowed chairs are ordinarily made at senior tenure rank and appointments to endowed professorships, when appropriate, can be made for early or mid-career faculty. Such endowments are to support the establishment of a new endowed position, and support the work of the faculty in terms of academic work and/or compensation as determined in consultation with OAA.
- II. Procedures for Faculty Emeritus Requests
 - A. Colleges are to forward written requests for faculty emeritus status to OAA using the [Request for Emeritus Status Form \(Form 207\)](#). TIUs are to follow the unit approval process set forth in their APT documents.
 - B. The title request is to be tied to final faculty status (e.g. associate professor emeritus). The process for using an emeritus title with an endowed chair, endowed professorship, or eminent scholar position is set forth in Policy Details I.H. The request for emeritus status must be received by the BOT prior to the date of retirement, if the perquisites of emeritus status (see Policy Details I.H.) are to become effective by that date.
 - C. After the emeritus request is approved by the BOT, the unit and/or college enters the emeritus appointment into the HR system. A retirement action must be entered prior to entering the emeritus action, and the emeritus effective date in the HR system must correspond with the effective date of the BOT approval. The emeritus effective date does not affect the retirement effective date or access to approved perquisites as determined by the TIU.
 - D. The process for recommending emeritus status to the executive vice president and provost must be set forth in the TIU APT document.
 - E. Emeritus status may be revoked in accordance with the Faculty Rules.



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III. Procedures for Verifying Qualifications

- A. Each course instructor must provide a CV to their department or college. The current CV, along with all relevant documents, will be kept by each department, college, or program in accordance with the university's [General Records Retention Schedule](#).
- B. Any offer of employment to a prospective faculty member will be made contingent on verification of necessary academic credentials. The candidate must submit credentials to verify that they hold an appropriate degree and any other academic or professional credential and/or experience (e.g., license or certification) required for the position.
- C. TIUs are responsible for verifying that received credentials are appropriate to the faculty member's position and teaching assignments.

IV. Retrenchment

- A. Pursuant to [ORC 3345.454\(A\)\(2\)](#) and (B), the university must outline procedures for addressing faculty and program levels in the event of a reduction of the student population or overall funding, a change to institutional missions or programs, or other fiscal pressures or emergencies facing the institution.
- B. In the event of financial exigency as defined in [Faculty Rule 3335-5-02.1\(A\)](#), the president may initiate the process to address that situation as outlined in [Faculty Rule 3335-5-02.1](#). Tenured faculty are subject to the provisions outlined in [Faculty Rule 3335-5-02.2](#) during financial exigency, and tenured faculty have the appeal rights outlined in [Faculty Rule 3335-5-02.3](#) if their employment is terminated in accordance with those rules.
- C. In the event that a department, school, or college must be restructured, altered, or abolished due to financial exigency or any other reasons, the provisions in [Faculty Rule 3335-3-37](#) and [Faculty Rule 3335-6-06](#) will apply.
- D. Faculty may be subject to furloughs in accordance with [bylaw 3335-1-08\(E\)](#) of the Ohio Administrative Code and the procedure in the [Furloughs policy](#).
- E. Pursuant to [ORC 3345.454\(C\)](#), unless a waiver is granted by the Chancellor of the Ohio Department of Higher Education, the university must eliminate any undergraduate degree program that confers an average of fewer than five degrees annually over any three-year period, without counting any academic year prior to the first academic year in which an undergraduate degree is conferred. The Office of Academic Affairs is responsible for monitoring degree conferrals and working with impacted units to develop appropriate plans for addressing these requirements in accordance with applicable policies, rules, and laws.

Responsibilities

Position or Office	Responsibilities
Candidate	Acknowledge acceptance of an endowed chair or professorship position in writing.
College dean	1. Approve the rehire of retired faculty. 2. Approve joint appointments of faculty. 3. Approve initial appointments of associated faculty at senior rank. 4. Approve qualifications of instructor of records when such faculty holds an academic degree that is not above the level at which they teach but possesses a minimum threshold of special competence, experience, and expertise that uniquely qualifies the individual in their discipline. 5. Conduct a formal review prior to submitting an individual for reappointment to an endowed position.
Human resources business partner	Approve the rehire of retired faculty.
Office of Academic Affairs (OAA)	1. Approve offer letter and MOUs involving joint appointment and all faculty transfers into a joint appointment. 2. Approve offer letters for appointments to endowed chairs or professorships. 3. Approve the rehire of retired faculty. 4. Approve the rehire of tenured-track faculty denied reappointment or tenure. 5. Approve initial appointments of associated faculty at senior rank. 6. Have final decision-making authority to determine whether the qualifications of a candidate whose highest degree is less than a master's degree meets the threshold of equivalent experience to be an instructor of record.



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Position or Office	Responsibilities
	7. Monitor undergraduate degree deferrals and work with impacted units as set forth in the policy.
Tenure initiating unit (TIU)	1. Determine if a joint appointment is the most appropriate means of accomplishing a shared goal. 2. Establish formal expectations for academic appointments. 3. Provide offer letters to candidates for signing prior to start date. 4. Reach agreement with a partnering TIU on the terms, requirements, workload of a joint appointment before filling the position. 5. Verify that received credentials are appropriate to the faculty member's position and teaching assignments.
TIU head	1. Approve the rehire of retired faculty. 2. Approve qualifications of instructor of records when such faculty holds an academic degree that is not above the level at which they teach but possesses a minimum threshold of special competence, experience, and expertise that uniquely qualifies the individual in their discipline.

Resources

Forms

Reemployment after Retirement, hr.osu.edu/benefits/retirement/reemployment

Request for Emeritus Status Form, Form 207, oaa.osu.edu/sites/default/files/documents/Form-207.pdf

Request to Rehire Retired Faculty/Staff Member Form, hr.osu.edu/wp-content/uploads/form-rehire-retired-request.pdf

Governance Documents

Advance Ohio Higher Education Act, ORC 3345.454, codes.ohio.gov/ohio-revised-code/section-3345.454

OAA Policies and Procedures Handbook, oaa.osu.edu/policies-and-procedures-handbook

Rules of the University Faculty, trustees.osu.edu/bylaws-and-rules/university-faculty-rules

University Policies, policies.osu.edu

Faculty Compensation, go.osu.edu/faculty-compensation-policy

Faculty Recruitment and Selection, go.osu.edu/faculty-recruitment-selection-policy

Furloughs, hr.osu.edu/wp-content/uploads/policy450.pdf

Paid Time Off, hr.osu.edu/policy/policy627.pdf

Reemployment of Faculty and Staff, hr.osu.edu/policy/policy425.pdf

Staff Employment, hr.osu.edu/policy/policy420.pdf

Additional Guidance

Faculty Rank Title Codes, bpb-us-w2.wpmucdn.com/u.osu.edu/dist/c/58333/files/2018/02/FacultyRankTitleCode-rjlaf3.pdf

Graduate School Handbook, gradsch.osu.edu/graduate-school-handbook-gsh

Higher Learning Commission Criteria for Accreditation and Assumed Practices, download.hlcommission.org/FacultyGuidelines_OPB.pdf

Contacts

Subject	Office	Telephone	E-mail/URL
Policy questions	Office of Academic Affairs	614-292-5881	oaa.osu.edu
Establishing an endowed chair or professorship Endowment approval schedule	Office of University Advancement	614-292-2970	advancement.osu.edu
Graduate faculty status	Graduate School	614-292-6031	gradsch.osu.edu
Rehiring retired faculty, benefits	HR Connection	614-247-myHR (6947)	HRConnection@osu.edu



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History

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3335-5-04 Procedures for complaints of failure to meet academic responsibilities, post-tenure review, and misconduct made against faculty members.

(A) This rule shall apply to all formal complaints of failure to meet academic responsibilities, post-tenure review, and misconduct against faculty members as defined in rule 3335-5-19(A) and (B). Complaints may be filed under this rule against any individual with a faculty appointment, including administrators who hold such appointments.

1. Complaints about the performance of administrators in their administrative capacity must be brought pursuant to applicable rules or policies for those administrative positions; all complaints against administrators who hold faculty appointments relating to the violation of applicable law, university policies or rules, or unit governance documents (other than those related to the performance of the administrator's duties) must be brought under this rule.

(B) Complaints shall proceed under the general procedures set forth in this rule and the specific procedures set forth in the following four subsections based on the nature of the allegations.

1. Complaints involving allegations of failure to meet academic responsibilities, complaints arising from the investigatory process set forth in the Campus Free Speech policy, and complaints arising from the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy shall proceed under rule 3335-5-04.1. A faculty member may be disciplined under this rule and may be terminated if the conduct constitutes serious failure to meet academic responsibilities for violations established under rule 3335-5-04.1(A) or a violation of the Campus Free Speech policy or the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy.
2. Complaints involving allegations of research misconduct shall proceed under rule 3335-5-04.2. A faculty member may be disciplined up to and including termination for violations established under this rule.
3. Complaints involving allegations of sexual misconduct, workplace violence, whistleblower retaliation, discrimination, harassment, and retaliation based on protected status shall proceed under rule 3335-5-04.3. A faculty member may be disciplined up to and including termination for violations established under this rule.
4. Complaints involving allegations of violations of applicable law, university policies or rules, or unit governance documents shall proceed under rule 3335-5-04.4, unless they fall under rules 3335-5-04.1, 3335-5-04.2 or 3335-5-04.3. A faculty member may be disciplined under this rule and may be terminated if the conduct constitutes grave misconduct or non-trivial financial fraud for violations established under rule 3335-5-04.4(A)(1)-(2).
5. Complaints arising out of the post-tenure review process set forth in section 3345.453 of the Revised Code and the Faculty Annual Review, Post-Tenure Review, and Reappointment policy shall proceed under rule 3335-5-04.5. A faculty member may be disciplined up to and including termination for violations established under this rule.

...

(K) The timelines set forth in this rule and in rules 3335-5-04.1 through 3335-5-04.4 are mandatory. However, the provost or designee may grant defined extensions of any time period

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on an as-needed basis upon written request. The timelines set forth in rule 3334-5-05 are mandatory, and the president shall hold sole authority to grant a single, two-month extension to complete the review process.

...

3335-5-04.1 Procedures for complaints of failure to meet academic responsibilities.

(A) This rule applies to complaints made against faculty members involving their failure to meet academic responsibilities as defined in rule 3335-5-01(C) as well as complaints arising from the investigatory process set forth in the Campus Free Speech policy and the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy. A faculty member may be disciplined for violations established under this rule, and may be disciplined up to and including termination for serious failure to meet academic responsibilities or violations of the Campus Free Speech policy or the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy. For the purposes of this rule “serious failure to meet academic responsibilities” is defined as conduct that reflects gross indifference or consistent failure to satisfactorily perform the academic responsibilities set forth in paragraph (C) of rule 3335-5-01 of the Administrative Code. If complaints against a faculty member are brought concurrently under both 3335-5-04.1 and 3335-5-04.4, those complaints may be consolidated into one proceeding, retaining the relevant evidentiary standard for each complaint.

...

3335-5-04.5 Procedures for post-tenure review complaints.

A) This rule applies to complaints made against tenured faculty members under the post-tenure review process set forth in section 3345.453 of the Revised Code and the Faculty Annual Review, Post-Tenure Review, and Reappointment policy. A tenured faculty member shall be required to undergo a post-tenure review if they: (1) receive a rating of “does not meet expectations” in the same area on their annual performance evaluation twice within any three-year period; (2) receive a rating of “does not meet expectations” in any area on their annual performance evaluation within two years following the conclusion of a previous post-tenure review; or (3) the faculty member’s department chair or dean or the provost determines that there is cause to find that the faculty member has a documented and sustained record of significant underperformance outside of the faculty member’s annual performance evaluation, provided that cause may not be based on an allowable expression of academic freedom as defined by the university or Ohio law. Post-tenure reviews arising from performance evaluations shall only be based on areas in which the faculty member spent at least five percent of their effort for the evaluation year. A tenured faculty member may be disciplined up to and including termination for violations established under this rule.

B) Preliminary proceedings.

- 1) Within thirty days after a tenured faculty member meets one of the conditions set forth in section (A) of this rule, the faculty member’s department chair shall submit a letter to the

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vice provost for faculty affairs explaining the concerns set forth in the evaluations or a separate statement outlining an alleged documented and sustained record of significant underperformance outside the evaluations, and providing copies of the faculty member's five most recent performance evaluations and any responses submitted by the faculty member for consideration as part of the post-tenure review as well as any other documentation that the department chair deems relevant. This letter shall serve as the complaint for the purposes of the post-tenure review.

- a) For the purposes of this rule, the term "department chair" shall include school directors as well as associate deans for colleges without departments. For regional campus faculty, the campus dean and director shall be responsible for filing the complaint in consultation with the TIU head.
- 2) The vice provost shall have fourteen days to review the complaint and ensure that it contains all required information to conduct the post-tenure review. Thereafter, the vice provost shall provide a copy of the complaint to the respondent and refer the complaint to the relevant college investigation and sanctioning committee, which shall officially begin the post-tenure review process.
- 3) Only allegations stated in the complaint shall be considered at the various stages of deliberation. However, additional facts relevant to the allegations set forth in the complaint may be presented throughout the process.

C) College investigation and sanctioning committee.

- 1) Each college shall appoint a standing college investigation and sanctioning committee, which shall fulfill the responsibilities set forth in this section and shall be comprised solely of tenured faculty. A college may include faculty members from other colleges on its committee. Should a college have more than one complaint, it has the authority to convene multiple panels of the committee as needed. Each member of the standing college investigation sanctioning committee must receive required training before conducting an investigation under this rule.
- 2) Upon receipt of a referral of a complaint from the vice provost, the committee shall be responsible for reviewing the faculty member's performance as documented in the annual reviews and any accompanying information, with a specific focus on those areas in which the faculty member received "does not meet expectations" ratings that triggered the post-tenure review, or on the information provided when the complaint alleges a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation. The committee shall meet with the department chair and the respondent and shall review any documentary evidence provided by these parties. The respondent shall be given copies of any documentary evidence provided to the committee as part of the investigation and be given an opportunity to respond to all such documentation. The committee shall have the authority to gather information relevant to the complaint, including by interviewing individuals other than the complainant and

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respondent as the committee sees fit or as recommended by the complainant or respondent. The committee shall strive to maintain confidentiality in the proceedings.

- 3) At the conclusion of the investigation, the committee shall prepare a preliminary report that identifies the proposed findings of fact regarding whether the faculty member's performance was substantiated as "does not meet expectations," or whether an allegation of a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation was substantiated. In making this determination, the committee must recognize that department chairs and deans have discretion to set performance expectations for their units and to evaluate performance according to those expectations, and that the committee may not substitute its judgment for the legitimate exercise of such discretion. However, the committee must still find that the alleged performance failures are supported by clear and convincing evidence to sustain a finding, and document its conclusions in the preliminary report. The committee shall provide that document to both the department chair or dean as applicable and respondent for review. Each party shall have seven days to respond and to identify any alleged errors or omissions in the findings.
- 4) Following review of any comments by the parties, the committee shall thereafter make any modifications to the report that it deems appropriate and issue a final report which shall include its proposed sanctions.
- 5) In evaluating sanctions, the committee shall consider the totality of the circumstances, including aggravating and mitigating factors.
 - a) Aggravating factors may include, but are not limited to:
 - (i) the significance and impact of the faculty member's failure to meet expectations;
 - (ii) the strength of the evidence presented;
 - (iii) whether there is a demonstrated pattern of failing to meet expectations;
 - (iv) the extent to which the respondent's conduct impacted students, staff, other faculty, their tenure-initiating unit's operations, and/or the university's reputation; and
 - (v) the respondent was offered feedback and resources to improve performance that were not utilized.
 - b) Mitigating factors may include, but are not limited to:
 - (i) the respondent's conduct did not have a significant negative impact on students, staff, other faculty, their tenure-initiating unit's operations, and/or the university's reputation;

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- (ii) the respondent's performance met or exceeded expectations in some areas of their evaluation, and/or the respondent has a consistent history of meeting or exceeding expectations in the areas in which they currently do not meet expectations;
 - (iii) Documented external factors beyond the respondent's control contributed to the failure to meet expectations; and
 - (iv) the respondent accepted responsibility for the failure to meet expectations.
 - 6) The committee shall have the authority to recommend sanctions as it sees fit as long as the sanctions are commensurate with the nature of the complaint and the committee's analysis of any aggravating and mitigating factors. Sanctions may be of a discrete or continuing nature, but sanctions of a continuing nature must specify the period of time in which they are applicable. Sanctions may include, but are not limited to the following, and may further include a combination of sanctions:
 - a) Verbal reprimand;
 - b) Written reprimand;
 - c) Mandatory training and professional development or other rehabilitation;
 - d) Reduction of salary base;
 - e) Reduction of twelve-month appointment to nine-month appointment;
 - f) Reduction of full-time equivalent (FTE) appointment;
 - g) Reduction of rank;
 - h) Revocation of tenure;
 - i) Termination of employment.
 - 7) The committee shall complete its investigation and submit its report to the respondent's dean within forty-five days of the delivery of the complaint to the committee. The committee may seek a single, fifteen-day extension from the provost if needed pursuant to rule 3335-5-04(K).
- D) Decision by the dean.
- 1) After reviewing the report and recommendation of the college investigation and sanctioning committee, the dean may:

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- a) Dismiss the complaint if the committee found that the complaint was not substantiated and the dean concurs with that finding;
 - (i) If the dean determines that the committee erred in recommending dismissal of the complaint, the dean may return the case to the committee to address the error. In the event that a case is returned to the committee, the dean must specify the error at issue, and the committee shall address that error in accordance with the requirements of this rule and resubmit its finding to the dean within fourteen days.
 - b) Impose the committee's proposed sanction;
 - c) Impose what would reasonably be interpreted as an equivalent or lesser sanction to the committee's sanction; or
 - d) Increase the committee's sanction.
- 2) The dean shall make a decision in seven days. The final report of the college investigation and sanctioning committee and the dean's decision shall be sent to the complainant and the respondent.
- a) Appeals:
 - (i) The dean's decision shall be final in all cases in which the sanction imposed is a verbal reprimand, a written reprimand, or mandatory counseling or training, but a respondent may place a response to this sanction in their primary personnel file.
 - (ii) If the dean imposes any other sanction except for revocation of tenure or termination of employment, the respondent shall have the right to appeal in writing to the provost.
 - (iii) If the dean imposes a sanction that revokes tenure or terminates employment, the matter shall be automatically appealed to the provost.
 - (iv) In all appeals, whether discretionary or automatic, the respondent may identify their position on the case in writing to the provost. All such submissions and all discretionary appeals must be filed within seven days after notice of the dean's decision was mailed.
- E) Review of appeals by the provost.
- 1) After reviewing the record of a case appealed by a respondent or referred by the dean, the provost may:
 - a) Affirm the dean's sanction;

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- b) Impose what would reasonably be interpreted as an equivalent or lesser sanction to the dean's sanction;
 - c) Increase the sanction; or
 - d) In the event that the provost determines that substantial new evidence exists (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding of misconduct) or there was conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent, the provost shall return the case back to a previous step of the process for further proceedings as appropriate. If the provost returns the case to the committee, the committee shall address the error or new evidence and resubmit its finding to the dean within fourteen days. If the provost returns the case to the dean, the dean shall address the error or new evidence and resubmit their decision to the provost within seven days.
- 2) The provost shall make a decision within seven days of receiving materials from the dean and respondent as applicable.
- 3) If the provost affirms the dean's decision to terminate employment, or imposes or upholds a sanction set forth in section (C)(6)(g) through (i) of this rule, the respondent may appeal to the faculty hearing committee. In all other cases, the provost's decision shall be final.
- 4) An appeal by the respondent must be in writing and must be filed with the faculty hearing committee within fourteen days after notice of the provost's decision was mailed. Appeals to the faculty hearing committee shall be limited to one or more of the following grounds:
- a) the sanction is disproportionate to the violations committed in view of the aggravating and mitigating factors;
 - b) substantial new evidence has been discovered (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding); or
 - c) there was a conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent.
- F) The faculty hearing committee.
- 1) Within three days of receipt of an appeal from a respondent, the faculty hearing committee established by rule 3335-5-48.10 shall convene a hearing panel to consider the appeal and to provide a recommendation to the president regarding the appropriate action. The respondent and the provost or designee may each make one peremptory challenge to the seating of one person on the hearing panel and one peremptory challenge

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to the selection of a presiding officer. Any peremptory challenges must be made within twenty-four hours of receipts of the panel and presiding officer names.

- 2) The parties to this hearing shall be the respondent and the provost, or designee.
 - 3) The hearing panel may restrict the attendance of persons at the proceedings. However, the respondent and the provost shall have the right to have one observer of their choosing present at all times.
 - 4) The provost, or designee, shall present the case to the hearing panel. In presenting the case, the provost may be advised and represented by the general counsel, or designee. The provost shall have the right to present witnesses and evidence and to examine witnesses and evidence presented by the respondent.
 - 5) Respondents shall have the right to represent themselves or to be represented by legal counsel or any other person of their choice. The respondent shall have the right to examine the witnesses and evidence presented against them in the hearing, to present witnesses and evidence on their own behalf, and to refuse to testify or be questioned in the proceedings without prejudice to their cause.
 - 6) The hearing panel shall receive testimony and other evidence as it deems relevant and material to the issues appealed, and may decline to receive evidence presented by the provost or the respondent that is not material and relevant to the appeal.
 - 7) An electronic recording shall be kept of all proceedings at a hearing panel. The recording shall be conveyed by the chair of the faculty hearing committee to the Office of Academic Affairs.
 - 8) At the conclusion of the proceedings, the hearing panel shall make written conclusions with respect to each substantive issue raised at the hearing:
 - a) If the respondent challenges the appropriateness of the sanction, the faculty hearing committee shall set forth what their recommended sanction is in accordance with the factors set forth in section (C)(5) of this rule.
 - b) If the respondent alleges conflict of interest, procedural error, or substantial new evidence, the faculty hearing committee shall set forth what their conclusions are and whether they believe that further proceedings are appropriate.
 - 9) The faculty hearing committee's report, together with a recording of the proceedings, shall be transmitted to the president, provost, and respondent within thirty days of the date that the final hearing panel is convened.
- G) The president.

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- 1) Upon receipt of the written recommendation and a record of the proceedings from a hearing panel, the president shall review the matter. The president may:
 - a) Impose any sanction less than termination of employment whether or not it accords with the recommendation of the hearing panel;
 - b) Recommend to the board of trustees termination of employment;
 - c) Remand the case to the hearing panel for reconsideration; or
 - d) In the event that the president determines that substantial new evidence exists (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding of misconduct) or there was conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent, the president shall return the case back to a previous step as appropriate.
 - 2) The president's decision on all sanctions less than termination of employment is final.
 - 3) Any decision of the president shall be communicated in writing to the hearing panel, the provost, and the respondent.
 - 4) The president shall make a decision within fourteen days.
- H) Board of trustees.
- 1) The board of trustees, in reviewing and deciding upon a case in which termination of employment has been recommended, has the ultimate authority to take that action necessary to promote the best interest of the university and to protect the rights of the individual. In such cases, the board shall have the discretion to decide whether the respondent has an opportunity to present to it arguments in writing, or in person, or both.

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3335-5-04 Procedures for complaints of ~~failure to meet academic responsibilities, post-tenure review, and~~ misconduct made against faculty members.

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1. Complaints about the performance of administrators in their administrative capacity must be brought pursuant to applicable rules or policies for those administrative positions; all complaints against administrators who hold faculty appointments relating to the violation of applicable law, university policies or rules, or unit governance documents (other than those related to the performance of the administrator's duties) must be brought under this rule.

(B) Complaints shall proceed under the general procedures set forth in this rule and the specific procedures set forth in the following four subsections based on the nature of the allegations.

1. Complaints involving allegations of failure to meet academic responsibilities, faculty obligations and complaints arising from the investigatory process set forth in the Campus Free Speech policy, and complaints arising from the DEI, Intellectual Diversity, and Controversial Beliefs Under the Ohio Higher Education Act policy shall proceed under rule 3335-5-04.1. A faculty member may be disciplined under this rule and may be terminated if the conduct constitutes serious failure to meet faculty obligations academic responsibilities for violations established under rule 3335-5-04.1(A) or a violation of the Campus Free Speech policy or the DEI, Intellectual Diversity, and Controversial Beliefs Under the Ohio Higher Education Act policy.
2. Complaints involving allegations of research misconduct shall proceed under rule 3335-5-04.2. A faculty member may be disciplined up to and including termination for violations established under this rule.
3. Complaints involving allegations of sexual misconduct, workplace violence, whistleblower retaliation, discrimination, harassment, and retaliation based on protected status shall proceed under rule 3335-5-04.3. A faculty member may be disciplined up to and including termination for violations established under this rule.
4. Complaints involving allegations of violations of applicable law, university policies or rules, or unit governance documents shall proceed under rule 3335-5-04.4, unless they fall under rules 3335-5-04.1, 3335-5-04.2 or 3335-5-04.3. A faculty member may be disciplined under this rule; and may be terminated if the conduct constitutes grave misconduct or non-trivial financial fraud for violations established under rule 3335-5-04.4(A)(1)–(2).
5. Complaints arising out of the post-tenure review process set forth in section 3345.453 of the Revised Code and the Faculty Annual Review, Post-Tenure Review, and Reappointment policy shall proceed under rule 3335-5-04.5. -A faculty member may be disciplined up to and including termination for violations established under this rule.

...

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(K) The timelines set forth in this rule and in rules 3335-5-04.1 through 3335-5-04.4 are mandatory. However, the provost or designee may grant defined extensions of any time period on an as-needed basis upon written request. The timelines set for in rule 3334-5-05 are mandatory except in post-tenure review cases arising pursuant to section 3345.453 of the Revised Code, and for which the president shall hold sole authority to grant a single, two-month extension to complete the review process.

...

3335-5-04.1 Procedures for complaints of failure to meet academic responsibilities.

(A) This rule applies to complaints made against faculty members involving their failure to meet academic responsibilities as defined in rule 3335-5-01(C) as well as complaints arising from the investigatory process set forth in the Campus Free Speech policy and the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy. A faculty member may be disciplined for violations established under this rule, and may be disciplined up to and including termination for serious failure to meet ~~faculty obligations~~ academic responsibilities or violations of the Campus Free Speech policy or the DEI, Intellectual Diversity, and Controversial Beliefs Under the Advance Ohio Higher Education Act policy. For the purposes of this rule “serious failure to meet ~~faculty obligations~~ academic responsibilities” is defined as conduct that reflects gross indifference or consistent failure to satisfactorily perform the ~~faculty obligations~~ academic responsibilities set forth in paragraph (C) of rule 3335-5-01 of the Administrative Code. If complaints against a faculty member are brought concurrently under both 3335-5-04.1 and 3335-5-04.4, those complaints may be consolidated into one proceeding, retaining the relevant evidentiary standard for each complaint.

...

3335-5-04.5 Procedures for post-tenure review complaints.

(A) This rule applies to complaints made against tenured faculty members under the post-tenure review process set forth in section 3345.453 of the Revised Code and the Faculty Annual Review, Post-Tenure Review, and Reappointment policy. A tenured faculty member shall be required to undergo a post-tenure review if they: (1) receive a rating of “does not meet expectations” in the same area on their annual performance evaluation twice within any three-year period; (2) receive a rating of “does not meet expectations” in any area on their annual performance evaluation within two years following the conclusion of a previous post-tenure review; or (3) the faculty member’s department chair or dean or the provost determines that there is cause to find that the faculty member has a documented and sustained record of significant underperformance outside of the faculty member’s annual performance evaluation, provided that cause may not be based on an allowable expression of academic freedom as defined by the university or Ohio law. Post-tenure reviews arising from performance evaluations shall only be based on areas in which the faculty member spent at least five percent of their effort for the evaluation year. A tenured faculty member may be disciplined up to and including termination for violations established under this rule.

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(B) Preliminary proceedings.

1. Within 30 days after a tenured faculty member meets one of the conditions set forth in section (A) of this rule, the faculty member's department chair shall submit a letter to the vice provost for faculty affairs explaining the concerns set forth in the evaluations or a separate statement outlining an alleged documented and sustained record of significant underperformance outside the evaluations, and providing copies of the faculty member's five most recent performance evaluations and any responses submitted by the faculty member for consideration as part of the post-tenure review as well as any other documentation that the department chair deems relevant. This letter shall serve as the complaint for the purposes of the post-tenure review.
 - a. For the purposes of this rule, the term "department chair" shall include school directors as well as associate deans for colleges without departments. For regional campus faculty, the campus dean and director shall be responsible for filing the complaint in consultation with the TIU head.
2. The vice provost shall have fourteen days to review the complaint and ensure that it contains all required information to conduct the post-tenure review. Thereafter, the vice provost shall provide a copy of the complaint to the respondent and refer the complaint to the relevant college investigation and sanctioning committee, which shall officially begin the post-tenure review process.
3. Only allegations stated in the complaint shall be considered at the various stages of deliberation. However, additional facts relevant to the allegations set forth in the complaint may be presented throughout the process.

(C) College investigation and sanctioning committee.

1. Each college shall appoint a standing college investigation and sanctioning committee, which shall fulfill the responsibilities set forth in this section and shall be comprised solely of tenured faculty. A college may include faculty members from other colleges on its committee. Should a college have more than one complaint, it has the authority to convene multiple panels of the committee as needed. Each member of the standing college investigation sanctioning committee must receive required training before conducting an investigation under this rule.
2. Upon receipt of a referral of a complaint from the vice provost, the committee shall be responsible for reviewing the faculty member's performance as documented in the annual reviews and any accompanying information, with a specific focus on those areas in which the faculty member received "does not meet expectations" ratings that triggered the post-tenure review, or on the information provided when the complaint alleges a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation. The committee shall meet with the department chair and the respondent and shall review any documentary evidence provided by these parties. The respondent shall be given copies of any documentary evidence provided to the committee

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as part of the investigation and be given an opportunity to respond to all such documentation. The committee shall have the authority to gather information relevant to the complaint, including by interviewing individuals other than the complainant and respondent as the committee sees fit or as recommended by the complainant or respondent. The committee shall strive to maintain confidentiality in the proceedings.

3. At the conclusion of the investigation, the committee shall prepare a preliminary report that identifies the proposed findings of fact regarding whether the faculty member's performance was substantiated as "does not meet expectations," or whether an allegation of a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation was substantiated. In making this determination, the committee must recognize that department chairs and deans have discretion to set performance expectations for their units and to evaluate performance according to those expectations, and that the committee may not substitute its judgment for the legitimate exercise of such discretion. However, the committee must still find that the alleged performance failures are supported by clear and convincing evidence to sustain a finding, and document its conclusions in the preliminary report. The committee shall provide that document to both the department chair or dean as applicable and respondent for review. Each party shall have seven days to respond and to identify any alleged errors or omissions in the findings.
4. Following review of any comments by the parties, the committee shall thereafter make any modifications to the report that it deems appropriate and issue a final report which shall include its proposed sanctions.
5. In evaluating sanctions, the committee shall consider the totality of the circumstances, including aggravating and mitigating factors.
 - a. Aggravating factors may include, but are not limited to:
 - i. The significance and impact of the faculty member's failure to meet expectations;
 - ii. The strength of the evidence presented;
 - iii. Whether there is a demonstrated pattern of failing to meet expectations;
 - iv. The extent to which the respondent's conduct impacted students, staff, other faculty, their tenure-initiating unit's operations, and/or the university's reputation; and
 - v. The respondent was offered feedback and resources to improve performance that were not utilized.
 - b. Mitigating factors may include, but are not limited to:

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- i. The respondent's conduct did not have a significant negative impact on students, staff, other faculty, their tenure-initiating unit's operations, and/or the university's reputation;
 - ii. The respondent's performance met or exceeded expectations in some areas of their evaluation, and/or the respondent has a consistent history of meeting or exceeding expectations in the areas in which they currently do not meet expectations;
 - iii. Documented external factors beyond the respondent's control contributed to the failure to meet expectations; and
 - iv. The respondent accepted responsibility for the failure to meet expectations.
6. The committee shall have the authority to recommend sanctions as it sees fit as long as the sanctions are commensurate with the nature of the complaint and the committee's analysis of any aggravating and mitigating factors. Sanctions may be of a discrete or continuing nature, but sanctions of a continuing nature must specify the period of time in which they are applicable. Sanctions may include, but are not limited to the following, and may further include a combination of sanctions:
 - a. Verbal reprimand;
 - b. Written reprimand;
 - c. Mandatory training and professional development or other rehabilitation;
 - d. Reduction of salary base;
 - e. Reduction of twelve-month appointment to nine-month appointment;
 - f. Reduction of full-time equivalent (FTE) appointment;
 - g. Reduction of rank;
 - h. Revocation of tenure;
 - i. Termination of employment.
7. The committee shall complete its investigation and submit its report to the respondent's dean within forty-five days of the delivery of the complaint to the committee. The committee may seek a single, 15-day extension from the provost if needed pursuant to rule 3335-5-04(K).

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(D) Decision by the dean.

1. After reviewing the report and recommendation of the college investigation and sanctioning committee, the dean may:
 - a. Dismiss the complaint if the committee found that the complaint was not substantiated and the dean concurs with that finding:
 - i. If the dean determines that the committee erred in recommending dismissal of the complaint, the dean may return the case to the committee to address the error. In the event that a case is returned to the committee, the dean must specify the error at issue, and the committee shall address that error in accordance with the requirements of this rule and resubmit its finding to the dean within fourteen days.
 - b. Impose the committee's proposed sanction;
 - c. Impose what would reasonably be interpreted as an equivalent or lesser sanction to the committee's sanction; or
 - d. Increase the committee's sanction.
2. The dean shall make a decision in seven days. The final report of the college investigation and sanctioning committee and the dean's decision shall be sent to the complainant and the respondent.
 - a. Appeals:
 - i. The dean's decision shall be final in all cases in which the sanction imposed is a verbal reprimand, a written reprimand, or mandatory counseling or training, but a respondent may place a response to this sanction in their primary personnel file.
 - ii. If the dean imposes any other sanction except for revocation of tenure or termination of employment, the respondent shall have the right to appeal in writing to the provost.
 - iii. If the dean imposes a sanction that revokes tenure or terminates employment, the matter shall be automatically appealed to the provost.
 - iv. In all appeals, whether discretionary or automatic, the respondent may identify their position on the case in writing to the provost. All such submissions and all discretionary appeals must be filed within seven days after notice of the dean's decision was mailed.

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(E) Review of appeals by the provost.

1. After reviewing the record of a case appealed by a respondent or referred by the dean, the provost may:
 - a. Affirm the dean's sanction;
 - b. Impose what would reasonably be interpreted as an equivalent or lesser sanction to the dean's sanction;
 - c. Increase the sanction; or
 - d. In the event that the provost determines that substantial new evidence exists (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding of misconduct) or there was conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent, the provost shall return the case back to a previous step of the process for further proceedings as appropriate. If the provost returns the case to the committee, the committee shall address the error or new evidence and resubmit its finding to the dean within fourteen days. If the provost returns the case to the dean, the dean shall address the error or new evidence and resubmit their decision to the provost within seven days.
2. The provost shall make a decision within seven days of receiving materials from the dean and respondent as applicable.
3. If the provost affirms the dean's decision to terminate employment, or imposes or upholds a sanction set forth in section (C)(6)(g) through (i) of this rule, the respondent may appeal to the faculty hearing committee. In all other cases, the provost's decision shall be final.
4. An appeal by the respondent must be in writing and must be filed with the faculty hearing committee within fourteen days after notice of the provost's decision was mailed. Appeals to the faculty hearing committee shall be limited to one or more of the following grounds:
 - a. The sanction is disproportionate to the violations committed in view of the aggravating and mitigating factors;
 - b. Substantial new evidence has been discovered (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding); or
 - c. There was a conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent.

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(F) The faculty hearing committee.

1. Within three days of receipt of an appeal from a respondent, the faculty hearing committee established by rule 3335-5-48.10 shall convene a hearing panel to consider the appeal and to provide a recommendation to the president regarding the appropriate action. The respondent and the provost or designee may each make one peremptory challenge to the seating of one person on the hearing panel and one peremptory challenge to the selection of a presiding officer. Any peremptory challenges must be made within 24 hours of receipts of the panel and presiding officer names.
2. The parties to this hearing shall be the respondent and the provost, or designee.
3. The hearing panel may restrict the attendance of persons at the proceedings. However, the respondent and the provost shall have the right to have one observer of their choosing present at all times.
4. The provost, or designee, shall present the case to the hearing panel. In presenting the case, the provost may be advised and represented by the general counsel, or designee. The provost shall have the right to present witnesses and evidence and to examine witnesses and evidence presented by the respondent.
5. Respondents shall have the right to represent themselves or to be represented by legal counsel or any other person of their choice. The respondent shall have the right to examine the witnesses and evidence presented against them in the hearing, to present witnesses and evidence on their own behalf, and to refuse to testify or be questioned in the proceedings without prejudice to their cause.
6. The hearing panel shall receive testimony and other evidence as it deems relevant and material to the issues appealed, and may decline to receive evidence presented by the provost or the respondent that is not material and relevant to the appeal.
7. An electronic recording shall be kept of all proceedings at a hearing panel. The recording shall be conveyed by the chair of the faculty hearing committee to the Office of Academic Affairs.
8. At the conclusion of the proceedings, the hearing panel shall make written conclusions with respect to each substantive issue raised at the hearing:
 - a. If the respondent challenges the appropriateness of the sanction, the faculty hearing committee shall set forth what their recommended sanction is in accordance with the factors set forth in section (C)(5) of this rule.
 - b. If the respondent alleges conflict of interest, procedural error, or substantial new evidence, the faculty hearing committee shall set forth what their conclusions are and whether they believe that further proceedings are appropriate.

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9. The faculty hearing committee's report, together with a recording of the proceedings, shall be transmitted to the president, provost, and respondent within thirty days of the date that the final hearing panel is convened.

(G) The president.

1. Upon receipt of the written recommendation and a record of the proceedings from a hearing panel, the president shall review the matter. The president may:
 - a. Impose any sanction less than termination of employment whether or not it accords with the recommendation of the hearing panel;
 - b. Recommend to the board of trustees termination of employment;
 - c. Remand the case to the hearing panel for reconsideration; or
 - d. In the event that the president determines that substantial new evidence exists (evidence that was not available at the time of the initial investigation and that may reasonably have affected the finding of misconduct) or there was conflict of interest or procedural error in the previous steps of the process that resulted in material harm or prejudice to the respondent, the president shall return the case back to a previous step as appropriate.
2. The president's decision on all sanctions less than termination of employment is final.
3. Any decision of the president shall be communicated in writing to the hearing panel, the provost, and the respondent.
4. The president shall make a decision within fourteen days.

(H) Board of trustees.

1. The board of trustees, in reviewing and deciding upon a case in which termination of employment has been recommended, has the ultimate authority to take that action necessary to promote the best interest of the university and to protect the rights of the individual. In such cases, the board shall have the discretion to decide whether the respondent has an opportunity to present to it arguments in writing, or in person, or both.



AMERICAN CIVIC LITERACY PLAN
REQUEST FOR APPROVAL

State institutions of higher education shall develop a plan, approved by the institution’s board of trustees, to offer a course in American civic literacy pursuant to [ORC Section 3345.382](#). Submit this form, along with the board of trustees’ resolution, to SB1@highered.ohio.gov.

The course shall comply with the criteria, policies, and procedures established under [ORC Section 3333.16](#). For approval of an American civic literacy course, complete the American Civic Literacy Course - Request for Approval Form.

OVERVIEW

Name of State Institution of Higher Education:

The Ohio State University

Date of Submission:

Primary Institutional Contact for This Request:

Name	W. Randy Smith, Ph.D.
Title	Vice Provost for Academic Programs
Phone number	614-292-5881
E-mail	smith.70@osu.edu

Date the institution’s Board of Trustees adopted the plan (attach BOT Resolution as an appendix):

SECTION 1: STUDENT SUCCESS

1.1 Provide a plan for students that do not pass the cumulative final examination at the conclusion of the course that assesses student proficiency of the documents listed in division (B) of [ORC Section 3345.382](#).

All undergraduate students must pass the civics literacy (CL) course to graduate. The course should be taken no later than the next-to-last semester to address any potential graduation issue.

The university anticipates offering multiple courses that will include the statutorily required elements. The approved course(s) would include two distinct, but related, components: overall approved course content with expected learning outcomes, **and** clear, distinct attention to the seven specified documents.

Students who are enrolled in the course will need to pass a cumulative test for the course, which will require students to demonstrate proficiency on the documents as well as additional course requirements. That examination will be specified on the syllabus. As occurs currently in all courses, if the student fails required elements of the course (including but not limited to the aforementioned proficiency examination), they need to retake the failed course or complete another course that also meets the statutory requirements.

The Office of Undergraduate Education and the Office of the University registrar will work on special transfer or returning student cases individually.

SECTION 2: CURRICULUM

2.1 Describe where the course fits into the curriculum for the program (i.e., general education course).

Multiple courses will fulfill this requirement, and will include existing or new courses, drawn primarily from two “Foundations” level areas of our new General Education (GEN) program: “Historical and Cultural Studies” and “Social and Sciences”. Goals and learning outcomes are specified for each. They align with the statewide general education requirements of “Arts and Humanities” and “Social Sciences”.

Established courses designated for civics literacy will have already been approved at the State level for statewide transfer and will be submitted as such to the Ohio Department of Higher Education (ODHE). Because any **new** course proposed for civics literacy designation will be seeking state certification and inclusion in the general education program, it will need to follow established curricular review processes for those programs, specifically review by the department/school, college, Arts and Sciences Curriculum Committee (for review of concurrence relative to existing general education courses), Office of Academic Affairs, University Registrar, and Ohio Department of Higher Education.

All courses fulfilling the civics literacy (CL) requirement will have a distinct name and number with a CL designation (History XXXX Title: CL).

Initially the courses will come from the College of Arts and Sciences and the Chase Center. The John Glenn College of Public Affairs, the Moritz College of Law and the College of Education and Human Ecology may submit courses for approval.

SECTION 3: APPLICABILITY

3.1 Describe how the institution will ensure students who graduate with a bachelor’s degree in the spring semester, or equivalent quarter, of the 2029-2030 academic year and after will meet the requirements to complete the course.

The Office of the University Registrar will build into our degree audit system, appropriate requirements to ensure that students have completed a civil literacy course. That will be accomplished in some combination of:

- degree requirements based on the specific Ohio State civics literacy course and/or
- the satisfactory completion of the Ohio Transfer 36 module, or
- transfer of a specifically approved civics literacy course from another Ohio post-secondary institution.

This process will be monitored annually by the Office of Academic Affairs working through the Council on Academic Affairs' University Level Advisory Committee on the General Education.

Verification and Signature

The Ohio State University verifies that the information provided is truthful and accurate.

Walter "Ted" Carter Jr.
President, The Ohio State University

APPENDIX XVII
FY 2026-2030 Final Capital Investment Plan
August 20, 2025

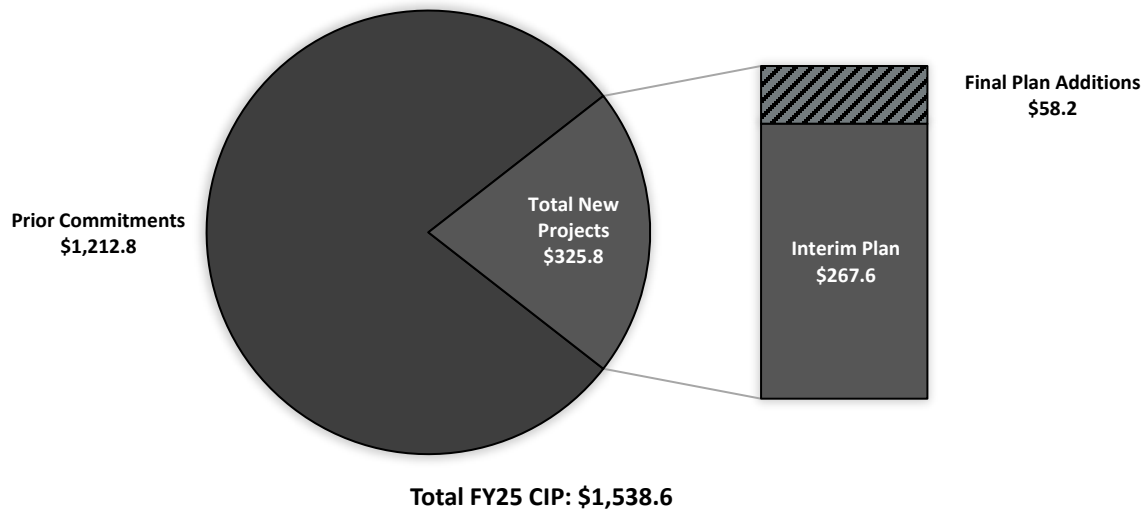


Table 1 - Prior Commitments - Remaining Spend (As of April 14 Actuals)

\$ in Millions

Line	Capital Priority	Projected Capital Expenditures					
		FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	Total
1	ABA - Schottenstein Center - Main Roof Replacement	\$ 2.2	\$ 5.5	\$ 0.5	\$ -	\$ -	\$ 8.2
2	ABA - Schottenstein Center - Scoreboard Replacement	\$ 1.0	\$ 2.8	\$ 1.2	\$ -	\$ -	\$ 5.0
3	A&S - Biological Sciences Building Upgrades	\$ -	\$ 1.8	\$ 5.3	\$ 4.7	\$ 2.3	\$ 14.0
4	A&S - Department of Economics Relocation	\$ 4.5	\$ 4.9	\$ -	\$ -	\$ -	\$ 9.4
5	COE - BMEC Phase 2	\$ 32.1	\$ 9.4	\$ 1.4	\$ -	\$ -	\$ 42.9
6	COE - Bus Testing Facility	\$ 2.7	\$ 12.6	\$ 0.7	\$ -	\$ -	\$ 16.0
7	EHE - Campbell Hall Renovation	\$ 16.1	\$ 20.5	\$ 6.3	\$ -	\$ -	\$ 42.9
8	ERIK - Battery Cell Research and Demonstration Center	\$ 6.0	\$ 1.3	\$ -	\$ -	\$ -	\$ 7.4
9	ERIK - Microelectronic Commons	\$ 2.4	\$ -	\$ -	\$ -	\$ -	\$ 2.4
10	FAES - Waterman Infrastructure Project	\$ -	\$ 4.1	\$ 2.8	\$ -	\$ -	\$ 7.0
11	FAES - Waterman Multispecies Animal Learning Center	\$ 21.9	\$ 18.3	\$ -	\$ -	\$ -	\$ 40.2
12	VET - PET/CT Space Renovation	\$ 0.3	\$ 0.8	\$ 1.4	\$ -	\$ -	\$ 2.5
13	WMC - Inpatient Hospital	\$ 201.3	\$ 88.6	\$ -	\$ -	\$ -	\$ 289.9
14	WMC - James Cellular Therapy Lab	\$ 1.3	\$ 3.8	\$ 1.7	\$ -	\$ -	\$ 6.8
15	WMC - James Outpatient Care	\$ 7.5	\$ -	\$ 12.7	\$ -	\$ -	\$ 20.2
16	WMC - James Outpatient Care Buildout	\$ 1.0	\$ 3.8	\$ 1.7	\$ -	\$ -	\$ 6.5
17	WMC - Magnetic Resonance Linear Accelerator & Housing	\$ 0.9	\$ 3.2	\$ 3.6	\$ 2.3	\$ 0.3	\$ 10.3
18	WMC - OSU East 4th Floor OR Renovation	\$ 0.8	\$ 7.0	\$ 10.6	\$ -	\$ -	\$ 18.4
19	WMC - Outpatient Care Powell	\$ 58.3	\$ 46.3	\$ -	\$ -	\$ -	\$ 104.6
20	Roll Up Other Projects	\$ 196.8	\$ 179.2	\$ 160.1	\$ 13.9	\$ 8.5	\$ 558.4
21	Subtotal	\$ 557.1	\$ 413.9	\$ 209.8	\$ 20.9	\$ 11.1	\$ 1,212.8

FY 2026-2030 Final Capital Investment Plan

August 13, 2025

Table 2 - New Projects Beginning in FY2026

\$ in Millions

Line	Capital Priority	Projected Capital Expenditures					Total
		FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	
1	Anticipated Spend for CIP Changes	\$ 10.0	\$ -	\$ -	\$ -	\$ -	\$ 10.0
2	Roll up of Small Infrastructure RDM Projects	\$ 2.7	\$ 10.4	\$ 10.8	\$ 5.4	\$ -	\$ 29.3
3	Small Programmatic Cash Ready	\$ 3.6	\$ 13.8	\$ 11.6	\$ 2.3	\$ -	\$ 26.8
4	WMC/COM - Roll up of Multiple Cash Ready	\$ 173.6	\$ 7.9	\$ 5.3	\$ -	\$ -	\$ 186.9
5	New Major Projects						
6	ATHL - 1922 Club Renovation (Construction)	\$ 1.8	\$ 5.4	\$ 5.4	\$ 1.9	\$ -	\$ 14.5
7	ATHL - Technology Modernization (Construction)	\$ 2.7	\$ 8.0	\$ 7.9	\$ 2.8	\$ -	\$ 21.3
8	DENT - Dental Simulation Space Modernization	\$ 0.2	\$ 1.5	\$ 3.7	\$ 3.4	\$ 1.8	\$ 10.6
9	NURS - Newton Hall Space Upgrades	\$ 0.2	\$ 1.4	\$ 2.1	\$ 0.4	\$ -	\$ 4.0
10	NURS - Newton Hall AHU Replacements	\$ 0.3	\$ 2.7	\$ 4.2	\$ 0.8	\$ -	\$ 8.0
11	SL - North Towers Upgrades - Jones, Taylor, Drackett (Design)	\$ 2.2	\$ 6.7	\$ 1.1	\$ -	\$ -	\$ 10.0
12	Grand Total	\$ 197.3	\$ 57.8	\$ 52.0	\$ 16.9	\$ 1.8	\$ 325.8

Table 3 - Funding for New Projects by Type and Funding Source

\$ in Millions

Line	Unit	Projected Capital Expenditures							% By Unit	Def. Maint. Addressed	Def. Maint. %
		Local	WMC	State	Grant	Gift- Pledged	University Debt	Grand Total			
1	Academic Support	\$ 29.9	\$ -	\$ 4.6	\$ -	\$ -	\$ 2.9	\$ 37.3	11.4%	\$ 12.9	34.5%
2	Athletics	\$ 9.5	\$ -	\$ -	\$ -	\$ 1.0	\$ 35.5	\$ 46.0	14.1%	\$ 20.9	45.5%
3	Infrastructure	\$ 32.8	\$ -	\$ -	\$ 0.5	\$ -	\$ -	\$ 33.2	10.2%	\$ 20.0	60.3%
4	Regional Campuses	\$ -	\$ -	\$ -	\$ 0.4	\$ -	\$ -	\$ 0.4	0.1%	\$ -	0.0%
5	Student Life	\$ 12.0	\$ -	\$ -	\$ -	\$ -	\$ 10.0	\$ 22.0	6.8%	\$ 19.8	90.0%
6	WMC/COM	\$ 15.9	\$ 171.0	\$ -	\$ -	\$ -	\$ -	\$ 186.9	57.4%	\$ 45.9	24.6%
7	Grand Total	\$ 100.0	\$ 171.0	\$ 4.6	\$ 0.9	\$ 1.0	\$ 48.4	\$ 325.8	100.0%	\$ 119.5	36.7%

APPENDIX XVIII

Project Data Sheet for Board of Trustees Approval

Blankenship Hall Upgrades

OSU-260014 (REQ ID# DPS260001)

Project Location: Blankenship Hall (0360)

- **Approval Requested and Amount**

Professional services	\$1.2M
Total requested	\$1.2M
- **Project Budget**

Professional services	\$1.2M
Construction w/contingency	TBD
Total project budget	TBD
- **Project Funding**
University funds
- **Project Schedule**

BoT professional services approval	08/25
Design	9/25 – 06/26
BoT construction approval	05/26
Construction	06/26 – 09/27
Facility opening	10/27
- **Project Delivery Method**
Construction Manager at Risk
- **Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- **Project Scope**
 - This project will modernize and reconfigure Blankenship Hall to support the Department of Public Safety while updating building infrastructure to address deferred maintenance.
 - Key improvements include a state-of-the-art command center, an expanded, media-ready press briefing room, a mat training room, and enhanced locker facilities to support officer training.
 - The renovation will also incorporate updated technology to establish a real-time crime center and public safety hub.
 - An initial phase of the project will merge a previously planned renovation of the building's sallyport.
 - Total project cost will be validated during design.
- **Approval Requested**
 - Approval is requested to enter into professional services contracts.



-
- **project team**
University project manager: Munger, Steve
AE/design architect: TBD
CM at Risk or Design TBD

Project Data Sheet for Board of Trustees Approval

Brain and Spine Hospital – Lower-Level Renovation

OSU-230598 (REQ ID# Jam230040)

Project Location: Brain and Spine Hospital (0372)

- Approval Requested and Amount**

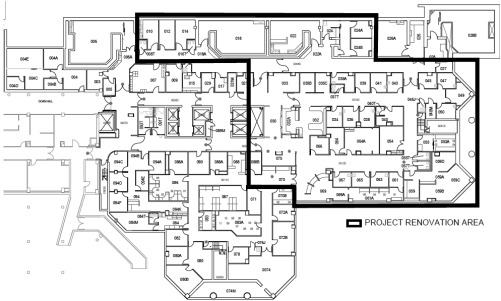
Professional services	\$0.3M
Total requested	\$0.3M
- Project Budget**

Professional services	TBD
Construction w/contingency	TBD
Total project budget	TBD
- Project Funding**

Auxiliary funds	
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- Project Schedule**

BoT professional services approval	08/25
Design	TBD
BoT construction approval	TBD
Construction	TBD
Facility opening	TBD
- Project Delivery Method**

Construction Manager at Risk	
------------------------------	--
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - The project will assess ways to optimize the ground floor of the Brain and Spine Hospital to support nuclear pharmacy, James diagnostic/treatment spaces and imaging services.
 - This project includes infrastructure and support space improvements for new LINAC and SPECT-CT equipment installations.
 - Total project cost will be validated during design.
- Approval Requested**
 - Approval is requested to enter into professional services contracts.



- project team**

University project manager: Brown, Vanessa
AE/design architect: BHDP
CM at Risk or Design Builder: Messer Construction

Project Data Sheet for Board of Trustees Approval

Doan Hall - PET/CT Replacement

OSU-250112 (REQ ID# JAM250012)

Project Location: Doan Hall (0089)

- Approval Requested and Amount**

Professional services	\$0.4M
Total requested	\$0.4M

- Project Budget**

Professional services	\$0.4M
Construction w/contingency	TBD
Total project budget	TBD

- Project Funding**

Auxiliary funds	
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- Project Schedule**

BoT professional services approval	08/25
Design	09/25 – 05/26
BoT construction approval	02/26
Construction	06/26 – 03/27
Facility opening	05/27

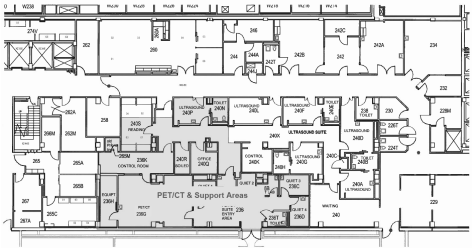
- Project Delivery Method**

Construction Manager at Risk	
------------------------------	--

- Planning Framework**
 - This project is included in the FY26 Capital Plan.

- Project Scope**
 - This project will support the installation of a new PET/CT machine in the Nuclear Medicine Department in Doan Hall.
 - Renovations to existing space will provide expanded support areas to accommodate the higher capacity and operational needs of the new equipment.
 - Total project budget and construction schedule to be validated during design.

- Approval Requested**
 - Approval is requested to enter into professional services contracts.



- project team**

University project manager:	Dollery, Mitchell
AE/design architect:	TBD
CM at Risk or Design Builder:	TBD

Project Data Sheet for Board of Trustees Approval

Outpatient Care East – Clinic Renovations & Relocations

OSU-255228 (REQ ID# WMC240003)

Project Location: Outpatient Care East (0837)

- Approval Requested and Amount**

Professional services	\$1.1M
Total requested	\$1.1M
- Project Budget**

Professional services	\$1.1M
Construction w/contingency	TBD
Total project budget	TBD
- Project Funding**

Auxiliary funds
- Project Schedule**

BoT professional services approval	08/25
Design	09/25 – 08/26
BoT construction approval	TBD
Construction	TBD
Facility opening	TBD



- Project Delivery Method**

Construction Manager at Risk
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - The project expands, renovates, and relocates healthcare services at Outpatient Care East, encompassing primary care, new optometry services, advanced urgent care, and non-oncology infusion spaces.
 - Total project cost will be validated during design.
- Approval Requested**
 - Approval is requested to enter into professional services contracts.

-
- project team**

University project manager: Radabaugh, Alexandra
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

East Hospital - Chiller and Cooling Tower Replacement

OSU-255136 (REQ ID# WMC240003)

Project Location: East Hospital - Tower (0397)

- Approval Requested and Amount**

Professional services	\$1.2M
Construction w/contingency	\$5.8M
Total requested	\$7.0M
- Project Budget**

Professional services	\$1.2M
Construction w/contingency	\$5.8M
Total project budget	\$7.0M
- Project Funding**

Auxiliary funds
- Project Schedule**

BoT professional services approval	08/25
BoT construction approval	08/25
Design	08/25 – 03/26
Construction	03/26 – 05/27
Facility opening	05/27
- Project Delivery Method**

Construction Manager at Risk
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - To address aging infrastructure, this project will replace the two main chillers, pumps and associated infrastructure, along with the cooling tower located on the west side of the facility.
 - The units that are being replaced are part of the redundant infrastructure serving the hospital, replacements will be staged with cooling unit replacement to occur during off-peak season.
- Approval Requested**
 - Approval is requested to enter into professional services and construction contracts.



- project team**

University project manager: Hyde, Carrie
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

Herrick Drive Rebuild

OSU-230116 (REQ ID# FOD232017)

Project Location: **Site-see project information

- Approval Requested and Amount**

Professional services	\$0.6M
Construction w/contingency	\$3.4M
Total requested	\$4.0M
- Project Budget**

Professional services	\$0.6M
Construction w/contingency	\$3.4M
Total project budget	\$4.0M
- Project Funding**

University debt
- Project Schedule**

Design	08/23 – 11/25
BoT professional services approval	08/25
BoT construction approval	08/25
Construction	03/26 – 12/26
Opening	12/26
- Project Delivery Method**

General Contracting
- Planning Framework**
 - This project is included in the FY23 and FY24 Capital Investment Plans.
- Project Scope**
 - This project will reconstruct John Herrick Drive between Woody Hayes Drive and Olentangy River Road to address the poor road conditions. The existing four-lane configuration will transition to a three-lane layout, including a center turn lane and a new multi-use path to enhance safety and connectivity.
 - Initial design funding was allocated in FY23 to define scope and estimate total project costs, which were anticipated to be under the \$4.0M threshold, with construction targeted for the summer of 2025. The total cost now requires board of trustee approval, and the project schedule has been modified to align with the completion of the CHP project.
- Approval Requested**
 - Approval is requested to enter into professional services and construction contracts.



- project team**

University project manager: Kitchen, Donovan
AE/design architect: American Structurepoint
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

1922 Club

OSU-230836 (REQ ID# ABA250075)

Project Location: Ohio Stadium (0082)

- Approval Requested and Amount**

Professional services	\$0.2M
Construction w/contingency	\$14.3M
Total requested	\$14.5M
- Project Budget**

Professional services	\$1.7M
Construction w/contingency	\$14.3M
Total project budget	\$16.0M
- Project Funding**

University debt, Auxiliary funds
- Project Schedule**

BoT professional services approval	11/24
Design	01/25 – 09/25
BoT prof. services approval (increase)	08/25
BoT construction approval	08/25
Construction	10/25 – 07/26
Facility opening	08/26



- Project Delivery Method**

Construction Manager at Risk
- Planning Framework**
 - This project is included in the FY25 and FY26 Capital Investment Plans.
- Project Scope**
 - This project will renovate vacant space on the east side of Ohio Stadium into premium club and event space.
 - The updated space will feature a new kitchen, catering space, full-service bar, dining room, and private event rooms to support and enhance the stadium's hospitality offerings.
- Approval Requested**
 - Approval is requested to increase professional services contracts and enter into construction contracts.

-
- project team**

University project manager: Munger, Steve
AE/design architect: Osborn / OSPO RTS / HNTB
CM at Risk or Design Builder: Pepper Construction

Project Data Sheet for Board of Trustees Approval

Polaris MEP updates

OSU-255690 (REQ ID# WMC240003)

Project Location: Polaris Pkwy, 2001 (0836)

- Approval Requested and Amount**

Professional services	\$0.8M
Construction w/contingency	\$6.6M
Total requested	\$7.4M
- Project Budget**

Professional services	\$0.8M
Construction w/contingency	\$6.6M
Total project budget	\$7.4M
- Project Funding**

Auxiliary funds
- Project Schedule**

BoT professional services approval	08/25
BoT construction approval	08/25
Design	09/25 – 05/26
Construction	06/26 – 02/27
Facility opening	02/27
- Project Delivery Method**

General Contracting
- Planning Framework**
 - This project is included in the FY26 Capital Investment Plan.
- Project Scope**
 - The project will update MEP infrastructure, including emergency electrical power in support of the overall building and cell therapy modular units. Updates will provide increased capacity for future expansion of the building.
- Approval Requested**
 - Approval is requested to enter into professional services and construction contracts.



-
- project team**

University project manager: Whitmore, Steven
AE/design architect: TBD
CM at Risk or Design Builder: TBD

Project Data Sheet for Board of Trustees Approval

600 Ackerman - Specialty Pharmacy Expansion

OSU-240182 (REQ ID# WMC240001)

Project Location: Ackerman Rd, 600 (2435)

Approval Requested and Amount

Professional services	\$1.2M
Construction w/contingency	\$14.0M
Total requested	\$15.2M

Project Budget

Professional services	\$1.2M
Construction w/contingency	\$14.0M
Total project budget	\$15.2M

Project Funding

Auxiliary funds

Project Schedule

Design	04/24 – 10/25
BoT professional services approval	08/25
BoT construction approval	08/25
Construction	11/25 – 05/27
Facility opening	06/27

Project Delivery Method

Construction Manager at Risk

Planning Framework

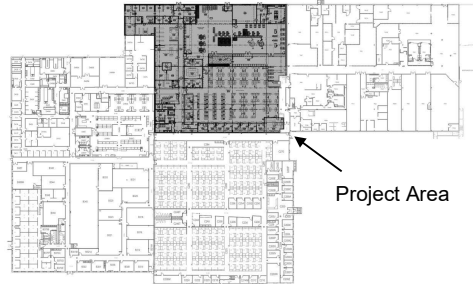
- This project is included in the FY24 and FY26 Capital Investment Plans.

Project Scope

- This project will renovate approximately 30,000 SF in the 600 Ackerman building to accommodate the growth of the Specialty Pharmacy space and services to meet the demand of the patient population.
- The scope includes increasing the dispensing pharmacy from 1,800 SF to 10,000 SF, adding automation equipment, and additional storage capabilities in the form of freezers and coolers.
- Equipment costs, which are included in the total project budget, are estimated to be \$2.8M.

Approval Requested

- Approval is requested to enter into professional services and construction contracts.



project team

University project manager: Lively, Sarah
AE/design architect: BDTAID
CM at Risk or Design Builder: The Ruhlin Company

Project Data Sheet for Board of Trustees Approval

Tunnel Rehabilitation Phase I

OSU-230499 (REQ ID# FOD230015)

Project Location: **Site-see project information

- Approval Requested and Amount**

Construction w/contingency	\$5.5M
Total requested	\$5.5M
- Project Budget**

Professional services	\$3.2M
Construction w/contingency	\$31.8M
OSEP/ENGIE scope	\$12.5M
Total project budget	\$47.5M
- Project Funding**

University debt, University funds, State funds, Partner funds (OSEP/ENGIE)
- Project Schedule**

Design	04/23 – 10/24
BoT professional services approval	11/23
BoT construction approval	11/23
Construction	05/24 – 12/26
- Project Delivery Method**

General Contracting
- Planning Framework**
 - This project is included in the FY23, FY24 and FY25 Capital Investment Plan
- Project Scope**
 - This request includes the design and construction dollars for the temporary above ground steam line that runs along the north side of John Herrick Drive from the Neil Ave. Garage to Cannon Drive.
 - This temporary steam line, which is expected to be operational by late 2025, will allow OSEP/ENGIE to design and construct the replacement of the west steam feed to ensure reliable steam service
 - The original project scope is the first phase of a three-phase tunnel project addressing deferred maintenance, including structural repairs, asbestos removal, and drainage/water infiltration issues. Phases 2 and 3 have not been funded.
 - Work will include structural repairs and piping replacements from 19th Avenue to an area near Lazenby Hall on South Neil.
- Approval Requested**
 - Approval is requested to increase construction contracts.



-
- project team**

University project manager: Stazzone, AI
AE/design architect: RMF Engineering
CM at Risk or Design Builder: McDaniel's Construction

APPENDIX XIX

BACKGROUND

TOPIC: Approval of Ohio State Energy Partners' ("OSEP") Utility System Capital Improvements Plan for Fiscal Year 2026

CONTEXT: Pursuant to the First Amended and Restated Long-Term Lease and Concession Agreement for The Ohio State University Utility System dated July 20, 2018, and as amended (the "Agreement"), OSEP will fund and implement capital improvements to the Utility System.

Proposed capital projects are evaluated for alignment with applicable strategic, financial, and physical plans and to ensure continued reliability, safety, and compliance.

Approval of these projects is pursuant to the project scopes, schedules, cost breakdowns, total project costs outlined below, any applicable university directives, applicable project approval request forms, and supporting documentation submitted pursuant to the Agreement.

These OSEP capital projects are categorized as Life-Cycle Renovations, Repair, and Replacement Projects ("LFC"): LFC projects are capital improvements to existing utility system plants and distribution networks.

SUMMARY:

Campus Gas – Building Systems Upgrades 101-25-LFC

Scope: This project will upgrade the natural gas systems necessary to comply with codes and/or the university's Building Design Standards (including gas entrances, building meters, and regulators). Specifically, this project will perform the upgrades required for 11 buildings connected to master meters #7 and #9. This project was previously approved for design.

Construction Cost Request: \$ 2.012 M

Project Cost Breakdown	Cost
FY 2025 – Design	\$ 0.659 M
FY 2026 – Design	\$ 1.102 M
FY 2026 – Construction	\$ 0.069 M
FY 2027 – Construction	\$ 1.707 M
FY 2027 – Construction	\$ 0.236 M
Total Project Cost	\$ 3.773 M

Building Transformer Replacements - Phase 1 154-26-LFC

Scope: Replacement of existing end-of-life medium voltage transformers and associated equipment. This request is limited to the procurement of long-lead equipment. Construction is expected to begin in fiscal year 2028. The design for this project was completed under project 127-23-LFC.

Construction Procurement Cost Request: \$ 1.779 M

Project Cost Breakdown	Cost
FY 2026 – Procurement	\$ 0.217 M
FY 2027 – Procurement	\$ 0.563 M
FY 2028 – Procurement	\$ 1.000 M
FY 2028 – Construction Estimate	\$ 2.414 M
FY 2029 – Construction Estimate	\$ 6.117 M
FY 2030 – Construction Estimate	\$ 2.515 M
Total Project Cost Estimate	\$ 12.826 M

Steam & Condensate Repairs and Replacements – East of Neil 156-24-LFC

Scope: Replacement of an end-of-life expansion joint, support structures, and approximately 2,500 feet of condensate piping, and repair of a steam pipe leak in the 12th Avenue and College Road tunnels. This project was previously approved for design with an original construction estimate of over \$12M. Detailed design and assessment of the existing system revealed the steam piping could be repaired in lieu of replacement reducing the total project cost to \$6.033M.

Construction Cost Request: \$ 5.149 M

Project Cost Breakdown	Cost
FY 2024 – Design	\$ 0.015 M
FY 2025 – Design	\$ 0.400 M
FY 2026 – Design	\$ 0.469 M
FY 2026 – Construction	\$ 5.149 M
Total Project Cost	\$ 6.033 M

OSU Substation Transformers Replacement T1 & T2 193-25-LFC

Scope: Detailed design for the replacement of two of the existing three 138kV transformers at the OSU substation and upgrades to associated telemetry, monitoring, and alarm equipment. The project was previously approved for preliminary design. The current request is to complete design.

Design Cost Request: \$ 2.165 M

Project Cost Breakdown	Cost
FY 2025 – Preliminary Design	\$ 0.318 M
FY 2026 – Preliminary Design	\$ 0.014 M
FY 2026 – Detailed Design	\$ 1.600 M
FY 2027 – Detailed Design	\$ 0.555 M
FY 2027 – Procurement estimate	\$ 4.485 M
FY 2028 – Procurement estimate	\$15.640 M
FY 2029 – Construction estimate	\$ 5.042 M
FY 2030 – Construction estimate	\$ 0.350 M
Total Project Cost Estimate	\$ 28.004 M

McCracken UPS B Replacement 194-26-LFC

Scope: Design of the replacement of the end-of-life Universal Power Supply (UPS) B in the McCracken Power Plant. UPS A was approved for replacement under a previously approved project (31-21-LFC). Design work will include updated electrical drawings and load studies to properly size the new UPS system.

Design Cost Request: \$ 0.421 M

Project Cost Breakdown	Cost
FY 2026 – Design	\$ 0.363 M
FY 2027 – Design	\$ 0.058 M
FY 2027 – Construction Estimate	\$ 1.216 M
FY 2027 – Construction Estimate	\$ 1.163 M
Total Project Cost Estimate	\$ 2.800 M

New West Steam Leg 306-26-LFC

Scope: Design of the replacement and relocation of the portion of the steam piping system that runs north and south along the east side of Cannon Drive. The current portion of piping is subject to water infiltration when excessive rain raises the river water level. Repeated efforts to repair this leg of the system as part of 144-23-LFC over the past several years have not been effective, requiring a full replacement.

Design Cost Request: \$ 1.565 M

Project Cost Breakdown	Cost
FY 2026 – Design*	\$ 1.565 M
FY 2027 – Construction Estimate	\$ 21.785 M
Total Project Cost Estimate	\$ 23.350 M

* Preliminary design in the amount of \$200,00 was approved in March 2025 under project 144-23 LFC.

REQUESTED OF THE MASTER PLANNING & FACILITIES AND THE FINANCE & INVESTMENT COMMITTEES: Approval of the resolution.

Project Data Sheet for Board of Trustees Approval

Campus Gas - Building system upgrade

101-25-LFC

Project Location: Master Meter 7 and 9

- **Approval(s) Requested and Amount**
Construction \$2.012 M

Total requested \$2.012 M

- **Project Budget**
Design \$ 0.082 M
Construction \$ 3.691 M
w/contingency
Total project budget \$ 3.773 M

- **Project Funding**
OSEP Financed \$ 3.773 M
University \$ 0.000 M

- **Project Schedule**
BoT design & construction approval 08/24
BoT construction approval 08/25
Construction 08/24 – 12/27

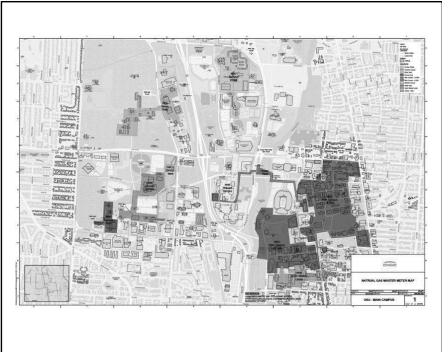
Completion /full operation 09/25 – 12/27

- **Project Delivery Method**
Design-Bid-Build

- **Project Scope**
 - Replace and upgrade meters and regulators are non-code compliant or non-functioning with new designed full setting.

- **Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Additional risks include gas leaks which may lead to minor service interruptions

- **Approval Requested**
 - Requesting approval for construction in FY26.



project team	
• OSEP project manager:	Firas S. Oueis
• General Contractor:	Design, Bid, Build – To be determined

Project Data Sheet for Board of Trustees Approval

Building Transformer Replacement 1

154-26-LFC

Project Location: Various Buildings across campus

- Approval(s) Requested and Amount**

Long lead procurement	\$1.779 M
Total requested	\$1.779 M
- Project Budget**

Construction	\$ 12.826 M
w/contingency	
Total project budget	\$ 12.826 M
- Project Funding**

OSEP Financed	\$ 12.826M
University	\$ 0.000M
- Project Schedule**

BoT Procurement approval	08/25
BoT Construction approval (estimate)	05/26
Construction	5/27-8/29
Completion /full operation	8/29
- Project Delivery Method**

Design-Bid-Build
- Project Scope**

Replace and upgrade aging transformers for several buildings, including those identified as safety hazards or requiring upgrades due to University-led renovation projects.
- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Supply chain issues leading to longer than anticipated delivery times and meeting university outage schedules
- Approval Requested**
 - Long lead procurement



project team

- OSEP project manager: Aoun Barki
- General Contractor: To be determined

August 2025

Project Data Sheet for Board of Trustees Approval
Steam and Condensate Repairs and Replacements - East of Neil

156-24-LFC

Project Location: Southeast Tunnels – Upper 12th Ave. and College Tunnels

- Approval(s) Requested and Amount**
Construction w/contingency \$5.149 M

Total requested \$5.149 M

- Project Budget**
Design \$0.884 M
Construction w/contingency \$5.149 M
Total project budget \$6.033 M

- Project Funding**
OSEP Financed \$6.033 M
University \$0.000 M

- Project Schedule**
BoT design Approval 11/23
Design 05/24 – 02/25
BoT construction approval 08/25
Construction 10/25 – 11/26
Completion /full operation 12/26

- Project Delivery Method**
Design-Bid-Build

- Project Scope**
 - Replace and upgrade approximately 2,500 linear feet of pumped condensate distribution piping in the Upper 12th Ave. and College Road tunnels.
 - Replace structural supports of the piping systems, including pipe stanchions, grout footing, connections, anchors, expansion joints, saddles, guides, and slides.
 - Replace an expansion joint located in the College Road tunnel between Page Hall and Ohio Union, and repair a steam leak near Canfield Hall.

- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Constrained space in the tunnels, which complicates the work.
 - Health and safety risks inherent in working along the route of active steam and in areas with compromised ventilation.
 - Labor shortage and supply chain issues.

- Approval Requested**
 - Approval for design received for FY24. Requesting Approval for construction in FY26.



project team

- OSEP project manager: Francisco D. Saavedra
- AE/design architect: Osborn Engineering
- General Contractor: Design, Bid, Build – To be determined

Project Data Sheet for Board of Trustees Approval

OSU Substation Transformer Replacement - T1, T2

193-25-LFC

Project Location: OSU Substation

- **Approval(s) Requested and Amount**
Detailed Design \$ 2.165 M

Total requested \$2.165 M

- **Project Budget**
Initial Design \$ 0.332 M
Design and Engineering Services \$ 2.165 M
Construction w/contingency \$25.507 M
Total project budget \$28.004 M

- **Project Funding**
OSEP Financed \$28.004 M
University \$ 0.000 M

- **Project Schedule**
BoT Pre-Design Approval 02/25
BoT Full Engineering Approval 08/25
BoT Long Lead Approval 11/25
BoT Construction Approval TBD

- **Project Delivery Method**
Design-Bid-Build

- **Project Scope**
 - This project will replace two (T1 and T2) of the three 84MVA, 138kV to 13.8kV stepdown transformers at the OSU substation to maintain reliable delivery of electricity to the campus and modernize support infrastructure.
 - In addition to improving the resiliency of the electrical system, this project implements an online transformer monitoring system which will provide real time information including warning and alarms relevant to the operating characteristics of the transformers to facilitate faults before they become failures, thereby minimizing downtime and unplanned outages.

- **Project Risks and Impacts**
 - Long lead equipment
 - Project duration and complexity

- **Approval Requested**
Design and Engineering Services



project team

- OSEP project manager: Chris Schneider
- AE/design architect: To be determined
- General Contractor: To be determined

Project Data Sheet for Board of Trustees Approval

McCracken UPS B Replacement

194-26-LFC

Project Location: McCracken Power Plant

- Approval(s) Requested and Amount**

Design	\$0.421 M
Total requested	\$0.421 M
- Project Budget**

Design & Construction w/contingency	\$ 2.799 M
Total project budget	\$ 2.799 M
- Project Funding**

OSEP Financed	\$ 2.799 M
University	\$ 0.000 M
- Project Schedule**

BoT Design approval	08/25
Design	9/25 – 6/26
BoT Construction approval	5/26
Completion /full operation	8/27
- Project Delivery Method**

Design-Bid-Build
- Project Scope**
 - This project involves the replacement of Universal Power Supply (UPS) “B”, a critical component of the McCracken Power Plant’s electrical infrastructure that is past its operational lifespan.
- Project Risks and Impacts**
 - Outages to be coordinated with OSU stakeholders.
 - Equipment lead times could drive the construction schedule
 - Close coordination will be required with the operations team at McCracken during construction to minimize disruption to operations
- Approval Requested**
 - Design only



project team	
• OSEP project manager:	Aoun Barki
• Engineer:	Osborn Engineering

Project Data Sheet for Board of Trustees Approval

West Steam Leg Installation

306-26-LFC

Project Location: South of OSU Stadium on OSU Columbus Campus

- Approval(s) Requested and Amount**

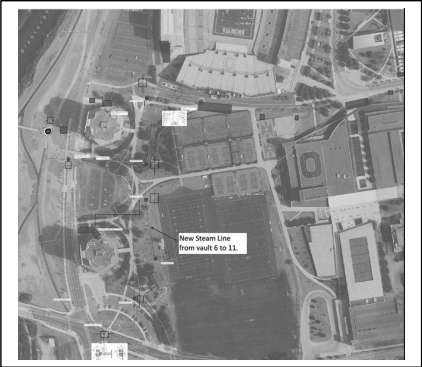
Design	\$ 1.565 M
Total requested	\$ 1.565 M
- Project Budget**

Design	\$ 1.565 M
Construction w/contingency	\$21.785 M
Total project budget	\$23.350 M
- Project Funding**

OSEP Financed	\$23.350 M
University	\$ 0.000 M
- Project Schedule**

BoT design Approval	08/25
Design	08/25 – 11/25
BoT construction approval	02/26
Construction	07/26 – 07/27
Completion /full operation	10/27
- Project Delivery Method**

Design-Bid-Build
- Project Scope**
 - Install approx. 1,500 linear feet of steam and condensate piping systems between steam vaults 6 and 11 located east of the Morrill and Lincoln dormitory towers.
 - Use exclusively Perma-Pipe buried pipes suitable for direct burial and can withstand the operating temperatures and pressures, including the installation of pipe connections, anchors, expansion loops, guides, and supports.
- Project Risks and Impacts**
 - Service outages and maintenance of traffic to be coordinated with Facilities Operations and Development, Facilities Design and Construction, Student Life, Wexner Med Center, Athletics, Rec-sports, Traffic and Transportation Management and Buckeye Grove departments.
 - Soil conditions, water table level, and existing utilities that may interfere with the piping installation.
 - Health and safety risks inherent in working along the route of the new steam and condensate pipes of active construction areas such as opened trenches, hot work, heavy equipment, material handling, and so on.
 - Supply chain issues and labor shortages could pose risks to completing the construction on time. No permitting risks are anticipated.
- Approval Requested**
 - Requesting approval for design in FY26.



project team	
• OSEP project manager:	Francisco D. Saavedra
• AE/design architect:	Affiliated Engineers, Inc.
• General Contractor:	Design, Bid, Build – To be determined

APPENDIX XX

APPROVAL FOR DISPOSITION OF REAL PROPERTY THAYER ROAD, ALLEN COUNTY, OHIO BOARD BACKGROUND

Background

The university seeks Board approval for the sale of 5.369 acres along Thayer Road at the OSU Lima Campus to Allen County. The Allen County Commissioners plan to use the property to widen Thayer Road, which is located along the east side of the campus and have requested to purchase the property at the appraised value of \$43,000.

Location and Description

The affected property consists of approximately 5.369 acres along the east side of Allen County parcel number 37-3500-02-001.000.

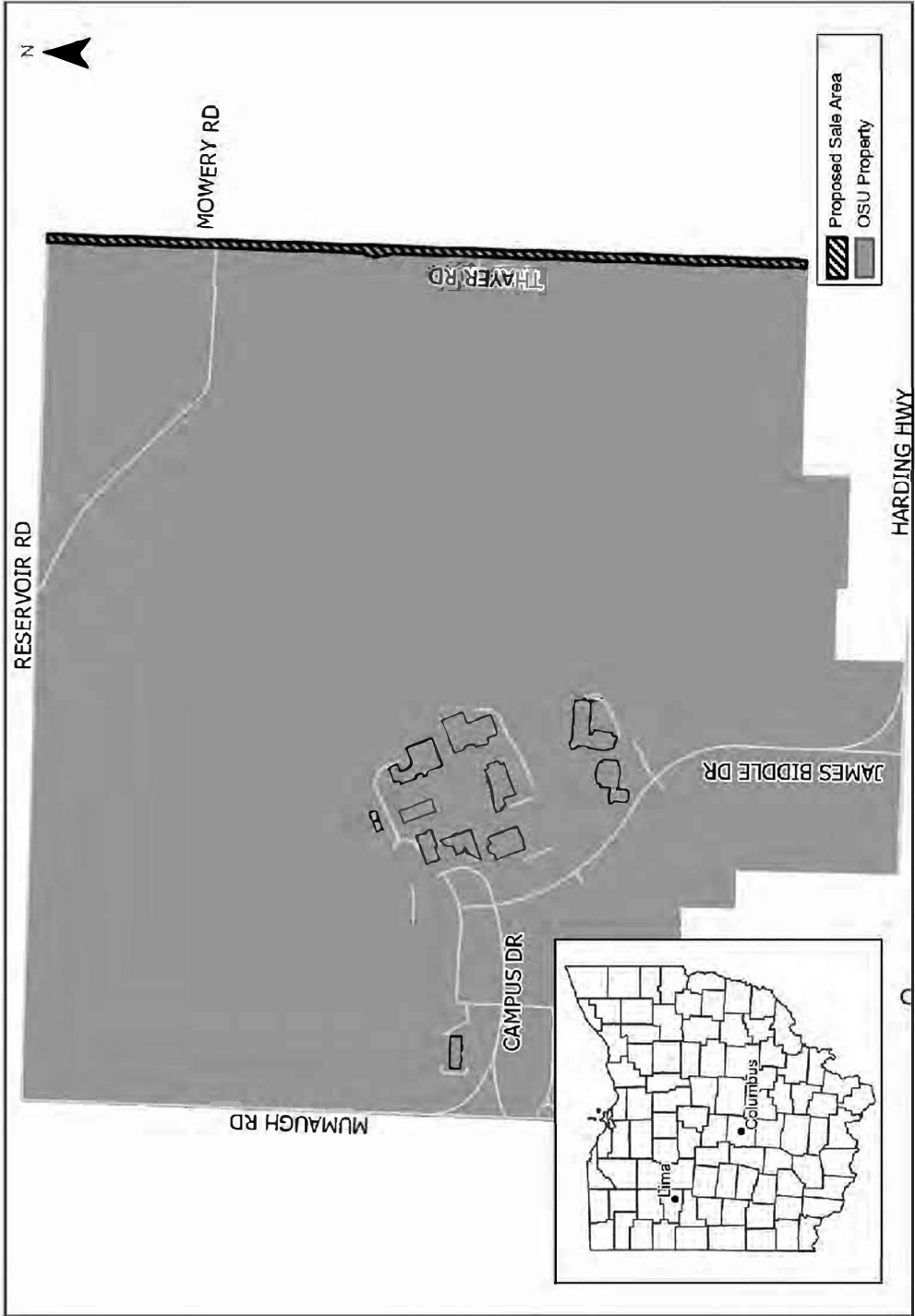
Property History

The property was purchased in 1965 as a part of the original acquisition and establishment of the OSU Lima Campus.

The proposed property to be sold extends along Thayer Road. The campus core lies approximately ¼ mile west of the sale area. The land to be sold is presently road right of way, farmland, or unimproved land, and sale of the site will not impact campus operations.

Sale of Property

Planning, Architecture and Real Estate recommends that the above referenced property be sold under terms and conditions that are deemed to be in the best interest of the university and at a sale price equal to appraised value. The proceeds will be used by OSU Lima campus to replenish their capital component fund for future projects.



Prepared By: The Ohio State University
Office of Planning, Architecture and Real Estate
Issue Date: March 3, 2025
The Ohio State University Board of Trustees

Parcel ID 37-3500-02-001.000
Thayer Road
Bath Township, Lima, Ohio

APPENDIX XXI

TOPIC:

Fiscal Year 2026 Operating Budget Approval

CONTEXT:

The approval of the Fiscal Year 2026 Operating Budget ending June 30, 2026, is the final step in establishing the budget for the University. The budget as presented is based on the tuition and mandatory fees proposed at the May 21, 2025, Board of Trustees meeting.

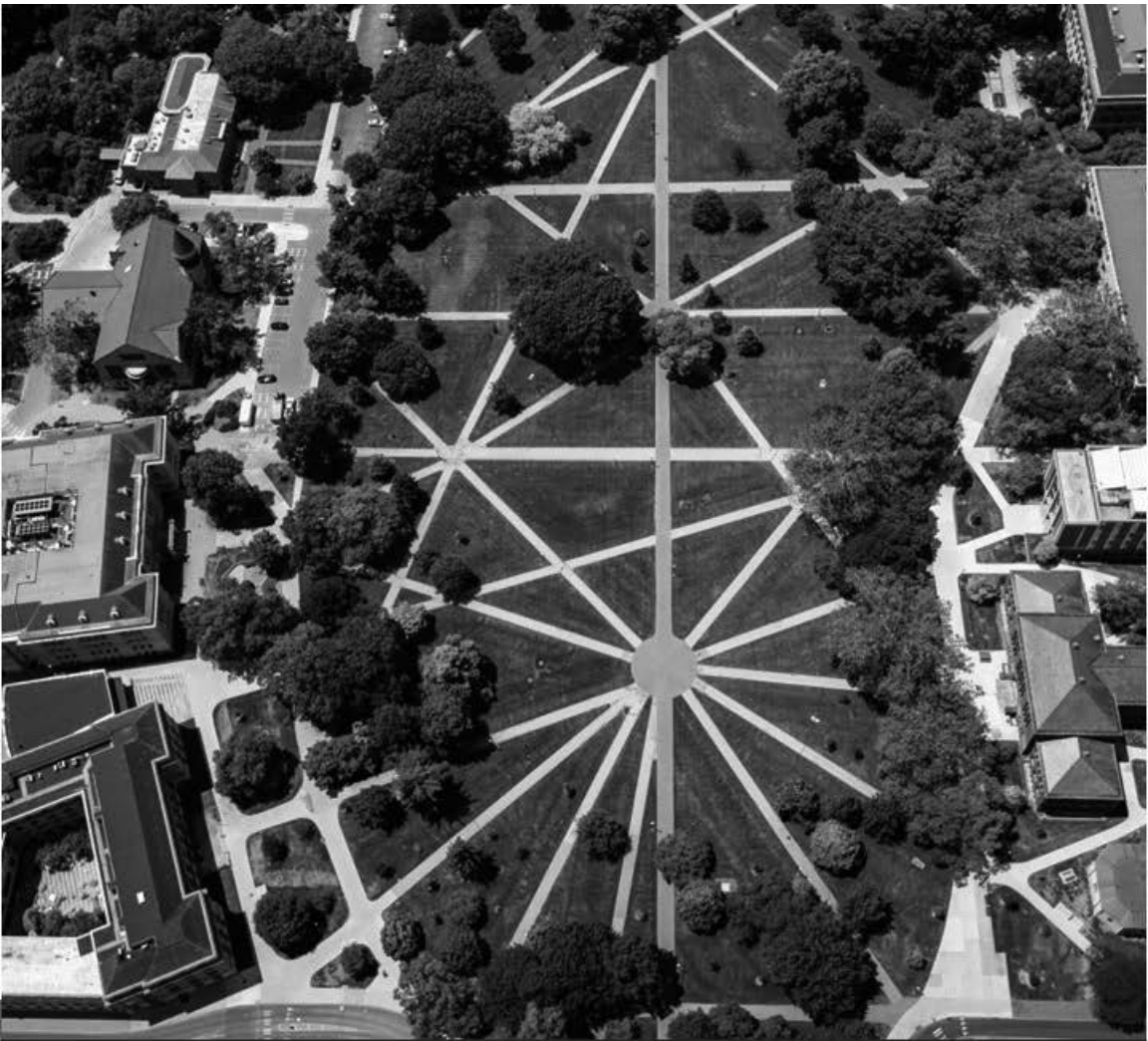
SUMMARY:

Included are the following:

- Resolution for Approval of the Fiscal Year 2026 Operating Budget
- Fiscal Year 2026 Operating Budget Book for The Ohio State University

REQUESTED OF THE BOARD OF TRUSTEES:

Approval of the Fiscal Year 2026 Operating Budget.



THE OHIO STATE UNIVERSITY

FY2026 Financial Plan

Office of Business and Finance
Financial Planning and Analysis

FY 2026 FINANCIAL PLAN

FY 2026 Financial Plan

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Chapter 1 | Executive Summary

We are pleased to submit the Fiscal Year 2026 Financial Plan. This plan builds on the university's strengths and provides an operating margin to be reinvested in strategic initiatives and capital projects at the university.

We are presenting the Operating Plan alongside the Capital Investment Plan to provide more clarity about funding sources – which funding sources are fungible and can be spent for unrestricted purposes, and which funding sources must be spent on legally mandated or designated programs and projects. The narratives throughout this financial plan utilize this managerial-based presentation.

This document includes an Executive Summary, an introduction to the budget process at Ohio State, the full FY 2026 Operating Plan, FY 2026 Capital Investment Plan, and detailed material provided in the Appendix.

Highlights of the Consolidated Financial Plan

Total Sources (\$ thousands)	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
University, External Sources	\$4,749,727	\$4,720,847	(\$28,881)	-0.6%
Health System	\$5,055,203	\$5,499,538	\$444,336	8.8%
OSU Physicians, Inc, External Sources	\$1,046,746	\$1,159,167	\$112,421	10.7%
DPCUs	\$81,591	\$72,124	(\$9,466)	-11.6%
Total Sources	\$10,933,267	\$11,451,676	\$518,409	4.7%
Total Uses (\$ thousands)	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Personnel Expenses	\$5,530,860	\$6,020,241	\$489,380	8.8%
Total Non-Personnel Expenses	\$4,574,641	\$4,866,500	\$291,859	6.4%
Total Uses	\$10,105,501	\$10,886,740	\$781,239	7.7%
Sources Less Uses, Operating	\$827,766	\$564,936	(\$262,830)	-31.8%
Capital Sources and Uses (\$ thousands)	FY25 Forecast	FY26 Plan	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Capital-Related Sources	\$302,091	\$269,169		
Total Capital-Related Uses	\$1,043,499	\$1,046,462		
Sources Less Uses, Capital	(\$741,408)	(\$777,293)		
Sources Less Uses, Capital and Operating	\$86,358	(\$212,358)		

Sources: We anticipate consolidated sources will increase \$518.4 million or 4.7% to \$11.5 billion in FY 2026 compared to the FY 2025 Forecast.

- The university is projecting \$4.7 billion of total sources, excluding net transfers from the Health System, which is a decrease of \$28.9 million to the FY 2025 Forecast. Specifically, we anticipate increases in the areas of tuition and fees (increasing \$59.9 million) driven by increases in rates for the incoming tuition guarantee cohort, non-resident fees, and differential rate increases for professional and tagged masters programs; state operating support (increasing \$18.0 million) based upon the state operating budget guidance; non-exchange grants and contracts (increasing

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\$3.7 million) driven primarily by increases in state financial aid; departmental sales and services (increasing \$6.7 million) resulting from instructional clinic activities; current use gifts (increasing \$7.0 million) and endowment distributions (increasing \$34.6 million). Increases in these areas are more than offset by decreases in exchange grants and contracts (decreasing \$63.4 million) driven by uncertainty in federal research funding; auxiliary sales and services (decreasing \$8.1 million) based on the autumn 2025 football schedule and a planned decrease in dorm occupancy; interest income (decreasing \$49.6 million) and other revenue (decreasing \$37.7 million) driven by one-time sources in FY 2025, inclusive of royalty, trademark and licensing revenues.

- The Health System and OSU Physicians, Inc. (OSUP) together account for a total increase in sources of \$556.8 million due to a combination of an estimated increase in adjusted admissions, outpatient growth, and some rate increases.

Uses: We anticipate consolidated uses will increase \$781.2 million or 7.7% to \$10.9 billion in FY 2026 compared to the FY 2025 Forecast.

- The university is projecting \$4.9 billion of total uses, which is an increase of \$214.9 million or 4.6%. The most significant driver of this increase is salaries, which are increasing \$118.4 million or 5.9% over the FY 2025 Forecast and related benefit cost increases of \$45.1 million. Increased salaries reflect a 3.5% merit increase pool (\$58.0 million) and related benefits expense. Increases more than the merit pool are driven by investments in strategic faculty and staff hiring initiatives including staff equity adjustments. Most notably, the FY 2026 personnel plan includes incremental faculty hiring of \$50.0 million to support academic excellence initiatives. Non-personnel uses are increasing by \$51.4 million, or 2.5%, driven by increases in student fee authorizations and scholarships of \$4.2 million; supplies, services, and other cost increases of \$57.8 million, or 4.4%; offset by an annual reduction in debt service of \$10.6 million.
- The Health System and OSUP's increases in uses are due to expenses to support their continued revenue growth and 5.5% salary increases, inclusive of the annual merit pool and incremental market increases to support employee retention and recruitment.

Sources Less Uses: We anticipate a consolidated surplus, excluding capital, of \$564.9 million. After including capital sources and uses, this surplus decreases to a loss of \$212.4 million, representing the investment of cash and bond proceeds in the university's capital plan. Details of the FY 2026 Capital Investment Plan are included in Chapter 8.

- The university is projecting an operating surplus of \$152.9 million, excluding capital. This surplus becomes a loss of \$97.1 million after including capital sources and uses. University surpluses are not completely fungible as some funds are for restricted purposes. The university is comprised of general funds used for teaching and other unrestricted uses, restricted funds from grants, gifts, or governmental appropriations, and earnings funds such as housing and dining and health sciences clinical operations. University funds are tracked and managed to ensure all restrictions are met. Of the \$152.9 million surplus before capital, \$96.2 million is from general funds, \$2.7 million is from earnings funds, and the remainder is for restricted purposes.

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- The Health System FY 2026 Operating Plan projects an operating surplus of \$430.5 million, excluding capital. This surplus becomes a loss of \$96.9 million, including capital, based on net capital uses of \$527.4 million, primarily driven by the completion of the hospital tower project that is scheduled to open in the spring of 2026.
- The OSU Physicians, Inc. FY 2026 Operating Plan projects an operating surplus of \$4.6 million, based on \$1.336 billion operating sources (including \$176.9 million of Medical Center Investment transfers, see Chapter 7) and \$1.331 billion of operating uses.

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FY 2026 Operating Plan Summary

The following table shows consolidated sources and uses for FY 2026 and compares those numbers to the forecast for FY 2025 and actual results from FY 2024.

Total Sources (\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Tuition and Fees (gross)	\$1,374,390	\$1,473,897	\$1,533,838	5.6%	\$59,941	4.1%
State Share of Instruction	\$428,599	\$437,373	\$453,309	2.8%	\$15,935	3.6%
Other Operating Appropriations	\$99,937	\$103,312	\$105,418	2.7%	\$2,107	2.0%
Exchange Grants & Contracts	\$1,144,473	\$1,119,954	\$1,059,237	-3.8%	(\$60,717)	-5.4%
Non-Exchange Grants & Contracts	\$118,506	\$150,296	\$154,003	14.0%	\$3,706	2.5%
Sales and Services - Auxiliaries	\$450,352	\$492,416	\$484,281	3.7%	(\$8,135)	-1.7%
Sales and Services - Departmental	\$200,308	\$222,321	\$229,282	7.0%	\$6,961	3.1%
Sales and Services - Health System	\$4,440,400	\$4,964,944	\$5,390,544	10.2%	\$425,600	8.6%
Sales and Services - OSU Physicians	\$933,463	\$1,038,232	\$1,149,480	11.0%	\$111,248	10.7%
Current Use Gifts	\$189,492	\$190,000	\$197,000	2.0%	\$7,000	3.7%
Endowment Distributions	\$371,294	\$423,929	\$458,549	11.1%	\$34,619	8.2%
Interest Income	\$224,820	\$191,990	\$125,748	-25.2%	(\$66,242)	-34.5%
Other Revenue	\$174,543	\$124,602	\$110,988	-20.3%	(\$13,615)	-10.9%
Total Sources	\$10,150,577	\$10,933,267	\$11,451,676	6.2%	\$518,409	4.7%
Total Uses (\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Personnel Expenses	\$5,190,140	\$5,530,860	\$6,020,241	7.7%	\$489,380	8.8%
Fee Authorizations	\$140,316	\$147,807	\$149,250	3.1%	\$1,443	1.0%
Student Aid	\$468,315	\$524,279	\$527,001	6.1%	\$2,722	0.5%
Supplies, Services & Other	\$3,319,796	\$3,693,223	\$3,996,812	9.7%	\$303,589	8.2%
Debt Service	\$201,207	\$209,332	\$193,437	-1.9%	(\$15,895)	-7.6%
Total Non-Personnel Expenses	\$4,129,634	\$4,574,641	\$4,866,500	8.6%	\$291,859	6.4%
Total Uses	\$9,319,774	\$10,105,501	\$10,886,740	8.1%	\$781,239	7.7%
Sources Less Uses, Operating	\$830,803	\$827,766	\$564,936			
Total Capital-Related Sources	\$590,477	\$302,091	\$269,169			
Total Capital-Related Uses	\$964,303	\$1,043,499	\$1,046,462			
Sources Less Uses, Capital	(\$373,826)	(\$741,408)	(\$777,293)			
Sources Less Uses, Capital and Operating	\$456,977	\$86,358	(\$212,358)			

Sources

Tuition and fees are charged to students to cover the cost of instruction and university operations. All students are charged a base instructional fee depending on their program of study. Non-Ohio residents and international students also pay a non-resident and/or international surcharge. Select graduate and professional programs charge a market-based differential instructional fee. Certain programs also charge a program/special and/or technology fee. Tuition and fees also include Student Life fees, including the Ohio Union fee, the recreation fee, the student activities fee, and other miscellaneous fees for applications, orientation, transcripts, and the like.

Government Appropriations are divided between State Share of Instruction (SSI) and State Operating Appropriations. SSI is allocated between all Ohio public colleges based on a State of Ohio performance-based

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formula and is used to fund instruction, operations, and strategy. State Operating Appropriations are direct line-item allocations for Ohio State University and are restricted in use.

Grants and Contracts include research projects administered through the Office of Sponsored Programs (OSP), grants and contracts administered directly by colleges and support units, and funding from federal and state government financial aid programs. Grants and contract funds are highly restricted in use and are typically disbursed on a reimbursement basis.

Sales and Services are goods and services sold to students or the general public. Housing, dining, athletics, and instructional clinical services make up the majority of this revenue. University sales and services operations retain their earnings and are charged an overhead rate to fund central operations and strategy.

Health System and OSU Physicians Revenues are derived from patient and insurance billing. The Health System and OSU Physicians retain their earnings and are charged an overhead rate to fund central operations and strategy.

Current Use Gifts are gifts that are available for immediate use based on donor restrictions. These funds are highly restricted based on donor intent and may or may not be expended in the year received.

Endowment Distributions are received from endowed funds established for the purpose of generating a distribution in perpetuity for a donor-restricted purpose. For purposes of the Operating Plan, only distributions are counted as sources and are restricted to each endowment description.

Interest Income is generated by the university on all cash balances. The short and intermediate-term interest revenue is unrestricted and used to fund operations and strategy.

Other Sources include miscellaneous university earnings such as royalties and rental income.

Uses

Personnel Expenses are salaries, wages, and bonus payments to university employees and benefits paid on their behalf. Units pay into benefits pools based on composite rates by employee type; these rates are reviewed by the University Faculty Senate and approved by the Provost and Chief Financial Officer.

Student Aid includes all institutional, departmental, governmental, gift and athletic financial aid.

Fee Authorizations pay for the tuition and fees for graduate teaching, research or administrative appointments.

Supplies & Services cover all other operating expenses for the university. Utilities, repairs and maintenance, consulting expenses, and research subcontract expenses are reflected in this category.

University Debt Service is an interest expense and principal repayment incurred on all outstanding debt.

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Chapter 2 | Operating Plan Scope

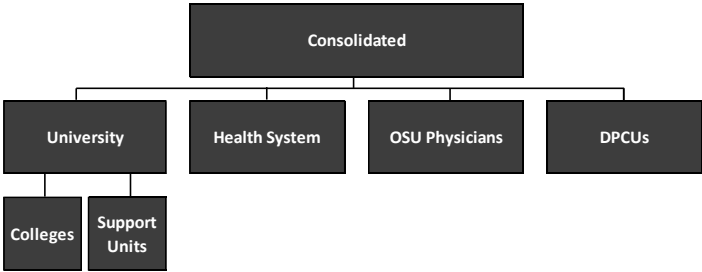
The university is a complex institution with planning units responsible for diverse missions: patient care, introductory accounting instruction, and automotive engineering research are all under the same umbrella. Diverse revenue streams fund these diverse missions, and the financial plan takes all these differences into account.

Operating Plan Units

All-funds operating plans are intended to represent planned revenue and expenses. They are collected from each unit across the university and reviewed and consolidated by the Office of Financial Planning and Analysis. This all-funds total operating plan provides the base framework for evaluating the activities of all academic and support units within the university, allowing proactive responses to changing economic issues as they arise. For the FY 2026 planning cycle, the university used Workday Adaptive Planning, a financial planning tool to collect college and unit plans and integrate data directly from Workday Finance and Human Resources. The university continues to optimize the use of Adaptive to reinforce consistent planning and forecasting, commitment tracking, and efficient position control at the college and unit level.

The financial structure of units throughout the organization reflects our complex mission. The financial plan is based on a hierarchical structure where individual plans are collected from colleges and support units and then consolidated. Financial Planning and Analysis performs a bottom-up review and consolidation of individual plans. It then reconciles the resulting numbers with a top-down forecast approach to arrive at the final submitted plan. Note that this hierarchy does not necessarily imply personnel reporting lines but serves as a graphical representation of how the plan is compiled and consolidated.

The top-level consolidation is made up of the University, Health System, OSU Physicians and Discretely Presented Component Units (DPCUs). Numerous eliminations occur at this level that reflect the transfer of funds among these four entities. In turn, the university is split between colleges and support units; the Health System is divided among five hospitals, dozens of ambulatory care facilities, and other administrative units; and OSU Physicians is split into 19 physicians’ practices. The Health System and OSU Physicians are discussed in greater detail in Chapters 6 and 7. The remainder of this chapter and Chapters 4 and 5 address the structure and details of the University portion of the consolidated budget.



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Colleges are segmented into their respective Executive Dean clusters, Arts and Sciences, Health Sciences Colleges, Professional Colleges, and Regional Campuses for the university consolidation. Figures below represent sources before transfers for all funds.

Colleges			
\$2.4B: total sources before transfers and capital - including research			
Arts and Sciences \$517M	Health Sciences \$838M	Professional \$951M	Regional \$68M
	Dentistry \$68M	Fisher College of Business \$119M	Lima \$11M
	Medicine \$499M	Education and Human Ecology \$104M	Mansfield \$12M
	Nursing \$47M	Engineering \$354M	Marion \$14M
	Optometry \$25M	Food, Agricultural, and Environmental Sciences \$284M	Newark \$31M
	Pharmacy \$47M	Glenn College of Public Affairs \$16M	
	Public Health \$28M	Moritz College of Law \$39M	
	Veterinary Medicine \$124M	Social Work \$34M	

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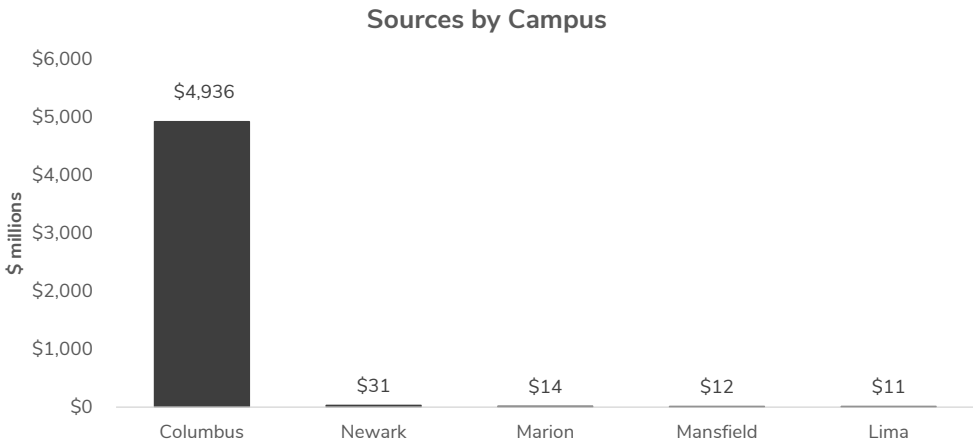
Sources before transfers for all funds for support units are as follows:

Support Units				
\$1.8B: total sources before transfers and capital - including research				
Major Auxiliaries \$688M	Academic Affairs \$264M		Other Support Units \$878M	
Athletics \$274M	Academic Affairs Administration \$59M	Strategic Enrollment \$27M	Administration and Planning \$373M	Board of Trustees \$1M
Business Advancement \$90M	Graduate School \$55M	Student Academic Excellence Administration \$3M	Business and Finance \$41M	ERIK \$94M
Student Life \$324M	International Affairs \$13M	Undergraduate Education \$20M	Government Affairs \$3M	Health Sciences \$206M
	Ohio State Online \$17M	University Libraries \$54M	Human Resources \$50M	Legal Affairs \$16M
	Outreach and Engagement \$3M	Wexner Center for the Arts \$11M	Marketing and Communications \$13M	President \$6M
			University Advancement \$74M	

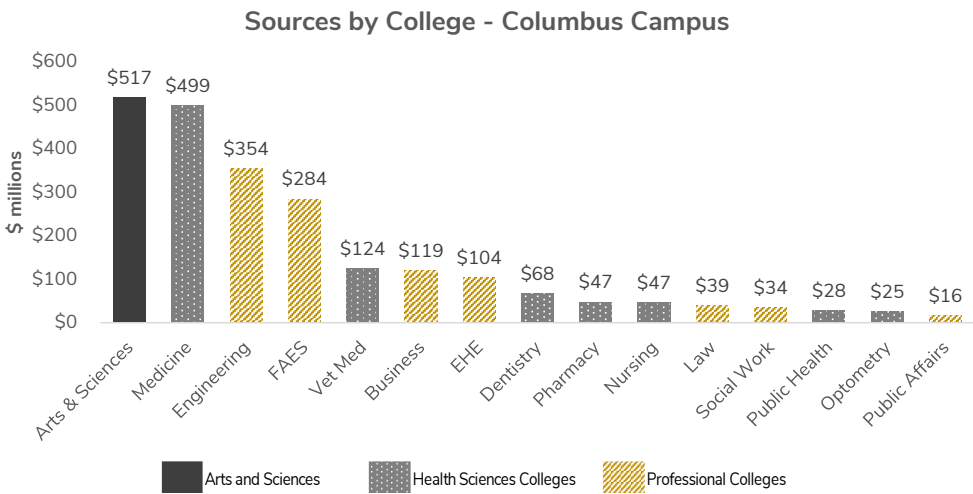
Note: Each college and support unit depicted is also divided into many additional planning sub-units, which include divisions such as academic departments, deans’ offices, centers, specific earnings operations, sports teams, physicians’ practices, etc. University Advancement is shown after central funding transfers that comprise a majority of their budget.

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The size of campuses varies widely. The Columbus Campus is by far the largest in terms of sources:

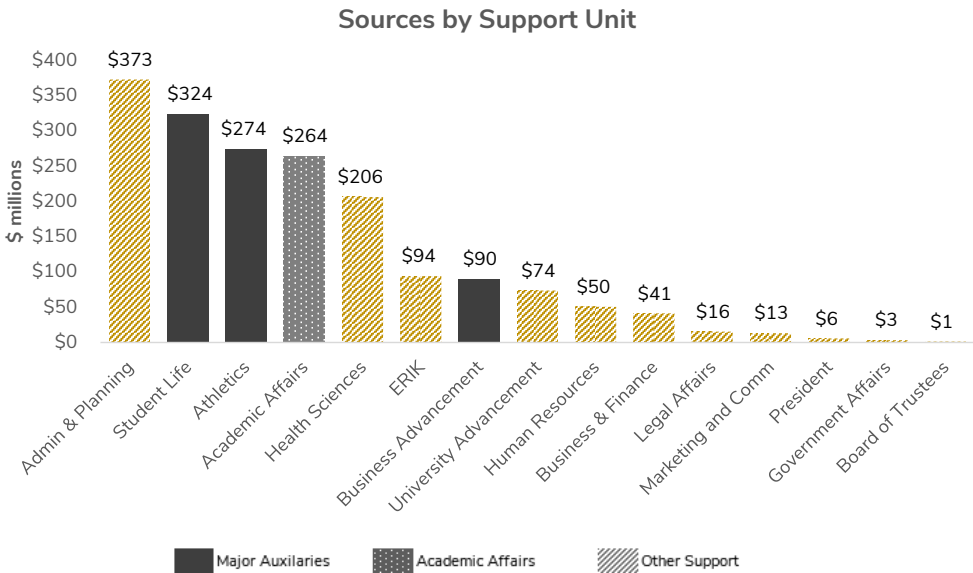


The College of Arts and Sciences is the largest college by sources, followed by the College of Medicine, the College of Engineering, and the College of Food, Agricultural, and Environmental Sciences.



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After the transition of the Office of Technology and Digital Innovation (OTDI) and OH-TECH from Academic Affairs in 2024, the Office of Administration and Planning and its component units are the largest support unit, followed by Student Life and Athletics:

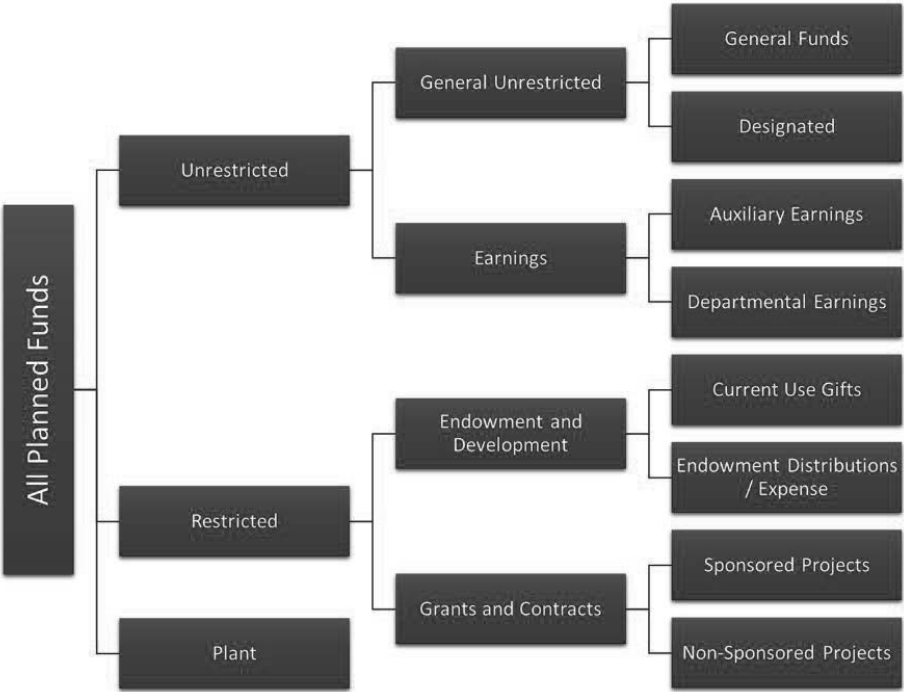


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Operating Plan Funds

Not only is the university divided into planning units of vastly varying sizes, but each planning unit is also tracked using funds to ensure that fund restrictions are met. For the FY 2026 Financial Plan, the university continues a planning process encompassing all university operating funds. This approach affords a holistic view of all university operations in an easily understood format that will enable the university to highlight the evolution of funding sources. This will allow leadership to make informed strategic decisions in a timely manner.

The operating plan comprises the following fund groups:

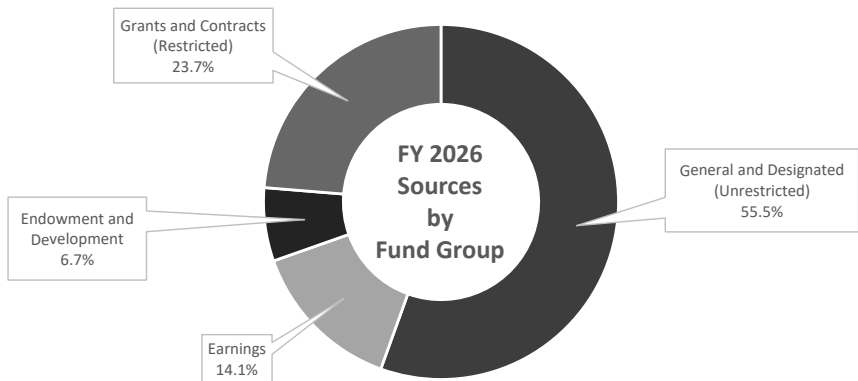


The university’s plan is developed and managed according to the principles of fund accounting. Not all funds are created alike, and many are not fungible. Revenue is separated into a variety of fund types, the use of which is governed by the restrictions of the specific fund. Some fund types are unrestricted, including general funds and some earnings funds. Other funds have restrictions derived from the source of revenue, including current use gifts, endowments, and grants and contracts received from government agencies, foundations, and other outside sponsors. For both planning and spending decision purposes, the source of funding matters, as only certain fund groups can be used for all purposes at the university. Roughly 55.5% of total university

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operating sources are tied to unrestricted general funds. An additional 14.1% of total university operating sources are derived from earnings sources, in which customers and users may expect revenue to only support specific goods or services, and the remaining 30.4% of university operating sources are restricted to the purposes set forth by the donor, contract, or granting agency.

As a feature of decentralized budgeting authority, all colleges and support units carry forward their own equity balances into the following year. They hold these equity balances to apply to strategic opportunities, including hires and startup packages, strategic procurement, capital uses, etc.

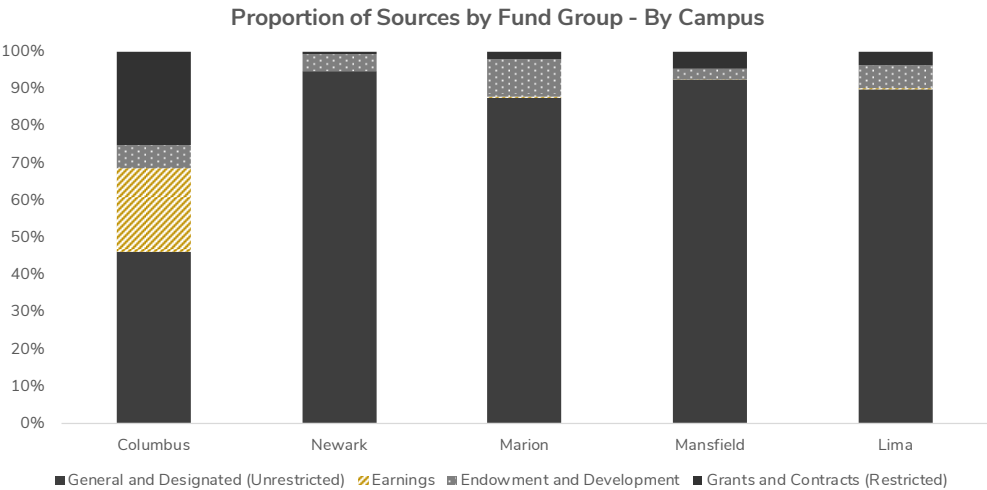


Funding sources and restrictions vary greatly by fund type:

Fund Group	Fund Type	Typical Funding Sources	Restrictions
Unrestricted	General Funds	Tuition and student fees, State Share of Instruction, short-term interest income, grant facilities and administrative cost allowances, cost allocations from earnings funds and Health System	None
	Designated	Originally from General Funds or unrestricted gifts, internally designated for a specific purpose	Not legally restricted but internally restricted for stated purposes
Earnings	Auxiliary Earnings	User fees, e.g., housing, dining, athletics ticket revenue	Not legally restricted, but customer/user may expect specific fees to only support specific goods or services
	Departmental Earnings	User fees, including internal billings, e.g., instructional clinic revenue, lab services revenue, etc.	Not legally restricted, but customers or users may expect specific fees to only support specific goods or services
Restricted Endowment and Development	Current Use Gifts	Donor gifts without either a requirement to be deposited into an endowment or used for a capital project	Restricted based on donor intent, may be governed by a gift agreement
	Endowment Income/Expense	Income from investment of donor gifts in the endowment	Restricted based on donor intent as memorialized in fund description
Restricted Grants and Contracts	Grants and Contracts	Grant or contract dollars received from external entities; includes specific line-item appropriations from the State of Ohio	Restricted based on grant agreement, contract, or line-item appropriation description

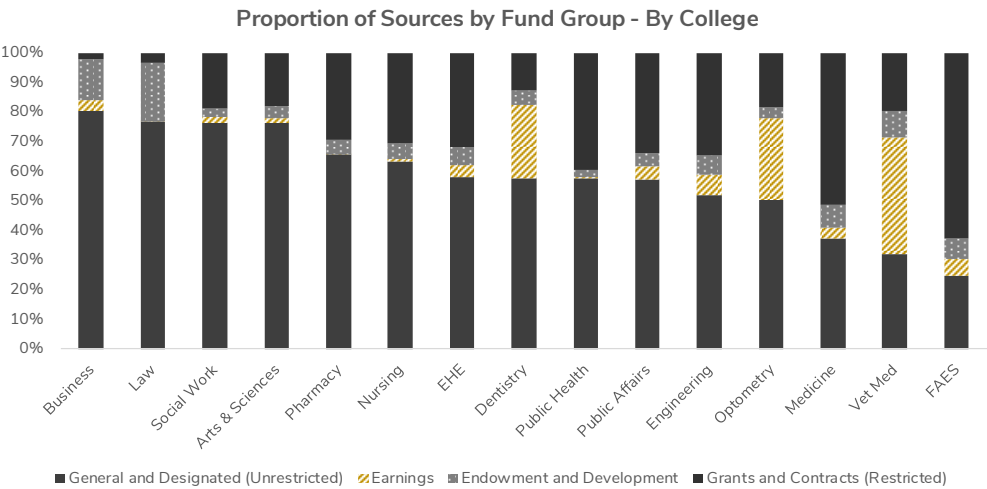
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As units vary in size, units can also vary by funding type. The following charts show the differences in funding proportions among general unrestricted, earnings and restricted funds. Differences in funding sources result in different risk profiles. A unit with heavy reliance on general funds will be more sensitive to changes in enrollment, tuition and fees (including restrictions on tuition rates from the State of Ohio), the proportion of non-resident students, and changes in subsidy received from the State of Ohio than a more balanced unit. Support units with reliance on earnings are more susceptible to market-driven factors and typically must carry greater equity balances as reserves to maintain facilities and replace capital equipment. Units more reliant on restricted funding may not have the flexibility to spend all available equity balances based on the original gift or grant restrictions and are likely more susceptible to changes in the grant funding landscape or the loss of a large donor.



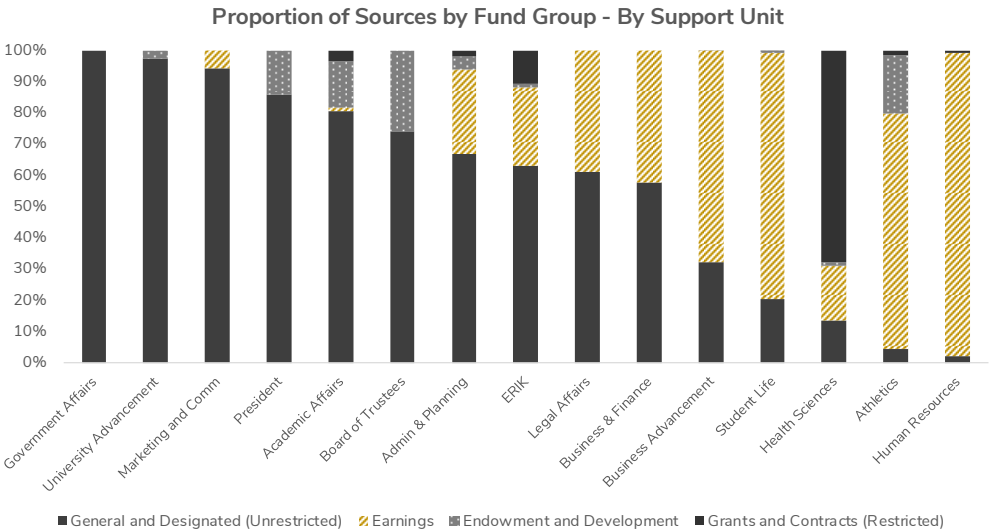
The Columbus Campus has more varied funding sources than the regional campuses, which rely primarily on general funds sources – tuition and subsidy.

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Like the Colleges of Business, Law, Social Work, and Arts and Science, some colleges are highly dependent on general fund sources – tuition and subsidies. Colleges such as Dentistry, Optometry, and Veterinary Medicine rely on significant earnings revenue through their instructional clinics. Colleges like Food, Agricultural, and Environmental Sciences (FAES), the College of Medicine, and the College of Public Health operate with significantly restricted funding that supplements their general funds.

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Support units also demonstrate a wide variety of funding dependencies, from units that are heavily reliant on general funds – Government Affairs and University Advancement – to units that heavily utilize earnings funds – such as Student Life and Athletics.

Units use a variety of techniques to prepare their plans. General funds plans are based on fixed uses and historical patterns coupled with preliminary estimates of tuition and subsidy allocations provided by Financial Planning and Analysis. Earnings units typically plan based on their business plans, approved fees, and projected use of their products and services. Grants and contracts revenue and current use gifts are projected based on historical patterns and anticipated gifts and grants that may be received.

The Ohio State University Health System and Ohio State University Physicians, Inc. prepare their plans based on projected activity and associated costs. External factors, such as government regulations and reimbursement rates, as well as contractual agreements with healthcare payors, also play an integral part in developing the Health System's plan.

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General Funds Allocations

Although emphasis was placed on including all university funds in the FY 2026 planning process, general funds continue to remain a significant component of the plan. General funds can broadly be used for any university purpose, whereas restricted funds are more specifically targeted. These funds play an essential role in both the plan and operations of the university, as they cover many expenses in the colleges and support units for which it is difficult to raise money. The primary sources of general funds are tuition and other student fees, State Share of Instruction, indirect cost recovery, and overhead charged to earnings units.

Allocation of Funds

For general funds, the Columbus campus uses an allocation model that is comprised of two components: a modified Responsibility Center Management (RCM) model and the strategic investment of central funds. This structure allows for decentralized decision-making and control of financial resources at the colleges and support units while still retaining central funds for holistic strategic investment purposes. The modified RCM allocation model assigns substantial control over resource decisions to individual colleges and support units. The underlying premise of the university's decentralized budget model is entrusting academic and support unit leaders with significant control over financial resources, leading to more informed decision-making and better outcomes for the university. Through this resource funding model, colleges are incentivized to increase resources by teaching more credit hours and growing research activity.

Each college and support unit receives a portion of general funds supporting both academic and administrative functions. The process for allocating the funds is administered through the Office of Financial Planning and Analysis under the guidance of the Chief Financial Officer and Provost. General funds are allocated to colleges and support units on a marginal basis under established criterion. In other words, increases (or decreases) in the pool of general funds available each budget year are allocated back to colleges and support units as increases (or decreases) to their base general funds' budgets.

Revenue is allocated to colleges based on three primary funding formulas: pooled undergraduate, graduate tuition, and graduate state support. The pooled undergraduate formula utilizes a model to distribute undergraduate marginal tuition and state support. In prior years, sixty percent of the total marginal undergraduate revenue was allocated based on total credit hours taught, while forty percent was allocated based on the cost of instruction. In FY 2023, this funding model began a six-year phase-out to more closely align with an "as-earned" allocation. The new allocation will treat tuition revenue and state support separately and allocate tuition revenue based on total credit hours taught and state support revenue based on the type of course taught/cost of instruction. This allocation method is more in line with the allocation methods for graduate tuition and state support and will be fully phased in by FY 2028.

The other two funding formulas allocate graduate tuition and state support based on a two-year average of credit hours in fee-paying categories (tuition) and the type of course taught based on the cost of instruction (state support). As a college teaches more of the share of total credit hours, it receives a proportionally larger share of the incremental funding.

Conversely, if a college's share of the hours taught declines, the college's allotted share of incremental funding will correspondingly decline proportionally. The two-year average credit hour driver acts as a smoothing

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mechanism in times of unforeseen volatility. Colleges will receive their share of marginal revenue on indirect research cost recovery, based on the college's share of research revenue. Fee revenue from differential, learning technology, course and program/special fees are provided directly to colleges.

Support units are funded through a combination of central tax, specific activity-based assessments, and an overhead rate charged to auxiliary and earnings units. The central tax, assessments and overhead charges are designed to provide the funds necessary to maintain support services such as payroll, central human resources, and academic support. Support units are generally ineligible for marginal revenue changes because the funding formulas rely on credit hours taught; instead, support units must request additional funding during the annual planning process to support new services or mandates. For FY 2026, the following requests were prioritized for central investment, assuming no local funds are available, through the shared governance support office budget request process.

Service Excellence Investment	FY26 Plan
Public Safety	\$600,000
A&P - Lyft Ride Smart (continued investment)	\$2,000,000
OTDI - Workday Success Plan	\$332,000
Total	\$2,932,000

In addition to the requested central investments, \$8.5 million in unit investments have been committed in FY 2026 for ongoing strategic initiatives, including \$5.4 million for the Student Information Systems Project and \$3.1 million of resources for mental health program support. In support of the institution's strategic planning efforts currently under development, an additional \$75.0 million has been budgeted in FY26 to support Executive Leadership's investments.

Allocations of expenses are also made through the general funds' allocation model. Both colleges and support units receive a net allocation that considers both marginal revenue and marginal expenses. Current expense assessments include:

Assessment	Allocation Basis	Notes
Plant Operation and Maintenance	Assignable square footage	The square footage is multiplied by a flat rate per square foot for four types of costs: utilities, custodial service, maintenance, and deferred maintenance.
Student Services	Credit hours	• Cost Pool 1 (Undergraduate): 92% of this pool is Undergraduate Financial Aid. It also includes operating budgets for Financial Aid and First-Year Experience. Expense is allocated by average undergraduate credit hours. • Cost Pool 2 (Graduate): 97% of this pool is Non-Resident Fee Authorizations and Graduate Fellowships. This pool also includes the operating budget of the Graduate School. Expense is allocated by average graduate credit hours. • Cost Pool 3 (All Students): This is the smallest student services cost pool and includes portions of operating budgets for Student Affairs, Academic Affairs, and new Library Acquisitions. Expense is allocated by an average of ALL credit hours.
Research	Modified Total Direct Costs	Research cost allocation covers the budgets of units that support sponsored research.
Distance Education	Distance Education credit hours	Funds operations for Ohio State Online.
Central Tax	% of marginal tuition and subsidy revenue	Funds support units such as the President's Office, OAA, Controller, Public Safety, etc. as well as promotion and tenure and strategic investments.

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Auxiliaries and earnings units are expected to operate at a break-even or better margin and generally do not receive general fund support. One exception is the Office of Student Life, which receives general fund support via special Student Activity, Ohio Union and Recreational Facility fees enacted to specifically advance the student experience.

Regional campuses develop their individual campus plans primarily based on the student tuition and fees received from the regional campus students, the State Share of Instruction they expect to collect, and costs directly incurred to operate those campuses.

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Chapter 3 | FY 2026 Financial Plan

The FY 2026 Financial Plan is displayed in a modified cash flow presentation that includes operating sources and uses. The purpose of this presentation is to provide a more complete understanding of the university’s funding and margins generated by operations. Capital sources and uses will be discussed in Chapter 8.

Consolidated

	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Sources (\$ thousands)						
Total Tuition and Fees (gross)	\$1,374,390	\$1,473,897	\$1,533,838	5.6%	\$59,941	4.1%
State Share of Instruction	\$428,599	\$437,373	\$453,309	2.8%	\$15,935	3.6%
Other Operating Appropriations	\$99,937	\$103,312	\$105,418	2.7%	\$2,107	2.0%
Exchange Grants & Contracts	\$1,144,473	\$1,119,954	\$1,059,237	-3.8%	(\$60,717)	-5.4%
Non-Exchange Grants & Contracts	\$118,506	\$150,296	\$154,003	14.0%	\$3,706	2.5%
Sales and Services - Auxiliaries	\$450,352	\$492,416	\$484,281	3.7%	(\$8,135)	-1.7%
Sales and Services - Departmental	\$200,308	\$222,321	\$229,282	7.0%	\$6,961	3.1%
Sales and Services - Health System	\$4,440,400	\$4,964,944	\$5,390,544	10.2%	\$425,600	8.6%
Sales and Services - OSU Physicians	\$933,463	\$1,038,232	\$1,149,480	11.0%	\$111,248	10.7%
Current Use Gifts	\$189,492	\$190,000	\$197,000	2.0%	\$7,000	3.7%
Endowment Distributions	\$371,294	\$423,929	\$458,549	11.1%	\$34,619	8.2%
Interest Income	\$224,820	\$191,990	\$125,748	-25.2%	(\$66,242)	-34.5%
Other Revenue	\$174,543	\$124,602	\$110,988	-20.3%	(\$13,615)	-10.9%
Total Sources	\$10,150,577	\$10,933,267	\$11,451,676	6.2%	\$518,409	4.7%
Total Uses (\$ thousands)						
Total Personnel Expenses	\$5,190,140	\$5,530,860	\$6,020,241	7.7%	\$489,380	8.8%
Fee Authorizations	\$140,316	\$147,807	\$149,250	3.1%	\$1,443	1.0%
Student Aid	\$468,315	\$524,279	\$527,001	6.1%	\$2,722	0.5%
Supplies, Services & Other	\$3,319,796	\$3,693,223	\$3,996,812	9.7%	\$303,589	8.2%
Debt Service	\$201,207	\$209,332	\$193,437	-1.9%	(\$15,895)	-7.6%
Total Non-Personnel Expenses	\$4,129,634	\$4,574,641	\$4,866,500	8.6%	\$291,859	6.4%
Total Uses	\$9,319,774	\$10,105,501	\$10,886,740	8.1%	\$781,239	7.7%
Sources Less Uses, Operating	\$830,803	\$827,766	\$564,936			
Total Capital-Related Sources	\$590,477	\$302,091	\$269,169			
Total Capital-Related Uses	\$964,303	\$1,043,499	\$1,046,462			
Sources Less Uses, Capital	(\$373,826)	(\$741,408)	(\$777,293)			
Sources Less Uses, Capital and Operating	\$456,977	\$86,358	(\$212,358)			

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University [excluding Health System, OSUP, DPCUs, and eliminations]

	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Sources (\$ thousands)						
Tuition and Fees (gross)	\$1,374,390	\$1,473,897	\$1,533,838	5.6%	\$59,941	4.1%
State Share of Instruction	\$428,599	\$437,373	\$453,309	2.8%	\$15,935	3.6%
Other Operating Appropriations	\$99,937	\$103,312	\$105,418	2.7%	\$2,107	2.0%
Exchange Grants & Contracts	\$1,016,551	\$1,030,222	\$966,813	-2.5%	(\$63,409)	-6.2%
Non-Exchange Grants & Contracts	\$116,078	\$150,296	\$154,003	15.2%	\$3,706	2.5%
Sales and Services - Auxiliaries	\$450,352	\$492,416	\$484,281	3.7%	(\$8,135)	-1.7%
Sales and Services - Departmental	\$205,271	\$212,780	\$219,455	3.4%	\$6,675	3.1%
Current Use Gifts	\$172,581	\$190,000	\$197,000	6.8%	\$7,000	3.7%
Endowment Distributions	\$371,294	\$423,929	\$458,549	11.1%	\$34,619	8.2%
Interest Income	\$122,643	\$149,942	\$100,355	-9.5%	(\$49,587)	-33.1%
Other Revenue	\$66,869	\$85,561	\$47,827	-15.4%	(\$37,733)	-44.1%
Total External Sources	\$4,424,565	\$4,749,727	\$4,720,847	3.3%	(\$28,881)	-0.6%
Net Transfers from OSU Health System	\$204,756	\$231,633	\$283,086	17.6%	\$51,453	22.2%
Total Internal Sources	\$204,756	\$231,633	\$283,086	17.6%	\$51,453	22.2%
Total Sources	\$4,629,321	\$4,981,361	\$5,003,932	4.0%	\$22,572	0.5%
Total Uses (\$ thousands)						
Salaries	\$1,898,102	\$2,001,463	\$2,119,906	5.7%	\$118,443	5.9%
Benefits	\$545,244	\$568,402	\$613,457	6.1%	\$45,054	7.9%
Total Personnel Expense	\$2,443,346	\$2,569,865	\$2,733,363	5.8%	\$163,497	6.4%
Fee Authorizations	\$140,316	\$147,807	\$149,250	3.1%	\$1,443	1.0%
Student Aid	\$468,315	\$524,279	\$527,001	6.1%	\$2,722	0.5%
Supplies, Services & Other	\$1,238,061	\$1,315,573	\$1,373,420	5.3%	\$57,848	4.4%
Debt Service	\$86,443	\$78,645	\$68,048	-11.3%	(\$10,597)	-13.5%
Total Non-Personnel Expense	\$1,933,135	\$2,066,304	\$2,117,719	4.7%	\$51,416	2.5%
Total Uses	\$4,376,481	\$4,636,169	\$4,851,082	5.3%	\$214,913	4.6%
Sources Less Uses, Operating	\$252,840	\$345,192	\$152,850			
Total Capital-Related Sources	\$219,193	\$277,280	\$230,304			
Total Capital-Related Uses	\$337,282	\$519,897	\$480,210			
Sources Less Uses, Capital	(\$118,089)	(\$242,617)	(\$249,905)			
Sources Less Uses, Capital and Operating	\$134,751	\$102,574	(\$97,055)			

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University by Fund Group

As explained in Chapter 2, not all funding is fungible at the university. The following gives a breakout by fund group indicating the level of restriction of dollars:

Total Sources (\$ thousands)	General and Designated (Unrestricted)	Earnings	Endowment and Development	Grants and Contracts (Restricted)	Total FY2026 University
Tuition and Fees (gross)	\$1,531,204	\$1,976	\$-	\$657	\$1,533,838
State Share of Instruction	\$453,309	\$-	\$-	\$-	\$453,309
Other Operating Appropriations	\$-	\$-	\$-	\$105,418	\$105,418
Exchange Grants & Contracts	\$38,049	\$1,680	\$2,370	\$924,714	\$966,813
Non-Exchange Grants & Contracts	\$-	\$300	\$-	\$153,703	\$154,003
Sales and Services - Auxiliaries	\$-	\$484,281	\$-	\$-	\$484,281
Sales and Services - Departmental	\$59,366	\$159,268	\$821	\$-	\$219,455
Current Use Gifts	\$600	\$-	\$196,400	\$-	\$197,000
Endowment Distributions	\$262,559	\$-	\$195,990	\$-	\$458,549
Interest Income	\$97,944	\$2,325	\$35	\$51	\$100,355
Other Revenue	\$30,980	\$15,124	\$107	\$1,616	\$47,827
Total External Sources	\$2,474,011	\$664,953	\$395,723	\$1,186,159	\$4,720,847
Net Transfers In (Out)	\$303,700	\$40,728	(\$61,342)	\$0	\$283,086
Total Internal Sources	\$303,700	\$40,728	(\$61,342)	\$0	\$283,086
Total Sources	\$2,777,711	\$705,681	\$334,381	\$1,186,159	\$5,003,932
Total Uses (\$ thousands)	General and Designated (Unrestricted)	Earnings	Endowment and Development	Grants and Contracts (Restricted)	Total FY2026 University
Salaries	\$1,280,783	\$379,596	\$53,538	\$405,988	\$2,119,906
Benefits	\$376,972	\$117,477	\$14,573	\$104,434	\$613,457
Total Personnel Expense	\$1,657,755	\$497,074	\$68,112	\$510,422	\$2,733,363
Fee Authorizations	\$125,046	\$1,710	\$4,453	\$18,042	\$149,250
Student Aid	\$284,674	\$34,068	\$64,074	\$144,185	\$527,001
Supplies, Services & Other	\$546,032	\$170,120	\$161,977	\$495,291	\$1,373,420
Debt Service	\$68,048	\$-	\$-	\$-	\$68,048
Total Non-Personnel Expense	\$1,023,800	\$205,898	\$230,503	\$657,518	\$2,117,719
Total Uses	\$2,681,556	\$702,972	\$298,615	\$1,167,940	\$4,851,082
Sources Less Uses, Operating	\$96,154	\$2,710	\$35,766	\$18,218	\$152,850

In FY 2026, Unrestricted General and Designated funds are projected to generate a margin of \$96.2 million, which is mainly used for operating reserves, capital reinvestment and strategic investments. Earnings operations are planned to generate a slightly positive margin of \$2.7 million. Endowment and Development funds are planned to generate a margin of \$35.8 million, mainly due to anticipated timing differences between gift receipt or endowment distribution and spend. Restricted grants and contracts generate a margin of \$18.2 million due to the timing of reimbursements on research projects.

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Chapter 4 | University Operating Plan | Sources

Tuition and Fees

\$ thousands	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Instructional Fees	\$819,229	\$860,360	\$882,174	3.8%	\$21,813	2.5%
Non-Resident Fees	\$419,154	\$463,036	\$493,557	8.5%	\$30,521	6.6%
General Fees	\$27,993	\$30,529	\$33,116	8.8%	\$2,587	8.5%
International Surcharge	\$9,177	\$9,829	\$9,484	1.7%	(\$345)	-3.5%
Program and Tech Fees	\$49,229	\$58,289	\$63,407	13.5%	\$5,119	8.8%
Other Student Fees	\$23,026	\$24,532	\$24,662	3.5%	\$130	0.5%
Total Academic Fees	\$1,347,806	\$1,446,575	\$1,506,401	5.7%	\$59,826	4.1%
Student Activity Fees	\$4,573	\$4,658	\$4,690	1.3%	\$31	0.7%
Recreational Fees	\$13,933	\$14,419	\$14,528	2.1%	\$108	0.8%
Ohio Union Fees	\$8,078	\$8,244	\$8,220	0.9%	(\$24)	-0.3%
Total Student Life Fees	\$26,584	\$27,322	\$27,437	1.6%	\$116	0.4%
Total Tuition and Fees (gross)	\$1,374,390	\$1,473,897	\$1,533,838	5.6%	\$59,941	4.1%

Gross tuition and fees are expected to increase by \$59.9 million, or 4.1%, from \$1.47 billion in FY 2025 to \$1.53 billion in FY 2026. The growth in gross tuition revenue is primarily driven by an increase in instructional fees and non-resident surcharges. Additionally, the university is expecting the non-resident mix of new first-year students (NFYS) to decrease from 36% in autumn 2024 to 33% in autumn 2025. The FY 2026 Operating Plan assumes the summer 2025 enrollment and mix will be consistent with the summer 2024 enrollment.

The FY 2026 Operating Plan reflects a 3.0% increase in resident (base) tuition and mandatory fees for incoming undergraduate students not in the Ohio State Tuition Guarantee. Ohio resident undergraduate students in the Tuition Guarantee cohort that began in autumn of 2021 (FY 2022), will move to the Tuition Guarantee cohort rates established for FY 2023. Ohio resident undergraduate students in the Tuition Guarantee cohorts that began in fiscal years 2023, 2024 and 2025 will continue at the rates established for their cohorts and will therefore see no change (0%) in their tuition, mandatory fees, and room and board rates for academic year 2025-26. New first-year Ohio resident undergraduate students enrolled at all campuses in 2025-26 will be part of a new Ohio State Tuition Guarantee cohort.

Based on market research, the FY 2026 Operating Plan reflects a 3.0% increase in resident (base) tuition and mandatory fees and a 4.0% increase in the non-resident surcharge for graduate students. Some tagged master's and professional programs have differential fees based on the market demand for those programs.

The university is committed to access, affordability and excellence. In areas where tuition and fee increases are planned, the proceeds will be used to cover inflation and to invest in excellence within the core academic mission. Tuition and fees provide approximately 76% of general funds revenue available to fund the core academic mission. The remaining 24% is largely provided through the State of Ohio instructional subsidy (SSI).

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Three distinct drivers generally impact revenue in academic fees for undergraduates at the Columbus campus: price (relating to rates charged), volume (total size of enrollments), and mix (proportion of resident and non-resident student populations), as detailed below. When comparing the FY 2025 Forecast to the FY 2026 Plan, undergraduate instructional and non-resident revenue at the Columbus campus is expected to increase by \$13.3 million and \$29.7 million, respectively. The revenue variances are predominantly due to our normal revenue drivers of price, volume and mix.

- **Price (+\$42.1 million):** Students paying lower instructional fees graduate and leave the university, and the average price per student rises. The average instructional price is planned to grow by 3.2% or \$183 per full-time equivalent (FTE) over FY 2025. This growth in price accounts for \$16.8 million in instructional fee revenue. The non-resident fee is planned to increase 7.5% or \$1,002 per FTE as compared to the FY 2025 rate and when charged to all non-resident students accounts for a \$25.3 million increase.
- **Volume (-\$3.4 million):** Total undergraduate enrollment is projected to decline from 46,815 in autumn 2024 to 46,556 in autumn 2025 (-0.5%) due to a stabilized trend of the decreased time-to-degree and matriculation of the smaller incoming cohorts in autumn 2022 and autumn 2023. This decrease is offset by a higher projected incoming class of 8,220 in autumn 2025 as compared to the graduating class. The total decrease in volume accounts for approximately \$3.4 million in instructional and non-resident surcharge revenue.
- **Mix (+\$4.3 million):** Non-resident FTE is planned to increase 1% due to the progression of larger domestic and international non-resident cohorts in autumn 2024, offset by a slight projected decline in the non-resident mix of the incoming cohort in autumn 2025. The increase in non-resident mix accounts for approximately \$4.3 million of non-resident surcharge fees.

Volume Driver: Total Enrollment (Undergraduate, Graduate and Professional)

15th Day Headcount	Autumn 2020	Autumn 2021	Autumn 2022	Autumn 2023	Autumn 2024	Autumn 2025	1 YR % Chg	6 YR % Chg
Columbus	61,369	61,677	60,540	60,046	61,443	60,981	-0.8%	-0.6%
Lima	998	874	818	740	723	723	0.0%	-27.6%
Mansfield	1,012	954	828	849	849	849	0.0%	-16.1%
Marion	1,158	1,047	900	886	849	849	0.0%	-26.7%
Newark	2,873	2,730	2,263	2,422	2,544	2,544	0.0%	-11.5%
ATI	547	490	446	462	493	493	0.0%	-9.9%
University - Total	67,957	67,772	65,795	65,405	66,901	66,439	-0.7%	-2.2%
Regionals - Total	6,588	6,095	5,255	5,359	5,458	5,458	0.0%	-17.2%

Autumn 2025 enrollment is expected to decline slightly compared with FY 2025 levels.

Regional campuses account for 8.2% of the university's enrollment. Autumn enrollments at regional campuses have been declining over the past five years because of demographic changes and declining numbers of high school graduates outside of Ohio's largest cities. The most significant declines are at Lima, Mansfield, and Marion campuses. Each campus is engaged in efforts to improve student retention and success by enhancing students' academic experiences and elevating the quality of campus life. The regional campuses are working

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with the Office of Academic Affairs and University Marketing to incorporate regional recruitment and marketing strategies into the university's overall strategy and provide increased visibility, greater resources, an improved internet presence, and an easier application process.

Price Driver: Fees

See Appendix for a listing of student fees.

Instructional, General & Student Life Fees

The university continues to focus on affordability. The Ohio State Tuition Guarantee was established in FY 2018 to provide predictability and transparency for Ohio resident students and their families by locking in a set price for tuition, mandatory fees, housing and dining for four years. Increases for entering cohorts will allow the university to continually invest in quality while addressing the inflationary cost increases that affect the rest of the economy.

Undergraduate tuition (instruction and general fees) will increase by 3.0% or \$397 for new first-year students (2025-26 cohort) compared with the 2024-25 tuition guarantee cohort. Undergraduate tuition rates for students who are part of the Ohio State Tuition Guarantee (2022-23, 2023-24 and 2024-25) will not change. Students in the Tuition Guarantee cohort that began in autumn of 2021 (FY 2022), will move to the Tuition Guarantee cohort rates established for FY 2023. Ohio resident undergraduate students, not included in the Ohio State Tuition Guarantee program, resident (base) tuition and mandatory fees will remain unchanged.

Master's and Ph.D. resident (base) tuition and mandatory fees will increase by 3.0% or \$417 in FY 2026. Some graduate and professional programs charge a differential instructional fee based principally on market demand and pricing. Revenue generated from these additional fees directly supports the graduate or professional program that is charging the student. Twelve programs across nine colleges are seeking changes or new differential instruction fees:

- Seven Colleges have requested changes: Business, Dentistry, Law, Medicine, Optometry, Pharmacy, and Veterinary Medicine.
- Two Colleges have requested new differentials: Law and Engineering.

Non-Resident & International Surcharges

The non-resident surcharge will increase by 7.5% or \$2,004 for undergraduates and 4.0% or \$1,153 for most graduate programs at each campus.

In addition, four colleges are seeking changes to the non-resident surcharge. These changes would apply instead of the standard increase (4.0%) proposed for Fiscal Year 2026:

- The College of Business is requesting an increase of \$6,995 per semester for the Specialized Master of Finance program.
- The College of Dentistry is requesting a 5.0% increase for all students.
- The College of Veterinary Medicine is requesting a 5.0% increase for Rank 1.

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- The College of Medicine is requesting a 10.0% increase for Rank 1 and a 98.1% decrease for Ranks 2-3 for their Doctor of Occupational Therapy program.
- The College of Medicine is requesting a 25.4% decrease for Rank 1 and a 72.6% decrease for Ranks 2-3 for their Doctor of Physical Therapy program.

The undergraduate international surcharge will increase by 6.0% or \$175 in FY 2026.

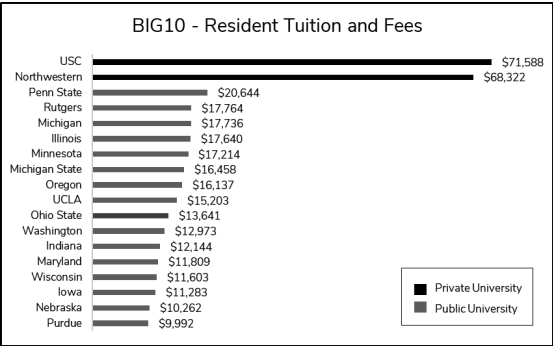
Program / Special & Technology Fees

The College of Engineering implemented a special fee effective autumn 2022 (FY 2023) that, when fully implemented in autumn 2025, will have the benefits of a lower student-faculty ratio, increased program quality and rankings, more academic advisors, more internships/industry immersion, increased research activity and alignment with future multi-disciplinary STEM degrees. This increase to the special fee applies to new first-year undergraduates to The Ohio State University and transfers who were new first-year undergraduates in autumn 2022 at another college or university. The special fee of \$2,000 per semester replaced the existing program fee of \$590 per semester. Students enrolled prior to autumn 2022 will continue to pay the existing program fee of \$590 per semester.

Several colleges and academic programs have additional fees to support specific initiatives. In accordance with the Ohio Revised Code, these types of fees will be frozen for undergraduate students for FY 2026. Program fees are designed to provide financial support for specific academic and student programs, and technology fees support learning technology. Course fees provide classroom supplies, and distance education fees support distance education technology.

Peer Comparison of Fees

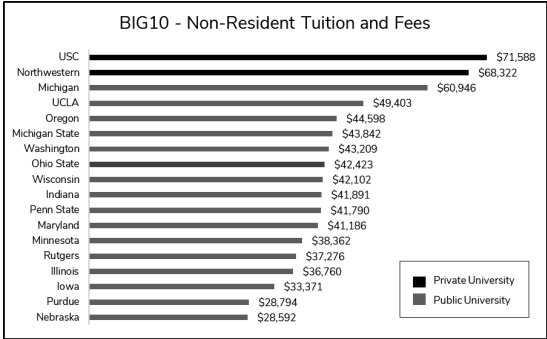
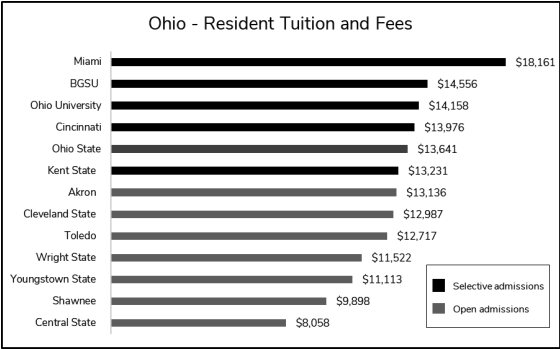
Note: Charts below compare the tuition guarantee cohort entering autumn 2025 with peers' published FY 2025 rates. Peer rates are sourced from the Association of American Universities' Data Exchange.



In the Big Ten, Ohio State is near the median and is more affordable than 10 of the other 17 Big Ten universities.

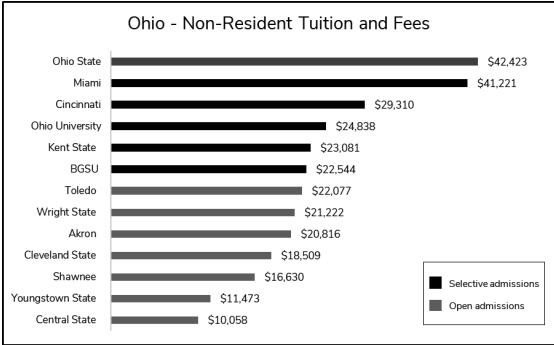
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Among Ohio's six public four-year universities with selective admissions, Ohio State ranks highest in academic reputation and is the second most affordable rate for resident tuition and fees – even including the most expensive tuition guarantee cohort.

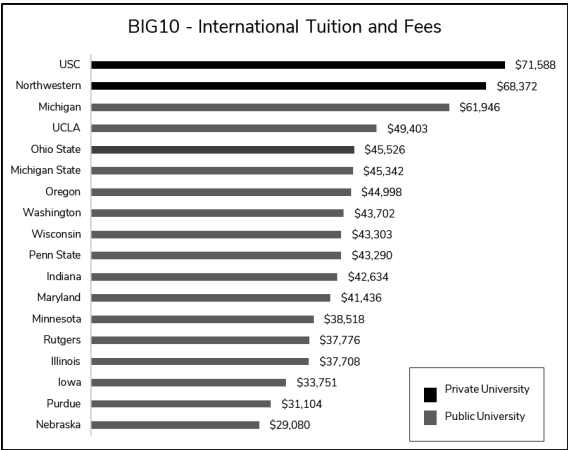


Ohio State is more affordable than 7 of the other 17 Big Ten schools for undergraduate non-resident tuition and fees.

Among Ohio's six public four-year universities with selective admissions, Ohio State is the most expensive university for non-resident tuition and fees.



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Ohio State is the fourteenth most affordable compared to the other 17 Big Ten schools for undergraduate international student tuition and fees.

Government Appropriations

The university receives funding from the State of Ohio, the federal government and local governments to support various aspects of the university’s operations. The largest category received is the State Share of Instruction (SSI), which is expected to account for approximately 81.1% of State funding in FY 2026.

(\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
State Share of Instruction	\$428,599	\$437,373	\$453,309	2.8%	\$15,935	3.6%
Other Operating Appropriations	\$99,937	\$103,312	\$105,418	2.7%	\$2,107	2.0%
Total Government Appropriations	\$528,536	\$540,685	\$558,727	2.8%	\$18,042	3.3%

State Share of Instruction (SSI)

The SSI allocation is the State of Ohio’s primary funding support for higher education. The allocation between public colleges and universities in Ohio is based on their share of enrollment, course and degree completions, indexed for financially and academically at-risk resident undergraduate students, medical and doctoral subsidy, and other criteria intended to advance the goals of the state. The FY 2026 Financial Plan assumes \$7.4 million annual growth in the historical SSI allocation, or a 1.7% increase, after accounting for the \$8.5 million operating earmark for the Salmon P. Chase Center, added to the SSI line item as part of the state’s biennial operating budget process. The SSI formula increase is driven by a 1% increase in appropriation alongside a 0.7% increase in Ohio State’s share of course and degree completions across all levels of instruction. The Columbus campus expects to receive approximately 95.7% of the SSI formula allocation in FY 2026, or \$425.7 million, with the remaining \$19.1 million earned by the regional campuses.

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Other Operating Appropriations

In addition to SSI funding, the university also receives funding directed for specific purposes through state line-item appropriations. Total appropriations for FY 2026 are projected to be \$105.4 million, a \$2.1 million increase from FY 2025 in alignment with the final state operating budget appropriations.

Grants and Contracts

Grants and contracts revenue is administered in two ways: recorded by individual units in segregated grants and contracts funds or sponsored projects administered by the Office of Sponsored Programs. For FY 2026, revenue from grants and contracts (including non-exchange grants) is expected to be \$1.1 billion, representing a decrease of 5.1% as compared to the FY 2025 Forecast.

(\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Federal Grants and Contracts	\$518,809	\$530,660	\$443,771	-7.5%	(\$86,889)	-16.4%
Private Grants and Contracts	\$338,077	\$366,095	\$386,095	6.9%	\$20,000	5.5%
State Grants and Contracts	\$126,623	\$101,468	\$103,489	-9.6%	\$2,021	2.0%
Local Grants and Contracts	\$33,042	\$32,000	\$33,458	0.6%	\$1,458	4.6%
Total Exchange Grants & Contracts	\$1,016,551	\$1,030,222	\$966,813	-2.5%	(\$63,409)	-6.2%
Federal Grants and Contracts Non-Exchange	\$70,982	\$89,749	\$88,937	11.9%	(\$812)	-0.9%
State Grants and Contracts Non-Exchange	\$30,851	\$49,226	\$53,744	32.0%	\$4,519	9.2%
Federal Covid Assistance	\$2,924	\$-	\$-	-100.0%	\$0	n/a
Federal Build America Bonds Subsidy	\$11,321	\$11,321	\$11,321	0.0%	\$0	0.0%
Total Non-Exchange Grants & Contracts	\$116,078	\$150,296	\$154,003	15.2%	\$3,706	2.5%
Total Grants & Contracts	\$1,132,629	\$1,180,518	\$1,120,815	-0.5%	(\$59,703)	-5.1%

Of the \$1.1 billion, \$803.8 million is administered by the Office of Sponsored Programs, \$171.2 million is administered directly by colleges and support units, \$134.5 million is administered by Student Financial Aid for student aid programs, and \$11.3 million is received as federal subsidy for Build America Bond interest. Projects administered by the Office of Sponsored Programs typically have a more stringent process and documentation requirements than projects that are directly administered through the colleges and support units.

Exchange Grants and Contracts

Exchange grants and contracts are administered either through the Office of Sponsored Programs or directly by colleges and support units. The university secures funding for sponsored research programs from a variety of external sources. External grants are awarded by federal, state, and local agencies, along with private foundations and corporate sponsors. Total revenue for sponsored research programs administered by the Office of Sponsored Programs is expected to decrease from \$842.3 million in FY 2025 to approximately \$803.8 million in FY 2026, a decrease of 4.6%. The estimated decrease is based on the current research grant funding landscape at the federal government level.

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The sponsored research revenues include facilities and administrative (F&A) cost recoveries, which are projected to be \$138.1 million, a 27.8% decrease over the estimated FY 2025 recovery of \$191.2 million. F&A costs are recovered from most sponsored programs to offset the cost of maintaining the physical and administrative infrastructure that supports the research enterprise at the university. It is important to note that direct and indirect cost expenditures do not necessarily align when comparing expected revenue streams, which occur for two reasons. First, certain direct cost expenditures do not recover F&A. Second, not all sponsors allow the university to recover F&A at the university's fully negotiated rate. The full negotiated F&A rate for FY 2026 will tentatively remain at 57.5%, the same rate in effect for FY 2025. While the institution's negotiated F&A rate remains unchanged, the university's plan assumes federal indirect cost recoveries are capped at 30% given uncertainty in the federal research landscape.

FY 2026 revenue for exchange grants and contracts administered directly by individual colleges and support units is expected to decrease to \$163.2 million, a decrease of 13.2%.

Non-Exchange Grants and Contracts

Some grants and contract revenues are considered non-exchange items and appear in the non-operating section of the external income statement as Non-Exchange Grants. These items include \$134.5 million of grants administered by Student Financial Aid, sourced from federal funding for Pell Grants and Supplemental Educational Opportunity Grants (SEOG) and state funding for Ohio College Opportunity Grants (OCOG) and the Governor's Merit Scholarship.

Sales and Services

(\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Auxiliaries	\$450,352	\$492,416	\$484,281	3.7%	(\$8,135)	-1.7%
Departmental	\$205,271	\$212,780	\$219,455	3.4%	\$6,675	3.1%
Total Sales and Services	\$655,623	\$705,196	\$703,736	3.6%	(\$1,460)	-0.2%

Student Life, Athletics and Business Advancement comprise the majority of sales and services of auxiliary enterprises. Revenue from auxiliary enterprises before scholarship allowances is expected to decrease \$8.1 million, or 1.7%, in FY 2026 over FY 2025. Athletics' sales and services are expected to grow by \$9.3 million in FY26, primarily driven by larger Big 10 Conference distributions resulting from the removal of gate revenue sharing, as well as increased television media rights. Student Life room and board revenues are projected to decrease by \$5.3 million due to a decrease in the budgeted number of beds occupied and meal plans purchased. Additionally, the FY26 Plan for the Schottenstein Center (Business Advancement) includes an \$11.5 million decrease due to its conservative projection of Ohio Stadium shows, prior to knowing performers.

Revenue sources in educational departments consist largely of clinical operations in colleges such as Dentistry, Optometry, and Veterinary Medicine and non-college departments such as Recreational Sports and Student Health Services. Sales and services are expected to increase by \$6.7 million in FY 2026 due primarily to increases in Dentistry and Veterinary Medicine clinical activity.

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Advancement Sources

\$ thousands	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Current Use Gifts	\$172,581	\$190,000	\$197,000	6.8%	\$7,000	3.7%
Endowment Distributions	\$371,294	\$423,929	\$458,549	11.1%	\$34,619	8.2%
Total Advancement Sources	\$543,875	\$613,929	\$655,549	9.8%	\$41,619	6.8%

Gifts from alumni, friends, grateful patients, and the rest of Buckeye Nation continue to be directed to our students, faculty, campuses and future potential. In FY 2026, the university’s goal for “New Fundraising Activity” is \$706 million, which represents a \$43 million increase as compared to the FY 2025 Forecast. New Fundraising Activity includes gifts, pledges and certain private contracts. The Office of Advancement fully expects to deliver results in line with expectations. Dollars are being raised by engaging a variety of constituents, including students, faculty, staff, alumni, friends, corporate partners and private foundations.

To display an operating financial plan, only the cash sources that can be used immediately against operating expenses are presented. These include current use gifts and endowment distributions.

Current Use Gifts

In the FY 2026 Financial Plan, current use gifts are expected to increase by \$7.0 million compared to the updated goal used in the FY 2025 Forecast.

Endowment Distributions

Endowment distributions are the spendable portion of annual distributions from the Long-Term Investment Pool (LTIP), which is projected to total \$8.3 billion as of FY 2025 year-end and includes gifted endowment funds of \$3.2 billion, designated funds of \$3.3 billion and operating funds of \$1.8 billion that have been invested for long-term institutional stability. The investment team has built a portfolio of specialized investment teams around the world to implement the university’s investment strategy and to be responsive to changing market conditions. The LTIP is expected to gain \$546.7 million before fees at an 8.0% return in FY 2026 and is projected to have an ending market value of \$8.7 billion at the end of FY 2026.

For the operating budget, spendable endowment distributions of \$458.5 million for FY 2026 are anticipated. Distribution per share was calculated based on projected market values through March 2025.

Interest Income

Interest income on cash, short and intermediate-term investments is budgeted at \$100.4 million for FY 2026, a decrease of \$49.6 million from the forecasted FY 2025 activity. Ongoing elevated short-term rates due to economic conditions were experienced in FY 2025. The FY 2026 Plan assumes a conservative short-term rate, in line with historical levels.

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Chapter 5 | University Operating Plan | Uses

Salaries and Benefits

\$ thousands	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Faculty	\$652,117	\$686,935	\$742,176	6.7%	\$55,242	8.0%
Staff	\$1,075,599	\$1,133,361	\$1,200,745	5.7%	\$67,384	5.9%
Students	\$170,386	\$181,167	\$176,985	1.9%	(\$4,182)	-2.3%
Total Salaries	\$1,898,102	\$2,001,463	\$2,119,906	5.7%	\$118,443	5.9%
Benefits	\$545,244	\$568,402	\$613,457	6.1%	\$45,055	7.9%
Total Personnel	\$2,443,346	\$2,569,865	\$2,733,363	5.8%	\$163,497	6.4%

Salaries

Salary expenses are expected to increase by \$118.4 million or 5.9% over FY 2025. The plan for FY 2026 includes a 3.5% increase in faculty and staff annual merit compensation pool, which accounts for \$59.3 million (\$21.8 million for faculty and \$37.5 million for staff) of the increase. Beyond salary increases, additional investments in human capital are largely driven by strategic investments in academic excellence and market wage pressures, as detailed below.

Strategic Investments: Academic Excellence –FY 2026 Plan includes incremental investments of \$50.0 million for faculty salary and benefits. The strategic investment in academic excellence will be tracked separately throughout FY 2026 and reported to the Board of Trustees to ensure alignment with the university’s strategic plan.

Market Wage Pressures –FY 2026 Plan includes a total of \$4.0 million in incremental salary expense to address wage pressures that are a result of both internal and external market factors. The planned university adjustments reflect staff raise-to-minimum for employees identified as part of Career Roadmap salary re-banding, which continues to create compression issues. As the external labor landscape remains highly competitive, the university is facing pressures to counter-offer salary adjustments to retain existing employees, in addition to extending competitive salary offers for open positions to attract new talent.

Benefits

Benefits consist of several different pools of costs, including retirement plans, medical plans, educational benefits and life insurance benefits. For the forecast and budget, benefits are estimated based on the composite benefit rate applied to salaries by employee type (e.g., full-time faculty vs. part-time staff vs. students). Actual expenses may be more or less than the amount collected through the rates and vary from year to year. The composite benefit rate-setting process takes these yearly variations into account.

Total benefit costs are expected to increase by \$45.1 million or 7.9% over FY 2025, to \$613.5 million. This increase is primarily driven by salary guidelines, benefit cost increases, as well as strategic hiring. The annual

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change in aggregate benefit costs is due to the 9% increase in the medical plan component; these rates will continue to reflect controlled employer medical costs.

Controlled employer medical costs are driven by benefits plan changes that reflect recent trends in moving to consumerism. Employer medical costs are also driven by tightened controls over benefits administration and decreased inpatient and outpatient utilization from enhanced medical management processes. Benefits include the university's contribution to employee retirement plans, various medical, dental, vision, life and disability plans, employee and dependent tuition plans and university expenses related to compulsory plans, such as workers' compensation and unemployment compensation.

Retirement Plans - University employees are covered by one of three retirement systems. The university faculty are covered by the State Teachers Retirement System of Ohio (STRS Ohio). Substantially all other employees are covered by the Public Employees Retirement System of Ohio (OPERS). Employees may opt out of STRS Ohio and OPERS and participate in the Alternative Retirement Plan (ARP) if they meet certain eligibility requirements. Under each of the plans, the university contributes 14% of the employee's pay to the plan annually, while the employees contribute 10%. Vesting varies by plan.

Medical Plan - The university is self-insured for employee health insurance. FY 2026 medical plan costs are budgeted based on historical cost trend data, projected employee eligibility, and expected plan changes associated with governmental regulations and plan design.

Student Financial Aid

(\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Institutional	\$196,614	\$206,892	\$206,823	2.6%	(\$69)	0.0%
Departmental	\$83,167	\$86,171	\$87,691	2.7%	\$1,520	1.8%
Endowment and Development	\$55,991	\$64,508	\$64,074	7.0%	(\$435)	-0.7%
Athletic	\$37,337	\$35,916	\$33,920	-4.7%	(\$1,997)	-5.6%
Federal	\$69,306	\$86,067	\$85,251	10.9%	(\$816)	-0.9%
State	\$25,901	\$44,723	\$49,242	37.9%	\$4,519	10.1%
Total Student Aid	\$468,315	\$524,279	\$527,001	6.1%	\$2,722	0.5%
Fee Authorizations	\$140,316	\$147,807	\$149,250	3.1%	\$1,443	1.0%

Financial Aid is a critical investment of resources that keeps the cost of education manageable for students. The Ohio State University engages both the federal and state governments in conversations to stress the importance of financial aid and reasonable loan programs for students.

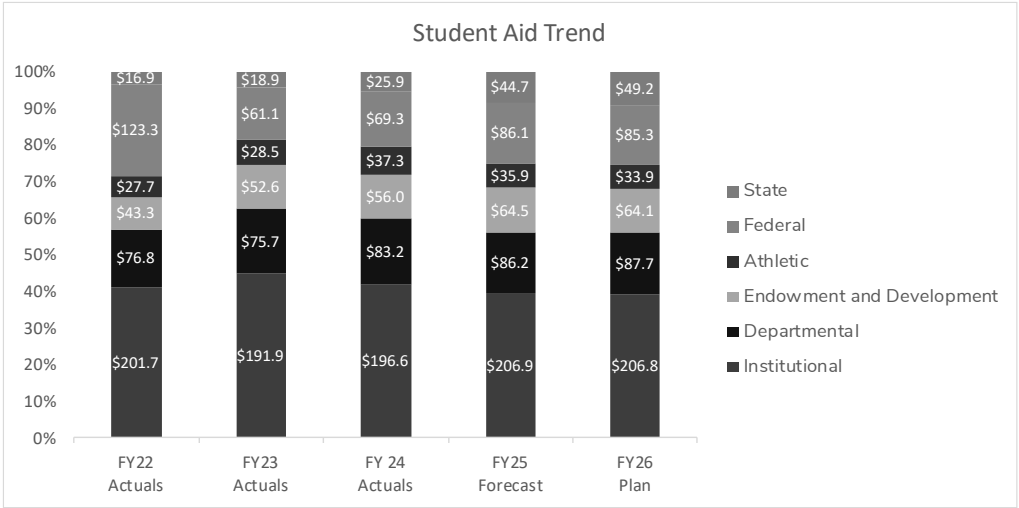
The financial aid plan seeks to advance two specific goals for the university: to invest in the quality, quantity and mix of students to continue to advance Ohio State as a leading national flagship public research university; and to invest in students to fulfill the role as a land grant university for the State of Ohio, whereby college access is afforded to those students with limited resources. The university continues to support both goals and develop the appropriate balance in moving the university toward eminence. Fundraising efforts are also underway through various initiatives.

FY 2026 FINANCIAL PLAN

Since FY 2015, millions in additional need-based financial aid have supported students with the introduction of the Buckeye Opportunity Program and President’s Affordability Grants. Since FY 2018, and the advent of the undergraduate Tuition Guarantee, Ohio State’s average student debt (for those with loans) has decreased 9.6% from nearly \$27,500 per student to less than \$25,000 per student.

Ohio State expects to distribute a total of \$527.0 million of financial aid, excluding graduate fee authorizations, to students in FY 2026. Sources for financial aid include federal and state programs, gifts and endowments and institutionally funded aid. The university financial statements present a portion of financial aid, in accordance with GASB accounting requirements, as an allowance against gross tuition and, in the case of athletic and room and board scholarships, an allowance against sales and services of auxiliary enterprises.

The increased budget of \$2.7 million of total student aid for FY 2026 is driven primarily by the addition of a second cohort of students to the Governor’s Merit Scholarship that was created in FY 2025.



Fee Authorizations

Fee authorizations are provided to students holding graduate student appointments to pay for graduate tuition and fees. Total university fee authorization expenses are expected to grow by 1%, from \$147.8 million in FY 2025 to \$149.3 million in FY 2026.

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Supplies and Services

Supplies and services expenses are comprised of several discrete categories, including the following: Cost of Sales, Supplies, Services, Travel, Utilities, Other Expense and Non-Capitalized Equipment, all offset by Intra-University Revenue.

\$ thousands	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Cost of Sales	\$131,294	\$142,673	\$137,090	2.2%	(\$5,583)	-3.9%
Supplies	\$160,147	\$151,146	\$154,536	-1.8%	\$3,390	2.2%
Services	\$478,347	\$507,576	\$535,742	5.8%	\$28,167	5.5%
Travel	\$80,315	\$89,170	\$89,008	5.3%	(\$163)	-0.2%
Utilities	\$198,416	\$200,211	\$228,519	7.3%	\$28,309	14.1%
Other Expense	\$222,307	\$279,487	\$280,412	12.3%	\$925	0.3%
Investment Expenses	\$80,866	\$84,043	\$87,306	3.9%	\$3,263	3.9%
Non-Capital Equipment (<\$5k)	\$62,322	\$68,460	\$74,158	9.1%	\$5,698	8.3%
Intra-University Revenue	(\$175,953)	(\$207,193)	(\$213,350)	10.1%	(\$6,157)	3.0%
Total Supplies and Services	\$1,238,061	\$1,315,573	\$1,373,420	5.3%	\$57,848	4.4%

Overall, supplies and services expenses are projected to increase \$57.8 million, or 4.4%, over FY 2025 to \$1.4 billion. In response to global macroeconomic trends, including research activity and associated indirect costs, we are planning for general inflation of 3.0%, which is below the historical 5% planned annual increases and yields an increase of approximately \$36 million. Utilities expense, including commodity costs and expenses associated with the OSEP Engie agreement, are expected to grow by 14.1% based on OSEP-related capital project assumptions and utility inflation, driven by purchased power and market capacity impacts. The growth of 3.9% in investment expenses is aligned with the growth in the Long-Term Investment Pool (LTIP).

University Debt Service

The proceeds of debt issuances have been utilized to fund major construction projects, including the Ohio State Wexner Medical Center expansion, student housing construction and refurbishments, significant campus infrastructure improvements and academic facility construction and enhancements. A portion of the consolidated debt service budget is aligned with the Health System based on its internal loan amortization schedules, with the remainder attributed to the university. The university's portion of the consolidated debt service is expected to decrease \$10.6 million from FY 2025 to approximately \$68.0 million in FY 2026. As the Health System debt service is planned to remain relatively flat between FY 2025 and FY 2026, the reduced debt service aligned with the university is due to \$14.4 million less in principal payments on the 2012A and 2020A series bonds in FY 2026.

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Chapter 6 | Health System Operating Plan

In order to consolidate the University with the Health System, we format the Health System budget into a sources and uses view as provided below:

	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Sources (\$ thousands)						
Sales and Services - Health System	\$4,444,042	\$4,964,944	\$5,390,544	10.1%	\$425,600	8.6%
Interest Income	\$92,051	\$56,217	\$50,984	-25.6%	(\$5,233)	-9.3%
Other Revenue	\$71,299	\$34,042	\$58,010	-9.8%	\$23,969	70.4%
Total Sources	\$4,607,392	\$5,055,203	\$5,499,538	9.3%	\$444,336	8.8%
Total Uses (\$ thousands)						
Total Personnel Expense	\$2,019,464	\$2,164,404	\$2,392,835	8.9%	\$228,431	10.6%
Supplies, Services & Other	\$2,029,800	\$2,273,860	\$2,552,069	12.1%	\$278,209	12.2%
Debt Service	\$113,125	\$129,456	\$124,158	4.8%	(\$5,298)	-4.1%
Total Non-Personnel Expenses	\$2,142,925	\$2,403,316	\$2,676,227	11.8%	\$272,911	11.4%
Total Uses	\$4,162,389	\$4,567,720	\$5,069,062	10.4%	\$501,342	11.0%
Sources Less Uses, Operating	\$445,003	\$487,483	\$430,476			
Total Capital-Related Sources	\$371,284	\$24,811	\$38,864			
Total Capital-Related Uses	\$627,021	\$523,601	\$566,252			
Sources Less Uses, Capital	(\$255,737)	(\$498,790)	(\$527,388)			
Sources Less Uses, Capital and Operating	\$189,266	(\$11,308)	(\$96,912)			

The managerial Income Statement view provided on behalf of the Health System is provided below:

	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
(\$ thousands)						
Total Operating Revenue	\$4,444,042	\$4,964,944	\$5,390,544	10.1%	\$425,600	8.6%
Salaries & Benefits	\$2,019,464	\$2,164,404	\$2,392,835	8.9%	\$228,431	10.6%
Supplies	\$516,707	\$560,441	\$608,603	8.5%	\$48,162	8.6%
Drugs & Pharmaceuticals	\$642,946	\$749,846	\$816,641	12.7%	\$66,794	8.9%
Services	\$482,102	\$553,807	\$640,349	15.2%	\$86,541	15.6%
Depreciation	\$231,473	\$267,881	\$291,132	12.1%	\$23,250	8.7%
Interest	\$41,362	\$50,682	\$47,328	7.0%	(\$3,354)	-6.6%
University Overhead	\$80,757	\$86,540	\$92,454	7.0%	\$5,914	6.8%
Other Expenses	\$71,855	\$75,590	\$82,972	7.5%	\$7,382	9.8%
Total Operating Expenses	\$4,086,666	\$4,509,192	\$4,972,313	10.3%	\$463,121	10.3%
Gain/Loss from Operations	\$357,376	\$455,752	\$418,231			
Medical Center Investments	(\$235,433)	(\$247,635)	(\$311,051)	14.9%	(\$63,416)	-225.6%
Investment Income	\$92,051	\$56,217	\$50,984	-25.6%	(\$5,233)	-9.3%
Other Gains (Losses)	\$71,299	\$34,042	\$58,010	-9.8%	\$23,969	70.4%
Excess of Revenue over Expenses	\$285,293	\$298,376	\$216,174			

The margin for the OSU Health System is budgeted at \$216.2 million for FY 2026. The operating budget is set at a level to achieve the organization's strategic and long-range financial plan goals and provides the necessary margin to invest in clinical and academic programs, strategic capital and provide debt service coverage. The

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operating budget for FY 2026 anticipates continued growth in both inpatient and outpatient activities, with the cancer program, new ambulatory services and surgical specialties being the leading contributors. The budget also includes assumptions around healthcare reform impacts on reimbursement. In addition, the budget continues to incorporate payor mix changes resulting from an aging population with shifts to Medicare. Included in the budget is the Health System's continued support for faculty investments relating to clinical, academic and research initiatives (\$522.0 million). The budget provides a Total Margin percentage of 4.0% and earnings before interest, depreciation, and amortization (EBIDA) margin of 10.3%.

Revenue Drivers

Overall revenue is budgeted to increase 8.6% compared to an 11.7% increase forecasted in FY 2025. Total inpatient volume growth is budgeted at 3.1% above FY 2025. Growth is projected across numerous specialties with a slight increase in length of stay assumed related to increased patient acuity. Outpatient activity is expected to grow 3.7% in total. The outpatient growth is being driven by the backfill of University Hospital space and continued growth in outpatient ambulatory facilities, including Outpatient James, New Albany and Dublin. The overall payor mix continues to see growth in Medicare and decreases in managed care. The managed care plan migration to Medicare due to the aging population is anticipated at 2% in FY 2026. Overall, Medicare rates will increase by approximately 1%. Managed care arrangements are negotiated through the end of FY 2026 and, in some cases, into FY 2027. Inflation, quality-driven outcomes and risk-based contracts are the primary drivers in ongoing negotiations with payors and are reflected in the modeled reimbursement rates. The payment increases for managed care contracts are on average 5% in rate growth, while government payor base rates are anticipated to increase 1%.

Expense Drivers

Total operating expenses will grow by 10.3%, which aligns with the prior-year growth of 10.3%. Drug costs are increasing 8.9% with 4.0% due to inflation, and the remaining impact is primarily due to growth in infusions and increased cancer drug utilization. Operating expenses, excluding drugs, depreciation and overhead, are budgeted to grow by 10.8%, of which 4.4% will be activity-driven and 6.4% rate-driven. Annual salary merit increases are budgeted at 3.5% and an additional 2% is planned in the budget relating to market increases for employee retention and recruitment. Benefit rates are expected to increase 2.5% from FY 2025. Revenue enhancement and expense efficiency initiatives will continue to be an emphasis to mitigate pressures around inflationary expense impacts on labor, supplies and drugs.

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Chapter 7 | OSU Physicians Operating Plan

In order to consolidate the University with OSU Physicians (OSUP), we format the OSUP budget into a sources and uses view as provided below.

	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Sources (\$ thousands)						
Sales and Services - OSU Physicians	\$943,589	\$1,038,232	\$1,149,480	10.4%	\$111,248	10.7%
Interest Income	\$10,126	\$8,514	\$9,687	-2.2%	\$1,173	13.8%
Net Transfers from OSU Health System	\$159,004	\$153,905	\$176,914	5.5%	\$23,009	15.0%
Total Sources	\$1,112,719	\$1,200,651	\$1,336,081	9.6%	\$135,430	11.3%
	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Total Uses (\$ thousands)						
Total Personnel Expense	\$717,406	\$786,255	\$883,345	11.0%	\$97,090	12.3%
Supplies, Services & Other	\$384,378	\$409,328	\$448,122	8.0%	\$38,794	9.5%
Total Non-Personnel Expenses	\$384,378	\$409,328	\$448,122	8.0%	\$38,794	9.5%
Total Uses	\$1,101,784	\$1,195,583	\$1,331,467	9.9%	\$135,884	11.4%
Sources Less Uses, Operating	\$10,935	\$5,068	\$4,614			

The managerial Income Statement view provided on behalf of the OSU Physicians is provided below:

(\$ thousands)	FY24 Actuals	FY25 Forecast	FY26 Plan	FY24-FY26 CAGR	FY25-FY26 \$ Diff	FY25-FY26 % Diff
Net Patient Revenue	\$696,431	\$759,871	\$845,439	10.2%	\$85,568	11.3%
Other Revenue	\$247,158	\$278,361	\$304,041	10.9%	\$25,680	9.2%
Medical Center Investments	\$159,004	\$153,905	\$176,914	5.5%	\$23,009	15.0%
Interest Income	\$10,126	\$8,514	\$9,687	-2.2%	\$1,173	13.8%
Total Revenue	\$1,112,719	\$1,200,651	\$1,336,081	9.6%	\$135,430	11.3%
Provider Salaries & Benefits	\$717,406	\$786,255	\$883,345	11.0%	\$97,090	12.3%
Non-Provider Salaries & Benefits	\$206,636	\$232,078	\$260,528	12.3%	\$28,450	12.3%
Other Expenses	\$177,743	\$177,250	\$187,594	2.7%	\$10,344	5.8%
Depreciation	\$5,417	\$4,800	\$4,389	-10.0%	(\$411)	-8.6%
Interest	\$444	\$235	\$225	-28.9%	(\$10)	-4.3%
Total Expenses	\$1,107,645	\$1,200,618	\$1,336,081	9.8%	\$135,463	11.3%
Change in Net Assets	\$5,074	\$33	\$0			

Total revenue is budgeted to increase \$135.4 million or 11.3% over FY 2025. Total operating revenue includes net patient revenue and other operating revenue associated with physician services. Net patient revenue is budgeted to increase \$85.6 million or 11.3% over FY 2025 due to faculty recruitment, increased clinical productivity and expansion of services in Outpatient Care locations and three additional Primary Care locations. Other operating revenue and MCI are budgeted to increase \$48.7 million due primarily to support for and growth in specific healthcare service lines.

Total expenses are expected to increase by \$135.5 million. Expense categories with the largest increases were physician salaries & benefits and staff salaries & benefits. Growth in staff salaries includes investment in the expansion of services and service locations.

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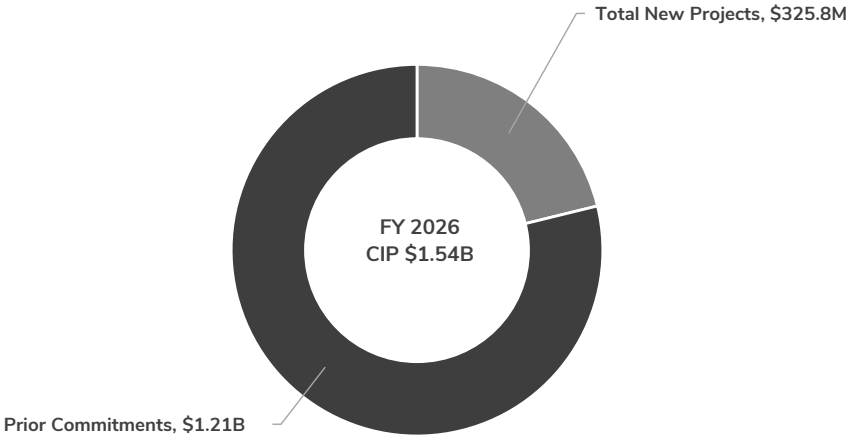
Work continues to increase revenue growth through several operating initiatives, plus an improvement in payor mix. In addition, expense control measures continue to evolve to help keep controllable costs, such as the number of staff, supplies, and services, in line with revenue changes. Annual salary merit increases are budgeted at 3.5% and an additional 2% is planned in the budget related to market increases for employee retention and recruitment. The budget also includes assumptions about the inflationary impact on supplies and offsetting supplies expense mitigation strategies. These assumptions are aligned with the Health System's FY2026 Financial Plan.

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Chapter 8 | Capital Investment Plan FY 2026-30

The university is planning to invest more than \$1.54 billion through FY 2030 in strategic physical plant projects as detailed in the final FY 2026-30 Capital Investment Plan. Each year, Ohio State completes a robust capital planning process resulting in a comprehensive Capital Investment Plan (CIP) that reflects all capital investments across six campuses and the Ohio State Wexner Medical Center, regardless of funding source. Each project is evaluated for alignment with strategic, physical and financial plans prior to inclusion in the Capital Investment Plan. This integrated approach ensures that capital investments support the strategic mission of the university.

The Capital Investment Plan captures the expenditure on all capital projects, defined as projects over \$250,000, that are in various stages of implementation or are anticipated to begin in FY 2026. The following chart reflects the Capital Investment Plan through FY 2030. Of the total \$1.54 billion, \$1.21 billion is remaining spend on projects previously committed and \$325.8 million is on new projects beginning in FY 2026. The remaining expenditure reflects the active strategic capital projects, including the Wexner Medical Center Inpatient Hospital. The total for the new expenditures includes the projects for which state capital funding has been requested.



FY 2026 FINANCIAL PLAN

Prior Commitment Remaining Spend

Capital Priority (\$ millions)	Projected Capital Expenditures					Total
	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	FY26-FY30
ABA - Schottenstein Center - Main Roof Replacement	\$2.2	\$5.5	\$0.5	-	-	\$8.2
ABA - Schottenstein Center - Scoreboard Replacement	\$1.0	\$2.8	\$1.2	-	-	\$5.0
A&S – Biological Sciences Building Upgrades	-	\$1.8	\$5.3	\$4.7	\$2.3	\$14.0
A&S – Department of Economics Relocation	\$4.5	\$4.9	-	-	-	\$9.4
COE – BEMC Phase 2	\$32.1	\$9.4	\$1.4	-	-	\$42.9
COE – Bus Testing Facility	\$2.7	\$12.6	\$0.7	-	-	\$16.0
EHE – Campbell Hall Renovation	\$16.1	\$20.5	\$6.3	-	-	\$42.9
ERIK – Battery Cell Research and Demonstration Center	\$6.0	\$1.3	-	-	-	\$7.4
ERIK - Microelectronic Commons	\$2.4	-	-	-	-	\$2.4
FAES – Waterman Infrastructure Project	-	\$4.1	\$2.8	-	-	\$7.0
FAES – Waterman Multispecies Animal Learning Center	\$21.9	\$18.3	-	-	-	\$40.2
VET – PET/CT Space Renovation	\$0.3	\$0.8	\$1.4	-	-	\$2.5
WMC – Inpatient Hospital	\$201.3	\$88.6	-	-	-	\$289.9
WMC – James Cellular Therapy Lab	\$1.3	\$3.8	\$1.7	-	-	\$6.8
WMC – James Outpatient Care	\$7.5	-	\$12.7	-	-	\$20.2
WMC – James Outpatient Care Buildout	\$1.0	\$3.8	\$1.7	-	-	\$6.5
WMC – Magnetic Resonance Linear Accelerator & Housing	\$0.9	\$3.2	\$3.6	\$2.3	\$0.3	\$10.3
WMC – OSU East 4th Floor OR Renovation	\$0.8	\$7.0	\$10.6	-	-	\$18.4
WMC – Outpatient Care Powell	\$58.3	\$46.3	-	-	-	\$104.6
Roll Up Other Projects	\$196.8	\$179.2	\$160.1	\$13.9	\$8.5	\$558.4
Total Prior Commitments	\$557.1	\$413.9	\$209.8	\$20.9	\$11.1	\$1,212.8

New Projects Beginning in FY 2026

Capital Priority (\$ millions)	Projected Capital Expenditures					Total
	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	FY26-FY30
Anticipated Spend for CIP Changes	\$10.0	-	-	-	-	\$10.0
Roll up of Small Infrastructure RDM Projects	\$2.7	\$10.4	\$10.8	\$5.4	-	\$29.3
Small Programmatic Cash Ready	\$3.6	\$13.8	\$11.6	\$2.3	-	\$26.8
WMC/COM - Roll up of Multiple Cash Ready	\$173.6	\$7.9	\$5.3	-	-	\$186.9
New Major Projects	\$7.6	\$27.2	\$26.7	\$9.7	\$1.8	\$72.8
ATHL - 1922 Club Renovation (Construction)	\$1.8	\$5.4	\$5.4	\$1.9	-	\$14.5
ATHL - Technology Modernization (Construction)	\$2.7	\$8.0	\$7.9	\$2.8	-	\$21.3
DENT - Dental Simulation Space Modernization	\$0.2	\$1.5	\$3.7	\$3.4	\$1.8	\$10.6
NURS - Newton Hall Space Upgrades	\$0.2	\$1.4	\$2.1	\$0.4	-	\$4.0
NURS - Newton Hall AHU Replacements	\$0.3	\$2.7	\$4.2	\$0.8	-	\$8.0
SL - North Towers Upgrades - Jones, Taylor, Drackett (Design)	\$2.2	\$6.7	\$1.1	-	-	\$10.0
New Projects Beginning in FY26	\$197.3	\$57.8	\$52.0	\$16.9	\$1.8	\$325.8

FY 2026 FINANCIAL PLAN

Capital Plan Funding Sources

Capital projects are funded with a variety of sources, including state capital appropriations, fundraising, debt proceeds, current year operating margins and existing cash from units and central university. As discussed previously, operating margins can be highly restrictive, and only certain funds are available for capital use. As projects are completed, restricted dollars such as state capital appropriations and private capital gifts are typically used first, followed by existing cash, depending on the project or funding plan. Each project requiring debt must have a specific funding plan completed and approved before inclusion in the capital plan. For the FY 2026-2030 Capital Investment Plan, the following represents the sources identified to fund the new projects.

Unit Type (\$ millions)	Local	Wexner Medical Center	State	Grant	Pledged Gifts	University Debt	Total FY26-FY30	% by Unit
Academic Support	\$29.9	-	\$4.6	-	-	\$2.9	\$37.3	11.4%
Athletics	\$11.2	-	-	-	\$1.0	\$33.8	\$46.0	14.1%
Infrastructure	\$32.8	-	-	\$0.5	-	-	\$33.2	10.2%
Regional Campuses	-	-	-	\$0.4	-	-	\$0.4	0.1%
Student Life	\$12.0	-	-	-	-	\$10.0	\$22.0	6.8%
WMC/COM	\$15.9	\$171.0	-	-	-	-	\$186.9	57.4%
Grand Total	\$101.7	\$171.0	\$4.6	\$0.9	\$1.0	\$46.7	\$325.8	100.0%
% by Fund Source	31.2%	52.5%	1.4%	0.3%	0.3%	14.3%	100.0%	

FY 2026 FINANCIAL PLAN

Appendix A | Student Fees

Columbus Undergraduate Fees

Typical Annual Undergraduate Fees by Cohort (Autumn and Spring Terms)

Resident	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$9,351	\$11,525	\$11,826	\$12,180	\$12,545
General Fees	\$390	\$458	\$524	\$548	\$571
Student Activity Fee	\$75	\$80	\$80	\$80	\$82
Student Union Fee	\$149	\$149	\$149	\$149	\$149
Rec Fee	\$246	\$246	\$253	\$260	\$267
COTA Fee	\$27	\$27	\$27	\$27	\$27
Total Tuition and Fees	\$10,238	\$12,485	\$12,859	\$13,244	\$13,641
Housing (Rate I)	\$7,876	\$9,514	\$9,798	\$10,090	\$10,392
Dining (Gray 10)	\$3,790	\$4,452	\$4,584	\$4,720	\$4,860
Total	\$21,904	\$26,451	\$27,241	\$28,054	\$28,893

Non-Resident Domestic	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$9,351	\$11,525	\$11,826	\$12,180	\$12,545
General Fees	\$390	\$458	\$524	\$548	\$571
Student Activity Fee	\$75	\$80	\$80	\$80	\$82
Student Union Fee	\$149	\$149	\$149	\$149	\$149
Rec Fee	\$246	\$246	\$253	\$260	\$267
COTA Fee	\$27	\$27	\$27	\$27	\$27
Non-Resident Surcharge	\$28,782	\$28,782	\$28,782	\$28,782	\$28,782
Total Tuition and Fees	\$39,020	\$41,267	\$41,641	\$42,026	\$42,423
Housing (Rate I)	\$7,876	\$9,514	\$9,798	\$10,090	\$10,392
Dining (Gray 10)	\$3,790	\$4,452	\$4,584	\$4,720	\$4,860
Total	\$50,686	\$55,233	\$56,023	\$56,836	\$57,675

Non-Resident International	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$9,351	\$11,525	\$11,826	\$12,180	\$12,545
General Fees	\$390	\$458	\$524	\$548	\$571
Student Activity Fee	\$75	\$80	\$80	\$80	\$82
Student Union Fee	\$149	\$149	\$149	\$149	\$149
Rec Fee	\$246	\$246	\$253	\$260	\$267
COTA Fee	\$27	\$27	\$27	\$27	\$27
Non-Resident Surcharge	\$28,782	\$28,782	\$28,782	\$28,782	\$28,782
International Surcharge	\$3,103	\$3,103	\$3,103	\$3,103	\$3,103
Total Tuition and Fees	\$42,123	\$44,370	\$44,744	\$45,129	\$45,526
Housing (Rate I)	\$7,876	\$9,514	\$9,798	\$10,090	\$10,392
Dining (Gray 10)	\$3,790	\$4,452	\$4,584	\$4,720	\$4,860
Total	\$53,789	\$58,336	\$59,126	\$59,939	\$60,778

FY 2026 FINANCIAL PLAN

Regional Campus and ATI Undergraduate Fees

Typical Annual Regional Campus Undergraduate Fees by Cohort (Autumn and Spring Terms)

Resident	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$7,050	\$8,677	\$8,937	\$9,205	\$9,481
General Fees	\$233	\$267	\$275	\$283	\$291
Total Tuition and Fees	\$7,283	\$8,944	\$9,212	\$9,488	\$9,772
Non-Resident	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$7,050	\$8,677	\$8,937	\$9,205	\$9,481
General Fees	\$233	\$267	\$275	\$283	\$291
Non-Resident Surcharge	\$28,782	\$28,782	\$28,782	\$28,782	\$28,782
Total Tuition and Fees	\$36,065	\$37,726	\$37,994	\$38,270	\$38,554

Typical Annual ATI Undergraduate Fees by Cohort (Autumn and Spring Terms)

Resident	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$7,014	\$8,633	\$8,892	\$9,158	\$9,432
General Fees	\$233	\$267	\$275	\$283	\$291
Total Tuition and Fees	\$7,247	\$8,900	\$9,167	\$9,441	\$9,723
Non-Resident	Pre-tuition Guarantee	Cohort 2022-2023	Cohort 2023-2024	Cohort 2024-2025	Cohort 2025-2026
Instructional Fees	\$7,014	\$8,633	\$8,892	\$9,158	\$9,432
General Fees	\$233	\$267	\$275	\$283	\$291
Non-Resident Surcharge	\$28,782	\$28,782	\$28,782	\$28,782	\$28,782
Total Tuition and Fees	\$36,029	\$37,682	\$37,949	\$38,223	\$38,505

Undergraduate tuition and fee rates reflected for both the Columbus Undergraduate Fees and Regional Campus and ATI Undergraduate Fees do not include program specific, special or technology fees that may be assessed based on major or program of study. For more information, for more information, please visit: <https://registrar.osu.edu/student-hub/tuition-and-fees/>.

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Graduate and Professional Fees

Traditional Graduate and PhD programs charge standard graduate tuition and mandatory fees. Some graduate and professional programs charge a differential instructional fee based principally on market demand and pricing. For a detailed listing of graduate and professional fees by program, please visit: <https://registrar.osu.edu/student-hub/tuition-and-fees/graduate-tuition-and-fees/>.

FY 2026 FINANCIAL PLAN

Housing Rates

The Ohio State University Proposed Housing Rates for FY 2026

Housing Plans	FY 2025	FY 2026	\$ Change	% Change
Columbus Campus (Annual Rates - 2 semesters)				
Rate I	\$10,090	\$10,392	\$302	3.0%
Rate II	\$8,406	\$8,658	\$252	3.0%
Rate IIA	\$8,138	\$8,382	\$244	3.0%
Rate III	\$7,858	\$8,092	\$234	3.0%
Stadium Scholars Program	\$6,662	\$6,860	\$198	3.0%
Alumnae Scholarship Houses - single or double w/bath	\$7,640	\$7,868	\$228	3.0%
Alumnae Scholarship Houses - double or triple	\$7,472	\$7,696	\$224	3.0%
German House - 1-person room	\$7,748	\$7,980	\$232	3.0%
German House - 2-person room	\$7,214	\$7,430	\$216	3.0%
Columbus Campus (Monthly Housing Rates)				
237 E17th - mini-single	\$519	\$535	\$16	3.0%
237 E17th - single	\$718	\$740	\$22	3.0%
237 E17th - supersingle	\$868	\$894	\$26	3.0%
237 E17th - double	\$473	\$487	\$14	3.0%
Gateway - studio	\$1,105	\$1,138	\$33	3.0%
Gateway - 1 bedroom apartment	\$1,184	\$1,220	\$36	3.0%
Gateway - 2 bedroom apartment	\$2,306	\$2,375	\$69	3.0%
Gateway - 3 bedroom apartment	\$3,012	\$3,102	\$90	3.0%
Neil - efficiency	\$1,004	\$1,034	\$30	3.0%
Neil - 4 bedroom	\$994	\$1,024	\$30	3.0%
Penn Place - 1 person room	\$948	\$976	\$28	3.0%
Penn Place - 2 person room	\$544	\$560	\$16	3.0%
ATI				
1-bedroom for 2 (per person)	\$8,366	\$8,616	\$250	3.0%
2-bedroom for 2 (per person)	\$9,946	\$10,244	\$298	3.0%
2-bedroom for 4 (per person)	\$8,366	\$8,616	\$250	3.0%
2-bedroom for 5 (per person - double)	\$8,366	\$8,616	\$250	3.0%
2-bedroom for 5 (per person - triple)	\$7,218	\$7,434	\$216	3.0%
3-bedroom for 5 (per person - single)	\$8,814	\$9,078	\$264	3.0%
3-bedroom for 5 (per person - double)	\$8,366	\$8,616	\$250	3.0%
Private Apartment	\$9,946	\$10,244	\$298	3.0%
Newark				
1-person efficiency	\$9,370	\$9,650	\$280	3.0%
2-person efficiency (per person)	\$9,048	\$9,318	\$270	3.0%
2-bedroom for 4 (per person)	\$9,098	\$9,370	\$272	3.0%
3-bedroom for 6 (per person)	\$8,574	\$8,830	\$256	3.0%
McConnell Hall	\$9,370	\$9,650	\$280	3.0%
Mansfield				
2-bedroom for 2 (per person)	\$9,562	\$9,848	\$286	3.0%
2-bedroom for 4 (per person)	\$7,652	\$7,880	\$228	3.0%
5-bedroom for 5 (per person)	\$8,026	\$8,266	\$240	3.0%
5-bedroom for 6 - single (per person)	\$7,652	\$7,880	\$228	3.0%
5-bedroom for 6 - double (per person)	\$6,896	\$7,102	\$206	3.0%

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Dining Rates

The Ohio State University Proposed Dining Rates for FY 2026

Dining Plans	FY 2025	FY 2026	\$ Change	% Change
Columbus Campus				
Scarlett 14	\$5,622	\$5,790	\$168	3.0%
Declining Balance	\$5,016	\$5,166	\$150	3.0%
Gray 10	\$4,720	\$4,860	\$140	3.0%
Traditions	\$4,608	\$4,746	\$138	3.0%
Carmen 1 (off-campus)	\$1,016	\$1,046	\$30	3.0%
Carmen 2 (off-campus)	\$1,988	\$2,046	\$58	2.9%
Regional Campus				
McConnell Hall (Newark)	\$3,284	\$3,382	\$98	3.0%
Carmen 1	\$1,016	\$1,046	\$30	3.0%
Carmen 2	\$1,988	\$2,046	\$58	2.9%

FY 2026 FINANCIAL PLAN

Appendix B | Tuition and SSI History (Columbus Campus)

Fiscal Year	Undergraduate Resident Total	% Change	Undergraduate Non-Resident (Domestic) Total	% Change	Columbus Campus Total SSI (000's)	% Change
1998	\$3,687	6.3%	\$10,896	5.4%	\$297,551	5.1%
1999	\$3,906	5.9%	\$11,475	5.3%	\$305,161	2.6%
2000	\$4,137	5.9%	\$12,087	5.3%	\$312,839	2.5%
2001	\$4,383	5.9%	\$12,732	5.3%	\$317,721	1.6%
2002	\$4,788	9.2%	\$13,554	6.5%	\$305,389	-3.9%
2003	\$5,691	18.9%	\$15,114	11.5%	\$300,064	-1.7%
2004	\$6,651	16.9%	\$16,638	10.1%	\$299,998	0.0%
2005	\$7,542	13.4%	\$18,129	9.0%	\$301,898	0.6%
2006	\$8,082	7.2%	\$19,305	6.5%	\$305,588	1.2%
2007	\$8,667	7.2%	\$20,562	6.5%	\$314,597	2.9%
2008	\$8,676	0.1%	\$21,285	3.5%	\$330,269	5.0%
2009	\$8,679	0.0%	\$21,918	3.0%	\$362,682	9.8%
2010	\$8,726	0.5%	\$22,298	1.7%	\$391,658	8.0%
2011	\$9,420	8.0%	\$23,604	5.9%	\$390,830	-0.2%
2012	\$9,735	3.3%	\$24,630	4.3%	\$329,548	-15.7%
2013	\$10,037	3.1%	\$25,445	3.3%	\$331,829	0.7%
2014	\$10,037	0.0%	\$25,757	1.2%	\$334,394	0.8%
2015	\$10,037	0.0%	\$26,537	3.0%	\$330,878	-1.1%
2016	\$10,037	0.0%	\$27,365	3.1%	\$341,582	3.2%
2017	\$10,037	0.0%	\$28,229	3.2%	\$362,654	6.2%
2018	\$10,591	5.5%	\$29,695	5.2%	\$360,816	-0.5%
2019	\$10,726	1.3%	\$30,742	3.5%	\$359,412	-0.4%
2020	\$11,084	3.3%	\$32,061	4.3%	\$353,396	-1.7%
2021	\$11,518	3.9%	\$33,502	4.5%	\$375,115	6.1%
2022	\$11,936	3.6%	\$35,019	4.5%	\$376,486	0.4%
2023	\$12,485	4.6%	\$36,722	4.9%	\$393,035	4.4%
2024	\$12,859	3.0%	\$38,365	4.5%	\$405,472	3.2%
2025	\$13,244	3.0%	\$40,022	4.3%	\$416,652	2.8%
2026	\$13,641	3.0%	\$42,423	6.0%	\$425,721	2.2%

APPENDIX XXII

	Amount Establishing <u>Endowment*</u>	Total <u>Commitment</u>
<u>Establishment of Named Endowed Professorship (University)</u>		
Honda Endowed Professorship in Artificial Intelligence in Mechanics and Manufacturing Established August 21, 2025, as a quasi-endowment, with a match from the College of Engineering Dean's Endowed Faculty Position and Graduate Student Fellowship Match Program; supports a professorship position in the College of Engineering. The person appointed to such professorship shall be a tenure track professor in the college with preference for a faculty member with a joint appointment in the Department of Integrated Systems Engineering and the Department of Materials Science and Engineering. If the position is vacant, the annual distribution may be used to support faculty in the college who are focused on manufacturing.	\$1,000,000.00	\$1,000,000.00
Dr. John M. McGregor Department of Neurosurgery Professorship Established August 21, 2025, as a quasi-endowment, with a fund transfer by the Department of Neurosurgery; supports a professorship position in Department of Neurosurgery, if full funding is reached. If the position is vacant, the annual distribution may be used to support faculty in the department.	\$1,000,000.00	\$1,000,000.00
<u>Establishment of Named Endowed Fund (University)</u>		
Mary Seaton Breese Scholarship Fund Established August 21, 2025, with estate gifts from Mary Seaton Breese; supplements the grant-in-aid costs of student-athletes who are playing at the point-guard position on The Ohio State University Women's Varsity Basketball Team. If annual distribution remains, the scholarship(s) will be open to all student-athletes who are playing on The Ohio State University Women's Varsity Basketball Team. If annual distribution still remains, the scholarship(s) will be open to all student-athletes who are playing on women's varsity teams.	\$2,036,200.34	\$2,036,200.34
College of Medicine Greatest Needs Fund Established August 21, 2025, as a quasi-endowment, with a fund transfer by the College of Medicine of an unrestricted gift from the estate of Mary Ann Stockum; supports the greatest needs of the College of Medicine as determined by the highest ranking official in the college or his/her designee.	\$678,887.62	\$678,887.62
College of Medicine Scholarship Fund for First-Year Medical Students Established August 21, 2025, as a quasi-endowment, with a fund transfer by the College of Medicine of an unrestricted gift from the estate of Mary Ann Stockum; provides one or more scholarships to first-year medical students who demonstrate academic merit and/or financial need.	\$678,762.62	\$678,762.62

Julia Holland Memorial Scholarship Fund Established August 21, 2025, with gifts from friends and family of Julia Holland (BA 2023); provides one or more scholarships to students who are enrolled in the Michael E. Moritz College of Law with preference given to students who are interested in criminal defense law.	\$100,200.00	\$100,200.00
<u>Change in Name and Description of Named Endowed Fund (University)</u>		
From: The Jo Ann M. Ferguson Scholarship Fund for Synchronized Swimming To: The Jo Ann M. Ferguson Fund for Artistic Swimming		
From: The Ohio State University Nephrology Endowed Professorship for Kidney Research To: The Brad H. Rovin Endowed Professorship for Kidney Research		
From: The Mary Lundie Stewart Vorman Loan Fund To: The Mary Lundie Stewart Vorman Endowed Scholarship Fund		
<u>Change in Description of Named Endowed Fund (University)</u>		
The W. E. Cramer Scholarship Fund		
Faculty Initiatives and Research Discovery Endowment Fund		
The Julie Price Memorial Scholarship Fund in Law		
The Ruth Haignere Rose Student Nurse Scholarship Fund		
The Shepherd Scholarship Award Fund		
The Wildah Turnbull and Joseph K. Walkup Memorial Fund		
The Herbert G. Utz Memorial Scholarship Fund		
The Dorothy Sumption Wirthwein – Women's Physical Education Fund		
<u>Establishment of Named Endowed Chair (Foundation)</u>		
Dr. Harold "Hal" Miller and Betty J. Miller Endowed Chair in Organic Chemistry and Biochemistry Established February 10, 2022, with a gift from Betty Jane Miller in memory of Dr. Harold "Hal" Miller (BA '48, MA '51, PhD '59 Chemistry); supports a chair position in the College of Arts and Sciences, Department of Chemistry and Biochemistry. The chair may be used to recruit or retain candidates who demonstrate excellence in teaching and conduct research in organic chemistry and/or biochemistry. If the position is vacant, the annual distribution may be used to support faculty in the department. Revised August 21, 2025.	\$3,824,497.40	\$3,824,497.40

Endowed Chair in Integrative Health Established August 21, 2025, with gifts from Christina E. Grote and James E. Grote; supports a chair position in the College of Medicine to be held by the highest ranking official in the Center for Integrative Health. Subsequent to the date on which the current Director of the Center, Maryanna D. Klatt (MA 2001, PhD 2002), retires or is otherwise no longer the Director of the Center, the fund shall be renamed the Maryanna D. Klatt Endowed Chair in Integrative Health. If the position is vacant, the annual distribution may be used to support the priorities of the center. If the center ever ceases to exist, the annual distribution shall support faculty in the college.	\$3,500,000.00	\$3,500,000.00
<u>Establishment of Named Endowed Professorships (Foundation)</u>		
Jeffrey Professorship in Children, Young Adult and Family Psychiatry Established April 6, 2007, with gifts from Robert H. "Tad" and Anne K. "Nancy" Jeffrey of Bexley, Ohio; used for a professorship position in the Department of Psychiatry and Behavioral Health focused on activities relevant to advancing the quality of mental health services delivered to children, adolescents, and young adults with mental disorders and their families. If the position is vacant, the annual distribution may be used to support faculty in the College of Medicine. Revised August 21, 2025.	\$2,017,401.35	\$2,017,401.35
The Leon M. McCorkle Jr. Professorship in Commercial Law Established August 21, 2025, with gifts from Leon M. McCorkle Jr. (JD 1972); supports a professorship position in the Michael E. Moritz College of Law focused on commercial and consumer law. If the position is vacant, the annual distribution may be used to support faculty in the college who are focused on commercial and consumer law.	\$1,016,579.40	\$1,016,579.40
Colleen McMahon Professorship in Music Established May 19, 2022, with a gift from the Honorable Colleen McMahon (BA 1973); supports a professorship position in the School of Music. If the position is vacant, the annual distribution may be used to support faculty in the school. This endowment should be used to enhance the school's reputation for faculty excellence, by facilitating the recruitment and retention of outstanding educators and researchers who display the potential for leadership both in their specialty and in the College of Arts and Sciences. Preferred fields of specialization are choral music and music theory. Revised August 21, 2025.	\$1,000,000.00	\$1,000,000.00
<u>Establishment of Named Endowed Professorship Funds (Foundation)</u>		

The Ernestine R. Lowrie Professorship Fund in Thoracic Surgery Established August 21, 2025, with gifts from Ernestine R. Lowrie. If the gifted principal balance of the fund reaches the required professorship funding level of \$1,000,000 by July 1, 2030, the annual distribution from this fund supports a professorship position in the Division of Thoracic Surgery. Prior to full funding, if the position is vacant, or if full funding is not reached, the annual distribution may be used to support faculty in the division.	\$199,357.11	\$1,000,000.00
Wayne Urban Endowed Professorship Fund Established August 21, 2025, with gifts from Dr. Wayne Joseph Urban. If the gifted principal balance of the fund reaches the required professorship funding level of \$1,000,000 by December 31, 2035, the annual distribution from this fund supports a professorship position in the College of Education and Human Ecology. Candidates should be focused on the history of American education and/or the history of American higher education. Prior to full funding, if the position is vacant, or if full funding is not reached, the annual distribution may be used to support faculty working in the areas of philosophy and history of education in the Department of Educational Studies. The annual distribution shall be reinvested in the endowment principal for up to the first five years of the fund's existence at the discretion of the highest ranking official in the college or his/her successor.	\$112,000.00	\$1,000,000.00
<u>Establishment of Named Endowed Funds</u> <u>(Foundation)</u>		
Jeffrey M. Prestel Professional Sales Support Fund Established August 21, 2025, with grants from The Columbus Foundation as recommended by Jeffrey Michael Prestel (MBA 1989); provides operational support for professional sales programs and initiatives in the Max M. Fisher College of Business. Expenditures may be used for, but are not limited to, enhancing the curricular offerings, programmatic offerings, and technology enhancements for use in the classroom related to sales.	\$1,500,000.00	\$3,500,000.00
The Darlene and Tom McCalmont Sustainability & Cancer Research Graduate Fellowship Established August 21, 2025, with gifts from Darlene Hinerman McCalmont (BS 1976) and David Thompson McCalmont; supports a graduate fellowship(s) in the College of Engineering for PhD candidates who are studying in the William G. Lowrie Department of Chemical and Biomolecular Engineering. Preference shall be given to candidates who are pursuing sustainability-related research or cancer-related research. Additional preference shall be given to students who participate in activities that promote leadership or community service efforts to broaden participation by women and girls in the field of engineering.	\$1,200,000.00	\$1,200,000.00

Krishan and Vicky Joshi Eye Research Endowed Fund Established August 21, 2025, with gifts from Krishan K. Joshi (B.A.A.E. 1961) and Vicky M. Joshi; supports faculty, residents, or medical students in the Department of Ophthalmology & Visual Sciences who are developing or conducting research programs to discover innovative treatments and cures for eye diseases. Expenditures shall be used for, but are not limited to, salary support, research supplies, and/or equipment costs.	\$500,000.41	\$500,000.41
Edward J. Wagner II and Erva M. Wagner Scholarship Fund Established August 21, 2025, with an estate gift from Edward J. Wagner II (BA 1958, MA 1959, PhD 1963) and Erva M. Wagner; provides financial aid scholarships to fulltime, undergraduate students who are majoring in studies in the College of Arts and Sciences who qualify for a financial aid scholarship under the University's standard financial aid guidelines. In addition, in order to receive this scholarship, the student(s) must have a maintained at least a B cumulative grade point average in high school if the candidate (s) is a freshman or maintained at least a B cumulative grade point average (per University criteria) at all times while a student at the University if the student(s) is a sophomore, junior or senior.	\$385,449.71	\$385,449.71
Karen Collins (O'Neal) Memorial Scholarship Fund Established August 21, 2025, with gifts from David M. O'Neal Jr. in memory of his wife, Karen Collins O'Neal (MSW 1982); supports students who are enrolled in the Master's of Social Work program in the College of Social Work. First preference shall be given to MSW students who demonstrate an interest in working in the medical or behavioral health field. Second preference shall be given to any students enrolled in the MSW program.	\$350,000.00	\$700,000.00
Yvette McGee Brown and Tony Brown Athletic Scholarship Fund Established August 21, 2025, with gifts from the Honorable Yvette M. McGee Brown and Anthony L. Brown (MA 1986) and matching funds as part of the Scarlet and Gray Advantage Endowed Matching Gift Program. The Donors wish to honor Leo M. Brown (DDS 1962), the first black co-captain of The Ohio State University Football team in 1955-57. Supplements the grant-in-aid costs of undergraduate student-athletes with preference towards those who have overcome substantial educational or economic obstacles.	\$213,016.18	\$213,016.18

Rosenfield Family Athletics Scholarship Fund Established August 21, 2025, with gifts from Daniel Lawrence Rosenfield (BS 1973, MA 1974); supplements the grant-in-aid costs of undergraduate student-athletes who are majoring in finance or real estate within the Max M. Fisher College of Business. First preference shall be given to candidates who are enrolled in or have taken courses on Hebrew and Jewish Studies and/or have demonstrated experience through academic study, community service, or other work with issues affecting individuals or communities of Jewish faith. Second preference shall be given to candidates who are from the New York City metro area. If no students meet the selection criteria, the scholarship(s) will be open to all undergraduate student-athletes. The donor desires to support two recipients annually. Scholarships may be awarded in varying numbers based on student enrollment, available funding, and other factors.	\$150,275.64	\$200,000.00
Dr. Hedda Litowitz Haning and Dr. Ray Vernon Haning, Jr. Fund Established August 21, 2025, with the gifts anonymous donors; supports The Ohio State University.	\$137,008.59	\$137,008.59
The Anil K. Makhija Undergraduate Impact Fund Established August 21, 2025, with gifts from friends, family, and colleagues to honor the leadership of Anil K. Makhija; used for leadership development, social responsibility, and experiential learning opportunities for undergraduate students at the Max M. Fisher College of Business. The donors desire the fund be used to enhance student leadership competencies.	\$115,275.00	\$115,275.00
Morris Beja Odyssey Award: Thriving Through Global Discovery Fund Established August 21, 2025, with gifts from Andrew Beja, friends, family and colleagues of Morris Beja; provides one or more travel awards to undergraduate and/or graduate students who are pursuing degrees in the Department of English. Preference shall be given to undergraduate students who are specializing in Literature, Film, Folklore and Popular Culture Studies.	\$109,470.00	\$109,470.00
The Moussallem Foundation Civil Engineering Endowed Scholarship Fund Established August 21, 2025, with gifts from Maroun Moussallem (BS 1983, MS 1985); provides one or more scholarships to students who are enrolled in the College of Engineering and are majoring in civil engineering. Preference shall be given to candidates who demonstrate high financial need and are in good academic standing with a minimum 3.0 grade point average on a 4.0 scale.	\$100,603.14	\$100,603.14

Dr. Frederick "Fritz" Stocker Memorial Fund Established August 21, 2025, with gifts from friends, family and colleagues of Dr. Frederick "Fritz" Stocker; provides one or more scholarships to graduate students who are enrolled in the John Glenn College of Public Affairs and demonstrate financial need. The group desires that when awarding this scholarship special consideration be given for students who have encountered or overcome substantial educational or economic obstacles. It is the group's desire to provide as significant financial support as possible to one eligible recipient. Any remaining distribution shall be used to provide as significant financial support as possible to additional eligible recipients. If no students meet the selection criteria, the scholarship(s) will be open to all students enrolled in the college.	\$100,055.00	\$100,055.00
The Jarka and Grayce Susan Burian Research Fund Established August 21, 2025, with a gift from the estate of Grayce Susan Burian; shall be available to scholars at the graduate student, faculty, and theatre professional levels, and will support research in the collections on Czech theatre and culture held in the Jerome Lawrence and Robert E. Lee Theatre Research Institute of The Ohio State University Libraries. If the distribution is not awarded in a given year, the distribution may be used to support a Burian Symposium presenting research or analysis on Czech theatre or Czech theatre artists, additions to the collections of works of Czech theatre, or reinvested in the fund's principal.	\$100,000.00	\$100,000.00
Sandra Jennifer Coco Endowed Scholarship Fund Established August 21, 2025, with gifts from Robert A. Coco and Mary W. Coco; provides one or more scholarships to undergraduate students who are enrolled in the College of Nursing and have a passion for and/or demonstrate an interest in working in oncology nursing. The donors desire to support at least two students annually. Scholarships may be awarded in varying amounts based on student enrollment, available funding, and other factors. If no students meet the selection criteria, the scholarship(s) will be open to all undergraduate students who are enrolled in the college.	\$100,000.00	\$1,000,000.00
The Michael Dubetz, Jr. Endowed Scholarship in Tax Law Established August 21, 2025, with gifts from Michael Dubetz Jr. (JD 1989); provides one or more scholarships to second- or third-year students who are enrolled in the Michael E. Moritz College of Law. First preference shall be given to candidates who demonstrate an interest in tax law. Second preference (which shall be applied only when no candidates are available that meet the first preference) shall be given to candidates who demonstrate an interest in corporate/business law.	\$100,000.00	\$100,000.00

Andrew and Rosemary Fogarty Global Eye Health Fund Established August 21, 2025, with gifts from Patricia A. McElroy and Cathy Busemeyer, with inspiration from the rest of the Fogarty family, in memory of Andrew and Rosemary Fogarty and in honor of Robert Chambers, DO; supports global outreach initiatives in ophthalmology to assist with medical care and education in low resource communities. Expenditures may be used for, but are not limited to, salary support, supplies, equipment, or other expenses for faculty, alumni, staff, and learners aspiring to build knowledge and local resource capacity toward preventing blindness. If in any given year, there is remaining distribution after being used for the purpose above, or if there are no eligible global outreach initiatives, the annual distribution may be used to support regional outreach initiatives in ophthalmology.	\$100,000.00	\$100,000.00
The McClure Nursing Scholarship Fund Established August 21, 2025, with gifts from Colonel Roger E. McClure (BS 1955) and Mary C. McClure (BS 1955); provides one or more scholarships to undergraduate students enrolled in the College of Nursing and are in good academic standing. Preference shall be given to students who graduated from high school in from Greater Dayton and/or the Miami Valley area of Ohio.	\$100,000.00	\$100,000.00
Peter L. & Cathy A. Hahn Endowment for Faculty and Student Excellence in History Established August 21, 2025, with gifts from Peter L. Hahn and Cathy A. Hahn; supports the enhancement of the World War II academic program in the Department of History.	\$52,450.00	\$52,450.00
<u>Change in Name and Description of Named Endowed Fund (Foundation)</u>		
From: Frederick Luis Aldama Inclusive Excellence Scholarship Fund To: Frederick Luis Aldama Leadership Scholarship Fund		
From: Mike and Linda Kaufmann Diversity, Equity & Inclusion Scholarship Fund To: Mike and Linda Kaufmann Scholarship Fund		
From: The Tom and Gail Reardon Chemical Engineering Scholarship Fund To: The Thomas E. Reardon Chemical Engineering Scholarship Fund		
From: The Vorman-Anderson Professorship of Nordic Languages and Literatures To: The Vorman-Anderson Faculty Support Fund for Nordic Languages and Literatures		
<u>Change in Description of Named Endowed Fund (Foundation)</u>		
The Jessica C. Beck Memorial Scholarship Fund		

Anthony Boone '74 & Steve W. Jemison '75 Scholarship Fund		
The Thomas (Tommy) M. Davis III Endowed Scholarship Fund		
The Captain Nick Rozanski Memorial Scholarship Fund		
The Dr. Carlton Triolo-Sapp Fund		
Dr. Robert E. Williams Endowed Dentistry Scholarship Fund		
<u>Change in Description of Named Endowed Fund (Foundation)</u>		
The Ohio State University Alumni Association, Inc. Scholarship Endowment Fund		
The Honorable Robert M. Duncan Scholarship Fund		
The Marie Catherine Elliott '47 Scholarship Fund		
The Barbara Eng and Anna Eng Artistic Swimming Athletic Scholarship Fund		
The Fred Kaufmann Memorial Scholarship Fund		
Total	\$22,577,489.51	

*Amounts establishing endowments as of June 30, 2025, unless notated otherwise.

APPENDIX XXIII

3335-1-02 Members, officers and committees of the board.

(A) Members of the board of trustees.

- (1) The board of trustees of the Ohio state university shall, as provided in section 3335.02 of the Revised Code, be comprised of seventeen trustees, including two student trustees, who shall be appointed by the governor, with advice and consent of the senate, with terms of office as articulated in the Ohio Revised Code.
- (2) ~~Student trustees. Student trustees shall be permitted to participate in all discussion and deliberations of the board, including attending executive sessions~~ provide valuable input and perspectives that deepen the board's understanding of the student experience at the university.
 - (a) Student trustees shall have no voting privileges on the board of trustees, shall not be considered in determining whether a quorum is present, shall not be entitled to attend executive sessions of the board, and shall not be eligible to be officers of the board, but may otherwise participate in all activities of the board, including membership on committees. Student trustees who are members of board committees shall have voting privileges on those committees.
- (3) Charter trustees. In order to take advantage of the diverse cultural, geographic, business, professional, public service and civic backgrounds, talents and experiences of friends and alumni of the Ohio state university who do not live in the state of Ohio, the position of charter trustee has been established, in accordance with the following guidelines:
 - (a) Charter trustees shall be non-Ohio residents and shall be chosen on the basis of the following attributes: Ohio state university alumna/alumnus or friend of the university; success in his or her chosen field or profession; state, national, or international prominence; ability to advocate for higher education; and willingness and ability to offer counsel.
 - (b) The board shall appoint no more than three charter trustees at any given time.
 - (c) Each charter trustee shall be appointed for one three-year term, commencing on May fourteenth and expiring on May thirteenth. The reappointment of a charter trustee is not automatic. Appointment and reappointment decisions will be made with consideration to the expertise needs of the overall board.
 - (d) Charter trustees shall have no voting privileges on the board of trustees, shall not be considered in determining whether a quorum is present, and shall not be eligible to be officers of the board, but will otherwise participate in all activities of the board, including membership on committees. Charter trustees who are members of board committees shall have voting privileges on those committees and shall be eligible to serve as committee chair or vice chair.
 - (e) Charter trustees shall be nominated by the talent, compensation and governance committee and shall be appointed, and may be removed before the conclusion of his or her term, by a vote of the board. Upon such appointment, the chair shall cause a letter of appointment to be delivered to the charter trustee, and a copy of the letter shall be delivered to the governor.
- (4) Ethics and conflicts of interest. All trustees shall follow the protections of the public set forth in Chapter 102, sections 2921.42 and 2921.43 of the Revised Code. In addition, the board of trustees shall adopt and periodically review a policy on ethics and conflicts of interest to

govern all members of the board of trustees, Wexner medical center board and their committees.

- (5) Statement of expectations. The board of trustees shall adopt and periodically review a board statement of expectations, which shall address such topics as comportment among board members, with the university president and other internal constituents, and with external constituents.
- (6) Indemnification. Trustees, charter trustees, and non-trustee committee members shall be entitled to legal defense and indemnification against any claims or liabilities which might arise from the performance of their duties on behalf of the Ohio state university to the fullest extent permitted by Ohio law.
- (7) Reimbursement of expenses. All trustees, charter trustees, and non-trustee committee members shall be entitled to reimbursement for reasonable travel expenses incurred in attending meetings of a committee or of the board of trustees, or other meetings as a representative of the board, in accordance with university policy and Ohio law.

(B) Officers

- (1) Number. The officers of the board shall be a chair, one or more vice chairs, and a secretary. No officer of the board shall, at the same time, hold more than one board office. The board may elect such other officers as the board may deem necessary with such authority and responsibility as delegated to them by the board.
- (2) Chair. The chair shall preside at all meetings of the board. Unless otherwise directed by the board, the chair shall have the authority to appoint members of and to fill vacancies on all standing and ad hoc committees and shall serve as an ex-officio member of all standing and ad hoc committees. Subject to these bylaws, the chair shall work with the secretary of the board of trustees to fix the date and time of all regular, special, and emergency meetings, shall sign the journal of all proceedings of the board, and perform such other duties as may pertain to this office.
- (3) Vice chair. At the request of or in the absence or incapacity of the chair, the vice chair shall perform all the duties of the chair and, while so acting, shall have all the powers and authority of, and be subject to all the restrictions upon, the chair. In the event that there are multiple vice chairs, these powers and duties shall devolve upon the senior vice chair, based on length of service on the board, unless otherwise indicated by the board. In addition, the vice chair shall perform such other duties as may be assigned to him or her by the board or by the chair.
- (4) Secretary. The board of trustees appoints the secretary of the board, establishes the qualifications for filling this role and conducts the annual performance evaluation for this position. The secretary reports functionally to the board and administratively to the university president. The responsibilities of the secretary, which are defined by the board as part of their oversight role, include:
 - (a) Serving as the key internal university liaison for the chair and the board;
 - (b) Communicating and interacting directly with the chair and the board to advance the strategic work of the board;
 - (c) Serving as the custodian of and being ultimately responsible for the preservation of all official records of the board;

- (d) Serving as the custodian of the university seal and causing its imprint to be placed whenever and wherever appropriate;
- (e) Overseeing the maintenance of the minutes of all meetings of the board and of committees of the board;
- (f) Overseeing the operations of the Office of the Board of Trustees; and
- (g) Performing all other duties customary to the office or assigned by the chair or the board.

In the absence of the secretary, the associate secretary shall perform the duties of the secretary of the board and all official actions taken by the associate secretary shall be deemed authorized and approved by the board of trustees.

(5) Election, term of office, and qualifications.

- (a) The chair and vice chair(s) of the board shall be elected annually by the board and shall take office at the adjournment of the final meeting of the fiscal year ending June 30. They shall hold their office through the following final fiscal year meeting of the board of trustees or until their successors are elected and qualified, so long as they shall continue to be eligible to serve as officers.
- (b) The chair and the vice chair(s) must be members of the board of trustees. The qualifications of all other officers shall be determined by the board.
- (c) The chair shall be elected to a one-year term and may serve up to three consecutive terms as chair. Before the end of each term, the talent, compensation and governance committee shall conduct a review of the chair, and after consultation with the members of the board, shall recommend to the board whether the chair should be reelected for an additional term.
- (d) The vote of a majority of all trustees then in office shall be necessary to elect or remove an officer of the board.

(C) Committees of the board.

- (1) Standing committees of the board, the members of which shall be appointed annually by the chair, shall be constituted and shall consider and make recommendations for action by the board on the various matters as enumerated below:
 - (a) Academic affairs and student life committee. The academic affairs and student life committee shall consider and make recommendations to the board regarding matters pertaining to the teaching, and public service, and research programs and activities of the university, Wexner medical center, and its faculty, staff, and students. Matters to be brought before the committee may include, but shall not be limited to: teaching and learning; student success, support and well-being; faculty and staff matters; educational policy; academic structure and organization; student welfare and housing; collective bargaining; university faculty and student rules; conferring of degrees, certificates, awards, and other honors; the university system of Ohio; regional campuses; the Ohio agricultural research and development center; agricultural technical institute; the university's land-grant mission and extension programs; athletics; programs and activities related to research and creative inquiry; policies to support and enhance research and creative inquiry conducted at the university; the development and support of strategic internal and external

relationships; outreach and engagement activities of the university's students, faculty, and staff, and any other matter assigned to the committee by the board or the chair of the board.

In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee, ~~one member up to two members~~ of the university faculty, and up to two additional non-trustee committee members, with majority membership by trustees at all times.

- (b) Finance and investment committee. The finance and investment committee shall consider and make recommendations to the board regarding matters pertaining to the financial, business, and administrative management of the university. Matters to be brought before the committee may include, but shall not be limited to: long-range financial planning; borrowing and investment policies and strategies; investment benchmarks and asset allocation; capital and operating budgets and policies; capital expenditure budgets and investment; financing related to real property transactions; financial reporting practices; issuance of debt; tuition and fees; endowment assets and Advancement objectives; namings of university buildings and spaces; purchasing policies; insurance and Self-Insurance Board appointments; efficiency and cost-savings efforts; managed health care systems; and any other matter assigned to the committee by the board or the chair of the board.

In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee and up to three additional non-trustee committee members, with majority membership by trustees at all times.

- (c) Talent, compensation and governance committee. The talent, compensation and governance committee shall provide oversight and counsel to the president regarding matters related to the senior leadership of the university, as determined by the board and the president, and make recommendations to the board regarding matters pertaining to the organization of the board and involvement and role of trustees. Matters to be brought before the committee may include, but shall not be limited to: roles and responsibilities of trustees and senior leadership positions; position specifications and necessary qualifications; compensation strategy and comparative data; transition plans; the board structure and operation; matters related to the trustees, non-trustee committee members and charter trustee selection process; trustee orientation; reviews of the president of the university and officers of the board; expectations regarding trustee comportment; organization of the board office; and any other matter assigned to the committee by the board or the chair of the board.

The committee shall consist of the chairs of each board committee and the vice chairs of the board. In addition to the trustees appointed to the committee, the committee may also consist of up to three additional non-trustee committee members, with majority membership by trustees at all times. The chair of the board may also appoint to this committee up to one current voting member of the board who formerly served as a board officer.

- (d) Master planning and facilities committee. The master planning and facilities committee shall consider and make recommendations to the board regarding the university's physical environment to ensure they enable and advance the university's academic mission and strategic goals. The committee will serve as stewards of the campus master plans and district plans. Matters to be brought before the committee may include, but shall not be limited to: the review and recommendation for approval of the planning, design, and construction activity of the university, including the

Wexner medical center; university master planning; development and maintenance of facilities; real property matters; security and infrastructure updates; and any other matter assigned to the committee by the board or the chair of the board.

In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee and up to three additional non-trustee committee members, with majority membership by trustees at all times.

- (e) Legal, audit, risk and compliance committee. The legal, audit, risk and compliance committee shall consider and make recommendations to the board regarding oversight of the university's legal, audit, risk, and compliance functions. Matters to be brought before the committee may include, but shall not be limited to: reports regarding significant legal, legislative, and regulatory matters and initiatives; potential and active litigation; oversight and monitoring of compliance programs and activities; university and Wexner medical center enterprise risk management programs and business continuity planning; approval and monitoring of affiliated entities; internal financial control systems and reporting; auditing of the university and related entity operations; internal audit policies, plans, and reports; selection of, and receiving reports from, independent auditors (in conjunction with the auditor of state); and any other matter assigned to the committee by the board or the chair of the board.

In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee and up to three additional non-trustee committee members, with majority membership by trustees at all times.

- ~~(f) Research, innovation and strategic partnerships. The research, innovation and strategic partnerships committee shall consider and make recommendations to the board regarding matters pertaining to the research programs and activities of the university, Wexner medical center, faculty, staff, and students. Matters to be brought before the committee may include, but shall not be limited to: programs and activities related to research and creative inquiry; policies to support and enhance research and creative inquiry conducted at the university; the development and support of strategic internal and external relationships; outreach and engagement activities of the university's students, faculty, and staff; and any other matter assigned to the committee by the board or the chair of the board.~~

~~In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee, one member of the university faculty, and up to two additional non-trustee committee members, with majority membership by trustees at all times.~~

- ~~(g)~~ (f) Athletics committee. The athletics committee shall consider and make recommendations to the board regarding oversight of the university's intercollegiate athletics programs and the actions taken to foster student-athlete success. Matters to be brought before the committee may include, but shall not be limited to: intercollegiate athletics programs and activities; student-athlete success, support, and well-being; reports regarding the operations of the organization, staffing, financial performance, and facilities for intercollegiate athletics operations; reports regarding significant structural, legal, and compliance developments impacting intercollegiate athletic activities; reviews and investigations related to intercollegiate athletic programs; and any other matter assigned to the committee by the board or the chair of the board.

In addition to the trustees appointed to the committee, the committee shall also consist of at least one student trustee and up to three additional non-trustee committee members, with majority membership by trustees at all times.

~~(h)~~(g) Wexner medical center board. The university board of trustees retains ultimate sovereign power and authority over, and fiduciary responsibility for, all aspects of the mission and operations of the university, including its Wexner medical center. The university board of trustees nonetheless recognizes the important oversight role of its Wexner medical center board. The Wexner medical center board shall consider and make recommendations to the university board of trustees regarding matters set forth in the Wexner medical center board bylaws. The Wexner medical center board shall keep the university board of trustees and its committees apprised of, and make recommendations regarding, Wexner medical center matters. The university board of trustees and its committees shall consult and seek the input of the Wexner medical center board on the relevant strategic and operational matters that come before the university board of trustees. Trustees who are members of the Wexner medical center board shall represent the interests of both boards during their service.

Trustees, public members and ex-officio voting members of the Wexner medical center board shall be appointed by the chair of the university board of trustees in compliance with the procedure set forth in the Wexner medical center board bylaws.

- (2) The chair and vice chair of each committee of the board shall be trustees or charter trustees.
- (3) The chair of the university board of trustees shall appoint the chair, vice chair, and other trustee and non-trustee members of each committee. The board or the chair of the board may designate guidelines regarding non-trustee members of committees. Student trustee, charter trustee, and non-trustee committee members shall be voting members of the committees on which they serve.
- (4) In addition to the committees enumerated in this bylaw, the board or the chair of the board may establish ad hoc committees and appoint the members thereof.
- (5) Committees of the board of trustees have no independent decision-making authority, except for specific exceptions outlined in the Ohio state university Wexner medical center board bylaws. Any matter or resolution recommended by a committee of the board shall be presented to the board for its consideration.
- (6) Except as provided in paragraph (B)(1) of rule 3335-93-01 of the Administrative Code, no trustee shall, during his or her term in office, serve as a director or officer or in any other capacity of any university affiliated entity or as a director, officer, or member or in any other capacity of any other university or related advisory or governance board, committee, or similar body, unless such service is approved by the chair of the board of trustees.

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THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

QUALITY LEADERSHIP COUNCIL

**The Ohio State University Wexner Medical Center
Clinical Quality Management, Patient Safety, &
Patient Experience Plan**

FY 2026

July 1, 2025 - June 30, 2026

The Ohio State University Wexner Medical Center

Clinical Quality Management, Patient Safety, & Patient Experience Plan

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Ambition, Mission, Vision and Values

Ambition: To be a top (Honor Roll) academic health center driving breakthrough healthcare solutions to improve people's lives and the communities in which we live.

Mission: To improve health in Ohio and across the world through innovations in research and transformation in research, education, patient care and community engagement.

Vision: By pushing the boundaries of discovery and knowledge, we will solve significant health problems and deliver unparalleled care

Values: Inclusiveness, Determination, Empathy, Sincerity, Ownership and Innovation

Definition

The Clinical Quality Management, Patient Safety and Patient Experience Plan is the health system approach to the systematic assessment and improvement of process design and performance aimed at improving quality of care, patient safety, and patient experience.

The approach to clinical quality management, patient safety, and patient experience is leadership-driven and involves significant staff and provider engagement. The activities within the health system are multi-disciplinary and rooted in the system's ambition, mission, vision, and values. The plan embodies a culture of continuously measuring, assessing, and initiating changes to improve outcomes. The health system employs the following principles which support the Institute of Medicine's six aims of care (Safe, Timely, Effective, Efficient, Equitable and Patient Centered). These principles are:

- **Customer Focus:** Knowledge and understanding of internal and external customer needs and expectations.
- **Leadership & Governance:** Dedication to continuous improvement instilled by leadership and the Board.
- **Education:** Ongoing development and implementation of a curriculum for quality, safety & service for all staff, employees, clinicians, patients, and learners.
- **Everyone is involved:** All members have mutual respect for the dignity, knowledge, and potential contributions of others. Everyone is engaged in improving the processes in which they work.
- **Data Driven:** Decisions are based on knowledge derived from data.
- **Process Improvement:** Analysis of processes for redesign and variance reduction using a scientific approach.
- **Continuous:** Measurement and improvement are ongoing.
- **Safety Culture:** A culture that is open, honest, transparent, collegial, team-oriented, accountable and non-punitive when system failures occur.
- **Personalized Health Care:** Incorporate evidence-based medicine in patient centric care that considers the patient's health status, genetics, cultural traditions, personal preferences, values family situations and lifestyles.

The Plan was developed in accordance with The Joint Commission (TJC) accreditation standards and the Center for Medicare & Medicaid Services (CMS) Conditions of Participation outlining a

Quality Assurance and Performance Improvement (QAPI) program. In addition to the principles outlined above, the following will also serve as fundamental components of the plan.

Consistent Level of Care

Certain elements of the OSUWMC Clinical Quality Management, Patient Safety, & Patient Experience Plan assure that patient care standards for the same or similar services are comparable in all areas throughout the health system. For example,

- Policies, procedures and services provided are not payer driven
- Application of a single standard for physician credentialing
- Health system monitoring tools to measure processes
- Standardize and unify health system policies and procedures that promote patient centered, high quality, and safe care

Performance Transparency

The OSUWMC Medical and Administrative leadership, in conjunction with the Board of Trustees, has a strong commitment to transparency of performance as it relates to clinical quality, patient safety, and patient experience performance. As supported by the long-range quality plan, the organization is committed to providing transparency to our patients and communities regarding our performance.

Performance data are shared internally with faculty and staff through a variety of methods. The purpose of providing data internally is to assist faculty and staff in having real-time performance results and to use those results to drive change and improve performance when applicable.

Online performance scorecards have been developed to cover a variety of clinical quality, safety and patient experience metrics. When applicable, on-line scorecards provide the ability to “drilldown” on the data by discharge service, department and nursing unit. In some cases, password authentication also allows for practitioner-specific data to be viewed by Department Chairs and various Quality and Administrative staff. Transparency of information will be provided within the limits of the Ohio law that protects attorney client privilege, quality inquiries and reviews, as well as peer review.

Confidentiality

Confidentiality is essential to the quality management and patient safety process. All records and proceedings are confidential and are to be marked as such. Written reports, data, and meeting minutes are to be maintained in secure files. Access to these records is limited to appropriate administrative personnel and others as deemed appropriate by legal counsel. As a condition of staff privilege and peer review, it is agreed that no record, document, or proceeding of this program is to be presented in any hearing, claim for damages, or any legal cause of action. This information is to be treated for all legal purposes as privileged information. This is in keeping with the Ohio Revised Code 121.22 (G)-(5) and Ohio Revised Code 2305.251.

Scope/Purpose

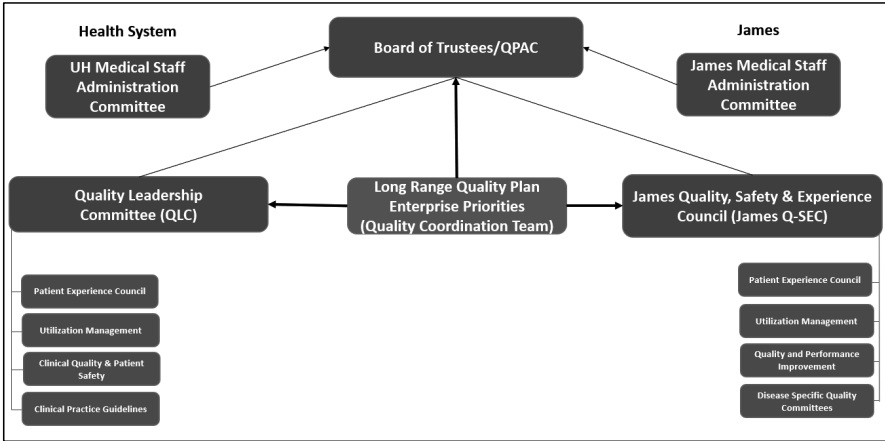
The Clinical Quality Management, Patient Safety & Patient Experience Plan includes all inpatient and outpatient facilities in The OSU Wexner Medical Center (OSUWMC) and appropriate entities across the continuum of care and in any clinical setting. The execution of the Clinical Quality Management, Patient Safety & Patient Experience Plan will demonstrate measurable improvements in health outcomes and the value of patient care provided within the OSUWMC.

As part of the Quality Assurance and Performance Improvement (QAPI program), the organization provides oversight for contracted services. The contracts are reviewed annually by the Medical Staff Administrative Committee (MSAC) and then forwarded to the Quality and Professional Affairs Committee of the governing body for review and approval.

Objectives

- Continuously monitor, evaluate, and improve outcomes and sustain improved performance.
- Implement reliable system changes that will improve patient care and safety by assessing, identifying, and reducing risks within the organization and responding accordingly when undesirable patterns or trends in performance are identified, or when events requiring intensive analysis occur.
- Assure optimal compliance with accreditation standards, state, federal and licensure regulations.
- Develop, implement, and monitor adherence to evidenced-based practice guidelines and companion documents in accordance with best practice to standardize clinical care and reduce practice variation.
- Improve patient experience and perception of treatment, care and services by identifying, evaluating, and improving performance based on patient needs, expectations, and satisfaction.
- Improve value by providing the best quality of care at the minimum cost possible. Incorporate value metrics, specifically the cost of care, into quality data and discussions where appropriate.
- Provide a mechanism by which the governance, medical staff and health system staff members are educated in quality management principles and processes.
- Provide appropriate levels of data transparency to both internal and external customers.
- Create a level of accountability for all system-wide quality improvement initiatives at the dyad/triad leadership level and assure processes involve an interdisciplinary teamwork approach.
- Improve processes to prevent patient harm.
- Improve clinical documentation to accurately reflect the severity of illness for the patients in which we provide care.

Structure for Quality Oversight



The Quality Leadership Council serves as the single, multidisciplinary quality and safety oversight committee for the OSUWMC. In accordance with the Long-Range Quality Plan (Appendix A), The Quality Leadership Council utilizes criteria (Appendix B) to determine priorities for the health system that are reported in the Quality & Safety Priorities (Appendix C). Given the James Cancer Hospital has a separate provider number with a requirement for a distinct QAPI program, they have a specific substructure that ultimately reports to QPAC (Appendix D).

Committees

Medical Center Board

The Medical Center Board is accountable to The Ohio State University Board of Trustees through the President and Executive Vice President (EVP) for Health Sciences and is responsible for overseeing the quality and safety of patient care throughout the Medical Center including the delivery of patient services, quality assessment, improvement mechanisms, and monitoring achievement of quality standards and goals.

The Medical Center Board receives clinical quality management, patient safety and patient experience reports, and provides resources and support systems for clinical quality management, patient safety and patient experience functions, including medical/health care error occurrences and actions taken to improve patient safety and service. Board members receive information regarding the responsibility for quality care delivery or provision, and the Hospital's Clinical Quality Management, Patient Safety and Patient Experience Plan. The Medical Center Board ensures all caregivers are competent to provide services.

Quality Professional Affairs Committee (QPAC)

Composition: The committee shall consist of no fewer than four voting members of the university Wexner medical center board, appointed annually by the chair of the university Wexner medical center board, one of whom shall be appointed as chair of the committee. The chief executive officer of the Ohio state university health system; chief medical officer of the medical center; the director of medical affairs of the James; the medical director of credentialing for the James; the chief of the medical staff of the university hospitals; the chief of the medical staff of the James; the associate dean of graduate medical education; the chief quality and patient safety officer; the chief nurse executive for the OSU health system; and the chief nursing officer for the James shall serve as ex-officio, voting members. Other members as appointed by the chair of the university Wexner medical center board, in consultation with the chair of the quality and professional affairs committee.

Function:

The QPAC shall be responsible for the following specific duties:

- Reviewing and evaluating the patient safety and quality improvement programs of the university Wexner medical center;
- Overseeing all patient care activities in all facilities that are a part of the university Wexner medical center, including, but not limited to, the hospitals, clinics, ambulatory care facilities, and physicians' office facilities;
- Monitoring quality assurance performance in accordance with the standards set by the university Wexner medical center;
- Monitoring the achievement of accreditation and licensure requirements;
- Reviewing and recommending to the university Wexner medical center board changes to the medical staff bylaws and medical staff rules and regulations;
- Reviewing and approving clinical privilege forms;
- Reviewing and approving membership and granting appropriate clinical privileges for the credentialing of practitioners recommended for membership and clinical privileges by the university hospitals medical staff administrative committee and the James medical staff administrative committee;
- Reviewing and approving membership and granting appropriate clinical privileges for the expedited credentialing of such practitioners that are eligible by satisfying minimum approved criteria as determined by the university Wexner medical center board and are recommended for membership and clinical privileges by the university hospitals medical staff administrative committee and the James medical staff administrative committee;
- Reviewing and approving reinstatement of clinical privileges for a practitioner after a leave of absence from clinical practice;
- Conducting peer review activities and recommending professional review actions to the university Wexner medical center board;
- Reviewing and resolving any petitions by the medical staff for amendments to any rule, regulation or policy presented by the chief of staff on behalf of the medical staff pursuant to the medical staff bylaws and communicating such resolutions to the university hospitals medical staff administrative committee and the James medical staff administrative committee for further dissemination to the medical staffs; and
- Such other responsibilities as assigned by the chair of the university Wexner medical center board.

Medical Staff Administrative Committees (MSACs)

Composition: Refer to Medical Staff Bylaws and Rules and Regulations

Function: Refer to Medical Staff Bylaws and Rules and Regulations

The organized medical staff, under the direction of the Medical Director and the MSAC(s) for each institution, implements the Clinical Quality Management, Patient Safety and Patient Experience Plan throughout the clinical departments.

The MSAC(s) reviews reports and recommendations related to clinical quality management, efficiency, patient safety and service quality activities. This committee has responsibility for evaluating the quality and appropriateness of clinical performance and service quality of all individuals with clinical privileges. The MSAC(s) reviews corrective actions and provides authority within their realm of responsibility related to clinical quality management, patient safety, efficiency, and service quality activities.

Quality Leadership Council (QLC)

Composition: Refer to Medical Staff Bylaws and Rules and Regulations

Function: Refer to Medical Staff Bylaws and Rules and Regulations

The QLC is responsible for designing and implementing systems and initiatives to enhance clinical care, outcomes and patient experience throughout the integrated health care delivery system. The QLC serves as the oversight council for the Clinical Quality Management, Patient Safety and Patient Experience plan. Quality improvement activities within the Quality Accountability Team will be reported up to the QLC to ensure alignment of priorities for system- wide quality improvement projects and to provide consistent interventions (toolkits) to all stakeholders in the system.

Clinical Practice Guideline Committee (CPGC)

Composition: The CPGC consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Information Technology, Pharmacy, Nursing, and other allied health professionals. An active member of the medical staff chairs the committee. The CPGC reports to QLC and shares pertinent information with the Medical Staff Administrative Committees.

Function:

- Develop and update evidence-based clinical practice guidelines and best practices to support the delivery of patient care that promotes high quality, safe, efficient, effective, and patient centered care.
- Develop and implement Health System-specific resources and tools to support evidence-based guideline recommendations and best practices to improve patient care processes, reduce variation in practice, and support health care education.
- Develop measures to evaluate guideline use, processes, and outcomes of care.

Clinical Quality and Patient Safety Committee (CQPSC)

Composition: The CQPSC consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Information Technology, Nursing, Pharmacy, Laboratory, Respiratory Therapy, Diagnostic Testing and Risk Management. An active member of the Medical Staff chairs the Committee. The committee reports to QLC and additional committees as deemed applicable.

The primary role of the CQPSC is to ensure that OSUWMC is compliant with the Joint Commission and CMS Requirements for Participation.

Function:

- Creates a culture of safety which promotes organizational learning and minimizes individual blame or retribution for reporting or involvement in a medical/health care error
- Assure optimal compliance with patient safety-related accreditation standards
- Proactively identifies risks to patient safety and initiates actions to reduce risk with a focus on process and system improvement
- Oversees completion of proactive risk assessment as required by TJC
- Oversees education & risk reduction strategies as they relate to Sentinel Event Alerts from TJC
- Provides oversight for clinical quality management committees
- Evaluates and, when indicated, provides recommendations to improve clinical care and outcomes
- Ensures actions are taken to improve performance whenever an undesirable pattern or trend is identified
- Receive reports from committees that have a potential impact on the quality & safety in delivering patient care

Patient Experience Council(s)

Composition: The Patient Experience Councils consists of executive, physician, and nursing leadership spanning the inpatient and outpatient care settings. The University Hospitals Council is co-chaired by the Chief Nurse Executive for the Health System, The Chief Administrative Officer for the Hospitals Division, and Chief Quality and Patient Safety Officer. The committee reports to the QLC and reports out to additional committees as applicable. The James Patient Experience Council reports to the James Quality, Patient Safety and Experience Council which then reports to QPAC. The Council's key strategic initiatives center on empathy, trust, and personal connections as well as leveraging technology to enhance communication with patients and families.

Function:

- Create a culture and environment that delivers an unparalleled patient experience consistent with the OSU Medical Center's mission, vision and values focusing largely on service quality.
- Set strategic goals and priorities for improving the patient experience to be implemented by area specific patient experience councils and teams.
- Serve as a communication hub reporting out objectives and performance to the system.
- Serve as a coordinating body for subcommittees working on specific aspects of the patient experience.
- Measure and review voice of the customer information in the form of Patient and Family Experience Advisor Program and related councils, patient satisfaction data, comments, letters, and related measures.
- Monitor publicly reported and other metrics used by various payers to ensure optimal reimbursement.
- Collaborate with other departments to reward and recognize faculty and staff for service excellence performance.

Practitioner Evaluation Committee (PEC)

Composition: The Practitioner Evaluation Committee (PEC) (Appendix E) is the Peer Review committee that provides medical leadership in overseeing the Peer Review process. The PEC is co-chaired by the CQPSO and a CMO appointee. The committee is composed of the Chair of the Clinical Quality and Patient Safety Committee, physicians, and advanced practice licensed health care providers from various business units & clinical areas as appointed by the CMO & Physician in Chief at the James. The Medical Center CMO & Physician-in-Chief at the James serves Ex- Officio. In FY24, a subcommittee of PEC will be established to review OPPE outliers and to report these concerns to PEC.

Function:

- Provide leadership for OSUWMC clinical quality improvement processes.
- Provide clinical expertise to the practitioner peer review process thorough and timely review of clinical care and/or patient safety issues referred to the PEC.
- Advises the CMO & Director of Medical Affairs at the James regarding action plans to improve the quality and safety of clinical care at the OSUWMC.
- Develop follow up plans to ensure action is successful in improving quality and safety.
- Monitor OPPE reports (via subcommittee) to identify outliers in the faculty prior to their recredentiaing review every three years.
- Establish Peer Review Process Policy to clearly define the scope, methods, and timing of peer review events.

Sentinel Event Team

Composition: The OSUWMC Sentinel Event Team (SET) includes an Administrator, the Chief Quality and Patient Safety Officer, the Administrative Director for Quality & Patient Safety, a member of the Physician Executive Council, a member of the Nurse Executive Council, representatives from Quality and Operations Improvement and Risk Management and other areas as necessary.

Function:

- Approves & makes recommendations on sentinel event determinations and teams, and action plans as received from the Sentinel Event Determination Group,
- Evaluates findings, recommendations, and approves action plans of all root cause analyses.

The Sentinel Event Determination Group (SEDG)

The SEDG is a sub-group of the Sentinel Event Team and determines whether an event will be considered a sentinel event, a significant event or a non-event. SEDG has the authority to assign the Root Cause Analysis (RCA) Executive Sponsor, RCA Workgroup Leader, RCA Workgroup Facilitator, and recommends the Workgroup membership to the Executive Sponsor. When the RCA is presented to the Sentinel Event Team, the RCA Workgroup Facilitator will attend to support the members.

Composition: The SEDG voting membership includes the CQPSO or designee, Director of Risk Management, and Quality Director of respective business unit for where the event occurred (or their designee). Additional guests attend as necessary.

Clinical Quality & Patient Safety Sub-Committees

Composition: For the purposes of this plan, Quality & Patient Safety Sub-Committees will refer to any standing committee or sub-committee functioning under the Quality Oversight Structure. Membership on these committees will represent the major clinical and support services throughout the hospitals and/or clinical departments. These committees report, as needed, to the appropriate oversight committee(s) defined in this Plan.

Function: Serve as the central resource and interdisciplinary work group(s) for the continuous process of monitoring and evaluating the quality and services provided throughout a hospital, clinical department, and/or a group of similar clinical departments.

Quality Improvement (QI) Teams/Work Groups

The QI Teams serve as the functional arm of Quality and Patient Safety to implement specific quality improvement initiatives within the Health System. The teams leverage the triad/dyad leaders across the system to establish a clear level of accountability for quality improvement activities. The councils use data provided by ACE to identify and prioritize processes and tactics to improve a specific outcome or priority. The teams may develop implementation toolkits consistent with best practice. These toolkits decrease variation in how quality improvement efforts are undertaken across the system for common issues such as falls, hospital acquired infections, and patient safety indicators. QI Team members are responsible for the successful implementation and maintenance of these QI efforts within their areas of responsibility.

Composition: Co-chaired by the Chief Quality and Patient Safety Officer and the Senior Director of Quality and Patient Safety. The teams consist of multidisciplinary leaders across the system and selected business units, nursing, pavilion, as well as educational and administrative leaders.

Function:

- System-wide implementation of quality improvement efforts for specific quality opportunities impacting a broad patient population.
- QI Teams are not intended to replace any service line or business unit level quality committee or activity but are intended to align QI efforts across the system for specific opportunities.
- Priorities are established based on current performance and identified gaps in performance when compared to industry leaders; data is provided from the ACE and quality teams.
- QI Teams are tasked with creating a system-wide QI plan to improve performance to include a standardized toolkit for implementation.
- The team coordinates with ACE to develop process measures, adherence reports, and outcome reporting for the project.
- After implementation, council leaders are responsible for ongoing surveillance of process adherence and outcomes for their respective units.
- QI teams report priorities, progress, and results to the QLC as appropriate.

Roles and Responsibilities

Executive Vice President/CEO

The EVP leads all seven health science colleges and the Wexner Medical Center Enterprise which includes seven hospitals, a nationally ranked college of medicine, 20-plus research institutes, multiple ambulatory sites, an accountable care organization and a health plan. Additionally, the EVP serves as the Chief Executive Officer for Wexner Medical Center and serves in an ex-officio role for the Wexner Board of Trustees, as well as being the Chairman for the Quality and Professional Affairs committee which is a Board committee.

Chief Operating Officer (COO)

The COO for the Medical Center is responsible for providing leadership and oversight for the overall Clinical Quality Management, Patient Safety and Patient Experience Plan across the OSUWMC.

Chief Clinical Officer (CCO)

The CCO for the Medical Center is responsible for facilitating the implementation of the overall Clinical Quality Management, Patient Safety & Patient Experience Plan at OSUWMC. The CCO is responsible for facilitating the implementation of the recommendations approved by the various committees under the Quality Leadership Committee (QLC).

Chief Quality and Patient Safety Officer (CQPSO)

The CQPSO reports to the Chief Operating Officer and provides oversight and leadership for the OSUWMC in the conceptualization, development, implementation and measurement of the OSUWMC approach to quality, patient safety and patient experience.

Senior Director, Quality and Safety

The Senior Director of Quality and Safety works in dyad partnership with the CQPSO to provide oversight and leadership for the OSUWMC in the conceptualization, development, implementation, and measurement of the OSUWMC approach to quality, patient safety, and patient experience.

Associate Chief Quality and Patient Safety Officers

The Associate Chief Quality and Patient Safety Officers support the CQPSO in the development, implementation, and measurement of OSUWMC's approach to quality, safety, and patient experience.

Medical Director/Director of Medical Affairs

Each business unit Medical Director is responsible for the review, implementation and oversight of the Clinical Quality Management, Patient Safety & Patient Experience Plan.

Associate Medical Directors

The Associate Medical Directors assist the CQPSO in the oversight, development, and implementation of the Clinical Quality Management, Patient Safety & Patient Experience Plan as it relates to the areas of quality, safety, evidence-based medicine, clinical resource utilization and service.

Chief Administrative Officers – Acute Care Division/Post-Acute and Home-Based Care Division/Outpatient and Ambulatory Division/Clinical and Physician Network

The OSUWMC Chief Administrative Officers are responsible to the Board for implementation of the Clinical Quality Management, Patient Safety & Patient Experience Plan for their respective divisions.

Business Unit Executive Directors

The OSUWMC staff, under the direction of the Health System Chief Administrative Officer and Hospital Administration, implements the program throughout the organization. Hospital Administration provides authority and supports corrective actions within its realm for clinical quality management, patient safety, and patient experience activities.

Clinical Department Chief and Division Directors:

Each department chairperson and division director are responsible for ensuring the standards of care and service are maintained within their department/division. In addition, department chairpersons/division directors may be asked to implement recommendations from the Clinical Quality Management, Patient Safety and Patient Experience Plan, or participate in corrective action plans for individual physicians, or the division/department as a whole.

Medical Staff

Medical staff members are responsible for achieving the highest standard of care and services within their scope of practice. As a requirement for membership on the medical staff, members are expected and must participate in the functions and expectations set forth in the Clinical Quality Management, Patient Safety, & Patient Experience Plan. In addition, members may be asked to serve on quality management committees and/or quality improvement teams.

House Staff Quality Forum (HQF)

The House Staff Quality Forum (HQF) is comprised of representatives from each Accreditation Council for Graduate Medical Education (ACGME) program. HQF has Executive Sponsorship from the CQPSO and the Associate CQPSO.

The purpose of the HQF is to provide post-graduate trainees with an opportunity to participate in clinical quality, patient safety and patient experience-related initiatives while incorporating the perspective of the frontline provider. HQF will work on quality, safety and patient experience related projects and initiatives that are aligned with the health system goals and will report to the Clinical Quality and Patient Safety committee. The Chair HQF will serve as a member of the Leadership Council.

Nursing Quality

The primary responsibility of the Nursing Quality and Evidence-Based Practice (EBP) Department is to monitor and evaluate performance of the nursing staff in support of organizational quality, safety and patient experience goals, submit required data to the National Database for Nursing Quality Indicators (NDNQI), review benchmark data and identify opportunities for improvement, use the literature to guide recommended changes to nursing practice and policy, coordinate and facilitate nursing quality improvement initiatives, facilitate participation/collaboration with system-wide patient safety activities, and use EBP and research to improve both the delivery and outcomes of personalized nursing care.

Nursing Quality team members serve as internal consultants for the development and evaluation of quality improvement, patient safety, and EBP activities. The department maintains human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

Hospital Department Directors

Each department director is responsible for ensuring the standards of care and service are maintained or exceeded within their department. Department directors are responsible for implementing, monitoring, and evaluating activities in their respective areas and assisting medical staff members in developing appropriate mechanisms for data collection and evaluation. In addition, department directors may be asked to implement recommendations from the Clinical Quality Management, Patient Safety and Patient Experience Plan or participate in corrective action plans for individual employees or the department as a whole. Department directors provide input regarding committee memberships and serve as participants on quality management committees and/or quality improvement teams.

Health System Staff

Health System staff members are responsible for ensuring the standards of care and services are maintained or exceeded within their scope of responsibility. The staff is involved through formal and informal processes related to clinical quality improvement, patient safety and patient experience efforts, including but not limited to:

- Reporting events, including near misses or “good catches” via the internal Patient Safety Reporting System (PSRS)
- Suggesting processes to improve quality, safety and service
- Monitoring activities and processes, such as patient complaints and patient satisfaction
- Participating in focus groups
- Attending staff meetings
- Participating in efforts to improve quality and safety including Root Cause Analysis and Proactive Risk Assessments

Quality and Operations Improvement

The primary responsibility of the Quality and Operations Improvement team is to coordinate and facilitate clinical quality management and patient safety activities throughout the Health System. The primary responsibility for the implementation and evaluation of clinical quality management and patient safety activities resides in each department/program; however, the quality and operations improvement staff also serve as an internal consultant for the development and evaluation of quality management and patient safety activities. The team maintains human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

The department is comprised of five main functions (Appendix F):

1. Patient Safety
2. Quality Outcomes Management
3. Quality Program Reporting
4. Provider Engagement / Peer Review

Patient Experience

The primary responsibility of the Patient Experience team is to coordinate and facilitate a service-oriented approach to providing healthcare throughout the Health System. This is accomplished through both strategic and program development as well as through managing operational functions within the Health System. The implementation and evaluation of service-related activities resides in each department/program; however, the Patient Experience staff also serves as an internal consultant for the development and evaluation of service quality activities as well as a representative of the “voice of the patient” throughout the organization by reflecting or providing patient feedback to shape decision making.

The Patient Experience Department maintains human and technical resources for interpreter services, information desks, patient relations, pastoral care, team facilitation, survey management, and performance improvement. The department also oversees the Patient and Family Experience Advisor Program which is a group of current/former patients, or their primary caregivers, who have had experiences at any OSU facility. These individuals are volunteers who serve as advisory members on committees and workgroups, complete public speaking engagements and review materials.

Approach to Clinical Quality, Patient Safety & Patient Experience Management Systematic Approach/Model to Process Improvement

The OSUWMC embraces change and innovation as one of its core values. Organizational focus on process improvement and innovation is embedded within the culture using a general Process Improvement Model that includes:

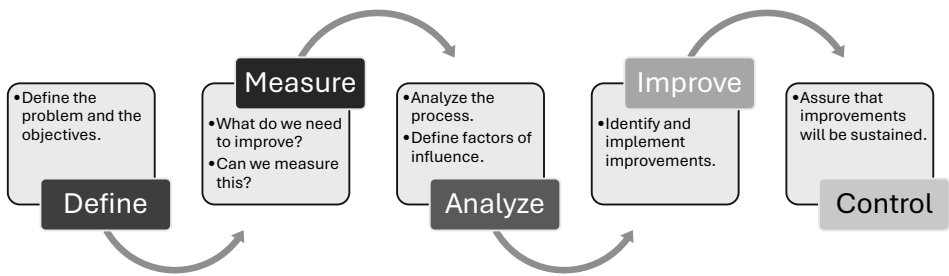
1. An organizational expectation that the entire workforce is responsible for enhancing organizational performance and;
2. Active involvement of multidisciplinary teams and committees focused on improving processes.

With the increased organizational emphasis on utilizing metric-driven approaches to reducing unintended medical errors, eliminating rework, and enhancing the efficiency/effectiveness of our work processes, the DMAIC methodology will be instrumental as a tool to help focus our process improvement efforts.

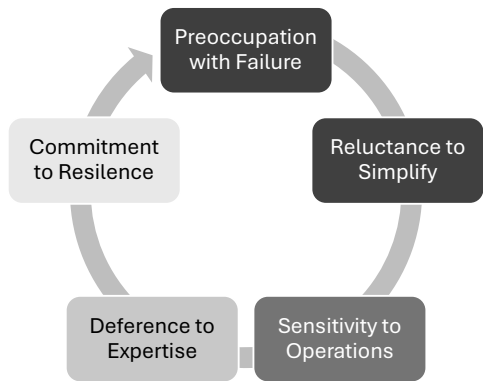
Determining Priorities

The OSUWMC has a process in place to identify and direct resources toward quality management, patient safety, and patient experience activities. The OSUWMC criteria are approved and reviewed by QLC and the Medical Center Board. The prioritization criteria are reevaluated annually according to the mission and strategic plan of the OSUWMC. The leaders may also set performance improvement priorities and reevaluate on an ad hoc basis in response to unusual or urgent events.

DMAIC Roadmap



High Reliability Organization Principles



Data Measurement and Assessment

Determination of Data Needs

The OSUWMC data needs are determined according to improvement priorities and surveillance needs. The OSUWMC collects data for monitoring important processes and outcomes related to patient care and the OSUWMC functions. In addition, each department is responsible for identifying quality indicators specific to their area of service. The quality management committee of each area is responsible for monitoring and assessing the data collected.

Collection/Measurement

Data, including patient demographic and clinical information, are systematically collected throughout the OSUWMC through various mechanisms including:

- Administrative and clinical registries and databases
- Retrospective and concurrent medical record review (e.g., infection surveillance)
- Reporting systems (e.g., patient safety reporting system)
- Surveys (i.e. patients, families, and staff)

Assessment

Statistical methods such as control charts, g-charts, confidence intervals, and trend analysis are used to identify undesirable variance, trends, and opportunities for improvement. The data is compared to previous performance, and external benchmarks. Accepted standards of care and aspirational performance targets are used to establish metrics and goals. Annual goals are established to evaluate performance. Where appropriate, OSUWMC has adopted the philosophy of setting multi-year aspirational targets. Annual targets are set as steps to achieve the aspirational goal.

Surveillance

The OSUWMC systematically collects and assesses data in different areas to monitor and evaluate the quality and safety of services, including measures related to accreditation and other requirements. Data collection also functions as a surveillance system for timely identification of undesired variations or trends in quality indicators. Other mechanisms by which data may be obtained are outlined in the graphic below.

Benchmark data

Both internal and external benchmarking provides value to evaluating performance.

Internal Benchmarking: Internal benchmarking uses processes and data to compare OSUMCs performance to itself overtime. Internal benchmarking provides a gauge of improvement strategies within the organization.

External Benchmarking: OSUWMC participates in various database systems, clinical registries and focused benchmarking projects to compare performance with that of peer institutions. Vizient, The US News & World Report, National Database of Nursing Quality Indicators, and The Society of Thoracic Surgery are examples of several external organizations that provide benchmarking opportunities.

External Reporting Requirements

There are several external reporting requirements related to quality, safety, and service. These include regulatory, governmental, payer, and specialty certification organizations. An annual report is given to the Compliance Committee to ensure all regulatory requirements are met.

Methods for Monitoring



Communication of Data/Performance

Metric Headquarters (Metric HQ)

Quality and patient safety related data are collected to monitor key processes and outcomes related to care delivery and according to improvement priorities and surveillance needs. For example, Metric HQ is an internal set of dashboards for visualizing quality and safety data. This serves as a single source of truth across the organization. Additional data sets are available from IHIS reports and/or the Analytics Center of Excellence for specific initiatives as needed and at the requested frequency.

Specific data within Metric HQ is available at the system, business unit, and unit level. Additional process measure data as leading indicators for established outcomes or priorities are also included to help target improvement efforts.

Vital Signs of Performance

The Vital Signs of Performance is an online dashboard available to everyone in the Medical Center with a valid user account that shows Mortality, Length of Stay, Patient Safety Indicators, and Readmission data over time. The data can be displayed at the health system, business unit, clinical service, and nurse station level.

Patient Satisfaction Dashboard

The Patient Satisfaction dashboard consists of patient experience indicators and comments gathered from surveys after discharge or visit to a hospital or outpatient area. The dashboard covers performance in areas such as overall experience, physician communication, nurse communication, responsiveness, and environment. It also measures process indicators, such as joint physician-nurse rounding and nurse leader rounding, as well as serves as a resource for best practices. The information contained on the dashboard is shared in various forums with staff, clinicians, administration, including the Boards.

Frequency of Data Collection

Dashboards are automatically refreshed daily without the need for manual refresh processes. Data collection frequency through other reports and/or data sets occurs at the timeframes designated for each specific initiative. Project and departmental teams set the data collection plan and frequency that meets their project's goals and objectives.

Performance Based Physician Quality & Credentialing

Performance-based credentialing ensures processes that assist to promote the delivery of quality and safe care by physicians and advanced practice licensed health care providers. Both Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE) occur. Focused Professional Practice Evaluation (FPPE) is utilized on 3 occasions: initial appointment, when a Privileged Practitioner requests a new privilege, and for cause when questions arise regarding the practitioner's ability to provide safe, high quality patient care. Ongoing Professional Practice Evaluation (OPPE) is performed on an ongoing basis (every 6 months).

Profiling Process

- Data gathering from multiple sources
- Report generation and indicator analysis
- Department chairs (division directors as well) have online access 24/7 to physician profiles for their ongoing review
 - Individual physician access to their profiles 24/7
- Discussion at Credentialing Committee
- Final Recommendation & Approval:
 - Medical Staff Administrative Committees
 - Medical Director
 - Hospital Board

Service-Specific Indicators

Several of the indicators are used to profile each physician's performance. The results are included in a physician profile which is reviewed with the department chair as part of credentialing process.

The definition of service/department specific indicators is the responsibility of the director/chair of each unit. The performance in these indicators is used as evidence of competence to grant privileges in the re-appointment process. The clinical departments/divisions are required to collect the performance information as necessary related to these indicators and report that information to the Department of Quality & Operations Improvement.

Purpose of Medical Staff Evaluation

- To monitor and evaluate medical staff performance ensuring a competent medical staff
- To integrate medical staff performance data into the reappointment process and create the foundation for high quality care, safe, and efficacious care
- To provide periodic feedback and inform clinical department chairs of the comparative performance of individual medical staff
- To identify opportunities for improving the quality of care

Conflict of Interest

Any person, who is professionally involved in the care of a patient being reviewed, should not participate in peer review deliberations and voting. A person is professionally involved if they are responsible for patient care decision making either as a primary or consulting professional and/or have a financial interest (as determined by legal counsel) in the case under review.

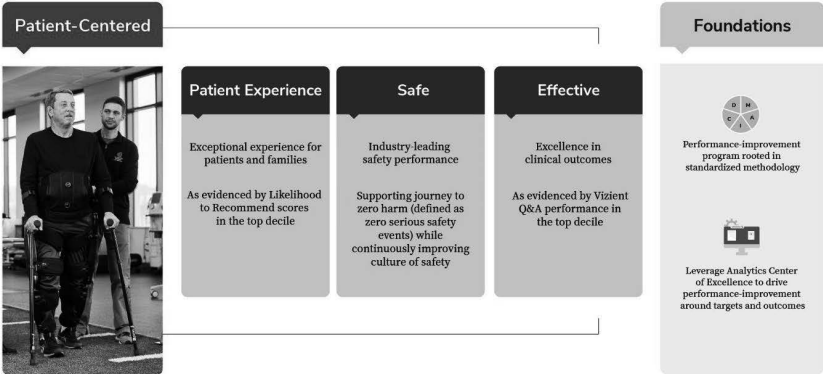
Persons who are professionally involved in the care under review are to refrain from participation except as requested by the appropriate administrative or medical leader. During peer review evaluations, deliberations, or voting, the chairperson will take steps to avoid the presence of any person, including committee members, professionally involved in the care under review. The chairperson of a committee should resolve all questions concerning whether a person is professionally involved. In cases where a committee member is professionally involved, the respective chairperson may appoint a replacement member to the committee.

Participants and committee members are encouraged to recognize and disclose, as appropriate, a personal interest or relationship they may have concerning any action under peer review.

Annual Approval and Continuous Evaluation

The Clinical Quality Management, Patient Safety & Patient Experience Plan is approved by the QLC, the Medical Staff Administrative Committees, and the Medical Center Board on an annual basis. The annual evaluation includes a review of the program activities and an evaluation of the effectiveness of the structure.

Appendix A: Long Range Quality Plan



Appendix B: Prioritization Criteria

The following criteria are used to prioritize clinical value enhancement initiatives to ensure the appropriate allocation of resources.

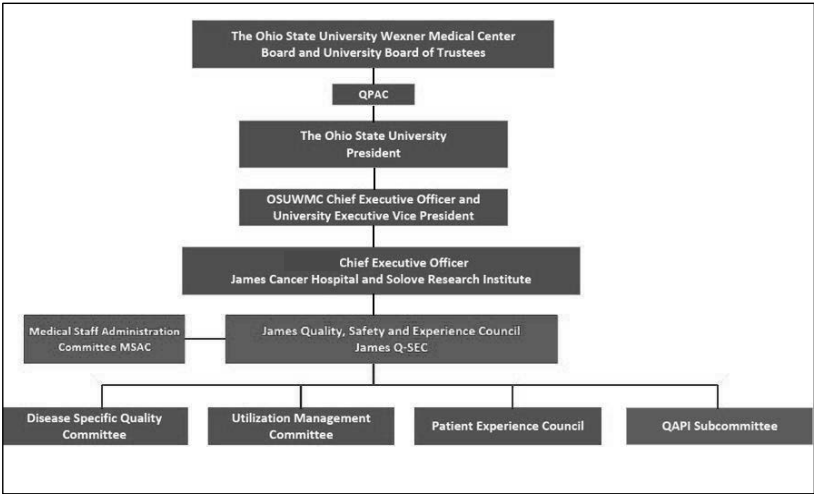
1. Ties to strategic initiatives and is consistent with hospital's mission, vision, and values
2. Reflects areas for improvement in patient safety, appropriateness, quality, and/or medical necessity of patient care (e.g., high risk, serious events, problem-prone)
3. Has considerable impact on our community's health status (e.g., morbidity/mortality rate)
4. Addresses patient experience issues (e.g., access, communication, discharge)
5. Reflects divergence from benchmarks
6. Addresses variation in practice
7. Is a requirement of an external organization
8. Represents significant cost/economic implications (e.g., high volume)

Appendix C: FY26 Priorities/Metrics

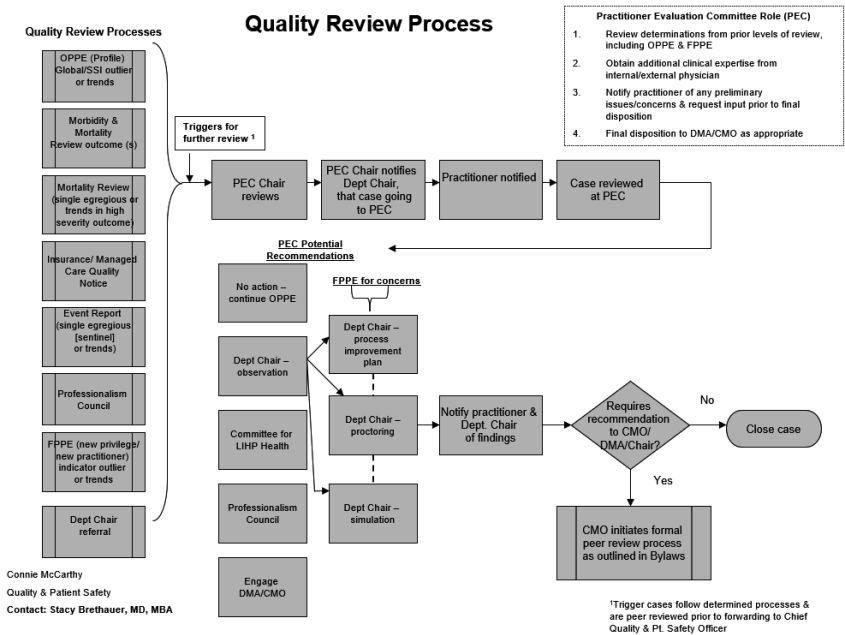
Board Endorsed FY26 Quality & Safety Priorities

- Mortality
- Patient Experience (Likelihood to Recommend)
- Central Line Associated Blood Stream Infection (CLABSI)
- Falls with Injury
- Serious Safety Event Rate
- Execute on HRO

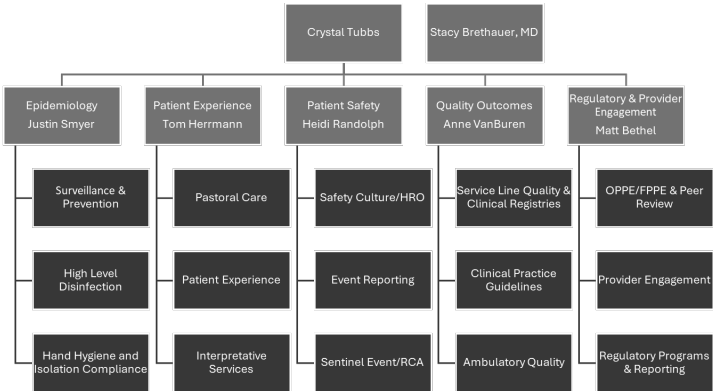
Appendix D: Quality Structure for The James Cancer Hospital & Solove Research Institute



Appendix E: Quality Review Process & Physician Performance Based Profile



Appendix F: Quality & Operations Improvement Organizational Chart



The James Cancer Hospital Quality, Safety and Experience Council Plan

The Ohio State University
James Cancer Hospital and
Solove Research Institute
The Comprehensive Cancer Center
(The James and CCC)

Fiscal Year 2026
July 1, 2025, through June 30, 2026

The James



The James Cancer Hospital Quality, Safety and Experience Council Plan

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The James Cancer Hospital & Solove Research Institute

The James Quality, Safety and Experience Council Plan

Mission, Vision, and Values:

Mission: To eradicate cancer from individuals' lives by creating knowledge and integrating groundbreaking research with excellence in education and patient-centered care.

Vision: Creating a cancer-free world. One person, one discovery at a time.

Values: Excellence, Collaborating as One University, Integrity and Personal Accountability, Openness and Trust, Diversity in People, and Ideas, Change and Innovation, Simplicity in Our Work, Empathy, Compassion, and Leadership.

The James' model of patient-centered care is enhanced by the teaching and research programs. Patient service, both directly and indirectly, provides the foundation for teaching and research programs. This three-part mission and a staff dedicated to its fulfillment, distinguish The Arthur G. James Cancer Hospital and Richard J. Solove Research Institute as a Comprehensive Cancer Center and as one of the nation's premier cancer treatment centers.

Definition:

The James Quality, Safety, and Experience Council Plan (hereinafter The Plan) of The James Cancer Hospital and Solove Research Institute is our organization-wide approach to systematic assessment of process design and performance improvement targeting quality of care, patient safety, and patient experience. The Plan serves to provide direction for how clinical care and activities are to be designed to enrich patient outcomes, reduce harm, and improve value-added care and service to the cancer patient population.

Scope:

As a Prospective-Payment-System-exempt (PPS-exempt) hospital, which serves as the clinical care delivery-arm of an NCI-designated Comprehensive Cancer Center, The James has a unique opportunity to ensure value-added services and research expertise are provided to our patients, families, and the community – both nationally and internationally. The Plan encompasses all clinical services. Through close partnership with the Comprehensive Cancer Center, The Plan includes quality and patient safety goals for process improvements related to functions and processes involving both the Cancer Center and the hospital and ambulatory clinics/treatment areas.

With a close partnership within OSUWMC, The Plan provides oversight of the clinical contracted services and serves as a component of The Quality Assessment and Performance Improvement (QAPI) requirements from the Center for Medicaid and Medicare Services. These services are evaluated on an annual basis by The James Quality, Safety and Experience Council (Q-SEC), The James Quality Assessment and Performance Improvement (QAPI) Subcommittee, The James Medical Staff Administrative Committee (MSAC), and then forwarded each year to the Quality and Professional Affairs Committee (QPAC) as a part of the governing body, to ensure quality and safety of care is provided to all James' patients.

Purpose:

The purpose of the Plan is to provide guidance for the resources and processes available to ensure measurable improvements to patient care are occurring. The James recognizes the vital importance of creating and maintaining a safe environment for all patients, visitors, employees, and others within the organization to bring about personalized care through evidence-based medicine.

Objectives:

The central objectives of The James Quality, Safety and Experience Council Plan are to:

1. Provide guidance for monitoring and evaluation of effort(s) in clinical care to sustain high performance and improved outcomes for all patients.
2. Evaluate and recommend evidence-based system changes to improve patient care and safety by assessing, identifying, and reducing risk within the organization when undesirable patterns or trends in performance are identified, or when events requiring intensive analysis occur.
3. Assure overall program meets or exceeds accreditation standards, state, federal and licensure regulations.
4. Provide information for adherence to evidence-based practice guidelines to standardize clinical care and reduce practice variation.
5. Improve patient satisfaction and perception of treatment, care, and services by continuously identifying, evaluating, and improving performance based on needs, expectations, and satisfaction results.
6. Enhance the patient experience by providing safe and high-quality care at the best value.
7. Provide education to the governance, faculty and staff regarding quality management principles and processes for improving systems.
8. Provide appropriate levels of data transparency.
9. Assure quality and patient safety processes developed involve trans-disciplinary teamwork.
10. Provide process improvement initiatives to clinical systems to prevent or eliminate patient harm.

Structure for Quality Oversight:

The James Quality, Safety and Experience Council (Q-SEC) serves as the primary entity within The James to develop annual goals which are consistent with goals from the Health System. However, these goals are designed specifically for The James to target and focus on the cancer patient population and cancer research agendas.

Governance and Committees:

Governing Body

The Wexner Medical Center Board is the governing body, responsible to The Ohio State University Board of Trustees, for operation, oversight, and coordination of the Wexner Medical Center and The James Cancer Hospital. The Wexner Medical Center Board is composed of sixteen voting members, plus an additional group of university and medical center senior leaders who serve in ex-officio roles. The Quality & Professional Affairs Committee (QPAC) reports to the Wexner Medical Center Board and is responsible for, among other things, annually reviewing and evaluating The James Quality Safety, and Experience Council Plan, along with goals and process improvements made for improved patient safety and quality programs, QPAC is also responsible for granting clinical privileges for the credentialing of practitioners. The Board of Trustees and its committees meet throughout the year with focused agendas and presentations.

The Quality and Professional Affairs Committee (QPAC):

Composition:

This committee consists of no fewer than four voting members of the University Wexner Medical Center Board of Trustees. Members are appointed each year by the Chair of the OSUWMC Board, and one of these shall be assigned as the Chair of the committee. The CEO of the OSU Health System; CMO of the University Medical Center; CMO of The James; the Medical Director of Credentialing for The James; the Chief of Medical Staff of the University hospitals; the Chief of Medical Staff for The James; the Associate Dean of Graduate Medical Education; the Chief Quality and Patient Safety Officer; The Chief Nurse Executive for the OSU Health System; and the Chief Nursing Officer for The James serve in ex-officio, voting positions. Other members as may be appointed by The Chair of the OSUWMC board, in consultation with the Chair of Quality and Professional Affairs committee.

Function:

The Quality and Professional Affairs Committee (QPAC) shall be responsible for the following specific duties:

1. Reviewing and evaluating the Quality and Patient Safety programs of OSUWMC.
2. Overseeing all patient care activity in all facilities as a part of OSUWMC, including but not limited to, hospitals, clinics, ambulatory care, and physician office facilities.
3. Monitoring quality assurance performance in accordance with the standards set by OSUWMC.
4. Monitoring the achievement of accreditation and licensure requirements.
5. Reviewing and then recommending to the OSUWMC board changes to the medical staff bylaws and medical staff rules and regulations.
6. Reviewing and approving clinical privilege forms.
7. Reviewing and approving membership, as well as granting appropriate clinical privileges for the credentialing of practitioners, recommended for membership and clinical privileges by the hospital's Medical Staff Administrative Committees (MSAC).
8. Reviewing and approving membership and granting appropriate clinical privileges for the expedited credentialing of such practitioners that are eligible by satisfying the minimum approved criteria which is determined by the OSUWMC board and recommended for membership and clinical privileges to the MSACs of OSUWMC and The James.
9. Reviewing and approving the reinstatement of clinical privileges for a practitioner after a leave of absence from clinical practice.
10. Conducting Peer Review activities and recommending professional review actions to the OSUWMC board.
11. Reviewing and resolving any petitions by the medical staff for amendments to any rule, regulation or policy presented by the Chief of Staff on behalf of the medical staff pursuant to the medical staff bylaws and communicating such resolutions to the hospital's MSACs.
12. Such other responsibilities as assigned by the Chair of the OSUWMC Board.

The James Medical Staff Administrative Committee (MSAC)

Composition:

Refer to Medical Staff Bylaws and Rules and Regulations

Function:

Refer to Medical Staff Bylaws and Rules and Regulations

The organized medical staff, under the direction of the Director of Medical Affairs/Chief Medical Officer, implements The Plan throughout the clinical departments. The James MSAC reviews reports, and makes recommendations related to clinical quality management, patient safety, and service quality activities. This Committee has responsibility for evaluating the quality and appropriateness of clinical performance and service

quality of all individuals with clinical privileges. The James MSAC reviews corrective actions and provides authority within their realm of responsibility related to clinical quality management, patient safety, and service quality activities.

The James Quality, Safety and Experience Council (Q-SEC)

Composition:

The James Quality, Safety and Experience Council (Q-SEC) consists of representatives from Medical Staff, Administration, Advanced Practice Providers, Quality and Patient Safety, Clinical Outcomes, Analytics Center of Excellence, Nursing, Operations Improvement, and Patient Experience (Attachment A). Membership varies due to the fluency of ongoing quality initiatives and is subject to change. This Council reports to Executive Leadership and The James Medical Staff Administrative Committee (MSAC).

Function:

- Create a culture which promotes organizational learning and recognition of clinical quality (improving outcomes) and patient safety (reducing harm).
- Develop and sustain a culture of safety which strives to embed Just Culture principles in the follow-up of healthcare errors.
- Assure compliance with patient safety-related accreditation standards.
- Proactively identify risks to patient safety and creates a call-to-action to reduce risk with a focus on process and system improvement.
- Oversee education and risk reduction strategies as they relate to Sentinel Event Alerts from The Joint Commission.
- Evaluate standards of care and evidence-based practices and provide recommendations to improve clinical care and outcomes.
- Ensure actions are taken to improve performance whenever an undesirable pattern or trend is identified.
- Receive reports from disease specific committees that have a potential impact on the quality & safety in delivering patient care such as, but not limited to, Apheresis, BMT and Acute Leukemia, Cell Therapy, Lymphoma, Sickle Cell, Radiation Oncology, Translational Research, Patient Experience, Grievance Committee, Utilization Management Committee, and Infection Prevention Committees.
- Receive reports from Shared Services as they represent the metrics for quality and safety of care for the cancer patient population.
- Maintain follow-up on Shared Services action plans as necessary for improving metrics for quality and safety of care for the cancer patient population.

The James Quality, Safety and Experience Council QAPI Sub-Committee

Composition:

The James Quality, Safety and Experience QAPI Sub-Committee refers to the sub-committee functioning under the quality oversight structure of The James Quality, Safety and Experience Council (Q-SEC). The term QAPI refers to Quality Assessment and Performance Improvement. Membership on this sub-committee represents the major clinical and support services throughout the hospitals and/or clinical departments, as well as members from The James Quality, Safety and Experience Council. The QAPI Sub-committee will identify department barriers requiring escalation to The James Quality, Safety and Experience Council (Q-SEC), or as defined by The Plan.

Function:

Serves as the central resource and interdisciplinary work group for the continuous process of monitoring and evaluating the quality and services provided throughout a hospital, clinical department, and/or a group of similar clinical departments.

- Conducts department reviews for services provided by The James and services received from Wexner Medical Center, including process/patient safety metrics and PSRS events reviews.
- Receive and review reports from Shared Services as they present quality and safety of care metrics for the cancer patient population.
- Maintain continuous follow-up on Shared Services action plans for improving metrics for quality and safety of care for the cancer patient population.

The James Human Experience Strategic Steering Council

Composition:

The James Human Experience Strategic Steering Council consists of multidisciplinary representatives from Hospital Administration, Medical Staff, Nursing, Nutrition Services, Environmental Services, Communications, and the Patient Experience Department. The James Human Experience Strategic Steering Council has a liaison member connected to The James Quality, Safety and Experience Council (Q-SEC).

Function:

- Create a culture and environment to deliver exceptional patient experience consistent with the mission, vision and values focused on service quality.
- Measure and review voice of the customer information in the form of patient satisfaction, comments, letters, and related measures.
- Recommend system goals and expectations for consistent patient experience.
- Provides guidance and oversight into patient experience improvement efforts ensuring effective deployment and accountability throughout the system.
- Communicates the work of the Council throughout the organization.

The James Utilization Management Committee (JUMC)

Composition:

The James Utilization Management Committee (JUMC) is co-chaired by the Associate Chief Medical Officer of the Care Continuum and the Director of Patient Care Resource Management. Committee membership will include James Physician Advisors and Emergency Department Physician Advisors, physician members of the medical staff, representatives from the Patient Care Resource Management (PCRM) Department, Administration, Finance, Advance Practice Professionals, Providers, Quality and Safety, Revenue Cycle and Compliance, Nursing and Service Line Administration. Other departments in The James will be invited to join meetings as necessary when opportunities have been identified for improvement and input. JUMC members will not include any individual who has a financial interest in any hospital in the health system. No JUMC member will be included in the review process for a case when that member has direct responsibility for patient care in the case being reviewed.

Function:

The JUMC has a responsibility to establish and implement The James Utilization Management Plan. The JUMC implements procedures for reviewing the efficient utilization of care and services, including, but not limited to admissions, continued stays, readmissions, over and under-utilization of services, the efficient scheduling of services, appropriate stewardship of hospital resources, access and throughput and timeliness of discharge planning. Any quality or utilization opportunities identified by the JUMC through utilization review activities are

acted upon by the committee or referred to the appropriate entity for resolution. The JUMC provides education on care and utilization issues to all health care professionals and medical staff at The James.

Practitioner Evaluation Committee (PEC)

Composition:

The Practitioner Evaluation Committee (PEC) is the medical staff peer review committee that provides leadership in overseeing the peer review process. The PEC is composed of the Chair of the Clinical Quality and Patient Safety Committee, medical staff, and advanced practice providers from various business units and clinical areas as appointed by the Chief Medical Officer (CMO) of the Health System and the Director of Medical Affairs/Chief Medical Officer.

Function:

- Provide leadership for the provider clinical quality improvement processes.
- Provide clinical expertise to the practitioner peer review process by thorough and timely review of clinical care and/or patient safety issues referred to the PEC.
- Provide advice and support to the Director of Medical Affairs/CMO at The James regarding action plans to improve the quality and safety of clinical care.
- Provide input to the Director for Advanced Practice Providers when there is an APP Peer Review completed.
- Develop follow up plans to ensure action is successful in improving quality and patient safety.

Health System Information Systems Steering Team (HSISST)

Composition:

The HSISST is a multidisciplinary team chaired by the Chief Medical Information Officer of OSUWMC.

Function:

The HSISST oversees information technology for both The James and OSUWMC. The team is responsible for oversight of information technology and processes currently in place, as well as reviewing replacement and/or introduction of new systems, and related policies/procedures. Individual team members are charged with responsibility to communicate and receive input from their various communities of interest on relevant topics discussed at committee meetings and other forums.

Sentinel Event Committee and Sentinel Event Determination Group (SEDG):

Composition:

The Sentinel Event Team includes membership from both The James and the OSUWMC. Membership from The James includes: the Executive Director Medical Affairs/Chief Medical Officer, the Quality Medical Director for The James, the Quality Medical Director for Perioperative services, and the Director of Quality & Patient Safety and Nursing Quality Director. Members from the Medical Center include: an Administrator, Chief Medical Officer, Chief Quality Officer, Associate Chief Quality and Patient Safety Officer, Associate Executive Director of Quality & Safety, a member of the Physician Executive Council, Quality and Operations Improvement, and Medication Safety Officer. Members from Risk Management are also included.

The Sentinel Event Determination Group (SEDG) is a sub-group of the Sentinel Event Team which is comprised of quality leaders from The James and OSUWMC and are chaired by the Health System Chief Quality Officer. The SEDG membership includes the CQO, Associate CQO, Director of Risk Management, James Quality Medical Director, Directors of Quality & Patient Safety and Nursing Quality Directors of respective business units. The SEDG meets weekly to review sentinel events and significant events. Once an event is determined to be a

significant or sentinel event, SEDG members assign a Root Cause Analysis (RCA) Team who includes Executive Sponsor, RCA Workgroup Leader, and RCA Workgroup Facilitator. The James Director of Quality and Patient Safety serves as the executive sponsor for the RCA, and receives the input from SEDG, collaborates with facilitators and physician leaders to finalize the team membership, initiate team charters, and ensure that team meetings and action plans are completed in accordance with requirements to satisfy regulatory compliance.

Function:

Approve and make recommendations on sentinel event determinations and teams, and action plans as received from the Sentinel Event Determination Group. Results of a sentinel event, significant event or near-miss information are considered confidential according to Ohio Revised Code Section 2305.25 and are not externally reported or released.

The James Continuous Quality Improvement Teams

Composition:

For the purposes of this plan, Quality Improvement Teams are considered as ad-hoc committees, disease specific workgroups, performance improvement teams, taskforces, etc., that function under the quality oversight structure and are time-limited in nature, as well as the new Health System groups that will report up to Q-SEC (an example is the Hospital Acquired Infection group). Continuous Quality Improvement teams are comprised of owners or participants in the process under study. The process may be clinical or non-clinical. The members fill the following roles: team leader, Process Engineer or facilitator, physician advisor, administrative sponsor, and technical experts.

Function:

Improve current practice or processes using traditional continuous process improvement tools such as rapid cycle improvements, LEAN principles and DMAIC/DMADV/PDCA.

Roles and Responsibilities

The management of clinical quality, patient safety and excellence are responsibilities of all faculty, staff, and volunteers.

Chief Executive Officer (CEO)

The CEO for The James reports to the OSUWMC Chief Executive Officer and is responsible for providing leadership and oversight for the overall functions within The James. The CEO has authority over the James Quality, Safety and Experience Council Plan and collaborates with all employees and medical staff to ensure safe care is delivered to our patients to achieve quality outcomes for each encounter.

Director of Medical Affairs/Chief Medical Officer (CMO)

The Director of Medical Affairs is the Chief Medical Officer for The James Cancer Hospital who provides leadership and strategic direction for the faculty, medical staff, and other providers to ensure the delivery of high quality, cost-effective health care consistent with The James mission. The CMO has oversight of the medical staff's responsibilities for progress towards goals and process improvements. The CMO is a member of The James Medical Staff Administrative Committee (MSAC) and is the medical director for provider credentialing within The James.

Quality Medical Director

The James Quality Medical Director reports to the Chief Medical Officer and is responsible for assisting the Quality Department with medical review for all patient safety and quality outcomes. This physician also works

collaboratively with the health system quality medical directors and the Chief Quality and Patient Safety Officer in determining sentinel and significant events, as well as reporting events, when necessary, through the peer review process. The Quality Medical Director is a member of both the James Quality, Safety and Experience Council and a member of The James Medical Staff Administrative Committee (MSAC).

Medical Director

Each business unit Medical Director is responsible for reviewing the recommendations from The Plan and implementing quality goals and plans, along with maintaining oversight in their clinical areas.

Medical Staff

Medical staff members are responsible for achieving the highest standard of care and services within their scope of practice. As a requirement for membership on the medical staff, members are expected to and must participate in the functions and expectations set forth in The Plan. In addition, members serve on quality management/patient safety committees and/or continuous quality improvement teams throughout the year.

Executive Director, Clinical Services

The James Executive Director for Clinical Services provides leadership and oversight of The Plan and works collaboratively with the OSUWMC Quality Leadership Council (QLC) initiatives. The Executive Director is integral to the establishment and implementation of The Plan, organization-wide quality goals, and performance improvement achievements.

Chief Nursing Officer

The James CNO reports to the Executive Director of Clinical Services to work and provide senior leadership within the nursing structure to influence the nursing process and practices. The CNO ensures the overall James Quality, Safety and Experience Council Plan is utilized to assist with the development, implementation, and initiation of The James Nursing Strategic Plan. The CNO has oversight of the nursing shared governance model and the nursing leadership which establishes and implements annual nursing-sensitive goals.

Nursing Leadership

The Chief Nursing Officer, as well as the Associate Chief Nursing Officer(s), and Directors of Nursing are responsible to implement, maintain oversight, and incorporate opportunities and goals identified in collaboration with the OSUWMC- QLC Committee.

Nursing directors and managers are to implement recommendations or participate in action plans for individual employees or the department. They provide input regarding committee memberships, and serve as participants in the departmental, hospital and Health System quality/patient safety committees. Clinical Nurse Specialists (CNS) support quality improvement initiatives by providing leadership in the application and use of evidence-based practice. The James nursing staff is responsible for providing the highest standard of care and services within their scope of practice.

Quality and Patient Safety Leadership

The Sr. Director of Quality and Patient Safety, Director for Quality and Patient Safety, and the Director of Clinical Outcomes collaborate directly with the executive leaders as well as with the directors and managers of all areas to evaluate, plan and improve on patient safety and quality outcomes. In addition, the Directors have leadership oversight of quality improvement goals, patient safety improvements, and facilitates team(s) charged for implementation of annual hospital level goals.

The James Quality and Patient Safety Department

The primary responsibilities of The James Quality and Patient Safety Department are to:

- Track and trend quality events, including Sentinel Events.
- Coordinate and facilitate clinical quality management for improved outcomes.
- Monitor patient safety incidents and work with the management teams for elimination or reduction of risk/harm to patients.
- Improve patient care services by assuring the voice of the patient is heard throughout The James.
- Assist managers with evaluations of situations by utilizing Just Culture algorithm and training.

While primary responsibility for the implementation and evaluation of clinical quality, patient safety, and service activities resides within each department/program, The James Quality and Patient Safety staff also serve as internal consultants for the development, evaluation, and on-going monitoring of those activities. The James Quality and Patient Safety Department, James Quality and Clinical Outcomes team including The James Operations Improvement staff, and the Analytics Center of Excellence (ACE) staff, maintain human and technical resources for team facilitation, use of performance improvement tools, data collection, statistical analysis, and reporting.

Hospital Management Team

Each associate executive director, all service line administrators, department directors and managers are responsible to ensure the standards of care and service are maintained or exceeded within their department(s), and are responsible for implementing, monitoring, and evaluating activities in their areas and assisting clinical staff members in developing appropriate mechanisms for data collection and evaluation. Department directors, managers and/or assistant managers participate in action plans for individual employees or the department. All department directors/managers provide input regarding committee memberships and serve as participants on quality management/patient safety committees and/or quality improvement teams. Managers and staff are engaged through formal and informal processes related to quality improvement and clinical patient safety efforts, including but not limited to:

- Suggesting process improvements and reporting medical/health care events and near misses.
- Implementing evidence-based practices.
- Monitoring and responding to activities and processes, such as patient complaints and patient satisfaction.
- Participating in audits, observations and peer-to-peer review and feedback; and,
- Participating in efforts to improve patient outcomes and enhance patient safety.

The James Patient Experience/Guest Services Department

The primary responsibility of The James Patient Experience and Guest Services Department is to coordinate and facilitate a service-oriented approach to providing healthcare. This is accomplished through both strategic program developments and managing operational functions. The Patient Experience staff serves as an internal consultant for the development and evaluation of service-quality activities. The Department maintains human and technical resources for interpreter services, information desks, patient relations, team facilitation, and use of performance improvement tools, data collection, statistical analysis, and reporting. The Department also oversees the Patient/Family Advisor Program consisting of current and former patients, or their primary caregivers, who have had experiences at any James facility. These individuals are volunteers who serve on committees and workgroups, as Advisory Council members, complete public speaking engagements, and review

materials. Lastly, the department supports system-wide Volunteer efforts, aligning credentialed adult and student volunteers with service opportunities within the medical center.

Philosophy of Patient Care Services

The James provides innovative and patient-focused comprehensive cancer care and services which include the following:

- A mission statement that outlines the relationship between patient care, research, and teaching.
- Long-range, strategic planning conducted by leadership to determine the services to be provided.
- Establishing annual goals and objectives consistent with the hospital mission, and which are based on a collaborative assessment of patient/family and the community's needs.
- Provision of services appropriate to meet the needs of patients.
- Ongoing evaluation of services provided such as: performance assessment and improvement activities, budgeting, and staffing plans.
- Integration of services through the following: continuous quality improvement teams; clinical interdisciplinary quality programs; performance assessment and improvement activities; communications through management operations meetings, nursing shared governance structure, Medical Staff Administrative Committee, administrative staff meetings; participation in OSUWMC and OSU governance structures, special forums; and leadership and employee education/development.
- Maintaining competent patient care leadership and staff by providing education and ongoing competency reviews which are focused towards identified patient care needs.
- Respect for each patient's rights and decisions is an essential component in the planning and provision of care.
- Utilizing the Relationship Based Care principles which encompasses building a caring and healing environment for patients, families and staff by developing caring and therapeutic relationships with the patients/families, colleagues, self and the larger community.
- Embracing the principles of a Just Culture and honoring a Culture of Safety for all team members, faculty, and staff.

The IOM *10 Rules for Redesign* are guiding principles for the provision of safe and quality care. These are:

1. ***Care is based on continuous caring and healing relationships.*** Patients should receive care whenever they need it and, in many forms, not just face-to-face visits. This implies that the health care system must be always responsive, and access to care should be provided over the Internet, by telephone, and by other means in addition to in-person visits.
2. ***Care is customized according to patient needs and values.*** The system should be designed to meet the most common types of needs but should have the capability to respond to individual patient choices and preferences.
3. ***The patient is the source of control.*** Patients should be given the necessary information and the opportunity to exercise the degree of control they choose over health care decisions that affect them. The system should be able to accommodate differences in patient preferences and encourage shared decision making.
4. ***Knowledge is shared and information flows freely.*** Patients should have unfettered access to their own medical information and clinical knowledge. Clinicians and patients should communicate effectively and share information.

5. **Decision making is evidence-based.** Patients should receive care based on the best available scientific knowledge. Care should not vary illogically from clinician to clinician or from place to place.
6. **Safety is a system property.** Patients should be safe from injury caused by the care system. Reducing risk and ensuring safety require greater attention to systems that help prevent and mitigate errors.
7. **Transparency is necessary.** The system should make available to patients and their family's information that enables them to make informed decisions when selecting a health plan, hospital, or clinical practice, or when choosing among alternative treatments. This should include information describing the system's performance on safety, evidence-based practice, and patient satisfaction.
8. **Needs are anticipated.** The system should anticipate patient needs, rather than simply react to events.
9. **Waste is continuously decreased.** The system should not waste resources or patient time.
10. **Cooperation among clinicians is a priority.** Clinicians and institutions should actively collaborate and communicate to ensure an appropriate exchange of information and coordination of care.

Following these principles, The James has instituted the following guidelines as the approach to quality, safety, and experience services:

- **Customer Focus:** Knowledge and understanding of internal and external customer needs and expectations.
- **Leadership & Governance:** Dedication to continuous improvement instilled by leadership and the Board.
- **Education:** Ongoing development and implementation of curricula for quality, safety, and reliability for all faculty, staff, volunteers, and students.
- **Involvement:** All team members must have mutual respect for the dignity, knowledge, and contributions of others. Everyone is engaged in the improvement of processes where they work.
- **Data-driven decision making:** Decisions for quality, safety, and reliability are based on the knowledge derived from data.
- **Continuous Process Improvement:** Analysis of processes for design, redesign and to reduce variations are accomplished by use of an approach using science and LEAN/DMAIC/PDCA. Measures and improvements are ongoing.
- **Just Culture:** Our framework of quality, safety, and reliability services are based on a culture that is open, honest, transparent, collegial, team-oriented, accountable, and non-punitive when system failures have occurred.
- **Personalized Health Care:** Begins with developing a therapeutic relationship with the patient and family and incorporating evidence-based medicine which considers the patient's health status, genetics, cultural tradition, personal preferences, and values family and lifestyle situations.
- **Reducing Health Disparities:** Ongoing commitment to make health care disparities an organizational quality and safety priority by assessing, identifying trends in data, developing, and implementing action plans, and communicating progress to key stakeholders.

Consistent Level of Care

Certain elements of The Plan help to ensure patient care standards for the same or similar services are comparable in all areas. These elements include, but are not limited to:

- Policies and procedures and services provided are not payer driven and are standardized to promote high quality and safe care.
- Application of a single standard for physician credentialing.
- Cancer care delivery is based upon nationally recognized standards of care from the National Comprehensive Cancer Network (NCCN).

- Use of monitoring tools to measure processes in areas of the Health System and The James.

Performance Transparency

The James Medical and Administrative leadership have a long-standing and strong commitment to transparency of performance as it relates to clinical quality, safety, and service performance.

Performance data is shared internally with faculty and staff through a variety of methods. Providing data internally assists faculty and staff in obtaining real-time performance results and enables faculty and staff to use those results to drive change and improve performance. Transparency of the information provided is within the limits of the Ohio law that protects attorney–client privilege, quality inquiries and reviews, as well as peer review. Current quality data is shared on The James internal intranet site. The Analytics Center of Excellence team works with many departments and partners with other reporting groups to build and enhance quality and safety dashboards, as well as display other important metrics to build on the equation of value for our patients.

Confidentiality

Confidentiality is essential to the quality management and patient safety process. All records and proceedings are confidential and are to be marked as such. Written reports, data, and meeting minutes are to be maintained in secure files. Access to these records is limited to appropriate administrative personnel and others, as deemed appropriate by legal counsel. As a condition of staff privilege and peer review, it is agreed that no record, document, or proceeding of this program is to be presented in any hearing, claim for damages, or any legal cause of action. This information is to be treated for all legal purposes as privileged information, keeping aligned with Ohio Revised Code 121.22 (G)-(5) and Ohio Revised Code 2305.251.

Conflict of Interest

A person is professionally involved if they are responsible for patient care decision making, either as a primary or consulting professional, and/or have a financial interest (as determined by legal counsel) in a case under review. Persons who are professionally involved in the care under review are to refrain from participation except as requested by the appropriate administrative or medical leader. During peer review evaluations, deliberations, or voting, the chairperson will take steps to avoid the presence of any person, including committee members, professionally involved in the care under review. The chairperson of the committee should resolve all questions concerning whether a person is professionally involved. In cases where a committee member is professionally involved, the respective chairperson may appoint a replacement member to the committee. Participants and committee members are encouraged to recognize and disclose, as appropriate, a personal interest or relationship they may have concerning any action under peer review.

Priority Criteria

The following criteria are used to prioritize clinical value enhancement initiatives and continuous quality improvement opportunities, to ensure the appropriate allocation of resources.

1. Ties to strategic initiatives consistent with the hospital's mission, vision, and values.
2. Reflects areas for improvement in patient safety, appropriateness, quality, and/or medical necessity of patient care (e.g., high-risk, serious events, problem-prone).
3. Has a considerable impact on our community's health status (e.g., morbidity/mortality rate).
4. Address patient experience issues (e.g., access, communication, discharge).
5. Reflects divergence from benchmarks.
6. Addresses variation in practice.
7. Required by an external organization.

8. Represents significant cost/economic implications (e.g., high volume).

Determining Priorities

The James has a process in place to identify and direct resources toward quality management, patient safety, and service excellence activities. The prioritization criteria are reevaluated annually according to the mission and strategic plan. The leaders set performance improvement priorities and reevaluate annually in response to unusual or urgent events. Whenever possible, NCI, ADCC, or other appropriate cancer specific benchmarks are utilized to compare performance metrics for The James, to assist with determination of priorities each year to improve performance.

Design and Evaluation of New Processes

New processes are designed and evaluated according to the organizational mission, vision, values, and priorities, and are consistent with sound business practices.

The design or re-design of a process may be initiated by:

- Surveillance data indicating undesirable variance.
- Patients, staff, or payers perceived need to change a process.
- Information from within the organization and from other organizations about potential risks to patient safety, including the occurrence of sentinel events.
- Review and assessment of data and/or review of available literature to confirm the need and/or by evidence-based practices.

Data Measurement and Assessment

Determination of Needs

Data needs are determined according to improvement priorities and surveillance needs. The James Quality and Patient Safety departments and Analytics Center of Excellence collect and report data for monitoring important processes and outcomes related to patient care. In addition, each department is responsible for identifying quality indicators specific to their area of service. The quality management committee of each area is responsible for monitoring and assessment of the data collected. Quality and safety monitoring is on-going and reviewed by The James Quality, Safety and Experience Council (Q-SEC) annually.

External Reporting Requirements

The reporting requirements related to quality, safety, and service. These include regulatory, governmental, payer, and specialty certification organizations.

Collection of Data

Data, including patient demographic and diagnosis, are systematically collected by various mechanisms including but not limited to:

- Administrative and clinical databases
- Retrospective and concurrent medical record review
- Reporting systems (e.g., patient safety and patient satisfaction)
- Surveys (e.g., patients, families, and staff)
- External (e.g., Vizient, CDC-NHSN, NDNQI, CMS, or other vendors)

Assessment of Data

Statistical methods are used to identify undesirable variance, trends, and opportunities for improvement. The data are compared to the previous performance, external benchmarks, and accepted standards of care to establish goals and targets. Annual goals are established to evaluate performance.

Surveillance System

The James systematically collects and assesses data in different areas to monitor and evaluate the quality and safety of services, including measures related to accreditation and other requirements. Data collection also functions as a surveillance system for timely identification of undesired variations or trends in quality indicators.

The James Key Performance Indicator Scorecard

Patient Safety is the highest priority for all faculty and staff at The James. As a crucial element to caring for our patients, there is an on-going process of monitoring safety events and any untoward trends from patient care. The James Key Performance Indicator Scorecard (hereinafter The Scorecard) is a portal consisting of various dashboards with key performance indicators related to events considered potentially preventable, and which cause a level of harm to the patient. The Scorecard covers areas such as mortality, falls, hospital acquired infections, hospital-acquired pressure ulcers, as well as additional indicators such as patient satisfaction, readmissions, and length of stay.

This information is shared in various quality forums with the medical staff, clinicians, James's administration, and senior staff, and The Quality and Professional Affairs Committee (QPAC) at the Wexner Medical Board. The indicators to be included in The Scorecard are reviewed each year to represent the priorities of the Quality and Patient Safety program. The Patient Safety program evaluates opportunities each month at The James Quality, Safety and Experience Council (Q-SEC), as well as monthly at the Medical Staff Administrative Committee (MSAC). Safety goals are reviewed annually and adjusted as necessary by the use of event trending, regulatory changes, needs identified from the culture of safety surveys and/or national cancer benchmarks.

The James Patient Satisfaction Dashboard

The Patient Satisfaction dashboard is a set of patient experience indicators gathered from surveys after discharge or visit to a system-based clinic or hospital. The dashboard displays performance in areas such as physician communication, nursing responsiveness, admitting, and discharging efficiencies and quality in addition to other service categories. The information from this dashboard is shared in forums with staff, clinicians, administration, including the Board. Performances on these indicators serve as annual goals for leaders and members of clinical and patient experience teams.

Quality and Patient Safety Staff Education

Education is identified as a key principle for providing safe, high-quality care, and excellent service for our patients. There is on-going development and implementation of a curriculum for quality, safety and service for all staff, employees, clinicians, patients, and students. There are a variety of forums and venues utilized to enhance the education surrounding quality and patient safety including, but not limited to:

- Online videos
- Newsletters
- Classroom forums
- Simulation training
- Computerized Based Learning Modules (e-learning/CBLs)

- Curriculum Development within College of Medicine
- Websites (internal SharePoint and external OSUMC)
- Patient Safety/Quality Lesson's Learned and Patient Safety Alerts

The James Benchmark Data

Both internal and external benchmarking provide value when evaluating performance.

Internal Benchmarking

Internal benchmarking uses processes and data to compare The James performance to itself over time and provides a gauge of improvement strategies within the organization.

External Benchmarking

The James participates in various database systems and focused benchmarking projects to compare performance with that of cancer hospital - peer institutions. The James Cancer Hospital utilizes and joins other comprehensive cancer centers for benchmarking such as C4QI (Comprehensive Cancer Center Consortium for Quality Improvement) and ADCC (Alliance of Dedicated Cancer Centers), National Cancer Institute (NCI). Also, The James participates in national benchmarking efforts through the following, but not limited to, The Vizient's Clinical Database (CDB), The US News and World Report, Ohio Department of Health, Press Ganey, National Database of Nursing Quality Indicators (NDNQI), Centers for Disease Control – National Healthcare Safety Network (NHSN), The American College of Surgeons (ACoS) and others.

Performance Based Provider Quality & Credentialing

Performance based credentialing ensures processes that assist with promoting the delivery of quality and safe care by physicians and advanced practice licensed health care providers. Both Focused Professional Practice Evaluation (FPPE) and Ongoing Professional Practice Evaluation (OPPE) occur. Focused Professional Practice Evaluation (FPPE) is utilized on three occasions: initial appointment, when a Privileged Practitioner requests a new privilege, and for cause when questions arise regarding the practitioner's ability to provide safe, high quality patient care. Ongoing Professional Practice Evaluation (OPPE) is performed on an ongoing basis (every 6 months).

Profiling Process:

- Data gathering from multiple sources.
- Report generation and indicator analysis.
- Profile review meetings with department chairs.
- Discussion at Credentialing Committee
- Final recommendation & approval:
- Medical Staff Administrative Committees
- Medical Director
- Hospital Board

Service-Specific Indicators

Indicators are used to profile each physician's performance. The results are included in a physician profile, which is reviewed with the department chair as part of the credentialing process. The definition of service/department-specific indicators is the responsibility of the director/chair of each unit. The performance of these indicators is used as evidence of competence to grant privileges in the re-appointment process. The clinical departments/divisions are required to collect the performance information related to these indicators and report that information to the Department of Quality and Operations Improvement.

The Medical Staff Evaluation is multi-purpose:

- To appoint quality medical staff.
- To monitor and evaluate medical staff performance.
- To integrate medical staff performance data into the reappointment process and create the foundation for high quality care.
- To provide periodic feedback and inform clinical department chairs of the comparative performance of individual medical staff.
- To identify opportunities for improving quality of care.

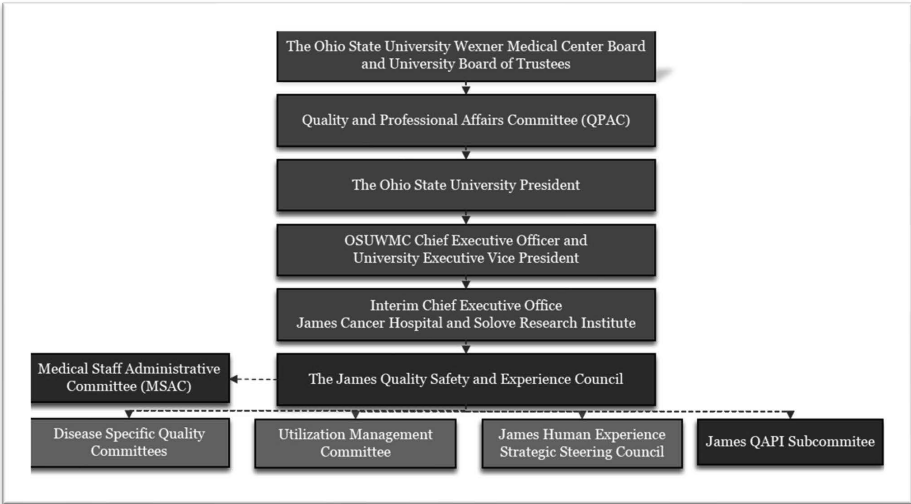
Annual and Ongoing Evaluations

The James Quality Safety, and Experience Council Plan is approved annually by The James Quality, Safety and Experience Council (Q-SEC), the Medical Staff and Committee (MSAC), The Quality and Professional Affairs Committee (QPAC), and the Wexner Medical Center Board.

Enterprise-Wide Alignment and Strategic Plan

The James Quality, Safety and Experience Plan has been developed in alignment with the OSUWMC Enterprise-Wide Long Range Quality Plan (Attachment B). The Long-Range Quality Plan focuses on the foundations and three pillars of patient centered care that have been deemed priorities by the OSUWMC Quality Leadership Council (QLC).

Attachment A: The James Quality, Safety and Experience Council Structure



Attachment B: Long Range Quality Plan

Long-Range Quality Plan

World-class care for every person, every time

Demonstrated by a decrease in preventable harm, as indicated by the serious safety event rate.

Exceptional Care

Safe

Industry-leading safety performance

Supporting journey to zero harm (as evidenced by a reduction in preventable harm as measured by the serious safety event rate)

Patient-centered

Exceptional experience for patients and families

As evidenced by Likelihood to Recommend scores in the top decile

Effective

Excellence in clinical outcomes

As evidenced by Vizient Q&A performance in the top decile

High reliability is the foundation of everything we do

Performance-improvement program rooted in standardized methodology

Leverage Analytics Center of Excellence to drive performance-improvement around targets and outcomes

APPENDIX XXVI



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Approvals:

MSAC- 5/14/2025

QPAC- 6/24/2025

Wexner Medical Center Board –

TITLE: THE OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER (INCLUDING UNIVERSITY HOSPITAL, RICHARD M. ROSS HEART HOSPITAL, BRAIN AND SPINE HOSPITAL, DODD REHABILITATION HOSPITAL, HARDING HOSPITAL, AND EAST HOSPITAL) HOSPITAL PLAN FOR PROVIDING PATIENT CARE

University Hospital, Richard M. Ross Heart Hospital, Brain and Spine Hospital, Dodd Rehabilitation Hospital, Harding Hospital, and East Hospital (hereafter referred to as the Hospitals) plan for patient care services describes the integration of departments and personnel who provide care and services to patients based on the Hospitals' mission, vision, shared values and goals. The plan encompasses both inpatient and outpatient services of the Hospitals.

OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER (OSUWMC) MISSION, VISION AND VALUES

Mission Statement:

To improve health in Ohio and across the world through innovations and transformation in research, education, patient care, and community engagement.

Vision Statement:

By pushing the boundaries of discovery and knowledge, we will solve significant health problems and deliver unparalleled care.

Values:

Inclusiveness, Determination, Empathy, Sincerity, Ownership and Innovation

The mission, vision and values statements, developed by our staff members, physicians, governing body members and administration team members, complements and reflects the unique role the hospitals fulfill within The Ohio State University.

PHILOSOPHY OF PATIENT CARE SERVICES

In collaboration with the community, the Hospitals will provide innovative, personalized, and person centered care through:

- a) A mission statement that outlines the synergistic relationship between patient care, research, and education;
- b) Long-range strategic planning with medical center leadership to determine the services to be provided; including, but not limited to essential services as well as special areas of concentration;
- c) Establishing annual goals and objectives consistent with the mission, which are based on a collaborative assessment of needs;
- d) Planning and design conducted by medical center leadership, which involves the potential communities to be served;
- e) Provision of services that are appropriate to the scope and level required by the patients to be served based on assessment of need;
- f) Ongoing evaluation of services provided through formalized processes; e.g., performance assessment and improvement activities, budgeting and staffing plans;
- g) Integration of services through the following mechanisms: continuous quality improvement teams; clinical interdisciplinary quality programs; performance assessment and improvement activities; communications through management team meetings, administrative staff meetings, special forums, and leadership and employee education/development;
- h) Maintaining competent patient care leadership and staff by providing education designed to meet identified needs;

- i) Respect for each patient's rights and decisions as an essential component in the planning and provision of care; and,
- j) Staff member behaviors that reflect a philosophical foundation based on the values of The Ohio State University Wexner Medical Center.

THE HOSPITAL LEADERSHIP

The Hospital leadership is defined as the governing board, CEO/Executive Vice President, administrative staff, physicians and nurses in appointed or elected leadership positions. The Hospital leadership is responsible for the framework of planning health care services provided by the organization based on the hospital's mission and for developing and implementing an effective planning process that allows for defining timely and clear goals.

The planning process includes a collaborative assessment of our customer and community needs, defining a long range strategic plan, developing operational plans, establishing annual operating budgets and monitoring compliance, establishing annual capital budgets, monitoring and establishing resource allocation and policies, and ongoing evaluation of the plans' implementation and success. The planning process addresses both patient care functions (e.g. patient rights, patient assessment, patient care, patient and family education, coordination of care, and discharge planning) and organizational support functions (e.g. information management, human resource management, infection control, quality and safety, the environment of care, and the improvement of organizational performance).

The Hospital leadership works collaboratively with all operational and clinical managers and leaders to ensure integration in the planning, evaluation, and communication processes within and between departments to enhance patient care services and support. This occurs informally on a daily basis and formally via interdisciplinary leadership meetings. The leadership involves department heads in evaluating, planning and recommending annual budget expenses and capital objectives, based on the expected resource needs of their departments. Department leaders are held accountable for managing and justifying their budgets and resource utilization. This includes, but is not limited to identifying, investigating and budgeting for new technologies and resources which are expected to improve the delivery of patient care and services.

Other leadership responsibilities include:

- a) Communication of the organization's mission, vision, goals, objectives and strategic plans across the organization;
- b) Ensuring appropriate and competent direction, management and leadership of all services and/or departments;
- c) Collaborating with community leaders and organizations to ensure services are designed to be appropriate for the scope and level of care required by the patients and communities served;
- d) Supporting the patient's continuum of care by integrating systems and services to improve efficiencies and care from the patient's viewpoint and diversity, equity and inclusion;
- e) Ensuring staffing resources are available to appropriately and effectively meet the needs of the patients served and to provide a comparable level of care to patients in all areas where patient care is provided;
- f) Ensuring the provision of a uniform standard of patient care throughout the organization;
- g) Providing appropriate job enrichment, employee development and continuing education opportunities which serve to promote retention of staff and to foster excellence in care delivery and support services;
- h) Establishing standards of care that all patients can expect and which can be monitored through the hospital's quality assurance and performance improvement (QAPI) process;

- i) Approving the organizational plan to prioritize areas for improvement, developing mechanisms to provide appropriate follow up actions and/or reprioritizing in response to untoward and unexpected events;
- j) Implementing an effective and continuous program to improve patient safety;
- k) Appointing appropriate committees, task forces, and other forums to ensure interdepartmental collaboration on issues of mutual concerns and requiring interdisciplinary input; and,
- l) Supporting patient rights and ethical considerations.

ROLE OF THE CHIEF NURSING OFFICER

The Chief Nursing Officer is responsible for the practice of nursing by ensuring consistency in the standard of nursing practice across the clinical settings. The CNO supports and facilitates an interdisciplinary team approach to the overall delivery of care to patients, families, and the community. This includes creating an environment in which collaboration is valued and excellence in clinical care, education, and research is promoted and achieved. The CNO leads quality, safety, and innovation initiatives in partnership with the Hospital Executive Directors.

The CNO is responsible for developing and driving the nursing strategic plan to deliver excellent patient care. The role will include responsibility for nursing performance improvement, program management, business operations, budgets, resource utilization, financial stewardship and maintenance of the professional contracts with the Ohio State University Nursing Organization and the International Association of Machinists and Aerospace Workers. The CNO ensures the vision, strategic direction, and the advancement of the profession of nursing at OSUWMC.

ROLE OF THE ASSOCIATE CHIEF NURSING OFFICER

The Associate Chief Nursing Officer (ACNO) is a member of the Nursing Executive Leadership team. The ACNO works collaboratively with both the CNO and Executive Director of their business entities. The ACNO has the authority and responsibility for directing the activities related to the provision of nursing care in those departments defined as providing nursing care to patients.

The ACNO is responsible to plan, develop, implement, and oversee programs and projects designed to evaluate and improve clinical quality, safety, resource utilization and operations in all areas staffed by nurses. The role includes implementation of patient care services strategies to support efficiency, clinical effectiveness, clinical operations and quality improvement with interdisciplinary team members. The ACNO works with teams to develop projects, programs and implement system changes that promote care coordination across the health care continuum.

FUNCTIONS OF NURSING LEADERSHIP

The Chief Nursing Officer and ACNOs ensure the following functions are addressed:

- a) Evaluating patient care programs, policies, and procedures describing how patients' nursing care needs are assessed, evaluated and met throughout the organization;
- b) Developing and implementing the plan for the provision of patient care through evidence-based practice and nursing research;
- c) Participating with leaders from the governing body, management, medical staff and clinical areas in organizational decision-making, strategic planning and in planning and conducting performance improvement activities throughout the organization;
- d) Implementing an effective, ongoing program to assess, measure and improve the quality of nursing care delivered to patients; developing, approving, and implementing standards of nursing practice,

- standards of patient care, and patient care policies and procedures that include current research/literature findings that are evidence based;
- e) Participating with organizational leaders to ensure that resources are allocated to provide a sufficient number of qualified nursing staff to provide patient care;
 - f) Ensuring that nursing services are available to patients on a continuous, timely basis.

DEFINITION OF PATIENT SERVICES, PATIENT CARE AND PATIENT SUPPORT

Patient Services are limited to those departments that have direct contact with patients. Patient services occur through organized and systematic throughput processes designed to ensure the delivery of appropriate, safe, effective and timely care and treatment. The patient throughput process includes those activities designed to coordinate patient care before admission, during the admission process, in the hospital, before discharge and at discharge. This process includes:

- **Access in:** emergency process, admission decision, transfer or admission process, registration and information gathering, placement;
- **Treatment and evaluation:** full scope of services; and,
- **Access out:** discharge decision, patient/family teaching and counseling, arrangements for continuing care and discharge.

Patient Care encompasses the recognition of disease and health, patient teaching, patient advocacy, spirituality and research. The full scope of patient care is provided by professionals who are charged with the additional functions of patient assessment and planning patient care based on findings from the assessment. Providing patient services and the delivery of patient care requires specialized knowledge, judgment, and skill derived from the principles of biological, chemical, physical, behavioral, psychosocial and medical sciences. As such, patient care and services are planned, coordinated, provided, delegated, and supervised by professional health care providers who recognize the unique physical, emotional and spiritual (body, mind and spirit) needs of each person. Under the auspices of the Hospitals, medical staff, registered nurses and allied health care professionals function collaboratively as part of an interdisciplinary, personalized patient-focused care team to achieve positive patient outcomes.

Competency for patient caregivers is determined in orientation and at least annually through performance evaluations and other department specific assessment processes. Credentialed providers direct all medical aspects of patient care as delineated through the clinical privileging process and in accordance with the Medical Staff By-Laws. Registered nurses support the medical aspect of care by directing, coordinating, and providing nursing care consistent with statutory requirements and according to American Nurses Association Nursing Scope and Standards of Practice book as well as hospital-wide policies and procedures. Allied health care professionals provide patient care and services in keeping with their licensure requirements and in collaboration with physicians and registered nurses. Unlicensed staff may provide aspects of patient care or services at the direction of and under the supervision of licensed professionals.

Nursing Care (nursing practice) is defined as competently providing all aspects of the nursing process in accordance with Chapter 4723 of the Ohio Revised Code (ORC), which is the law regulating the Practice of Nursing in Ohio. The law gives the Ohio Board of Nursing the authority to establish and enforce the requirements for licensure of nurses in Ohio. This law also defines the practice of both registered nurses and licensed practical nurses. All of the activities listed in the definitions, including the supervision of nursing care, constitute the practice of nursing and therefore require the nurse to have a current valid license to practice nursing in Ohio.

Patient Support is provided by a variety of individuals and departments which might not have direct contact with patients, but which support the integration and continuity of care provided throughout the continuum of care by the hands-on care providers.

SCOPE OF SERVICES / STAFFING PLANS

Each patient care service department has a defined scope of service approved by the hospital's administration and medical staff, as appropriate. The scope of service includes:

- the types and age ranges of patients served;
- methods used to assess and meet patient care needs (includes services most frequently provided such as procedures, etc.);
- the scope and complexity of patient care needs (such as most frequent diagnosis);
- support services provided directly or through referral contact;
- the extent to which the level of care or service meets patient need (hours of operation if other than 24 hours a day/7 days a week and method used for ensuring hours of operation meet the needs of the patients to be served with regard to availability and timeliness);
- the availability of necessary staff (staffing plans) and;
- recognized standards or practice guidelines, when available (the complex or high level technical skills that might be expected of the care providers).

Additional operational details and staffing plans may also be found in department policies, procedures and operational/performance improvement plans.

Staffing plans for patient care service departments are developed based on the level and scope of care provided, the frequency of the care to be provided, and a determination of the level of staff that can most appropriately (competently and confidently) provide the type of care needed. Nursing units are staffed to accommodate a projected average daily patient census. Unit management (including nurse manager and/or charge nurse) reviews patient demands to plan for adequate staffing. Staffing can be increased or decreased to meet patient needs. When the number of patients is high or the need is great, float staff assist in providing care. When staff availability is projected to be low, the unit manager and director may request temporary agency nurses. The Ohio State University Wexner Medical Center follows the Staffing Guidelines set by the American Nurses Association. In addition, we utilize staffing recommendations from various specialty nursing organizations, including: ENA, ANCC, AACN, AORN, ASPN, NDNQI, AWHONN, and others.

The Administrative Team, in conjunction with the budget and performance measurement process, reviews all patient care areas staffing and monitors ongoing regulatory requirements. Each department staffing plan is formally reviewed during the budget cycle and takes into consideration workload measures, utilization review, employee turnover, performance assessment, improvement activities, and changes in customer needs/expectations. A variety of workload measurement tools may be utilized to help assess the effectiveness of staffing plans.

STANDARDS OF CARE

Patients of the Hospitals can expect that:

- 1) Staff will do the correct procedures, treatments, interventions, and care following the policies, procedures, and protocols that have been established. Efficacy and appropriateness of procedures, treatment, interventions and care provided will be demonstrated based on patient assessments/reassessments, standard practice, and with respect for patient's rights and confidentiality.
- 2) Staff will provide a uniform standard of care and services throughout the organization.
- 3) Staff will design, implement and evaluate systems and services for care delivery (assessments, procedures, treatments, interventions) which are consistent with a personalized health care focus and which will be delivered:

- a. With compassion, courtesy, respect and dignity for each individual without bias using a patient centered approach;
- b. In a manner that best meets the individualized needs of the patient;
- c. Coordinated through interdisciplinary collaboration, to ensure continuity and seamless delivery of care to the greatest extent possible; and,
- d. In a manner that maximizes the efficient use of financial and human resources, streamlines processes, decentralizes services, enhances communication, supports technological advancements and maintains patient safety.

Patient Assessment:

Individual patient care requirements are determined by assessments (and reassessments) performed by qualified health professionals. Each service within the organization providing patient care has defined the scope of assessment provided. This assessment (and reassessment) of patient care needs continues throughout the patient's contact with the hospital.

Coordination of Care:

Patients are identified who require discharge planning to facilitate continuity of medical care, social determinant needs, and/or other care to meet identified needs. Discharge planning is timely, is addressed at a minimum during initial assessment as well as during discharge planning processes and can be initiated by any member of the interdisciplinary team. Case Managers coordinate patient care between multiple delivery sites and multiple caregivers; collaborate with physicians and other members of the care team to assure appropriate treatment plan and discharge care.

STANDARDS OF COMPETENT PERFORMANCE/STAFF EDUCATION

All employees receive an orientation consistent with the scope of responsibilities defined by their job description and the patient population to whom they are assigned to provide care. Ongoing education (such as in-services) is provided within each department. In addition, the Educational Development and Resource Department provides annual mandatory education and provides appropriate staff education associated with performance improvement initiatives and regulatory requirements. Performance appraisals are conducted at least annually between employees and managers to review areas of strength and to identify skills and expectations that require further development.

CARE DELIVERY MODEL

The care delivery model is guided by the following goals:

- The patient and family will experience the benefits of the AACN Synergy model for patient care. This model is driven by the core concept that the patient and family needs influence the competencies and characteristics of the nursing care provided. The benefits include enhanced quality of care, improved service, appropriate length of hospitalization and minimized cost.
- Hospital employees will demonstrate values and behaviors consistent with the OSUWMC Buckeye Spirit set of core values. The philosophical foundation reflects a culture of inclusiveness, sincerity, determination, ownership, empathy and innovation.
- Effective communication will impact patient care by ensuring timeliness of services, utilizing staff resources appropriately, and maximizing the patient's involvement in his/her own plan of care.
- Configuring departmental and physician services to accommodate the care needs of the patient in a timely manner will maximize quality of patient care and patient satisfaction.
- The Synergy professional nursing practice model is a framework which reflects our underlying philosophy and vision of providing care to patients based on their unique needs and characteristics. Aspects of the professional model support:

- (1) matching nurses with specific skills to patients with specific needs to ensure “safe passage” to achieve the optimal outcome of their hospital stay;
 - (2) the ability of the nurse to establish and maintain a therapeutic relationship with their patients;
 - (3) the presence of an interdisciplinary team approach to patient care delivery. The knowledge and expertise of all caregivers is utilized to restore a patient to the optimal level of wellness based on the patient’s definition;
 - (4) physicians, nurses, pharmacists, respiratory therapists, case managers, dietitians and many other disciplines collaborate and provide input to patient care.
- The patient and family will be involved in establishing the plan of care to ensure services that accommodate their needs, goals and requests.
 - Streamlining the documentation process will enhance patient care.

PATIENT RIGHTS AND ORGANIZATIONAL ETHICS

Patient Rights

In order to promote effective and compassionate care, the Hospitals’ systems, policies, and programs are designed to reflect an overall concern and commitment to each person’s dignity. All Hospital employees, physicians and staff have an ethical obligation to respect and support the rights of every patient in all interactions. It is the responsibility of all employees, physicians and staff of the Hospitals to support the efforts of the health care team, while ensuring that the patient’s rights are respected. Each patient (and/or family member as appropriate) is provided a list of patient rights and responsibilities upon admission and copies of this list are posted in conspicuous places throughout the Hospitals.

Organizational Ethics

The Hospitals have an ethics policy established in recognition of the organization’s responsibility to patients, staff, physicians and the community served. General principles that guide behavior are:

- Services and capabilities offered meet identified patient and community needs and are fairly and accurately represented to the public.
- Adherence to a uniform standard of care throughout the organization, providing services only to those patients for whom we can safely care for within this organization. The Hospitals do not discriminate based age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, protected veteran status or any other basis under the law.
- Patients will be billed only for care and services provided.

Biomedical Ethics

A biomedical ethical issue arises when there is uncertainty or disagreement regarding medical decisions, involving moral, social, or economic situations that impact human life. A mechanism is in place to provide consultation in the area of biomedical ethics in order to:

- improve patient care and ensure patient safety;
- clarify any uncertainties regarding medical decisions;
- explore the values and principles underlying disagreements;
- facilitate communication between the attending physician, the patient, members of the treatment team and the patient’s family (as appropriate); and,
- mediate and resolve disagreements.

INTEGRATION OF PATIENT CARE, ANCILLARY AND SUPPORT SERVICES

The importance of a collaborative interdisciplinary team approach, which takes into account the unique knowledge, judgment and skills of a variety of disciplines in achieving desired patient outcomes, serves as a foundation for integration. See Appendix A for a listing of ancillary and support services.

Open lines of communication exist between all departments providing patient care, patient services and support services within the hospitals, and as appropriate with community agencies to ensure efficient, effective and continuous patient care. Functional relationships between departments are evidenced by cross-departmental Performance Improvement initiatives as well as the development of policies, procedures, protocols, and clinical pathways and algorithms.

To facilitate effective interdepartmental relationships, problem solving is encouraged at the level closest to the problem at hand. Staff is receptive to addressing one another's issues and concerns and work to achieve mutually acceptable solutions. Supervisors and managers have the responsibility and authority to mutually solve problems and seek solutions within their spans of control; positive interdepartmental communications are strongly encouraged. Employees from departments providing patient care services maintain open communication channels and forums with one another, as well as with service support departments to ensure continuity of patient care, maintenance of a safe patient environment and positive outcomes.

CONSULTATIONS AND REFERRALS FOR PATIENT SERVICES

The Hospitals provide services as identified in the Hospital Plan for Providing Patient Care to meet the needs of our community. Patients whose assessed needs require services not offered are transferred to the member hospitals of The Ohio State University Wexner Medical Center or another quality facility (e.g., Nationwide Children's Hospital) in a timely manner after stabilization. Safe transportation is provided by air or ground ambulance with staff and equipment appropriate to the required level of care. Physician consultation occurs prior to transfer to ensure continuity of care. Referrals for outpatient care occur based on patient need.

INFORMATION MANAGEMENT PLAN

The overall goal for information management is to support the mission of The Ohio State University Wexner Medical Center. Specific information management goals related to patient care include:

- Develop and maintain an integrated information and communication network linking research, academic and clinical activities.
- Develop computer-based patient records with integrated clinical management and decision support.
- Support administrative and business functions with information technologies that enable improved quality of services, cost effectiveness, and flexibility.
- Build an information infrastructure that supports the continuous improvement initiatives of the organization.
- Ensure the integrity and security of the Hospital's information resources and protect patient confidentiality.

PATIENT CARE ORGANIZATIONAL IMPROVEMENT ACTIVITIES

All departments are responsible for following the Hospitals' Quality Assurance and Performance Improvement (QAPI) plan. Departments utilize the QAPI plan and cascade the hospital's goals to service line quality plans to ensure proper alignment to support the overall hospital quality goals.

PLAN REVIEW

The Hospital Plan for Providing Patient Care will be reviewed regularly by the Hospitals' leadership to ensure the plan is adequate, current and that the Hospitals are in compliance with the plan. Interim adjustments to the overall plan are made to accommodate changes in patient population, redesign of the care delivery systems or processes that affect the delivery, level or amount of patient care required.

Appendix A: Scope of Services: Patient Ancillary and Support Services

Other hospital services that support the comfort and safety of patients are coordinated and provided in a manner that ensures direct patient care and services are maintained in an uninterrupted, efficient, and continuous manner. These support and ancillary services will be fully integrated with the patient care departments of the Hospitals:

DEPARTMENT	SERVICE
BEHAVIORAL EMERGENCY RESPONSE TEAM (BERT)	Expert team that provides innovative and quality care to patients with complex behavioral symptoms while working collaboratively with staff through consultation, education, and early intervention
CARDIAC PROCEDURAL	Cardiac procedural areas include both cardiac catheterization and electrophysiology. Procedures may be diagnostic or interventional.
CARDIOVASCULAR IMAGING SERVICES	Diagnostic and therapeutic procedures in cardiac MR/CT, Nuclear Medicine, Echocardiography, Vascular Imaging Stress Test. Cardiovascular Imaging Services can be provided at inpatient, outpatient, and emergency locations.
CARE MANAGEMENT	As part of the health care team, provides personalized care coordination and resource management with patients and families.
CENTRAL STERILE SUPPLY (CSS)	Responsible for supporting all instrument cleaning and sterilization needs across the organization. In addition, CSS is responsible for providing case carts to the operating rooms which contain all of the instrumentation and disposable supply needs for each surgical case.
CHAPLAINCY AND CLINICAL PASTORAL EDUCATION	Assists patients, their families and hospital personnel in meeting spiritual needs through professional pastoral and spiritual care and education.
CLINICAL ENGINEERING	Routine equipment evaluation, maintenance, and repair of electronic equipment owned or used by the hospital; evaluation of patient owned equipment.
CLINICAL INFORMATICS	A subset of IT services that focuses on appropriately integrating the clinical care provided to the patient into the Electronic Health Record (EHR) through the specialized knowledge of clinical care and informatics. Additionally, direct work with the clinicians occurs through this team to ensure the EHR is adopted and aligns with the clinical work occurring in the organization and provides an accurate depiction of the patients' clinical course while being cared for in the organization.
CLINICAL LABORATORY	Responsible for pre-analytic, analytic and post-analytic functions on clinical specimens in order to obtain information about the health of a patient as pertaining to the diagnosis, treatment, and prevention of disease; assisting care providers with clinical information related to patient care, education, and research.
COMMUNICATIONS AND MARKETING	Responsible for developing strategies and programs to promote the organization's overall image and specific products and services to targeted internal and external audiences. Handles all media relations, advertising, internal communications, special events and publications.
DECEDENT AFFAIRS	Provide support to families of patients who died & assist them with completing required disposition decisions. Ensure notification of the CMS designated Organ Procurement Agency (OPO) – Lifeline of Ohio (Lifeline). Promote & facilitate organ/eye/tissue donation by serving as the OSU hospital Lifeline Liaison. Analyze data provided by Lifeline regarding organ/tissue/eye donation.
DIAGNOSTIC TRANSPORTATION	Provision of on-site transportation services for patients requiring diagnostic, operative or other ancillary services.
DIALYSIS	Dialysis is provided for inpatients of the medical center within a dedicated unit unless the patient cannot be moved. In those instances, bedside dialysis will be administered.

DEPARTMENT	SERVICE
EARLY RESPONSE TEAM (ERT)	Provides timely diagnostic and therapeutic intervention before there is a cardiac or respiratory arrest or an unplanned transfer to the Intensive Care Unit. Consists of a Critical Care RN and Respiratory Therapist who are trained to help patient care staff when there are signs that a patient's health is declining.
EDUCATION, DEVELOPMENT & RESOURCES	Provides and promotes ongoing development and training experiences to all member of the OSUWMC community; provides staff enrichment programs, organizational development, leadership development, orientation and training, skills training, continuing education, competency assessment and development, literacy programs and student affiliations.
ENDOSCOPY	Provides services to patients requiring a nonsurgical review of their digestive tract.
ENVIRONMENTAL SERVICES	Provides routine housekeeping and quality monitoring of such. Additional services upon request: extermination, wall cleaning, etc.
EPIDEMIOLOGY	Enhance the quality of patient care and the work environment by minimizing the risk of acquiring infection within the hospital setting.
FACILITIES OPERATIONS	Provide oversight, maintenance and repair of the building's life safety, fire safety, and utility systems. Provide preventative, repair and routine maintenance in all areas of all buildings serving patients, guests, and staff. This would include items such as electrical, heating and ventilation, plumbing, and other such items. Also providing maintenance and repair to basic building components such as walls, floors, roofs, and building envelope. Additional services available upon request.
FISCAL SERVICES	Works with departments/units to prepare capital and operational budgets. Monitors and reports on financial performance monthly.
HUMAN RESOURCES	Serves as a liaison for managers regarding all Human Resources information and services; assists departments with restructuring efforts; provides proactive strategies for managing planned change within the Health System; assists with Employee/Labor Relations issues; assists with performance management process; develops compensation strategies; develops hiring strategies and coordinates process for placements; provides strategies to facilitate sensitivity to issues of cultural diversity; provides HR information to employees, and establishes equity for payroll.
INFORMATION SYSTEMS	Work as a team assisting departments to explore, deploy and integrate reliable, state of the art Information Systems technology solutions to assist in the provision and documentation of care and services and to manage change of such systems.
MATERIALS MANAGEMENT	Routinely stocks supplies in patient care areas, distributes linen. Sterile Central Supply, Storeroom - upon request, distributes supplies/equipment not stocked on units.
MEDICAL INFORMATION MANAGEMENT	Maintains patient records serving the needs of the patient, provider, institution, and various third parties to health care.
NUTRITION SERVICES	Provides nutrition care and food service for Medical Center patients, staff, students, and visitors. Clinical nutrition assessment, care plan development, and consultation are available in both inpatient and outpatient settings. The Department provides food service to inpatients and selected outpatient settings in addition to operating a variety of retail café locations and acts as a liaison for vending and sub-contracted food services providers. Serve as dietetic education preceptors.
PATIENT ACCESS SERVICES	Coordinates registration/admissions with nursing management.
PATIENT EXPERIENCE	Develops programs for support of patient relations and customer service, and includes front-line services such as information desks.
PATIENT FINANCIAL SERVICES	Provides financial assistance upon request from patient/family. Also responsible for posting payments from patients and insurance companies among others to a patient's bill for services.

DEPARTMENT	SERVICE
PATIENT FLOW DEPARTMENT	Monitors and supports all admissions, discharges, and transfers across OSUWMC. Ensures timely, safe, and individualized access to all patients and families through collaboration with the healthcare team.
PERIOPERATIVE SERVICES	Perioperative Services include preoperative, intraoperative and postoperative care.
PHARMACY	Provides comprehensive pharmaceutical care through operational and clinical services. Responsible for medication distribution via central and satellite pharmacies, as well as 797 compliant IV compounding room and automated dispensing cabinets. Some of the many clinical services include pharmacokinetic monitoring, renal and hepatic dose adjustments, and patient education. Specialist pharmacists also round with patient care teams to optimize medication regimens and serve as the team's primary medication information resource.
QUALITY AND OPERATIONS IMPROVEMENT	Provides an integrated quality management program and facilitates continuous quality improvement efforts throughout the medical center.
RADIOLOGIC SERVICES	Diagnostic and therapeutic procedures in MR, CT, X-ray, Fluoroscopy, Interventional Radiology, Ultrasonography. Radiologic Services can be provided at inpatient, outpatient, and emergency locations.
RESPIRATORY THERAPY	Provide all types of respiratory therapeutic interventions and diagnostic testing, by physician order, mainly to critically ill adults and neonates, requiring some type of ventilator support, bronchodilator therapy, or pulmonary hygiene, due to chronic lung disease, multiple trauma, pneumonia, surgical intervention, or prematurity. Provides pulmonary function testing and diagnostic inpatient and outpatient testing to assess the functional status of the respiratory system. Bronchoscopy and other diagnostic/interventional pulmonology procedures are performed to diagnose and/or treat abnormalities that exist in the airways, lung parenchyma or pleural space.
REHABILITATION SERVICES	Physical therapists, occupational therapists, speech and language pathologists, and recreational therapists evaluate and develop a plan of care and provide treatment based on the physician's referral. The professional works with each patient/family/caregiver, along with the interdisciplinary medical team, to identify and provide the appropriate therapy/treatment and education needed for the established discharge plan and facilitates safe and timely movement through the continuum of care.
RISK MANAGEMENT	Protect resources of the hospital by performing the duties of loss prevention and claims management. Programs include: Risk Identification, Risk Analysis, Risk Control, Risk Financing, Claims Management and Medical-Legal Consultation.
SAFETY and EMERGENCY PREPAREDNESS	Manages programs related to general safety, life safety and emergency preparedness. Maintains compliance with regulatory agencies including, The Joint Commission, Centers for Medicare and Medicaid Services, Ohio Department of Health, State Fire Marshal, Environmental Protection Agency and other authorities having jurisdiction over hospital operations.
SECURITY	Provides a safe and secure environment for patients, visitors, and staff members by responding to all emergencies such as workplace violence, fires, bomb threats, visitor/staff/patient falls, Code Blues (cardiac arrests) in public places, internal and external disasters, armed aggressors, or any other incident that needs an emergency response.
SOCIAL WORK SERVICES	Social Work services are provided to patients/families to meet their medically related social and emotional needs as they impact on their medical condition, treatment, recovery and safe transition from one care environment to another. Social workers provide psychosocial assessment and intervention, crisis intervention, financial counseling, discharge planning, health education, provision of material resources

DEPARTMENT	SERVICE
	and linkage with community agencies. Consults can be requested by members of the treatment team, patients or family members.
VOLUNTEER SERVICES	Volunteer Services credential and place volunteers to fill departmental requests. Volunteers serve in wayfinding, host visitors in waiting areas, serve as patient / family advisors, and assist staff.
WOUND CARE	Wound Care includes diagnosis and management for skin impairments.

APPENDIX XXVII

The James



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

Approvals:
MSAC: April 18, 2025
QPAC: June 24, 2025
Wexner Medical Center Board:

Title: Arthur G. James Cancer Hospital and Richard J. Solove Research Institute Plan for Patient Care Services

The Plan for Providing Patient Care Services is described herein. The Plan is based on the mission, vision, values, and goals. The plan encompasses both inpatient and outpatient services delivered by the teams who provide comprehensive care, treatment, and services to patients with cancer diagnoses and their loved ones. The plan encompasses both inpatient and outpatient services of the hospital.

The Mission, Vision, and Values:

Mission: To eradicate cancer from individuals' lives by creating knowledge and integrating ground-breaking research with excellence in education and patient-centered care.

Vision: Create a cancer-free world, one person, and one discovery at a time.

Values: World class, empowered, compassionate, accountable, respectful, and expert.

At The James, no cancer is routine. Our researchers and oncologists study the unique genetic makeup of each patient's cancer, understand what drives it to develop, and then deliver the most advanced and targeted treatment for the individual patient. The James' patient centered, and relationship-based care is enhanced by our teaching and research programs. Our mission, and staff are dedicated to the fulfillment and success and distinguishes The Arthur G. James Cancer Hospital and Richard J. Solove Research Institute as one of the nation's premier comprehensive cancer centers.

Philosophy of Patient Care Services

The James Cancer Hospital and Solove Research Institute, in collaboration with the community, provides innovative and patient-focused multi-disciplinary cancer care through:

- Maintaining a mission which outlines the synergistic relationship between patient care, research, and teaching.
- Developing a long-range strategic plan with input from hospital leaders to determine the services and levels of care to be provided.
- Establishing annual goals and objectives consistent with the hospital mission and

strategic plan, which are based on a collaborative assessment of patient/family and community needs.

- Planning and designing from the hospital leadership, involving the communities served.
- Providing individualized care, treatment, and services appropriate to the scope and level required by each patient based on professional assessments of need.
- Evaluating ongoing services provided through formalized processes such as: performance assessment and improvement activities, budgeting, and staffing plans.
- Integrating services through the following mechanisms: continuous quality improvement teams; clinical interdisciplinary quality programs; communications through management and operations meetings, Division of Nursing shared governance structure, Medical Staff Administrative Committee, administrative staff meetings, participation in Ohio State University Wexner Medical Center (OSUWMC) governance structures, special forums, leadership and employee education and professional/development.
- Maintaining competent patient care leadership and staff by providing education designed to meet identified needs.
- Respecting each patient's rights and their decisions as an essential component in the planning and provision of care.
- Assuring every staff member demonstrates behaviors which reflect the philosophical foundation based on the values of The James Cancer Hospital and Solove Research Institute.

Hospital Leadership

The hospital leadership is defined as the governing Board of Trustees, the University President, Executive Vice President/Chief Executive Officer, administrative staff, faculty, physicians, nurses, clinical, and operational leaders in both appointed and elected positions. The hospital's leadership team is responsible for producing a framework to plan health care services which are to be provided by the organization, based on the hospital's mission and strategic planning. These responsibilities include developing and implementing a planning process that allows for defining timely and clear goals.

The planning process also includes an assessment of our customer and community needs. This process begins with:

- Developing a long-range strategic plan.
- Developing annual operational plans.
- Establishing annual operating and capital budgets, and monitoring compliance.
- Establishing resource allocations and policies.

- Ongoing evaluation of every plan's implementation and ongoing success.

The planning process addresses both patient care functions (patient: rights, assessment, care, safety, patient and family education, coordination of care, and discharge planning) and organizational support functions (information management, human resource management, infection control, quality, the environment of care, and the improvement of organization performance).

The hospital leadership team works collaboratively with all operational and clinical leaders to ensure integration of planning, evaluation, and communication processes within and between departments, to enhance patient care services and support. This occurs informally, daily, and formally, via multi-disciplinary leadership meetings. The leadership team works with each department manager to evaluate, plan, and recommend annual budget expenses and capital objectives, based on the expected resource needs of the department. Department leaders are accountable for managing, justifying their budgets and resource utilization. This includes, but is not limited to identifying, investigating, budgeting for modern technologies, and resources that are expected to improve the delivery of patient care and services.

Other leadership responsibilities include but are not limited to:

- Communicating the organization's mission, vision, goals, objectives, and strategic plans across the organization.
- Ensuring appropriate, competent management and leadership of all services and/or departments.
- Collaborating with community leaders and organizations to ensure services are designed to be appropriate for the scope and level of care required by the patients and communities served.
- Supporting the continuum of care by integrating systems and services to improve efficiencies and care from a patient's viewpoint.
- Ensuring staff resources are available and competent to effectively meet the needs of the patients and to provide a high level of care to patients in all clinical areas.
- Ensuring the provision of uniform standards of patient care are delivered throughout the continuum of care in accordance with each respective disciplines' approved standards of practice and organizational policy/procedure.
- Providing appropriate job enrichment, employee development, continuing education opportunities that serve to promote retention of staff and to foster excellence in care delivery and support services.
- Establishing standards of care for all patients, and which can be monitored through the hospital's performance assessment and improvement plan.
- Approving the organizational plan to prioritize areas for improvement, developing mechanisms to provide appropriate follow up actions and/or reprioritizing in response to unexpected events.
- Implementing an effective and continuous program to monitor and improve patient safety.

- Appointing appropriate committees, task forces, and other forums to ensure interdepartmental collaboration on issues of mutual concerns and requiring interdisciplinary input.
- Supporting patient rights and ethical considerations.
- Support of evidence-based practice (EBP) to drive patient care decision-making.

Role of the Executive Director of Clinical Services, and the Chief Nursing Officer

The Executive Director of Clinical Services, and the Chief Nursing Officer are members of the Executive Leadership Team who has the requisite authority and responsibility for directing activities related to the provision of care, treatment and services in those departments defined as providing care to patients.

The Executive Director of Clinical Services ensures the following functions are addressed:

- Evaluating patient care programs, policies, and procedures which describe how patients' care needs are assessed, evaluated, and met throughout the organization.
- Implementing the plan for the provision of patient care.
- Participating with leaders from the governing body, medical staff, and clinical areas in organizational decision-making. Strategic planning and conducting performance improvement activities through the organization.
- Implementing an effective, ongoing program to assess, measure and improve the quality of care and safe outcomes of care provided for patients.
- Participating with organizational leaders to ensure that resources are allocated to provide enough qualified and competent staff to provide patient care.
- Ensuring services are available to patients on a continuous, timely basis.
- Reviewing the plan for the providing patient care services on an annual basis.

The Chief Nursing Officer (CNO) ensures the following functions are addressed:

- Implementing standards of nursing practice, standards of patient care, patient care policies, and procedures that include current research and evidence-based practice.
- Supports and facilitates a multi-disciplinary team approach to the overall delivery of care to patients, families, and the community.
- Promotes relationship-based care (RBC), leads quality, safety, and innovation initiatives in partnership with the Executive Director of Clinical Services.
- Responsible for driving nursing strategic plan to deliver excellent patient care.
- Responsible for nursing performance improvement, program management, business operations, budgets, resource, utilization, and maintenance of the professional contract with the Ohio State University Nursing Organization (OSUNO).

Definition of Patient Services, Patient Care, Nursing Care, and Patient Support

Patient Services

Defined as those departments and care providers with direct contact with patients. These services occur through organized and systematic through-put processes designed to ensure the delivery of appropriate, safe, effective, and timely care and treatment. The patient through-put process includes those activities designed to coordinate patient care before admission, during the admission process, in the hospital, in the ambulatory exam or treatment clinics before discharge and at discharge. This process includes:

- Access in emergency process, admission decision, transfer or admission process, registration and information gathering, placement in the appropriate care areas.
- Treatment and evaluation: full scope of service from the care service department.
- Access out: discharge decision, patient/family education, counseling, arrangements for continuing care, and discharge.

Patient Care:

Encompasses the recognition of disease, health, and patient education, which allows the patient to participate in their care, advocacy, and spirituality. The full scope of patient care is provided by professionals who perform the functions of assessing, planning patient care based on information gathered from the assessment, as well as past medical history, social history, and other pertinent findings. Patient care and services are planned, coordinated, provided, delegated, and supervised by professional health care providers who recognize the unique physical, emotional, and spiritual (body, mind, and spirit) needs of each person. Under the auspices of the hospital medical staff, registered nurses, and allied health professionals function collaboratively as part of an interdisciplinary, patient-focused care team to achieve positive patient outcomes and personalized care.

Competency is determined during the initial orientation period and at least annually through performance evaluations and other department specific assessment processes. Physicians direct all aspects of a patient's medical care as delineated through the clinical privileging process and in accordance with the Medical Staff By-Laws. Registered Nurses support the medical aspect of care by assessing, directing, coordinating, providing nursing care consistent with statutory requirements, according to the organization's approved Nursing Standards of Practice and hospital-wide policies and procedures. Allied health professionals provide patient care and services keeping within their licensure requirements and in collaboration with physicians and registered nurses. Unlicensed staff may provide aspects of patient care or services at the direction of and under the supervision of licensed professionals.

Nursing Care and Practice:

Defined as competently providing all aspects of the nursing process in accordance with Chapter 4723 of the Ohio Revised Code (ORC), which is the law regulating the Practice of Nursing in Ohio. This law gives the Ohio Board of Nursing the authority to establish and enforce the requirements for licensure of nurses in Ohio. This law defines the practice of both registered nurses and licensed practical nurses. All activities listed in the definitions, including the supervision of nursing care, constitute the practice of nursing and therefore require the nurse to have a current valid license to practice nursing in Ohio.

Patient Support:

Provided by individuals and departments which may not have direct contact with patients, but which support the integration and continuity of care provided throughout the continuum of care by the direct care providers.

Scope of Services and Staffing Plans

Each patient care service department has a defined scope of service approved annually by administration and medical staff, as appropriate. The scope of service includes:

- The type and age ranges of patients served.
- Methods used to assess and meet patient care needs (including services most frequently provided such as procedures, medication administration, surgery, etc.).
- The scope and complexity of patient care needs.
- The appropriateness, clinical necessity, and timeliness of support services provided directly or through referral contact.
- The extent to which the level of care or service meets patient needs, hours of operation if other than 24 hours a day/7 days a week, and a method used to ensure hours of operation meet the needs of the patients to be served regarding availability and timeliness.
- The availability of necessary staff.
- Recognized standards or practice guidelines.

Staffing plans for patient care service departments are developed based on the level and scope of care provided, the frequency of the care to be provided, determination of the level and mix of staff that can most appropriately, competently, and confidently provide the type of care needed. Patient care units are staffed to accommodate a projected average daily patient census based on historical data.

Unit management (including nurse manager, assistant nurse manager, charge nurse or the administrative nursing supervisor (ANS)) provide 24/7 on-site oversight and review the

demand for patient care to plan for adequate staffing. Staffing can be increased or decreased to meet patient needs or changes in volume. When the census is high or the need is great, float/resource staff are available to assist in providing care.

Administrative leaders, in conjunction with budget and performance measurements, review staffing within all patient care areas and monitor ongoing regulatory requirements. Each department staffing plan is formally reviewed during the budget cycle and takes into consideration workload measures, utilization review, employee turnover, performance assessment, improvement activities, and changes in patient needs or expectations. A variety of workload measurement tools are utilized to help assess the effectiveness of staffing plan.

Standards of Care

Individualized health care at The James is the integrated practice of medicine and support of patients based upon the individual's unique biology, behavior, and environment. It is envisioned we will utilize gene-based information to understand each person's individual requirements for the maintenance of their health, prevention of disease, and therapy tailored to their genetic uniqueness. The direction of personalized health care is to be predictive and preventive.

Patients of The James Cancer Hospital and Solove Research Institute can expect that:

- Hospital staff provide the correct procedures, treatments, interventions, and care. The efficacy and appropriateness of care will be demonstrated based on patient assessment and reassessments, evidence-based practices, and achievement of desired outcomes.
- Hospital leadership staff design, implement and evaluate care delivery systems and services which are consistently focused on patient-centered care that is delivered with compassion, respect, and dignity for everyone, without bias, and in a manner that best meets the individual needs of the patients and their support system.
- Staff provide a uniform standard of care and service throughout the organization.
- Patient care is coordinated through interdisciplinary collaboration to ensure continuity and seamless delivery of care to the greatest extent possible.
- Efficient use of finances, human resources, streamlined processes, enhanced communication, and supportive technological advancements all while focused on quality of care and patient safety.

Patient Assessment:

The care requirements of the Individual patient and their support system are determined

by on-going assessments performed by qualified health professionals. Each service providing patient care within the organization has a defined scope of assessment provided. This assessment and reassessment of patient care needs continues throughout the continuum and the patient's contact.

Coordination of Care:

Staff provide patient discharge planning to facilitate continuity of medical care and/or other care to meet identified needs. Discharge planning is timely, addressed during initial assessment and/or upon admission, as well as during the discharge planning process, and can be initiated by any member of the multidisciplinary team. Registered nurses, patient care resource managers, advanced practice nurses, and social workers coordinate and maintain close contact with the healthcare team members to finalize an individualized discharge plan.

The medical staff is assigned by clinical department or division. Each clinical department has an appointed chair responsible for a variety of administrative duties, including development and implementation of policies that support the provision of departmental services, maintaining the proper number of qualified, and competent personnel needed to provide care.

Care Delivery Model

Individualized, patient-focused care is the model in which teams deliver care for similar cancer patient populations, intricately linking the physician and other caregivers for optimal communication and service delivery. Personalized patient-focused care is guided by the following principles:

- The patient and their support system will experience the benefits of individualized care that integrates skills of all care team members. These benefits include enhanced quality of care, improved service, appropriate length of hospitalization, value-based cost related to quality outcomes, and patient safety.
- Hospital employees will demonstrate behaviors consistent with the philosophy of personalized health care. This philosophical foundation reflects a culture of collaboration, enthusiasm, and mutual respect.
- Effective communication will impact patient care by ensuring timeliness of services, utilizing staff resources appropriately, and maximize the patient's involvement in their own plan of care.
- Configuring departmental and physician services to accommodate the care needs of the patient in a timely manner will maximize quality of patient care and patient satisfaction.
- Primary nursing characteristics, such as relationship-based care, conceptual framework supporting the professional practice model are used to reflect the guiding philosophy and vision of providing individualized care.
- The patient and their support system will be involved in establishing the plan

of care to ensure services that accommodate their needs, goals, and requests.

Patient Rights and Organizational Ethics

Patient Rights:

To promote effective and compassionate care, systems, processes, policies, and programs are designed to reflect an overall concern and commitment to each person's dignity and privacy. All hospital employees, physicians, and staff have an ethical obligation to respect and support the rights of every patient in all interactions. It is the responsibility of all employees, physicians, and staff to support the efforts of the health care team, to ensure the patient's rights are respected. Each patient (and/or their support system) is given a list of patient rights and responsibilities upon admission and copies of this list are posted in conspicuous places throughout the hospital.

Organizational Ethics:

The James utilizes an ethics policy to articulate the organization's responsibility to patients, staff, physicians, and community served. General guiding principles include:

- Services and capabilities offered meet identified patient and community needs and are fairly and accurately represented to the public.
- The hospital adheres to a uniform standard of care throughout the organization, providing services to those patients for whom we can safely provide care. The James does not discriminate based upon age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or source of payment.
- Patients are only billed for care and services received.

Biomedical Ethics:

A biomedical ethical issue arises when there is uncertainty or disagreement regarding medical decisions involving moral, social, or economic situations that impact human life. A mechanism is in place to provide consultation in biomedical ethics to:

- Improve patient care and ensure patient safety.
- Clarify any uncertainties regarding medical decisions.
- Explore the values and principles of underlying disagreements.
- Facilitate communication between the attending physician, the patient, members of the treatment team, and the patient's family or support system (as appropriate).
- Mediate and resolve disagreements.

Integration of Patient Care and Support Services

A collaborative, interdisciplinary team approach, that considers the unique knowledge, judgment, and skills is utilized. A variety of disciplines are involved to achieve the desired

patient outcomes and serves as a foundation for integration of patient care. Continual process improvement initiatives support effective integration of hospital and health system policies, procedures, protocols, and relationships between departments. See appendix A (Page 11) for a listing of support services.

An open line of communication exists between all departments providing patient care, patient services, support services within the hospital, and as appropriate with community agencies to ensure efficient, effective, and continuous patient care. To facilitate effective interdepartmental relationships, problem solving is encouraged at the level closest to the problem. The staff is receptive to addressing one another's issues and concerns and work to achieve mutually acceptable solutions. Supervisors and managers have the responsibility and authority to mutually solve problems and seek solutions within their scope. Positive interdepartmental communications are strongly encouraged. Direct patient care services maintain open communication with each other in alignment with organizational Code of Conduct, as well as with service support departments to ensure continuity of patient care, maintenance of a safe patient environment, and positive outcomes.

Consultations and Referrals for Patient Services

The James provides services as identified in this plan to meet the needs of our community. Patients with assessed needs requiring services not offered at The James are transferred in a timely manner after stabilization; and/or transfers are arranged with another quality facility.

Safe transportation is provided by air or ground ambulance with staff and equipment appropriate to the required level of care. Physician consultation occurs prior to transfer to ensure continuity of care. Referrals for outpatient care occur based on patient need.

Information Management Plan

The overall goal for information management is to support the mission of The James. Specific information management goals related to patient care and include:

- Ensuring the integrity and security of the hospital's information resources and protect patient confidentiality.
- Developing and maintaining an integrated information, communication network linking research, academic and clinical activities.
- Developing and updating computer-based patient records with integrated clinical management and decision support.
- Supporting administrative and business functions with information

technologies that enable improved quality of services, cost effectiveness, and flexibility.

- Building an information infrastructure that supports continuous improvement of the organization.

Patient Organization Improvement Activities

All departments participate in the hospital’s plan for improving organizational performance.

Plan Review

The hospital’s plan for providing patient care is reviewed regularly by leadership to ensure the plan is adequate, current and compliance is maintained with the plan. Interim adjustments to the plan are made as necessary to accommodate changes in patient population, care delivery systems, processes that affect the delivery, and level of patient care required.

Appendix A: Scope of Services for Ancillary and Support Services

Other hospital services that support the comfort and safety of patients are coordinated and provided in a manner that ensures direct patient care and services are maintained in an uninterrupted, efficient, and continuous manner. These support services will be fully integrated with the patient services departments of the hospital:

Department	Service
Cancer Diagnostic Center	Offers a platform for expert evaluation and access to the appropriate diagnostic testing so that a timely and precise cancer diagnosis can be made from the beginning. The center is staffed by a team of oncology-trained advanced practice providers and nurses. Starting with initial consultation, the team will manage each patient’s entire diagnostic journey. This includes identifying and prioritizing the patient’s needs and concerns and coordinating the appropriate testing and evaluation. If cancer is confirmed, the team will schedule the patient with the appropriate James multidisciplinary, subspecialized cancer team based on his or her type of cancer.
Central Sterile Supply	Coordinates the comprehensive cleaning, decontamination, assembly and dispensing of surgical instruments, equipment, and supplies needed for regular surgical procedures in related departments.
Chaplaincy and Clinical Pastoral Education	Assist patients, their support system, and hospital personnel in meeting spiritual needs through professional pastoral and spiritual care and education.

Clinical Engineering	Routine equipment evaluation, maintenance, and repair of electronic equipment, evaluation of patient owned equipment.
Cell Therapy Laboratory	Responsible for the processing, cryopreservation, and storage of cells for patients undergoing bone marrow or peripheral blood stem cell transplantation or receiving CAR-T therapy.
Clinical Call Center	Nurse-run telephone triage department that receives and manages telephone calls for established James patients outside normal business hours. The call center operates 24 hours a day and seven days of the week inclusive of holidays.
Communications and Marketing	Responsible for developing strategies and programs to promote the organization's overall image, brand, reputation, and specific products and services to targeted internal and external audiences. Manages all media relations, advertising, internal communications, special events, digital and social properties, collateral materials, and publications for the hospital.
Decedent Affairs	Provide support to the support system of patients who have died and assist them with completing required disposition decisions. Ensure notification of the CMS designated Organ Procurement Agency – Lifeline of Ohio (Lifeline). Promote and facilitate organ/eye/tissue donation by serving as the OSU Hospital Lifeline Liaison. Analyze data provided by Lifeline regarding organ/tissue/eye donation.
Diagnostic Testing Areas	Provide tests based on verbal, electronic, or written consult requests. Final reports are included in the patient record.
Early Response Team (ERT)	Provide timely diagnostic and therapeutic intervention before there is a cardiac or respiratory arrest or an unplanned transfer to the Intensive Care Unit. The team is comprised of rapid response RNs trained in ACLS and Respiratory Therapist who are trained to assist patient care staff when there are signs that a patient's health is declining.
Educational Development and Resources	Provide and promote ongoing development and training experiences to all members of The James Cancer Hospital community, provide staff enrichment programs, organizational development, leadership development, orientation and training, skills training, continuing education, competency assessment and development, literacy programs and student affiliations.
Endoscopy	Provide services to patients requiring a nonsurgical review of their digestive tract.
Environmental Services (EVS)	Provide housekeeping/cleaning and disinfecting of all areas of the hospital, including ORs, patient rooms, and nursing unit environments.
Epidemiology	Enhance the quality of patient care and the work environment by minimizing the risk of acquiring infection within the hospital and ambulatory settings.
Facilities Operations	Provide oversight, maintenance and repair of the building's life safety, fire

	safety, and utility systems. Provides preventative, repair, and routine maintenance in all areas of all buildings serving patients, guests, and staff.
Financial Services	Support leaders in preparation and management of capital and operational budgets; provide comprehensive patient billing services and collaborates with patients and payers to facilitate meeting all payer requirements for payment.
Human Resources (HR)	Serve as a liaison for managers regarding all human resources information and services; assist departments with restructuring efforts; provide proactive strategies for managing planned change within the health system; assist with Employee/Labor Relations issues; assists with performance management process; develops compensation strategies; develop hiring strategies and coordinates process for placements; provide strategies to facilitate sensitivity to issues of cultural diversity; provide human resources information to employees, and established equity for payroll.
Immediate Care Center (ICC)	Patients are evaluated for symptom management related to their disease, or treatment of their disease, and any acute needs requiring evaluation by an advanced practice provider (APP), subsequent treatments, and/or supportive care infusion therapy. Patient visits may include diagnostic, interpretive analysis, and minor invasive procedures. Referrals to other physicians, home care and hospice agencies, dieticians etc. are made by our APPs in collaboration with the primary team.
Information Systems	Support departments to evaluate information technology needs, deploy and integrate reliable, state-of-the-art information systems technology solutions to manage change.
Laboratory Services	Responsible for performing testing on patient specimens to obtain information about the health of patient as pertaining to the diagnosis, treatment, and prevention of disease. Laboratory reports are included in the patient record.
Materials Management	Supply, stock, and monitor PAR levels in patient care areas.
Medical Information Management (MIM)	Maintain patient records serving the needs of the patient, provider, institution and various third parties to health care in the inpatient and ambulatory setting.
Nutrition Services	Provide nutritional care and food service to The James inpatient and ambulatory site patients, staff, and visitors. Clinical nutrition assessment and consultation services are available in both inpatient and outpatient settings.
Pathology	Pathology receives, triages, and accessions gross (macroscopic) examination of all complexity of surgical resections and biopsies. Final reports are included in the patient record.
James Patient Access Services (JPAS)	Coordinate registration/admissions.

Patient Care Resource Management (PCRM) and Social Services	Provide personalized care coordination and resource management. with patients and their support systems. Provide discharge planning, coordination of external agency contacts for patient care needs and crisis intervention and support for patients and their support system. Provide services upon phone/consult request of physician, nurse or the patient or patient support system.
Patient Education	Provide educational resources that facilitate patient learning and encourage the patient to take an active role in their care. These resources are evidence- based, comply with national standards for health literacy/plain language/accessibility and meet Joint Commission and organizational standards. Based on their assessment, clinicians use patient education resources to assist in patient and caregiver understanding and to reinforce the learning provided during their hospital stay or clinic visit.
Patient Experience	Develop programs for support of patient relations and customer service and information desk. Volunteers do wayfinding, host visitors in waiting areas, serve as patient/family advisors and advocates, and assist staff. Volunteer Services serves as a liaison for the Service Board auxiliary, which annually grants money to department-initiated projects, enhancing the patient and family experience.
Perioperative Services	Provide personalized care of the patient receiving surgical services, from pre-anesthesia through recovery, for the ambulatory and inpatient surgical patients.
Pharmacy	Patient care services are delivered via specialty practice pharmacists and clinical generalists. Each practitioner promotes optimal medication use and assists in achieving the therapeutic goals of the patients.
Operations Improvement/Process Engineers	Operations Improvement Process Engineers utilize industrial engineering knowledge and skills, as well as LEAN and Six Sigma methods to provide internal consulting, coaching, and training services for all departments across all parts of The James Cancer Hospital to develop, implement, and monitor more efficient, cost-effective business processes and strategies.
Observation Unit	Provide additional bed capacity to expand care for oncology patients needing a non-inpatient level of care.
Pulmonary Diagnostics Lab	Provide services to patients requiring an evaluation of the respiratory system including pulmonary function testing, bronchoscopy, and other diagnostic/interventional pulmonary procedures.
Quality and Patient Safety	Provide integrated quality management and facilitate continuous quality improvement efforts throughout the hospital. Focus on the culture of safety and work with teams to provide information on trends and improvement opportunities.
Radiation Oncology	Responsible for clinical care related to the application of radiation treatments and radiation safety which include, but is not limited to photon, proton, gamma knife, and brachytherapy.

Radiology Services	Provide state-of-the-art radiological diagnostic and therapeutic testing and treatment. Services offered by the Radiology Imaging Department range from general radiography and fluoroscopy to new and advanced interventional procedures, contrast imaging, which include, but not limited to CT, MRI, IVP, etc., in which contrast agents are administered by IV certified radiology technologists.
Rehabilitation Services	Physical therapists, occupational therapists, speech and language pathologists and recreational therapists, evaluate, formulate a plan of care, and provide treatment based on physician referral and along with the interdisciplinary medical team for appropriate treatment and education needed for the established discharge plan.
Respiratory Therapy (RT)	Provide respiratory therapeutic interventions and diagnostic testing, by physician order including ventilator support, bronchodilator therapy, and pulmonary hygiene.
Safety	Hospital safety personnel handle issues associated with regulations, such as EPA, OSHA, and fire safety.
Security	Provide a safe and secure environment for patients, visitors, and staff members by responding to emergencies such as workplace violence, fires, bomb threats, internal and external disasters, armed aggressors, or any other incident that requires emergency response.
Social Work Services	Social Work Services are provided to patients/families to meet their medically related social and emotional needs as they impact their medical condition, treatment, recovery, and safe transition from one care environment to another. Social workers provide psychosocial assessment and intervention, crisis intervention, financial counseling, discharge planning, health education, provision of material resources and linkage with community agencies. Members of the treatment team can request consults for patients, or their support system.
Staff Development and Education	Provide and promote ongoing employee development and training related to oncology care, provides clinical orientation, and continuing education of staff.
Transfer Center	Coordinate with inpatient units and ancillary departments to ensure patient flow efficiency and timely access for patients who seek care. Provide transparency real-time across the Medical Center on capacity and all ADT (Admission, Discharge, and Transfer) activity. Timely and accurate patient placement based on level of care and service line is expedited through a capacity management technology platform.
Transportation	Supply patients with a secure and proficient transport within the Wexner Medical Center by transferring patients between rooms/floors within the hospital, taking patients to and from test sites, and discharging patients to Dodd Rehabilitation Center, on-site hospice, and the morgue.
Wound Care	Wound care services including but are not limited to the diagnosis and

	management for skin impairments, on-going wound management, treatment, and prevention.
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APPENDIX XXVIII

OSU AMBULATORY SURGERY CENTER
Scope of Care – Outpatient Care New Albany
Clinical Departments

Approved By:

X *Jessett A. Heard* 5/23/25

Dr. J. Heard, MD, MBA
Medical Director, Ambulatory Peri-Operative Services

X *Sheryl Burtch* 5.23.25

Sheryl Burtch, DNP, MA, RN, NEA-BC
Sr. Director, Peri-Operative Services

Department/ Patient Care Unit Name: The Ohio State University Ambulatory Surgery Center – Outpatient Care New Albany. The Center is an Ambulatory Surgery Center which provides services related to elective outpatient procedures.

Types (and age range) of patients served:

- 18 or more years of age.
- Patients aged 13 to 17 with the following requirements please follow below approval process:
 1. Treating physician has admitting privileges at an age-appropriate inpatient center
 2. Permission from Medical Director or Designee
 3. Minimum Height/ Weight requirements: 5'0" and 100 pounds. Variance shall require medical director (or designee) approval.
 4. All patients will have an anesthesia evaluation, either CompPAC or OPAC. Variance shall require medical director (or designee) approval.
 5. Pediatric BMI limit is 40.0.

Approved OSC Executive Team: May 24, 2021
Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

6. An accompanying responsible adult, preferably the custodial parent or legal guardian, must remain present in the building. A custodial parent or legal guardian must be available by phone during the surgery admission. For the Extended Recovery Unit, an accompanying responsible adult must remain present in the building overnight with the patient.

Physical Status:

- ASA I-II.
- ASA III without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV patients may not have straight Local without Anesthesia care; they may have MAC or General Anesthesia at the discretion of the Anesthesiologist.
- General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Procedure Length

- Procedures requiring more than 6 hours of total OR time will need prior authorization by the Medical Director or designee.
- Patients anticipated to have an extended PACU length of stay will need prior authorization by the Medical Director or designee.
- These cases will be scheduled no later than the first case in a physician's block and will be scheduled to end by 3:00pm.

DNR:

- For patient admitted to the surgery center with an active DNR order, the advance directive should be discussed with the patient and/or their family members or caregivers, the surgeon/proceduralist and anesthesia providers to determine whether the do-not-resuscitate orders are suspended or maintained for the surgery or procedure. **Ideally, this should occur before the day of surgery, after the ComPAC or OPAC visit has been completed.**
- Suspending a DNR will be in accordance with the OSUWMC policy for surgery center patients.

< <https://osumc.policytech.com/docview/?app=pt&source=unspecified&docid=118044>>

Malignant Hyperthermia:

Patients with a personal or family history of MH must be reviewed by the Medical Director or Designee.

Morbid Obesity OR's:

Approved OSC Executive Team: May 24, 2021

Date Last Revised: 3/8/2023

Date Last Reviewed: 6/24/24

Patients will be considered with identified criteria - Variance shall require medical director (or designee) approval.

- All patients must have current height & weight in IHIS before scheduled at the ASC.
- Patients with BMI > 40.0 may not be performed in the prone position if anesthetized and unable to move themselves into that position.
- Patients with BMI > 45.0 may not be performed in the lateral position if anesthetized and unable to move themselves into that position.
- Patients with a BMI 45.0-55.0 will be considered for general anesthesia, needing review and final approval from the medical director or designee. If BMI is greater than 55.0, procedure planned should require minimal sedation. Elective conversion to General Anesthesia will not be an option. If General Anesthesia conversion is an anticipated option, the surgery/procedure should not be scheduled at the ASC.
- No patient with BMI > 65.0 will be accepted at the ASC.
- No pediatric (age < 18 years) patient with BMI > 40.0 will be accepted at the ASC.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Morbid Obesity Endoscopy

- Patients with BMI > 45 may not have conscious/moderate sedation
- Patients with BMI between 45-55 will need review and final approval from the medical director or designee.
- Endoscopy patient BMI limit is 55.0 regardless of positioning.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Hemodialysis:

Hemodialysis patients cannot have procedure/surgery and hemodialysis scheduled on the same day. Either the date of procedure/surgery or dialysis must be changed if they are scheduled for the same day. Variance shall require medical director (or designee) approval.

Ambulation:

Patients must be able to ambulate with minimal assistance including ability to stand up and pivot to cart.

- Procedures will not be performed with patient's personal medical equipment (i.e. wheelchairs).

Anesthesia:

General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Difficult Airway:

Approved OSC Executive Team: May 24, 2021

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Date Last Reviewed: 6/24/24

Patients with a history of difficult airway / intubation must complete a ComPAC or OPAC evaluation and be approved by the Medical Director or Designee.

Pacemakers / Defibrillators:

- Patients with isolated pacemakers must have the device evaluated by their Cardiologist within twelve (12) months prior to Date of Service. Documentation of interrogation must be readily available.
- Patients with pacemakers will not be considered for ESWL procedures without OSU Pacer Clinic personnel on site throughout the surgical procedure.
- Patients with AICD's are considered for MAC Anesthesia/conscious sedation only. Patients must be evaluated by their cardiologist within six (6) months prior to Date of Service. Documentation of interrogation must be readily available and there should be no change in patient's clinical status since last cardiac evaluation. If placing a magnet would deprogram the AICD, these patients would not be candidates for the ASC.

Reference:

Crossley, George H. et al "The Heart Rhythm Society (HRS)/American Society of." *Heart Rhythm* 8.7 (2011): 1114-140. Print.
 Michael, Platonov A., MD, Anne Gillis, MD, and Katherine M. Kavanagh, MD. "Pacemakers, Implantable Cardioverter/Defibrillators." *Journal of Endourology* 22.2 (2008): 243-47. Print.

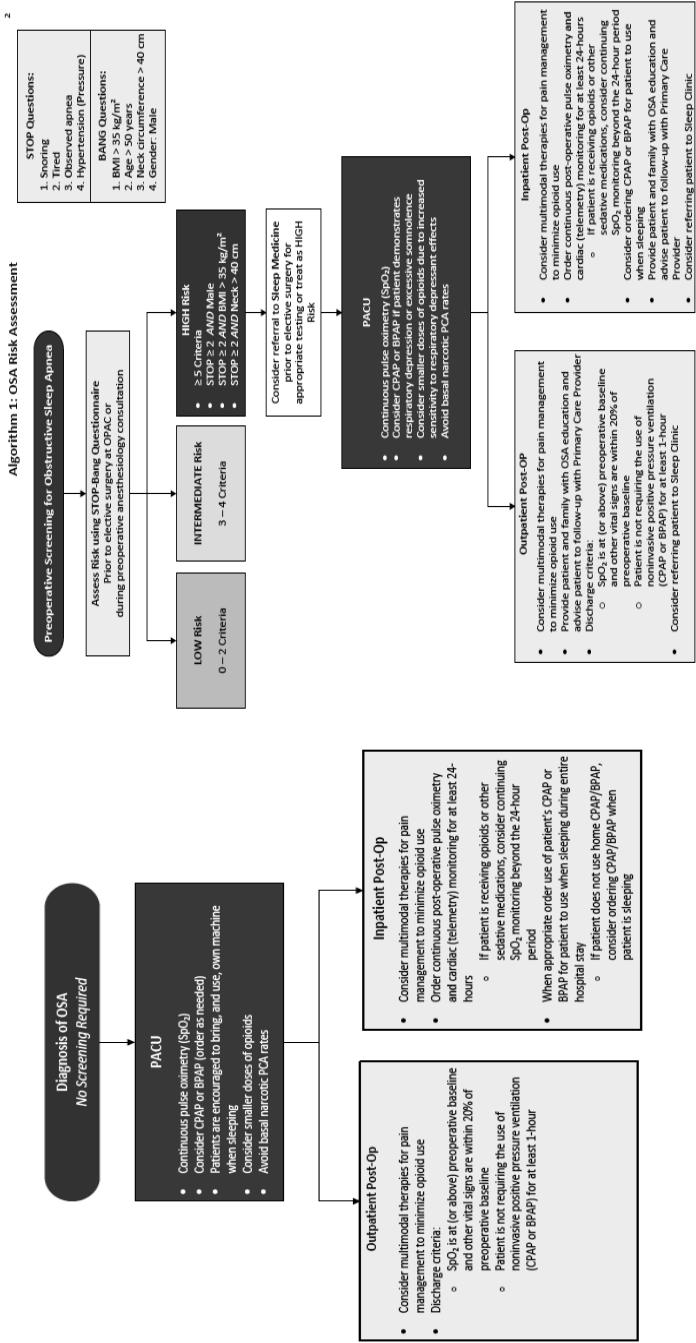
Obstructive Sleep Apnea:

- Anesthesiology services will evaluate the appropriateness of outpatient procedures/surgery, given the patient's OSA history, the proposed procedure and the patient's co-morbidities.
- Patients with known diagnosis of OSA that have optimized co-morbid medical conditions will be considered.
 - Patients with a presumed diagnosis of OSA based on screening (STOP Bang) questionnaire, and with optimized co-morbid conditions, will be considered for the OSC if postoperative pain can be managed predominantly with non-opioid analgesia.

Approved OSC Executive Team: May 24, 2021
Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

Reference:

Stein, E., Das, A., Guertin, M., Dalton, R., Springer, A., Rogers, B., & Heavener, D. (2021). *Perioperative assessment and management of obstructive sleep apnea (OSA): OSU WMC Clinical Practice Guideline*. <https://onesource.osumc.edu/sites/ebm/Documents/Guidelines/ObstructiveSleepApnea>



Approved OSC Executive Team: May 24, 2021
Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

Isolation Patients/ Infection Prevention:

Patients requiring isolation precautions (droplet, airborne) as defined by medical center guidelines will need approval by the Medical Director or Designee.

Patients requiring contact isolation precautions may be considered as defined by medical center guidelines using appropriate PPE.

Patients with wounds that are bleeding or draining will have sites contained with an occlusive dressing and treated with standard precautions.

Management of MRSA in Ambulatory Surgical Facilities. (n.d.). Management of MRSA in Ambulatory Surgical Facilities. Retrieved from <http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2010/Jun7%282%29/Pages/61.aspx>

Guide to Infection Prevention In Outpatient Settings: Minimum Expectations for Safe Care. (n.d.). CDC.Gov. Retrieved from

Pregnancy:

- No patient with a known pregnancy may be treated at the ASC.
- All patients of childbearing age with female reproductive organs will submit a urine pregnancy test on the day of surgery. Every attempt will be made to collect urine specimen. If the patient is unable to void, refuses to void, or the patient's legal guardian refuses the pregnancy test, a pregnancy test waiver consent form may be signed by the patient or the patient's legal guardian after a discussion of risks and signature from the anesthesiologist and attending proceduralist.

Developmental Disabilities/Special Needs:

The ASC will be provided an updated History & Physical that includes diagnosis of specific conditions/ syndromes. Along with the H&P, the "Functional Ability Assessment" will be completed. All Developmentally Disabled/ Special Needs patients require Anesthesia approval prior to scheduling.

Toxicology Screen:

All patients who appear to be intoxicated and who test positive on Date of Service for methamphetamines, amphetamines, cocaine &/or alcohol will have their procedure cancelled. Patients testing positive for other drugs will be evaluated on an individual basis.

Preoperative Evaluation:

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Date Last Revised: 3/8/2023

Date Last Reviewed: 6/24/24

Patients may undergo pre-operative testing according to the current Pre-Anesthetic Testing Algorithm. Complete pre-operative services are available by a CompAC or OPAC appointment.
Accompanying Adult:

Patients who have undergone minor, superficial procedures **without sedation** may be discharged at the discretion of their admitting physician. If the procedure performed involves the hand, eye, or foot & impairs their visual acuity, or hand/ foot dexterity to the degree that they cannot operate a motor vehicle, the patient will not be permitted to drive when discharged.

All other patients will require an accompanying adult (18 or more years of age) to provide patient transportation upon discharge. The ASC will recommend that the adult representative remain at the ASC throughout the procedure. Patients will be made aware that the absence of an accompanying adult may result in their procedure being cancelled. Patients found to be without transportation after their procedure will be discharged according to current medical center policy.

Scope and complexity of patient's care needs:

Four operating rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing the following specialties: General Surgery, Colorectal, Gynecology, Ophthalmology, Plastic Surgery and Urology. Four endoscopy procedure rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing from Gastroenterology, Hepatology and Nutrition (GHN), General Surgery and open access referrals.

The Center is staffed from 0600AM-to 1700PM Monday through Friday, primarily for adult patients requiring surgical intervention under local anesthesia, conscious sedation, monitored anesthesia care, regional anesthesia or general anesthesia.

Patients are admitted to the Center on an ambulatory basis. Patients are required to have the ability to understand and carry out their discharge instructions or have a responsible adult which will assist them in fulfilling these needs.

All procedures performed at the Ambulatory Surgery Center are part of the Core Privileges approved by Ohio State University Wexner Medical Center.

The following types of procedures are not performed at the Center:

- Are associated with the risk of extensive blood loss.
- Require major or prolonged invasion of body cavities.
- Directly involve major blood vessels.
- Are an emergency or life threatening in nature.
- Noted on the CMS Inpatient Only List. This list will be reviewed and updated annually.

Methods used to assess and meet patient's care needs:

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Date Last Reviewed: 6/24/24

Care of all patients experiencing surgical intervention is based on the nursing process and standards from AORN, ASPSN, SGNA and other National Peri-operative organizations supporting the service lines of the Center. Preoperatively, the RN verifies the patient, identifies the patient's special needs, completes a patient assessment and develops a plan of care. Intra-operatively, the RN implements the patient's plan of care and documents on the appropriate medical records (e.g.: Op-Time and hospital approved documents).

Methods used to determine the appropriateness, clinical necessity and timeliness of support services provided directly or through referral

The Circulating RN works collaboratively with the proceduralists, surgeons, anesthesiologists, PACU RN, and the Pre-op Holding RN in assessing, prioritizing and meeting the patient's individual needs. Based on the scheduled procedure and communication with the physician/surgeon and anesthesia, specific patient concerns regarding safety, infection control, positioning, and psychosocial needs are anticipated and met (e.g.: preparation of OR environment for latex allergy patient, isolation protocols implemented, limitation of patients range of motion, need for an interpreter or caregiver for MR/DD patients). The continued need for support is communicated to the receiving unit via the oral transfer report and IHIS documentation. A collaborative effort to improve this communication is ongoing. The success of this method is determined by the achievement of positive patient outcomes, reflected by PI monitors and retrospective chart reviews.

In the event of an identified patient need to receive services not provided at the ASC, the patient will be transferred to the Wexner Medical Center for subsequent evaluation.

Standards of practice/ practice guidelines, when available

The Ambulatory Surgery Center provides services related to elective outpatient procedures in the fields of General Surgery, GYN, Gynecology, Ophthalmology, Plastic Surgery, Urology, and Vascular at 6100 N. Hamilton Road, Westerville Ohio 43081. The OSUWMC Board of Directors, the OSUWMC Medical Staff, in conjunction with the Ambulatory Executive Director, Ambulatory Medical Director, Senior Director, Associate and Administrative Directors & Nurse Manager assess, plan, implement, and evaluate the delivery of care and services. The Ambulatory leadership team is responsible for ensuring that the delivery of care provided is consistent with the mission, standards, and policies established for patient care. The Ambulatory leadership team promotes an environment that fosters empowerment through active participation in strategic planning and development of processes that ensure adequacy of services and resources to meet the current and projected community needs, policy establishment, and professional growth.

The objective of The Ohio State University Ambulatory Surgery Center is to deliver excellent surgical, procedural, and anesthesia services to those we serve in accordance with the standards set forth by The Joint Commission, CMS Conditions of Participations for Hospitals and The Vision and Mission statements of The Ohio State University Wexner Medical Center. The Scope of Care is designed to provide appropriate care and services for all patients in a timely manner.

Approved OSC Executive Team: May 24, 2021

Date Last Revised: 3/8/2023

Date Last Reviewed: 6/24/24

Utilizing a multi-disciplinary approach in the delivery of patient care, our services promote continuous quality and performance improvement activities provided in an environment where collaboration and multi-disciplinary approaches to problem identification and resolution are the expectation. Important criteria and thresholds are measured and continuously monitored through our Quality and Performance Improvement process to optimize patient outcomes and assure the highest level of satisfaction for all our customers. Results of our Quality and Performance Improvement activities are used to improve patient outcomes enhance our services and our staff performance.

Understanding that the provision of health care services is dynamic and fluid; the Scope of Care will be **reviewed at least annually** and revised as needed to reflect the changing patient needs, community changes, and or facility needs and initiatives.

Approved OSC Executive Team: May 24, 2021
Date Last Revised: 3/8/2023
Date Last Reviewed: 6/24/24

OSU AMBULATORY SURGERY CENTER
Scope of Care – Outpatient Care Dublin
Clinical Departments

Approved By:

X Janett A. Heard 5/23/25

Dr. Heard, MD, MBA
Medical Director, Ambulatory Peri-Operative Services

X Sheryl Burch 5.23.25

Sheryl Burch, DNP, MA, RN, NEA-BC
Sr. Director, Peri-Operative Services

Department/ Patient Care Unit Name: The Ohio State University Outpatient Care Dublin - Ambulatory Surgery Center. The Center is an Ambulatory Surgery Center of OSUWMC which provides services related to elective outpatient procedures.

Types (and age range) of patients served:

- 18 or more years of age.
- Patients aged 13 to 17 with the following requirements please follow below approval process:
 1. Treating physician has admitting privileges at an age-appropriate inpatient center
 2. Permission from Medical Director or Designee
 3. Minimum Height/ Weight requirements: 5'0" and 100 pounds. Variance shall require medical director (or designee) approval.
 4. All patients will have an anesthesia evaluation, either CompPAC or OPAC. Variance shall require medical director (or designee) approval.
 5. Pediatric BMI limit is 40.0.

Approved: July 2022
Date Last Revised: 3/8/2023 Date
Last Reviewed: 6/24/2024

6. An accompanying responsible adult, preferably the custodial parent or legal guardian, must remain present in the building. A custodial parent or legal guardian must be available by phone during the surgery admission. For the Extended Recovery Unit, an accompanying responsible adult must remain present in the building overnight with the patient.

Physical Status:

- ASA I-II.
- ASA III without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV without signs or symptoms of uncontrolled or decompensated conditions.
- ASA IV patients may not have straight Local without Anesthesia care; they may have MAC or General Anesthesia at the discretion of the Anesthesiologist.
- General and MAC Anesthesia will be administered by Department of Anesthesia providers. Conscious sedation will be administered by any individual provider credentialed to do so.

Procedure Length

- Procedures requiring more than 6 hours of total OR time will need prior authorization by the Medical Director or designee.
- Patients anticipated to have an extended PACU length of stay will need prior authorization by the Medical Director or designee.
- These cases will be scheduled no later than the first case in a surgeon's block and will be scheduled to end by 3:00pm

DNR:

- For patient admitted to the surgery center with an active DNR order, the advance directive should be discussed with the patient and/or their family members or caregivers, the surgeon/proceduralist and anesthesia providers to determine whether the do-not-resuscitate orders are suspended or maintained for the surgery or procedure. **Ideally, this should occur before the day of surgery, after the CompPAC or OPAC visit has been completed.**
- Suspending a DNR will be in accordance with the OSUWMC policy for surgery center patients.

< <https://osumc-policytech.com/docview/?app=pt&source=unspecified&docid=118044>>

Malignant Hyperthermia:

Patients with a personal or family history of MH must be reviewed by the Medical Director or Designee.

Morbid Obesity OR's:

Patients will be considered with identified criteria - Variance shall require medical director (or designee) approval.

- All patients must have current height & weight in IHIS before scheduled at the ASC.
- Patients with BMI > 40.0 may not be performed in the prone position if anesthetized and unable to move themselves into that position.

Date Last Revised: 3/8/2023

Date Last Reviewed:

- Patients with BMI > 45.0 may not be performed in the lateral position if anesthetized and unable to move themselves into that position.
- Shoulder patients must have a BMI ≤ 45.
- Patients with a BMI 45.0-55.0 will be considered for general anesthesia, needing review and final approval from the medical director or designee. If BMI is greater than 55.0, procedure planned should require minimal sedation. Elective conversion to General Anesthesia will not be an option. If General Anesthesia conversion is an anticipated option, the surgery/procedure should not be scheduled at the ASC.
- No patient with BMI > 65.0 will be accepted at the ASC.
- No pediatric (age < 18 years) patient with BMI > 40.0 will be accepted at the ASC.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Morbid Obesity Endoscopy

- Patients with BMI > 45 may not have conscious/moderate sedation
 - Patients with BMI between 45-55 will need review and final approval from the medical director or designee.
 - Endoscopy patient BMI limit is 55.0 regardless of positioning.
- Recorded BMI at the time of the CompAC or OPAC appointment will be considered in evaluation of cases being cancelled on day of surgery by Attending Surgeon/Proceduralist and Anesthesia.

Hemodialysis:

Hemodialysis patients cannot have surgery and hemodialysis scheduled on the same day. Either the date of surgery or dialysis must be changed if they are scheduled for the same day. Variance shall require medical director (or designee) approval.

Ambulation:

Patients must be able to ambulate with minimal assistance including ability to stand up and pivot to cart

- Procedures will not be performed with patient's personal medical equipment (i.e. wheelchairs)
- Physical Therapy will be available for patients in Extended Recovery for total joint procedures.

Anesthesia:

General and MAC Anesthesia will be administered by providers from Department of Anesthesiology. Conscious sedation will be administered by any individual provider credentialed to do so.

Difficult Airway:

Patients with a history of difficult airway / intubation must complete a CompAC or OPAC evaluation and approved by the Medical Director or Designee.

Date Last Revised: 3/8/2023

Date Last Reviewed:

Pacemakers / Defibrillators:

- Patients with isolated pacemakers must have the device evaluated by their Cardiologist within twelve (12) months prior to Date of Service. Documentation of interrogation must be readily available.
- Patients with pacemakers will not be considered for ESWL procedures without OSU Pacer Clinic personnel on site throughout the surgical procedure.
- Patients with AICD's are considered for MAC Anesthesia/conscious sedation only. Patients must be evaluated by their cardiologist within six (6) months prior to Date of Service. Documentation of interrogation must be readily available and there should be no change in patient's clinical status since last cardiac evaluation. If placing a magnet would deprogram the AICD, these patients would not be candidates for the ASC.

Reference:

Crossley, George H. et al "The Heart Rhythm Society (HRS)/American Society of." *Heart Rhythm* 8.7 (2011): 1114-140. Print.
Michael, Platonov A., MD, Anne Gillis, MD, and Katherine M. Kavanagh, MD. "Pacemakers, Implantable Cardioverter/Defibrillators." *Journal of Endourology* 22.2 (2008): 243-47. Print.

Obstructive Sleep Apnea:

Anesthesiology services will evaluate the appropriateness of outpatient procedures/surgery, given the patient's OSA history, the proposed procedure, and the patient's co-morbidities.

- Patients with known diagnosis of OSA that have optimized co-morbid medical conditions will be considered.
- Patients with a presumed diagnosis of OSA based on screening (STOP Bang) questionnaire, and with optimized co-morbid conditions, will be considered for the OSC if postoperative pain can be managed predominantly with non-opioid analgesia.

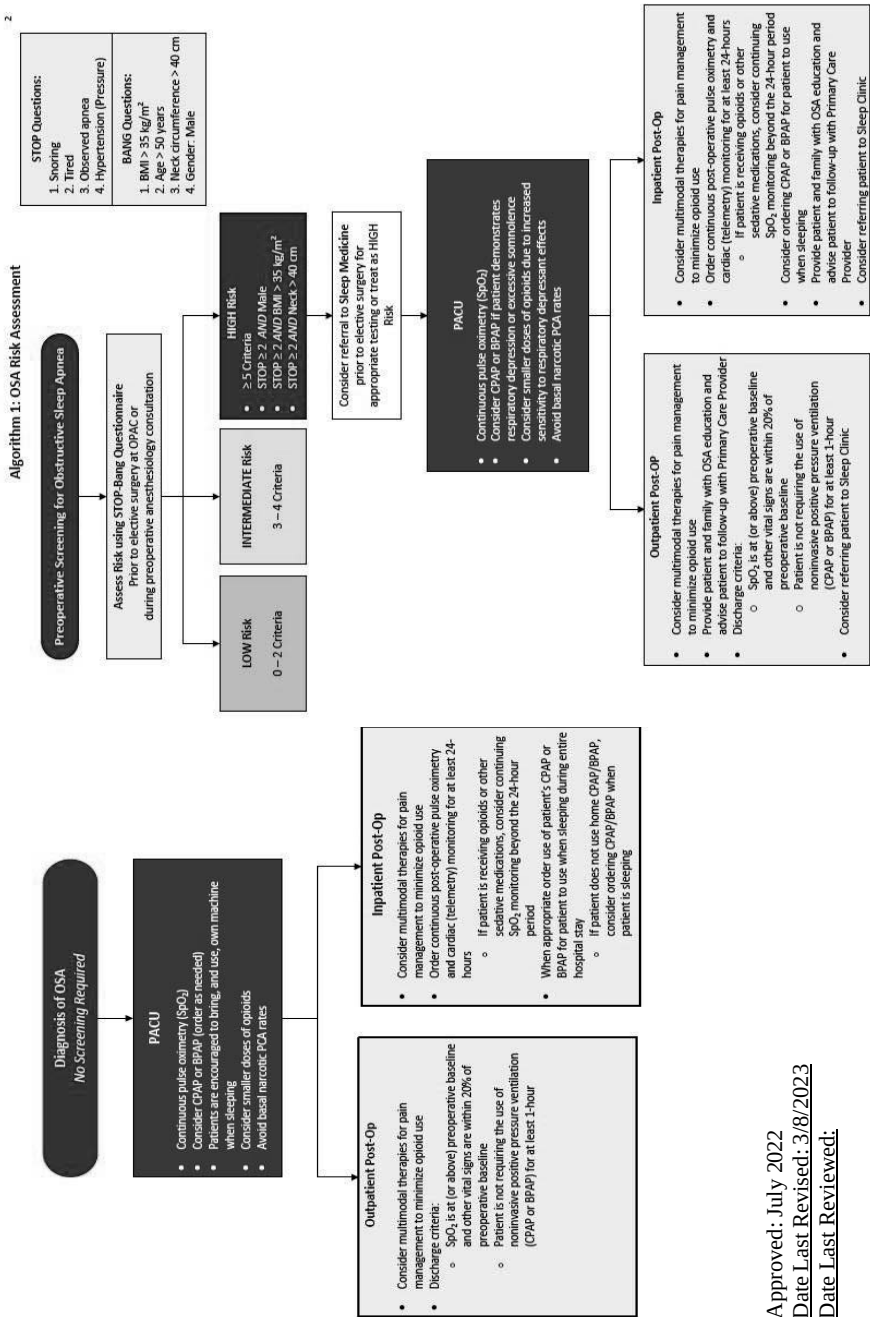
Approved: July 2022

Date Last Revised: 3/8/2023

Date Last Reviewed:

Reference:

Stein, E., Das, A., Guertin, M., Dalton, R., Springer, A., Rogers, B., & Heavener, D. (2021). *Perioperative assessment and management of obstructive sleep apnea (OSA): OSU WMC Clinical Practice Guideline*. <https://onesource.osumc.edu/sites/ebm/Documents/Guidelines/Guidelines/ObstructiveSleepApnea>



Approved: July 2022
Date Last Revised: 3/8/2023
Date Last Reviewed:

Isolation Patients/ Infection Prevention:

Patients requiring isolation precautions (droplet, airborne) as defined by medical center guidelines will need approval by the Medical Director or Designee.

Patients requiring contact isolation precautions may be considered as defined by medical center guidelines using appropriate PPE.

Patients with wounds that are bleeding or draining will have sites contained with an occlusive dressing and treated with standard precautions.

Management of MRSA in Ambulatory Surgical Facilities. (n.d.). *Management of MRSA in Ambulatory Surgical Facilities*. Retrieved from <http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2010/Jun7%282%29/Pages/61.aspx>

Guide to Infection Prevention In Outpatient Settings: Minimum Expectations for Safe Care. (n.d.). *CDC.Gov*. Retrieved from

Pregnancy:

- No patient with a known pregnancy may be treated at the ASC.
- All patients of childbearing age with female reproductive organs will submit a urine pregnancy test on the day of surgery. Every attempt will be made to collect urine specimen. If the patient is unable to void, refuses to void, or the patient's legal guardian refuses the pregnancy test, a pregnancy test waiver consent form may be signed by the patient or the patient's legal guardian after a discussion of risks and signature from the anesthesiologist and attending proceduralist.

Developmental Disabilities/Special Needs:

The ASC will be provided an updated History & Physical that includes diagnosis of specific conditions/ syndromes. Along with the H&P, the "Functional Ability Assessment" will be completed. All Developmentally Disabled/ Special Needs patients require Anesthesia approval prior to scheduling.

Toxicology Screen:

All patients who appear to be intoxicated and who test positive on Date of Service for methamphetamines, amphetamines, cocaine &/or alcohol will have their procedure cancelled. Patients testing positive for other drugs will be evaluated on an individual basis.

Preoperative Evaluation:

Patients may undergo pre-operative testing according to the current Pre-Anesthetic Testing Algorithm. Complete pre-operative services are available by a ComPAC or OPAC appointment.

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Accompanying Adult:

Patients who have undergone minor, superficial procedures **without sedation** may be discharged at the discretion of their admitting physician. If the procedure performed involves the hand, eye, or foot & impairs their visual acuity, or hand/ foot dexterity to the degree that they cannot operate a motor vehicle, the patient will not be permitted to drive when discharged.

All other patients will require an accompanying adult (18 or more years of age) to provide patient transportation upon discharge. The ASC will recommend that the adult representative remain at the ASC throughout the procedure. Patients will be made aware that the absence of an accompanying adult may result in their procedure being cancelled. Patients found to be without transportation after their procedure will be discharged according to current medical center policy.

Scope and complexity of patient's care needs:

Six operating rooms located on the second floor of The Ohio State University Outpatient Care Dublin Ambulatory Surgery Center servicing the following specialties: Urology, Vascular, Otolaryngology, Hand & Upper Extremity, Orthopaedic Joints, Orthopaedic Spine, Endoscopy and Interventional Radiology, Pain Management, and Podiatry. Six endoscopy procedure rooms located on the second floor of The Ohio State University Outpatient Care New Albany servicing from Gastroenterology, Hepatology and Nutrition (GHN), and open access referrals. The Center is staffed from 0600AM-4o 1700PM Monday through Friday, primarily for adult patients requiring surgical intervention under local anesthesia, conscious sedation, monitored anesthesia care, regional anesthesia or general anesthesia.

Patients are admitted to the ASC on an ambulatory basis. The patients are required to have the ability to understand and carry out their discharge instructions or have a responsible adult which will assist them in fulfilling these needs.

All procedures performed at the Ambulatory Surgery Center are part of the Core Privileges approved by Ohio State University Wexner Medical Center.

The following types of procedures are not performed at the Center:

- Are associated with the risk of extensive blood loss.
- Require major or prolonged invasion of body cavities.
- Directly involve major blood vessels.
- Are an emergency or life threatening in nature
- Noted on the CMS Inpatient Only List. This list will be reviewed and updated annually.

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Methods used to assess and meet patient's care needs:

Care of all patients experiencing surgical intervention is based on the nursing process and standards from AORN, ASPSN, SGNA and other National Peri-operative organizations supporting the service lines of the Center. Preoperatively, the RN verifies the patient, identifies the patient's special needs, completes a patient assessment and develops a plan of care. Intra-operatively, the RN implements the patient's plan of care and documents on the appropriate medical records (e.g.: Op-Time and hospital approved documents).

Methods used to determine the appropriateness, clinical necessity and timeliness of support services provided directly or through referral

The Circulating RN works collaboratively with the proceduralists, surgeons, anesthesiologists, PACU RN, and the Pre-op Holding RN in assessing, prioritizing and meeting the patient's individual needs. Based on the scheduled procedure and communication with the physician/surgeon and anesthesia, specific patient concerns regarding safety, infection control, positioning, and psychosocial needs are anticipated and met (e.g.: preparation of OR environment for latex allergy patient, isolation protocols implemented, limitation of patients range of motion, need for an interpreter or caregiver for MR/DD patients). The continued need for support is communicated to the receiving unit via the oral transfer report and IHIS documentation. A collaborative effort to improve this communication is ongoing. The success of this method is determined by the achievement of positive patient outcomes, reflected by PI monitors and retrospective chart reviews.

In the event of an identified patient need to receive services not provided at the ASC, the patient will be transferred to the Wexner Medical Center for subsequent evaluation.

Standards of practice/ practice guidelines, when available

The Ambulatory Surgery Center provides services related to elective outpatient procedures in the fields of Urology, Vascular, Otolaryngology, Hand & Upper Extremity, Orthopaedic Joints, Orthopaedic Spine, Endoscopy and Interventional Radiology, Pain Management, and Podiatry in Outpatient Care at Dublin Ambulatory Surgery Center - 6700 University Blvd, Dublin, Ohio 43016. The OSUWMC Board of Directors, the OSUWMC Medical Staff, in conjunction with the Ambulatory Executive Director, Ambulatory Medical Director, Senior Director, Associate and Administrative Directors, & Nurse Manager assess, plan, implement, and evaluate the delivery of care and services. The Ambulatory leadership team is responsible for ensuring that the delivery of care provided is consistent with the mission, standards, and policies established for patient care. The Ambulatory leadership team promotes an environment that fosters empowerment through active participation in strategic planning and development of processes that ensure adequacy of services and resources to meet the current and projected community needs, policy establishment, and professional growth.

The objective of the Outpatient Care Dublin Ambulatory Surgery Center is to deliver excellent surgical, procedural, and anesthesia services to those we serve in accordance with the standards set forth by The Joint Commission, CMS Conditions of Participations for Hospitals and The

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Vision and Mission statements of The Ohio State University Wexner Medical Center. The Scope of Care is designed to provide appropriate care and services for all patients in a timely manner.

Utilizing a multi-disciplinary approach in the delivery of patient care, our services promote continuous quality and performance improvement activities provided in an environment where collaboration and multi-disciplinary approaches to problem identification and resolution are the expectation. Important criteria and thresholds are measured and continuously monitored through our Quality and Performance Improvement process to optimize patient outcomes and assure the highest level of satisfaction for all our customers. Results of our Quality and Performance Improvement activities are used to improve patient outcomes enhance our services and our staff performance.

Understanding that the provision of health care services is dynamic and fluid; the Scope of Care will be **reviewed at least annually** and revised as needed to reflect the changing patient needs, community changes, and/or facility needs and initiatives.

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APPENDIX XXX



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

The James



THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

Policy Name: Patient Complaint and Grievance
Management 03-28

Applies to:

☒ OSU Wexner Medical Center [University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital, Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services]	☒ Ambulatory Surgery Centers [New Albany, Dublin]	☒ Arthur G. James Cancer Hospital and Richard J. Solove Research Institute and Outreach Sites
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Policy Objective

The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) is committed to promptly resolving complaints at the first level of contact whenever possible.

The purpose of this policy is to provide guidelines for staff to respond and manage complaints and grievances; and to define the process for responding to grievances according to The Joint Commission and CMS Hospital Conditions of Participation.

The Ohio State University Wexner Medical Center Board has delegated the responsibility for review and resolution of all grievances received from patients of University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital (Ross Hospital), Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services and Ambulatory Surgery Centers to the OSU Wexner Medical Center Grievance Committee and Arthur G. James and Richard J. Solove Research Institute (The James) Grievance Committee for grievances received from patients of the James Cancer Hospital and Outreach Sites.

The Patient Experience Department is responsible for supporting the complaint management process and assuring patients are adequately educated regarding their rights to register complaints and concerns.

In order to achieve the highest level of satisfaction possible, and to provide protection of their rights, patients will be encouraged to report concerns.

Concerns from patients, families, visitors, or other members of the community will be received courteously, treated seriously, and dealt with promptly. The act of voicing concern will not jeopardize the care a patient is currently receiving, nor any future access to appropriate care.

It is expected that the OSUWMC and The James staff will respond to patient concerns promptly and offer reasonable and appropriate solutions.

Definitions

Term	Definition
Staff Present	1. Includes any hospital staff present at the time of the complaint or who can quickly be at the patients location (i.e. nursing, administration, nursing supervisors, patient advocate, etc.) to resolve the patient's complaint.
Complaint	1. A clinical care issue that is verbally conveyed by a patient or the patient's representative to staff and generally resolved within forty eight (48) twenty-four (24) hours. 2. A complaint regarding discrimination on the basis of <u>race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits)</u> age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, veteran status or ability to pay , unless unable to resolve within forty-eight (48) hours. 3. A complaint such as not having a qualified interpreter available for a patient, patients spouse, family, and/or partner, even if the patient does not require an interpreter.

	4. Minor service complaints such as housekeeping, bedding, billing issues and food. 5. Complaints regarding property loss. 6. Privacy and HIPAA complaints, unless unable to be resolved within forty-eight (48) hours
Grievance	1. Any written complaint received from a patient or the patient's representative regarding clinical care, whether from an inpatient, outpatient or released/discharged patient. An e-mail or facsimile (fax) will be considered to be "written". 2. Verbal complaints about clinical care that are not resolved by staff at the time of the complaint, generally within forty-eight (48), and made by a patient or the patient's representative. 3. All verbal or written complaints regarding: • Abuse, neglect, patient harm; • Hospital compliance with CMS Hospital Conditions of Participation (CoP); and • Medicare Beneficiary Billing complaints related to rights and limitations provided by 42CFR§489. 4. Any complaint that the patient, or their representative, requests be handled as a formal grievance. 5. Any complaint where a written response from the hospital is requested by the patient or their representative. 6. Post-discharge complaints, made by a patient or their representative, related to clinical care or services during a stay shall be considered grievances, unless the complaint would have routinely been handled by staff generally within forty-eight (48) hours had the communication occurred during the stay or visit. In this instance, the communication will be considered a complaint.

Policy Details

1. Staff Reporting Complaints via the Hospital's Intranet Site (MyTools)
 1. Staff members are encouraged to enter non-clinical complaints directly into the Complaint Management Database on the hospital's intranet site, MyTools.
 2. The Complaint Management Database provides a mechanism for tracking and reporting complaint data, as well as coordinating timely follow-up.
 3. All verbal or written complaints regarding quality of care issues, abuse, neglect or patient harm shall be entered into the Patient Safety Reporting System for appropriate investigation and follow-up.
2. Patients or Visitors Reporting Complaints via Telephone
 1. Complaints about care delivered at University Hospital, Ross Hospital, Dodd Rehabilitation and Brain and Spinal Hospital, ~~or Ambulatory or the Specialty Primary Care Network~~ may be directed to the Patient Experience Department at 1-614-293-8944.
 2. Complaints about care delivered at The James may be directed to James Patient Experience at 1-614- 293-8609.
 3. Complaints about care delivered at East Hospital and Outpatient Care East may be directed to East Patient Experience at 1-614- 257-2310.
 4. Complaints about care delivered at Harding Hospital may be directed to Harding Patient Experience at 1-614-688-8941.
 5. After regular business hours, complaints may be escalated to the Hospital Administrative Manager or Nursing Supervisor for each location.
3. Procedures for Complaints
 1. All clinical care complaints handled within ~~forty-eight (48) hours~~ should be referred to the attending physician or manager for appropriate follow-up and entered in the Complaint Management Database.
 2. All non-clinical complaints should be referred to the appropriate department manager for follow-up.
 3. Patient Experience will forward all issues regarding property loss to the Property Loss Committee and enter the issue into the Complaint Management Database.
 4. Privacy and HIPAA complaints will be forwarded to the HIPAA Privacy Officer.
 5. When complaints cannot be immediately resolved by the staff member to whom they were reported, the complaint should be reported to the supervisor or manager for resolution and entered into the Complaint Management Database.
 6. Patient Experience staff will act as a liaison for the patient by representing their interests and facilitating communication with appropriate individuals within the Medical Center.
 7. Any complaints under the protected classes (race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, or veteran status) will be sent over to the Ohio State University Civil Rights Compliance Office of Institutional Equity (OIE) for further collaborative review in accordance with the university Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies.

CRCOOIE will serve as the primary contact for any further investigation outside of the OSUWMC/The James complaint process.

4. Procedures for Grievances
 1. When notified, Patient Experience or the appropriate manager will respond and investigate grievances regarding patients who are currently located within the hospital setting.
 2. Situations that endanger (e.g. neglect or abuse) the patient should be addressed immediately by the appropriate staff member.
 3. When appropriate, Risk Management may initiate a review of a grievance.
 4. Patient Experience will serve as the primary liaison to the patient, and may consult Risk Management as needed.
 5. If the grievance is from a written source, or reported after the patient has left the facility, Patient Experience will initiate contact with the complainant.
 6. Clinical Care Grievances
 - a. Clinical care grievances should be entered in the Patient Safety Reporting System, in accordance with the Patient Safety & Event Reporting 04-05.
 - b. Following initial contact with the complainant, Patient Experience will address the grievance between the patient, or their representative, and the appropriate hospital representatives based on the nature of the grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 7. Non-Clinical Care Grievances
 - a. Non-clinical grievances should be entered into the Complaint Management Database.
 - b. Following initial contact with the complainant, Patient Experience will facilitate communication and dialogue between the patient, or their representative, and the appropriate hospital representatives based on the nature of the non-clinical care grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 8. Typically, a grievance will be considered resolved when the patient is satisfied with the actions taken on their behalf.
 - a. However, there may be situations where the Hospital has taken appropriate and reasonable actions on the patient's behalf in order to resolve the patient's grievance and the patient or the patient's representative remains unsatisfied with the Hospital's actions. In these situations, the Hospital may consider the grievance to be closed.
 - b. Patient Experience must maintain documentation of its efforts and demonstrate compliance with this policy.
 9. A written response to all grievances shall be submitted to the patient, or their representative, by the Patient Experience representative or other appropriate individual within seven (7) business days regarding the disposition of the grievance.
 - a. Included in the written response will be:
 - i. The name of the hospital;
 - ii. The steps taken on behalf of the patient to investigate and resolve the grievance;
 - iii. The results of the grievance process; and
 - iv. The date of completion.
 - b. All grievance response letters will be mailed to the patient's or patient's representative's home address unless otherwise indicated.
 - c. If the grievance is received via email, the response may be sent via email.
 10. There may be complications or circumstances, which will not allow every grievance to be resolved during the seven (7) day timeframe.
 - a. If a response will take longer than seven (7) business days, the patient should be contacted by Patient Experience and advised that the hospital is still working to resolve the grievance.
 - b. The patient or the patient's representative should be contacted a minimum of every fourteen (14) business days by Patient Experience until the grievance is responded to in writing.
 - c. If the grievance is not resolved within 30 days, it must be reviewed by the OSU Wexner Medical Center Grievance Committee or The James Grievance Committee.
 11. A copy of the written response shall be retained by Patient Experience.
 12. Any grievances under the protected classes (age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, face, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) gender, sexual-orientation, pregnancy, or veteran status) will be sent over to the Office of Institutional Equity Ohio State University Civil Rights Compliance Office for further collaborative review in accordance with the university

Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies. ~~OSUWMC~~ will serve as the primary contact for any further investigation outside of the OSUWMC/The James grievance process.

5. Reporting Complaints via Patient Satisfaction Surveys

1. Information obtained from patient satisfaction surveys will not be considered a grievance, except:
 - a. If an identified patient writes or attaches a written complaint on the survey and requests resolution (i.e. requests an act or response), then the complaint shall be considered a grievance.
 - b. If an identified patient writes or attaches a written complaint on the survey and does not request resolution, then the hospital shall treat this as a grievance if the hospital would usually treat such a complaint a grievance.
2. Patient Experience will work collaboratively with the patient, or their representative, and the appropriate business unit to resolve the grievance when resolution has been requested by the patient.

6. Grievance Committees

1. The Ohio State University Wexner Medical Center Board has delegated oversight of the grievance management process to the Grievance Committees of the OSU Wexner Medical Center and the James Cancer Hospital to review and resolve the grievances of the hospital where the patient is receiving care.
2. The OSU Wexner Medical Center Grievance Committee is comprised of the Wexner Medical Center Chief Quality Officer, Chief Clinical Officer and the hospital Chief Executive Officer or their respective designees to review and resolve the grievances the hospital receives.
3. The James Grievance Committee is comprised of the James Executive Director of Patient Services, James Chief Medical Officer, Chief Nursing Officer, Director of James Quality and Patient Safety, Director of Patient Experience, or their respective designees to review and resolve grievances the hospital receives.
4. The OSU Wexner Medical Center and The James Hospital Grievance Committees functions to:
 - a. Facilitate grievance resolution when necessary;
 - b. Review grievances quarterly to evaluate effectiveness of the resolution process;
 - c. Complete an OSU Wexner Medical Center and James Cancer Hospital annual summary report for presentation to the Ohio State University Wexner Medical Center Board;
 - d. Submit patterns and trends to the Quality and Patient Safety Department for possible incorporation into a hospital performance improvement plan; and
 - e. Recommend operational modifications to senior hospital leadership in the event an immediate correction is necessary as a result of a patient grievance.
7. Complaints and grievances entered in the OSUWMC/The James Patient Advocacy Reporting System (PARS) may be analyzed for patterns related to professionals' behavior and performance. Refer to the Patient Advocacy Reporting System policy.

Resources

Related Policies

Affirmative Action and Equal Employment Opportunity
Non-Discrimination, Harassment, and Sexual Misconduct
Patient Advocacy Reporting System
Patient Rights and Responsibilities 03-23
Patient Safety & Event Reporting 04-05

Related References

CFR §482.13 (a)(2)

Staff Reporting Resources on MyToolsOneSource

Complaint Management Database Patient
Safety Reporting System

Patient Reporting Resources

Patients may choose to go directly to one of the reporting agencies listed below:

The Ohio Department of Health (ODH)

<http://www.odh.ohio.gov/contactus.aspx>

Complaints – Healthcare Facilities and Nursing Homes 246 North High Street

Columbus, Ohio 43215

Toll Free: 1-800-342-0553

E-Mail: HCComplaints@odh.ohio.gov

The Ohio Department of Health

Complaints – Health Care Facility Complaint Hotline Toll

Free: 1-800-669-3534

KePRO Inc.

<http://www.ohiokepro.com/aboutus/contacts.aspx> Ohio

KePRO Rock Run Center, Suite 100

5700 Lombardo Center

Seven Hills, Ohio 44131 Phone: 1-216-447-9604 E-

Mail: webmaster@ohiokepro.com

The Joint Commission

<http://www.jointcommission.org> Office

of Quality Monitoring

1 Renaissance Boulevard Oakbrook

Terrace, Illinois 60181

Office of Quality Monitoring Toll Free: 1-800-444-6610

To File a Complaint: <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/> <http://www.jointcommission.org/report-a-complaint.aspx>

U.S. Department of Health and Human Services- Office for Civil Rights Region V- Ohio

<http://www.hhs.gov/ocr> Office

for Civil Rights

233 N. Michigan Avenue, Suite 240

Chicago, Illinois 60601

Phone: (800) 368-1019/312-886-2359

To File a Complaint: <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

Ohio Department of Mental Health & Addiction Services

<http://mha.ohio.gov/>

Ohio Department of Mental Health 30 E. Broad Street, 36th Floor Columbus,

Ohio 43215

Phone: 1-614-466-2596

E-Mail: questions@mha.ohio.gov Contact Us

For Information about Client Rights and Resources: <http://mha.ohio.gov/Default.aspx?tabid=157>

Disability Rights Ohio

<http://www.disabilityrightsohio.org> 50–

W. Broad Street, Suite 1400 200 Civic

Center Drive, Suite 300

Columbus, Ohio 43215-5923

Phone: 1-614-466-7264

For Assistance: <http://www.disabilityrightsohio.org/get-help-now> Get Help Now

Patient Experience

For further questions regarding the hospital's policy on Patient Complaint Management, please contact either:

James Cancer Hospital Patient Experience

Phone: 1-614-293-8609 Toll Free: 1-866-993-8609
E-Mail: James.PatientExperience@osumc.edu

University Hospital and Ambulatory Surgery Center Patient Experience Phone:
1-614-293-8944

East Hospital Patient Experience Phone:

1-614-257-2310

Harding Hospital Patient Experience
Phone: 1-614-688-8941

Contacts

Office	Telephone
Patient Experience: University Hospital	614-293-8944
Patient Experience: East Hospital	614-257-2310
Patient Experience: The James	614-293-8609

History

<i>The Ohio State University Wexner Medical Center</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. UH Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/13/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/26/2021, <u>3/29/2022</u>	

<i>Arthur G. James Cancer Hospital and Richard J. Solove Research Institute</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. The James Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> 2. 4/7/2022 3. 4/15/2022 4. <u>5/26/2022</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/21/2021, <u>3/29/2022</u>	

APPENDIX XXXI



Policy Name: Patient Complaint and Grievance
Management 03-28

Applies to:

☒ OSU Wexner Medical Center [University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital, Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services]	☒ Ambulatory Surgery Centers [New Albany, Dublin]	☒ Arthur G. James Cancer Hospital and Richard J. Solove Research Institute and Outreach Sites
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Policy Objective

The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) is committed to promptly resolving complaints at the first level of contact whenever possible.

The purpose of this policy is to provide guidelines for staff to respond and manage complaints and grievances; and to define the process for responding to grievances according to The Joint Commission and CMS Hospital Conditions of Participation.

The Ohio State University Wexner Medical Center Board has delegated the responsibility for review and resolution of all grievances received from patients of University Hospital, East Hospital, Brain and Spine Hospital, Richard M. Ross Heart Hospital (Ross Hospital), Harding Hospital, Dodd Rehabilitation Hospital, Ambulatory Clinics and Services and Ambulatory Surgery Centers to the OSU Wexner Medical Center Grievance Committee and Arthur G. James and Richard J. Solove Research Institute (The James) Grievance Committee for grievances received from patients of the James Cancer Hospital and Outreach Sites.

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Concerns from patients, families, visitors, or other members of the community will be received courteously, treated seriously, and dealt with promptly. The act of voicing concern will not jeopardize the care a patient is currently receiving, nor any future access to appropriate care.

It is expected that the OSUWMC and The James staff will respond to patient concerns promptly and offer reasonable and appropriate solutions.

Definitions

Term	Definition
Staff Present	1. Includes any hospital staff present at the time of the complaint or who can quickly be at the patients location (i.e. nursing, administration, nursing supervisors, patient advocate, etc.) to resolve the patient's complaint.
Complaint	1. A clinical care issue that is verbally conveyed by a patient or the patient's representative to staff and generally resolved within forty eight (48) <u>twenty-four (24)</u> hours. 2. A complaint regarding discrimination on the basis of <u>race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits)</u> age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, veteran status or ability to pay, unless unable to resolve within forty-eight (48) hours. 3. A complaint such as not having a qualified interpreter available for a patient, patients spouse, family, and/or partner, even if the patient does not require an interpreter.

	4. Minor service complaints such as housekeeping, bedding, billing issues and food. 5. Complaints regarding property loss. 6. Privacy and HIPAA complaints, unless unable to be resolved within forty-eight (48) hours
Grievance	1. Any written complaint received from a patient or the patient's representative regarding clinical care, whether from an inpatient, outpatient or released/discharged patient. An e-mail or facsimile (fax) will be considered to be "written". 2. Verbal complaints about clinical care that are not resolved by staff at the time of the complaint, generally within forty-eight (48), and made by a patient or the patient's representative. 3. All verbal or written complaints regarding: • Abuse, neglect, patient harm; • Hospital compliance with CMS Hospital Conditions of Participation (CoP); and • Medicare Beneficiary Billing complaints related to rights and limitations provided by 42CFR§489. 4. Any complaint that the patient, or their representative, requests be handled as a formal grievance. 5. Any complaint where a written response from the hospital is requested by the patient or their representative. 6. Post-discharge complaints, made by a patient or their representative, related to clinical care or services during a stay shall be considered grievances, unless the complaint would have routinely been handled by staff generally within forty-eight (48) hours had the communication occurred during the stay or visit. In this instance, the communication will be considered a complaint.

Policy Details

1. Staff Reporting Complaints via the Hospital's Intranet Site (MyTools)
 1. Staff members are encouraged to enter non-clinical complaints directly into the Complaint Management Database on the hospital's intranet site, MyTools.
 2. The Complaint Management Database provides a mechanism for tracking and reporting complaint data, as well as coordinating timely follow-up.
 3. All verbal or written complaints regarding quality of care issues, abuse, neglect or patient harm shall be entered into the Patient Safety Reporting System for appropriate investigation and follow-up.
2. Patients or Visitors Reporting Complaints via Telephone
 1. Complaints about care delivered at University Hospital, Ross Hospital, Dodd Rehabilitation and Brain and Spinal Hospital, ~~or Ambulatory or the Specialty Primary Care Network~~ may be directed to the Patient Experience Department at 1-614-293-8944.
 2. Complaints about care delivered at The James may be directed to James Patient Experience at 1-614- 293-8609.
 3. Complaints about care delivered at East Hospital and Outpatient Care East may be directed to East Patient Experience at 1-614- 257-2310.
 4. Complaints about care delivered at Harding Hospital may be directed to Harding Patient Experience at 1-614-688-8941.
 5. After regular business hours, complaints may be escalated to the Hospital Administrative Manager or Nursing Supervisor for each location.
3. Procedures for Complaints
 1. All clinical care complaints handled within ~~forty-eight (48) hours~~ should be referred to the attending physician or manager for appropriate follow-up and entered in the Complaint Management Database.
 2. All non-clinical complaints should be referred to the appropriate department manager for follow-up.
 3. Patient Experience will forward all issues regarding property loss to the Property Loss Committee and enter the issue into the Complaint Management Database.
 4. Privacy and HIPAA complaints will be forwarded to the HIPAA Privacy Officer.
 5. When complaints cannot be immediately resolved by the staff member to whom they were reported, the complaint should be reported to the supervisor or manager for resolution and entered into the Complaint Management Database.
 6. Patient Experience staff will act as a liaison for the patient by representing their interests and facilitating communication with appropriate individuals within the Medical Center.
 7. Any complaints under the protected classes (race, color, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, gender, sexual orientation, pregnancy, or veteran status) will be sent over to the Ohio State University Civil Rights Compliance Office of Institutional Equity (OIE) for further collaborative review in accordance with the university Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies.

CRCOOIE will serve as the primary contact for any further investigation outside of the OSUWMC/The James complaint process.

4. Procedures for Grievances
 1. When notified, Patient Experience or the appropriate manager will respond and investigate grievances regarding patients who are currently located within the hospital setting.
 2. Situations that endanger (e.g. neglect or abuse) the patient should be addressed immediately by the appropriate staff member.
 3. When appropriate, Risk Management may initiate a review of a grievance.
 4. Patient Experience will serve as the primary liaison to the patient, and may consult Risk Management as needed.
 5. If the grievance is from a written source, or reported after the patient has left the facility, Patient Experience will initiate contact with the complainant.
 6. Clinical Care Grievances
 - a. Clinical care grievances should be entered in the Patient Safety Reporting System, in accordance with the Patient Safety & Event Reporting 04-05.
 - b. Following initial contact with the complainant, Patient Experience will address the grievance between the patient, or their representative, and the appropriate hospital representatives based on the nature of the grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 7. Non-Clinical Care Grievances
 - a. Non-clinical grievances should be entered into the Complaint Management Database.
 - b. Following initial contact with the complainant, Patient Experience will facilitate communication and dialogue between the patient, or their representative, and the appropriate hospital representatives based on the nature of the non-clinical care grievance (e.g. attending physician, nurse manager, clinic manager) to assure that the patient's concerns have been addressed.
 8. Typically, a grievance will be considered resolved when the patient is satisfied with the actions taken on their behalf.
 - a. However, there may be situations where the Hospital has taken appropriate and reasonable actions on the patient's behalf in order to resolve the patient's grievance and the patient or the patient's representative remains unsatisfied with the Hospital's actions. In these situations, the Hospital may consider the grievance to be closed.
 - b. Patient Experience must maintain documentation of its efforts and demonstrate compliance with this policy.
 9. A written response to all grievances shall be submitted to the patient, or their representative, by the Patient Experience representative or other appropriate individual within seven (7) business days regarding the disposition of the grievance.
 - a. Included in the written response will be:
 - i. The name of the hospital;
 - ii. The steps taken on behalf of the patient to investigate and resolve the grievance;
 - iii. The results of the grievance process; and
 - iv. The date of completion.
 - b. All grievance response letters will be mailed to the patient's or patient's representative's home address unless otherwise indicated.
 - c. If the grievance is received via email, the response may be sent via email.
 10. There may be complications or circumstances, which will not allow every grievance to be resolved during the seven (7) day timeframe.
 - a. If a response will take longer than seven (7) business days, the patient should be contacted by Patient Experience and advised that the hospital is still working to resolve the grievance.
 - b. The patient or the patient's representative should be contacted a minimum of every fourteen (14) business days by Patient Experience until the grievance is responded to in writing.
 - c. If the grievance is not resolved within 30 days, it must be reviewed by the OSU Wexner Medical Center Grievance Committee or The James Grievance Committee.
 11. A copy of the written response shall be retained by Patient Experience.
 12. Any grievances under the protected classes (age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, FACE, COLOR, national origin, age, disability or sex (including gender identity, pregnancy or related conditions, sexual orientation, sex stereotypes, or sex characteristics, including intersex traits) gender, sexual-orientation, pregnancy, or veteran status) will be sent over to the Office of Institutional Equity Ohio State University Civil Rights Compliance Office for further collaborative review in accordance with the university

Affirmative Action and Equal Employment Opportunity & Non-Discrimination, Harassment and Sexual Misconduct policies. ~~OSUWMC~~ will serve as the primary contact for any further investigation outside of the OSUWMC/The James grievance process.

5. Reporting Complaints via Patient Satisfaction Surveys

1. Information obtained from patient satisfaction surveys will not be considered a grievance, except:
 - a. If an identified patient writes or attaches a written complaint on the survey and requests resolution (i.e. requests an act or response), then the complaint shall be considered a grievance.
 - b. If an identified patient writes or attaches a written complaint on the survey and does not request resolution, then the hospital shall treat this as a grievance if the hospital would usually treat such a complaint a grievance.
2. Patient Experience will work collaboratively with the patient, or their representative, and the appropriate business unit to resolve the grievance when resolution has been requested by the patient.

6. Grievance Committees

1. The Ohio State University Wexner Medical Center Board has delegated oversight of the grievance management process to the Grievance Committees of the OSU Wexner Medical Center and the James Cancer Hospital to review and resolve the grievances of the hospital where the patient is receiving care.
2. The OSU Wexner Medical Center Grievance Committee is comprised of the Wexner Medical Center Chief Quality Officer, Chief Clinical Officer and the hospital Chief Executive Officer or their respective designees to review and resolve the grievances the hospital receives.
3. The James Grievance Committee is comprised of the James Executive Director of Patient Services, James Chief Medical Officer, Chief Nursing Officer, Director of James Quality and Patient Safety, Director of Patient Experience, or their respective designees to review and resolve grievances the hospital receives.
4. The OSU Wexner Medical Center and The James Hospital Grievance Committees functions to:
 - a. Facilitate grievance resolution when necessary;
 - b. Review grievances quarterly to evaluate effectiveness of the resolution process;
 - c. Complete an OSU Wexner Medical Center and James Cancer Hospital annual summary report for presentation to the Ohio State University Wexner Medical Center Board;
 - d. Submit patterns and trends to the Quality and Patient Safety Department for possible incorporation into a hospital performance improvement plan; and
 - e. Recommend operational modifications to senior hospital leadership in the event an immediate correction is necessary as a result of a patient grievance.
7. Complaints and grievances entered in the OSUWMC/The James Patient Advocacy Reporting System (PARS) may be analyzed for patterns related to professionals' behavior and performance. Refer to the Patient Advocacy Reporting System policy.

Resources

Related Policies

Affirmative Action and Equal Employment Opportunity
Non-Discrimination, Harassment, and Sexual Misconduct
Patient Advocacy Reporting System
Patient Rights and Responsibilities 03-23
Patient Safety & Event Reporting 04-05

Related References

CFR §482.13 (a)(2)

Staff Reporting Resources on MyToolsOneSource

Complaint Management Database Patient
Safety Reporting System

Patient Reporting Resources

Patients may choose to go directly to one of the reporting agencies listed below:

The Ohio Department of Health (ODH)

<http://www.odh.ohio.gov/contactus.aspx>

Complaints – Healthcare Facilities and Nursing Homes 246 North High Street

Columbus, Ohio 43215

Toll Free: 1-800-342-0553

E-Mail: HCComplaints@odh.ohio.gov

The Ohio Department of Health

Complaints – Health Care Facility Complaint Hotline Toll

Free: 1-800-669-3534

KePRO Inc.

<http://www.ohiokepro.com/aboutus/contacts.aspx> Ohio

KePRO Rock Run Center, Suite 100

5700 Lombardo Center

Seven Hills, Ohio 44131 Phone: 1-216-447-9604 E-

Mail: webmaster@ohiokepro.com

The Joint Commission

<http://www.jointcommission.org> Office

of Quality Monitoring

1 Renaissance Boulevard Oakbrook

Terrace, Illinois 60181

Office of Quality Monitoring Toll Free: 1-800-444-6610

To File a Complaint: <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/> <http://www.jointcommission.org/report-a-complaint.aspx>

U.S. Department of Health and Human Services- Office for Civil Rights Region V- Ohio

<http://www.hhs.gov/ocr> Office

for Civil Rights

233 N. Michigan Avenue, Suite 240

Chicago, Illinois 60601

Phone: (800) 368-1019/312-886-2359

To File a Complaint: <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

Ohio Department of Mental Health & Addiction Services

<http://mha.ohio.gov/>

Ohio Department of Mental Health 30 E. Broad Street, 36th Floor Columbus,

Ohio 43215

Phone: 1-614-466-2596

E-Mail: questions@mha.ohio.gov [Contact Us](mailto:Contact_Us)

For Information about Client Rights and Resources: <http://mha.ohio.gov/Default.aspx?tabid=157>

Disability Rights Ohio

<http://www.disabilityrightsohio.org> 50–

W. Broad Street, Suite 1400 200 Civic

Center Drive, Suite 300

Columbus, Ohio 43215-5923

Phone: 1-614-466-7264

For Assistance: <http://www.disabilityrightsohio.org/get-help-now> Get Help Now

Patient Experience

For further questions regarding the hospital's policy on Patient Complaint Management, please contact either:

James Cancer Hospital Patient Experience

Phone: 1-614-293-8609 Toll Free: 1-866-993-8609
 E-Mail: James.PatientExperience@osumc.edu

University Hospital and Ambulatory Surgery Center Patient Experience Phone:
 1-614-293-8944

East Hospital Patient Experience Phone:
 1-614-257-2310

Harding Hospital Patient Experience
 Phone: 1-614-688-8941

Contacts

Office	Telephone
Patient Experience: University Hospital	614-293-8944
Patient Experience: East Hospital	614-257-2310
Patient Experience: The James	614-293-8609

History

<i>The Ohio State University Wexner Medical Center</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. UH Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> <u>24/24/2025</u> 2. 4/7/2022 3. 4/13/2022 4. <u>5/26/2022</u> <u>26/24/2025</u>	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/26/2021, <u>3/29/2022</u>	

<i>Arthur G. James Cancer Hospital and Richard J. Solove Research Institute</i>		
Approved By (List All Committees): 1. Policy Oversight Committee 2. Health System Operations Committee 3. The James Medical Staff Administrative Committee 4. Quality Professional Affairs Committee	Approval Date: 1. <u>3/29/2022</u> <u>24/24/2025</u> 5 2. 4/7/2022 3. 4/15/2022 4. <u>5/26/2022</u> <u>26/24/2025</u> 5	Issue Date: 10/14/1991 Effective Date: 5/27/2022
Review Cycle: ☐ 2 years ☒ 3 years	Prior Approval Date(s): 9/10/2014; 10/5/2017; 5/29/2019; 8/21/2021, <u>3/29/2022</u>	

APPENDIX XXXII



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Hospitals Administration
Accreditation

168 Doan Hall
410 W 10th Ave
Columbus, OH 43210
617-293-9700 Phone
wexnermedical.osu.edu

CONTRACTED SERVICES EVALUATION **COMPLETED: CALENDAR YEAR 2024**

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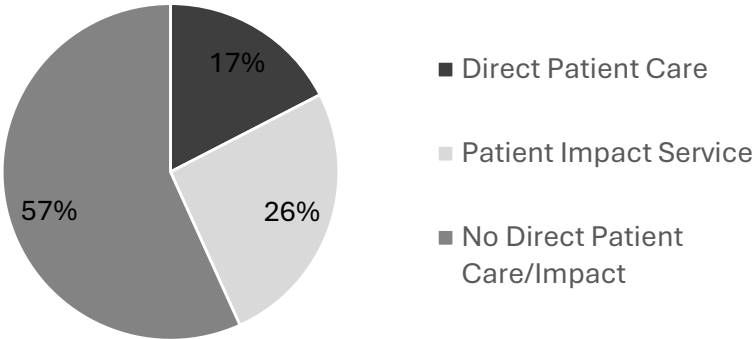
OVERVIEW

Annually, The Ohio State University Wexner Medical Center (OSUWMC) and Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (The James) complete an evaluation for contracted services. Evaluations are completed for compliance with The Joint Commission's (TJC) Leadership standard – LD.04.03.09 – which states 'Care, treatment, and services provided through contractual agreement are provided safely and effectively' and the Centers for Medicaid and Medicare Services' (CMS) Condition of Participation - 482.12(e) – which states 'The governing body must be responsible for services furnished in the hospital whether or not they are furnished under contracts. The governing body must ensure that a contractor of services (including one for shared services and joint ventures) furnishes services that permit the hospital to comply with all applicable conditions of participation and standards for the contracted services.

Evaluations are completed for contracts that fall into direct patient care or patient impact service. Direct Patient Care Service is defined as 'Health care that involves the examination of patients, treatment of patients, and/or preparation for diagnostic tests and procedures, including services used in the clinical management/diagnosis of the patient'. Patient Impact Service is defined as 'Suppliers of services that effect a patient's environment, typically in the hospital room'. Evaluations are not completed for contracts falling into the supply (suppliers of goods) or no direct patient care impact (suppliers of business services that the hospital and/or clinic use to help manage a specific part of their business but do not have a direct impact on the patient) as these are monitored through normal supply chain processes per policy: [Contract Evaluation Policy](#).

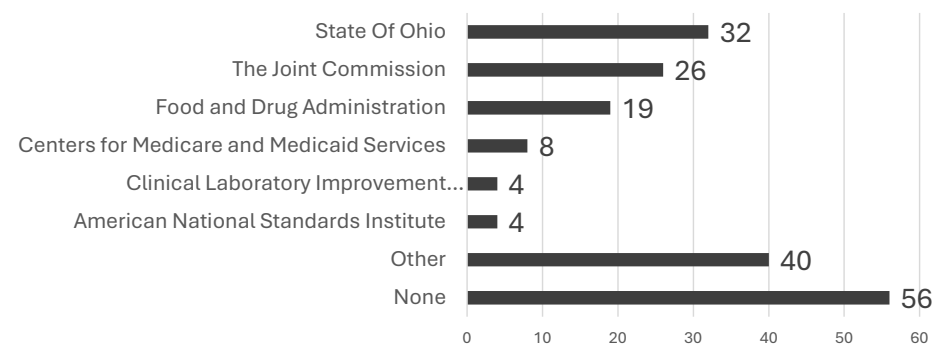
Operational owners were identified and asked to complete a Qualtrics survey for each contract under their oversight. Questions on the survey included overall satisfaction, accrediting bodies, metrics being collected, and if follow up was needed by Supply Chain or Legal Services.

CONTRACTS BY CATEGORY



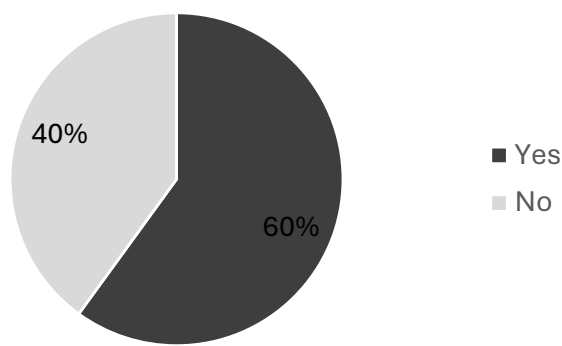
For calendar year 2024, completed evaluations totaled 155. The overall evaluation completion rate (56%) is a 22% increase from 2023 (46%). The remaining incomplete evaluations have been escalated to leadership for follow-up.

REGULATION OF CONTRACTED SERVICES



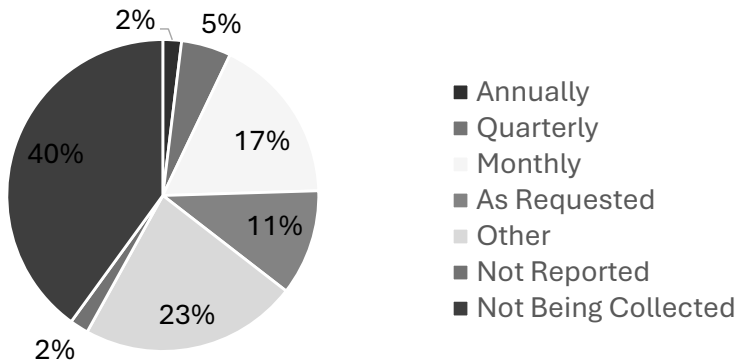
Other regulatory bodies included the Art Therapy Credentials Board, Board of Embalmers and Funeral Directors, Ohio Board of Pharmacy, and local health departments.

COMPLIANCE ACTIVITIES



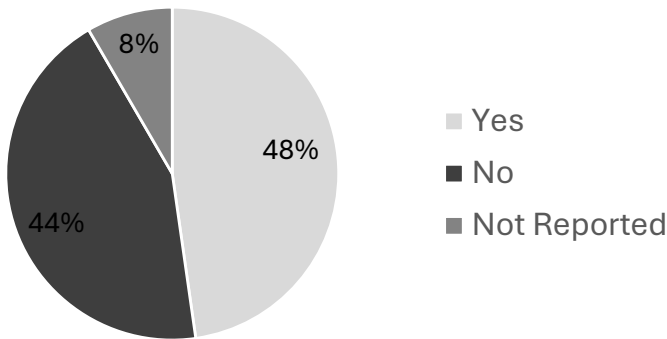
Per the Contract Evaluation policy, operational owners of direct patient care services contracts shall provide and attest to maintain position descriptions, assure licensure, registration, or certification requirements, provide orientation, provide competency assessments, provide and certify on-going education, conduct performance appraisals, and conduct competency evaluations. A secondary review is underway for questions in this section with a “No” response to determine if that answer is appropriate based on the type of service provided (e.g. Otis Elevator).

DATA COLLECTION



Due to the number and variety of contracts, data collection methods and time periods vary across the enterprise. Operational owners are tasked with determining the best method and time period to optimize evaluation of each contract. As shown in the above chart, data collection is largely monthly or another method determined by the operational owner and vendor. Follow up with contract owners will include emphasis on The Joint Commission LD. 04.03.09, element of performance 6 requirement that “Leaders monitor contracted services by evaluating these services in relation to the hospital’s expectations.”

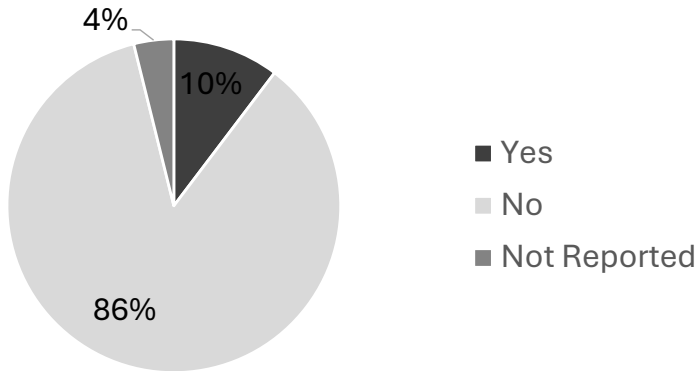
IMPROVEMENTS MADE WITHIN THE PAST YEAR



Overall, 44% of respondents reported improvements within the past year, which is an increase of 6 percentage points from 2023. Improvements included online training modules, forced feedback

technology, increased staffing, improved traffic lane devices, reduced computer crashes, increased coverage rates, and inclusion into a work order database.

FOLLOW UP NEEDED



The most requested follow-up was assistance with receiving quality data and improving performance of the vendor. A list of the departments that requested follow-up is listed in Appendix A.

BETWEEN PROVIDER NUMBERS

OSUWMC purchases and evaluated twenty (20) services from The James. Those services include but are not limited to Chaplaincy, High Level Disinfection and Ambulatory Sterilization, and Laboratory Services.

The James purchases and evaluated fifteen (15) services from OSUWMC. Those services include but are not limited to Clinical Engineering, Credentialing, and Medical Information Management.

Follow-up was not requested for any of the services provided between provider numbers.

CONCLUSION

Compliance activities and data collection is taking place for most contracts with oversight from a regulatory body. Efforts continue to standardize the reporting cadence and type of data being collected.

Almost half of the respondents reported improvements within the past year which represented a significant increase from last year's evaluation.

Follow up has been requested for a small portion of the contracts evaluated.

APPENDIX A – DEPARTMENTS REQUESTING FOLLOW UP

Department	Vendor/Contractor	Reason for Request
Environmental Services	Vernon, Inc	Would like quality data from the vendor
Environmental Services	Stericycle, Inc	Would like quality data from the vendor
Ross Admin	Johnson & Johnson Healthcare Systems	Not specified—have reached out for further clarification
Central Processing Area	ARUP	Not specified—have reached out for further clarification
Central Processing Area	GeneDX, Inc	Not specified—have reached out for further clarification
Central Processing Area	Fred Hutch Cancer Center	Not specified—have reached out for further clarification
Central Processing Area	Eurofins Viracor	Not specified—have reached out for further clarification
Central Processing Area	Emory University	Not specified—have reached out for further clarification
Facilities Operation & Development	Geiger Brothers	Multiple equipment issues due to poor maintenance
Women & Infants	Nationwide Children's Hospital	Need to renegotiate contract to a lower price
Comprehensive Transplant Center	Acelis Connected Health Supplies	Inaccuracies in the documentation of the VAD equipment that has been disseminated to patients. Turnaround time for improvements has been poor and unclear workflow process despite regular requests from OSU. Which has not been clarified despite multiple requests.
Respiratory Therapy	Linde Gas North America	Contract clarification needed: the contract is for Linde, but OSU liquid gas is Messer. Unaware of their regulatory responsibilities and any QA they do.
Laboratory Compliance	Quest Diagnostics Care360 Data Exchange Technology Software	Not sure what service this contract is providing and if still needed (over 10 years old)
Space and Facilities Planning MC	Rezod, LLC	Not specified—have reached out for further clarification
Patient Experience	Soloinstight	Product has not lived up to what was described at the time of purchase despite improvements. “World class visitor management system” has not been realized.

APPENDIX B – VENDOR IMPROVEMENTS FROM 2023 EVALUATIONS

Vendor/Contractor	Improvement(s) made.
3M / Solventum / KCI	Better tracking of equipment and savings for the Medical Center
Agiliti Health, Inc.	Workflow changes with pick up of discontinued rental beds from the hallways. Less beds being left in the hallways and brought to storage. Bed rental workflow has been improved with less beds being left in the hallways. They are helping to bring beds in the storage location.
Aidin	Enhanced reporting and access
ASIST Translations Inc.	We have received no complaints about interpreters from this agency so far, this fiscal year which is an improvement over last year and a demonstration that they take our feedback into account about their interpreters and performance.
Aya	Established governance model, contractual metrics and reporting cadence during FY25 based on work in FY24.
Barclay Water Management, Inc	Addition of point of use filter sales to service
Cap City Hotels	The hotel team implemented a new strategy to support the ease of ordering meals for the guests. The increase in communication has helped guests' awareness and enjoyment of the meals.
Carl Zeiss Meditec, Inc	Vendor provided a server upgrade. Lead to increased speed of the product.
Catholic Diocese of Columbus	We've been working on the priest documentation practices and they have shown tremendous improvement.
CBORD (Platform for all IT interfaces and data for Nutrition Services)	As an enabling project for the new hospital, we are upgrading our systems to cloud based and upgraded capabilities. All retail cash registers and kiosks upgraded in February 2025 and new patient modules will upgrade in fall of '25.
Chapter	Increased Medicare in network enrollment
Chem Aqua, Inc	Created onsite operator services as part of service package
Cisco	We are migrating to new version that will allow some additional automation in our phone space
Collective Medical Technologies, Inc.	We are still in the 6-month pilot phase and are working the vendor on enhancements to the dashboard data (e.g., view data by month of the year, ensure we can view all patients, ensure metrics are updating for the patient subset).
College of American Pathologists	Yearly updates to templates as needed.
Commercial Parts & Services of Ohio, Inc	Increased staffing and participate in asset spec collection procedures for work order system
Connexall USA, Inc	Significant upgrade and ability to work with Rauland Enterprise nurse call
Consensus Medical Systems, Inc	Application Upgrade
Day Funeral Service	Day Funeral Service and OSUWMC Morgue/Autopsy Services have agreed to improve communication regarding infant disposition and catalog any infant remains being placed in our crypt at Silent Home Cemetery. We agreed on parameters for when infant remains will be encrypted. We also clarified the process of opening and closing the crypt for mothers claiming the remains after being encrypted.
Deaf Services Center	DSC has significantly improved on rate of coverage, in the previous year they were able to cover only about 50% of our requests, this year they are now at

	75-80%. this is specifically crucial when it comes to CART services which we do not have a secondary service for.
Donald Asa Mason	He has effectively aligned himself with the responsibilities of the contract chaplain and has taken on additional shifts, which support the team's needs.
EC2 Software Solutions, LLC	Upgrade to version of software they provide (NMIS)
EDM Xpress Cleaning Solutions, LLC	Increased staffing
Epic	Numerous upgrades and updates
FB Olentangy Suite, LLC	Team has employed additional security and is continuing to explore opportunities to improve guest safety and satisfaction.
Fresco Food Group, LLC	Menu changes for guest satisfaction
GE Healthcare IITS USA Corp	Application Upgrade
Indus Riverside Hotel, LLC	The vendor has brought in additional refrigeration units, and is willing to update their in-house dining menu to best accommodate our mutual guests. Hotel team purchased additional refrigeration units to support guests that have outstanding hardships and have been willing to update their menu for the guests of the program. They continue to be an asset to the patient population.
Intuitive Surgical INC	Intuitive released their next generation robot, DV5 system. This system has forced feedback technology to give surgeon haptics while operating, better imaging, better ergonomics, more integrated technology in the vision tower, and additional case level data on instrument usage.
J&J Coatings	Assisted in difficult repairs, improved service. Saved us hundreds of thousands of dollars in restoring doors instead of replacing
Jennifer Gebhart	Initiated and facilitated new program Everyday Practices for Resiliency Series
Johnson Controls, Inc	Johnson Controls has provided access to one of their private documentation platforms to obtain random test reports and documentation not required by TJC but needed for setting up testing that is required. Added more team members to my monthly meeting group to provided quick answers and more enhanced communication. Changed some formats of documentation processes at my direct request to ensure easier recognition/review by TJC.
Lane Champa	Helped expand musician performances to James Outpatient Care
Language Line Solutions	We have expanded our usage and utilization of language line services to include translation services as well as on site interpreting services and they have been very responsive to any negative encounter feedback we have sent.
Laurel Health Care Company (direct bill agreement)	The Laurel Health Care Company has made a number of investments in enhancing the care provided at their SNFs. In May 2025, the Laurels invested in hiring their own phlebotomists and switching lab services to Ohio State University. This has allowed for more reliable and quicker lab results (same day) for the SNF. The Laurels has also introduced new remote monitoring technology at the bedside to identify changes in patient vital signs.
Leica Microsystems	Bug fixes

Amergis	We've seen excellent progress in partnership with our coding vendor, focusing on improvements in quality, risk adjustment capture, and overall alignment with our organizational goals, particularly around Vizient and US News & World Report rankings. <u>Quality Improvements and Accuracy Gains</u> The vendor has demonstrated steady improvement in coding accuracy, compliance, and alignment with documentation standards. Through targeted audits, coder feedback loops, and educational efforts, there has been a consistent improvement in coding accuracy and query compliance. The vendor has shown a strong commitment to ensuring queries are clinically supported, guideline-compliant, and effectively address documentation gaps. These efforts have contributed to a reduction in denials related to DRG downgrades and an overall improvement in coding integrity. <u>Risk Adjustment Capture Progress</u> The vendor has actively supported our initiatives to enhance risk adjustment capture by ensuring accurate documentation and coding of high-impact chronic conditions and comorbidities, including sepsis, respiratory failure, chronic kidney disease (CKD), malnutrition, and heart failure. They've provided strong support in aligning documentation practices with risk-adjusted models, including Vizient and Elixhauser frameworks, and have contributed to better risk-adjusted mortality and reliability scores. <u>Impact on Organizational Goals</u> These combined efforts have positively impacted our quality metrics and supported improvements in our Vizient Quality Scores and US News rankings. The vendor has shown responsiveness in addressing feedback, identifying opportunities for improvement, and aligning their work with our strategic priorities. <u>Next Steps</u> While the progress has been positive, we will continue to work with the vendor to refine documentation practices further, address emerging coding challenges, and maintain momentum in reducing query volumes and denials. We'll also focus on expanding targeted education on high-impact DRGs. In summary, the vendor has been a valuable partner in supporting our goals for documentation and coding integrity. Their work has contributed to measurable improvements in our quality outcomes, and I look forward to building on this foundation in the months ahead.
MCG	Annual upgrades
Medline	Medline has partnered with OSUWMC to make improvements to their kits which includes size/type of dressing and a change to the type of gloves in the standard kit.
MGC Diagnostic	Improved and installed Ascent software. Provided clinical education for staff and have been available for additional improvements and clinical questions
Michael Lester	Helped expand musician performances to James Outpatient Care
Midwest Elevators	Improved communication and perform PMs on time.
Nexxspan	This vendor was brought onboard for the Tower project and was able to provide the products needed for a large and complicated project.

Ohio Medical Transportation, Inc.	Labor Efficiency and improved revenue cycle collections.
ONCO, Inc	EHR Integration
One Lamda, Inc.	Timely response for any queries.
Pharmacy	Qlik Dashboard
Plunkett's Pest Control	Send service reports at each call
Pro-Flow Plumbing and Drain Cleaning	Inclusion into the work order database for metric recording
Provation	Documentation of advanced procedures; documentation of research procedures; Maintenance of ICD-10 & CPT codes relevant to CMS
Riverview Hotel LLC	Has redefined hotel shuttle operations to increase availability.
Scioto Services	Summary of Our Wins (2023 vs. 2024): Safety Checkpoint Completion increased by 108% (double the target), Near-Miss Reporting increased by 92%, TRIR improved by 21%
Scottcare	Scottcare was purchased by 91 Life and remote adjudication has improved.
SDG Partners, LLC	New flavors for guest satisfaction
Soloinsight	Reduced computer crashes, improved search capability, improved visitor badge picture quality, and decreased CPU spikes
STRYKER SALES CORPORATION	The vendor has adjusted the testing schedule and communicates any issues identified to their research lab. They provide recommendations for repairs, replacements, and upcoming changes as needed.
Teladoc (formerly InTouch)	New devices for use, upgrades to current cart models.
Teleflex	Provide online training modules now for competencies in addition to in person training.
Thai Palace, Inc	Menu upgrades
Towne Park Holdings	Improved lane traffic devices, Podiums at location and key rooms in multiple garages. Staffing increases, along with management level increases.
Us Together	Increased the amount of coverage they can provide. Even though they have the same percentage overall, since our requests have increased by 15%, they have been able to provide more coverage for appointments then they have in previous years in overall numbers. They have also added new languages such as Haitian creole to keep up with our changing patient population and needs.
Veris Health, Inc.	Resolved software bug in thermometer during pilot phase, also improved patient information input fields on web-based portal
Vernon Inc	We have reinvested in the company getting some new vans and we purchased new washers and new buggies. The greatest improvement has been our infrastructure, like the performance installer KPI's mentioned above. We are in the process of transitioning to a new HRIS internal system with onboarding, training and performance tracking programs
Versiti Blood Center	Request to review the standing order and make adjustment to the amount of products received weekly was made. Versiti presented historical ad hoc orders and pitch an increase for each product type for review. Adjustments made 9/1/24.
VIDATAK, LLC	Adding Language Line availability to allow translation services through the app
VIZ AI, Inc	Added modalities

APPENDIX XXXIII



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Hospitals Administration
Accreditation

168 Doan Hall
410 W 10th Ave
Columbus, OH 43210
617-293-9700 Phone
wexnermedical.osu.edu

CONTRACTED SERVICES EVALUATION **COMPLETED: CALENDAR YEAR 2024**

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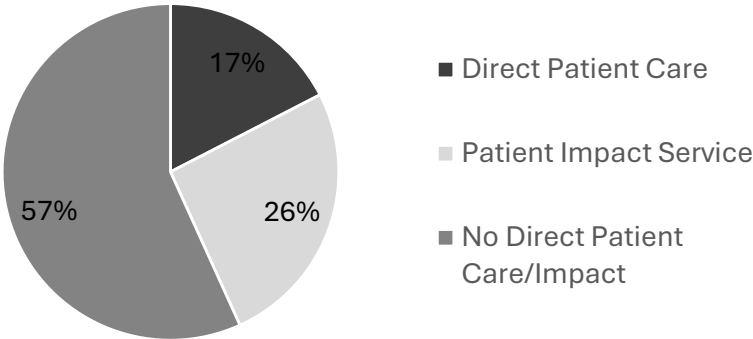
OVERVIEW

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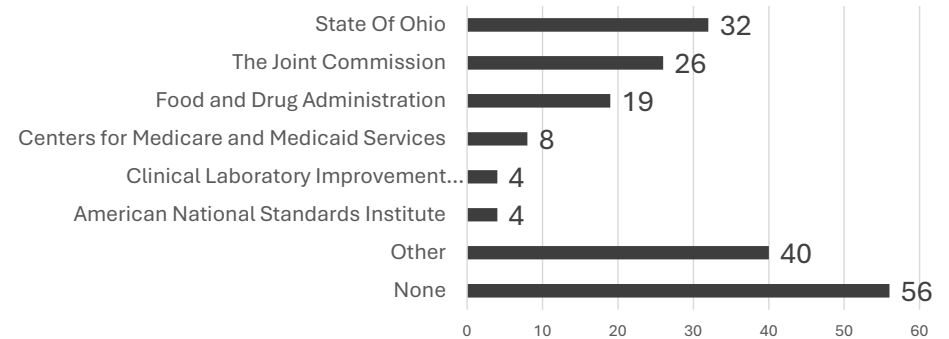
Operational owners were identified and asked to complete a Qualtrics survey for each contract under their oversight. Questions on the survey included overall satisfaction, accrediting bodies, metrics being collected, and if follow up was needed by Supply Chain or Legal Services.

CONTRACTS BY CATEGORY



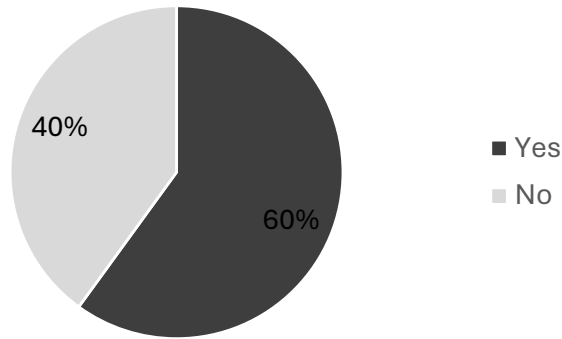
For calendar year 2024, completed evaluations totaled 155. The overall evaluation completion rate (56%) is a 22% increase from 2023 (46%). The remaining incomplete evaluations have been escalated to leadership for follow-up.

REGULATION OF CONTRACTED SERVICES



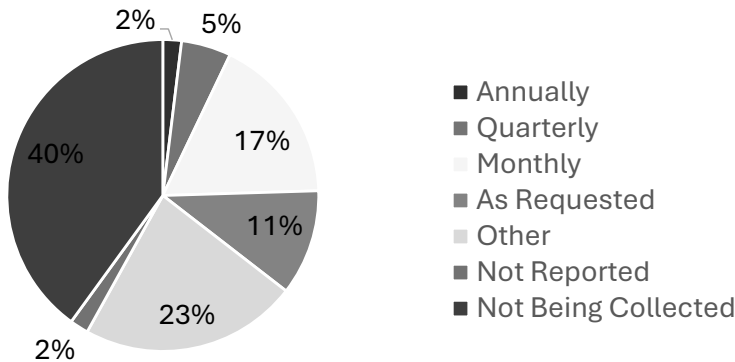
Other regulatory bodies included the Art Therapy Credentials Board, Board of Embalmers and Funeral Directors, Ohio Board of Pharmacy, and local health departments.

COMPLIANCE ACTIVITIES



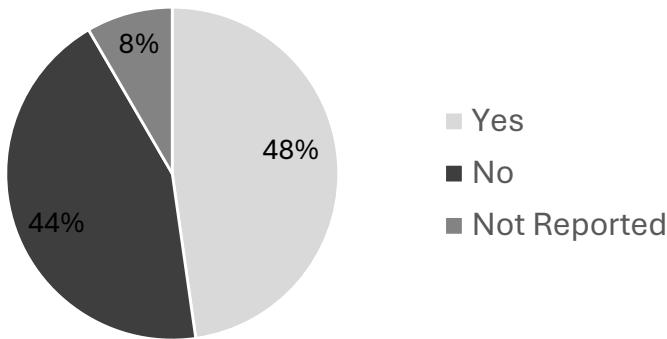
Per the Contract Evaluation policy, operational owners of direct patient care services contracts shall provide and attest to maintain position descriptions, assure licensure, registration, or certification requirements, provide orientation, provide competency assessments, provide and certify on-going education, conduct performance appraisals, and conduct competency evaluations. A secondary review is underway for questions in this section with a “No” response to determine if that answer is appropriate based on the type of service provided (e.g. Otis Elevator).

DATA COLLECTION



Due to the number and variety of contracts, data collection methods and time periods vary across the enterprise. Operational owners are tasked with determining the best method and time period to optimize evaluation of each contract. As shown in the above chart, data collection is largely monthly or another method determined by the operational owner and vendor. Follow up with contract owners will include emphasis on The Joint Commission LD. 04.03.09, element of performance 6 requirement that “Leaders monitor contracted services by evaluating these services in relation to the hospital’s expectations.”

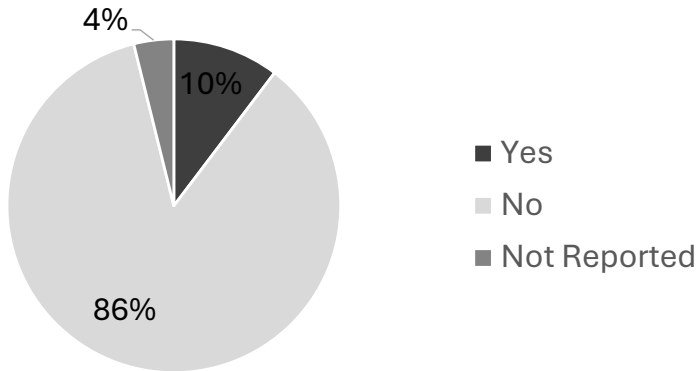
IMPROVEMENTS MADE WITHIN THE PAST YEAR



Overall, 44% of respondents reported improvements within the past year, which is an increase of 6 percentage points from 2023. Improvements included online training modules, forced feedback

technology, increased staffing, improved traffic lane devices, reduced computer crashes, increased coverage rates, and inclusion into a work order database.

FOLLOW UP NEEDED



The most requested follow-up was assistance with receiving quality data and improving performance of the vendor. A list of the departments that requested follow-up is listed in Appendix A.

BETWEEN PROVIDER NUMBERS

OSUWMC purchases and evaluated twenty (20) services from The James. Those services include but are not limited to Chaplaincy, High Level Disinfection and Ambulatory Sterilization, and Laboratory Services.

The James purchases and evaluated fifteen (15) services from OSUWMC. Those services include but are not limited to Clinical Engineering, Credentialing, and Medical Information Management.

Follow-up was not requested for any of the services provided between provider numbers.

CONCLUSION

Compliance activities and data collection is taking place for most contracts with oversight from a regulatory body. Efforts continue to standardize the reporting cadence and type of data being collected.

Almost half of the respondents reported improvements within the past year which represented a significant increase from last year's evaluation.

Follow up has been requested for a small portion of the contracts evaluated.

APPENDIX A – DEPARTMENTS REQUESTING FOLLOW UP

Department	Vendor/Contractor	Reason for Request
Environmental Services	Vernon, Inc	Would like quality data from the vendor
Environmental Services	Stericycle, Inc	Would like quality data from the vendor
Ross Admin	Johnson & Johnson Healthcare Systems	Not specified—have reached out for further clarification
Central Processing Area	ARUP	Not specified—have reached out for further clarification
Central Processing Area	GeneDX, Inc	Not specified—have reached out for further clarification
Central Processing Area	Fred Hutch Cancer Center	Not specified—have reached out for further clarification
Central Processing Area	Eurofins Viracor	Not specified—have reached out for further clarification
Central Processing Area	Emory University	Not specified—have reached out for further clarification
Facilities Operation & Development	Geiger Brothers	Multiple equipment issues due to poor maintenance
Women & Infants	Nationwide Children's Hospital	Need to renegotiate contract to a lower price
Comprehensive Transplant Center	Acelis Connected Health Supplies	Inaccuracies in the documentation of the VAD equipment that has been disseminated to patients. Turnaround time for improvements has been poor and unclear workflow process despite regular requests from OSU. Which has not been clarified despite multiple requests.
Respiratory Therapy	Linde Gas North America	Contract clarification needed: the contract is for Linde, but OSU liquid gas is Messer. Unaware of their regulatory responsibilities and any QA they do.
Laboratory Compliance	Quest Diagnostics Care360 Data Exchange Technology Software	Not sure what service this contract is providing and if still needed (over 10 years old)
Space and Facilities Planning MC	Rezod, LLC	Not specified—have reached out for further clarification
Patient Experience	Soloinstight	Product has not lived up to what was described at the time of purchase despite improvements. “World class visitor management system” has not been realized.

APPENDIX B – VENDOR IMPROVEMENTS FROM 2023 EVALUATIONS

Vendor/Contractor	Improvement(s) made.
3M / Solventum / KCI	Better tracking of equipment and savings for the Medical Center
Agiliti Health, Inc.	Workflow changes with pick up of discontinued rental beds from the hallways. Less beds being left in the hallways and brought to storage. Bed rental workflow has been improved with less beds being left in the hallways. They are helping to bring beds in the storage location.
Aidin	Enhanced reporting and access
ASIST Translations Inc.	We have received no complaints about interpreters from this agency so far, this fiscal year which is an improvement over last year and a demonstration that they take our feedback into account about their interpreters and performance.
Aya	Established governance model, contractual metrics and reporting cadence during FY25 based on work in FY24.
Barclay Water Management, Inc	Addition of point of use filter sales to service
Cap City Hotels	The hotel team implemented a new strategy to support the ease of ordering meals for the guests. The increase in communication has helped guests' awareness and enjoyment of the meals.
Carl Zeiss Meditec, Inc	Vendor provided a server upgrade. Lead to increased speed of the product.
Catholic Diocese of Columbus	We've been working on the priest documentation practices and they have shown tremendous improvement.
CBORD (Platform for all IT interfaces and data for Nutrition Services)	As an enabling project for the new hospital, we are upgrading our systems to cloud based and upgraded capabilities. All retail cash registers and kiosks upgraded in February 2025 and new patient modules will upgrade in fall of '25.
Chapter	Increased Medicare in network enrollment
Chem Aqua, Inc	Created onsite operator services as part of service package
Cisco	We are migrating to new version that will allow some additional automation in our phone space
Collective Medical Technologies, Inc.	We are still in the 6-month pilot phase and are working the vendor on enhancements to the dashboard data (e.g., view data by month of the year, ensure we can view all patients, ensure metrics are updating for the patient subset).
College of American Pathologists	Yearly updates to templates as needed.
Commercial Parts & Services of Ohio, Inc	Increased staffing and participate in asset spec collection procedures for work order system
Connexall USA, Inc	Significant upgrade and ability to work with Rauland Enterprise nurse call
Consensus Medical Systems, Inc	Application Upgrade
Day Funeral Service	Day Funeral Service and OSUWMC Morgue/Autopsy Services have agreed to improve communication regarding infant disposition and catalog any infant remains being placed in our crypt at Silent Home Cemetery. We agreed on parameters for when infant remains will be encrypted. We also clarified the process of opening and closing the crypt for mothers claiming the remains after being encrypted.
Deaf Services Center	DSC has significantly improved on rate of coverage, in the previous year they were able to cover only about 50% of our requests, this year they are now at

	75-80%. this is specifically crucial when it comes to CART services which we do not have a secondary service for.
Donald Asa Mason	He has effectively aligned himself with the responsibilities of the contract chaplain and has taken on additional shifts, which support the team's needs.
EC2 Software Solutions, LLC	Upgrade to version of software they provide (NMIS)
EDM Xpress Cleaning Solutions, LLC	Increased staffing
Epic	Numerous upgrades and updates
FB Olentangy Suite, LLC	Team has employed additional security and is continuing to explore opportunities to improve guest safety and satisfaction.
Fresco Food Group, LLC	Menu changes for guest satisfaction
GE Healthcare IITS USA Corp	Application Upgrade
Indus Riverside Hotel, LLC	The vendor has brought in additional refrigeration units, and is willing to update their in-house dining menu to best accommodate our mutual guests. Hotel team purchased additional refrigeration units to support guests that have outstanding hardships and have been willing to update their menu for the guests of the program. They continue to be an asset to the patient population.
Intuitive Surgical INC	Intuitive released their next generation robot, DV5 system. This system has forced feedback technology to give surgeon haptics while operating, better imaging, better ergonomics, more integrated technology in the vision tower, and additional case level data on instrument usage.
J&J Coatings	Assisted in difficult repairs, improved service. Saved us hundreds of thousands of dollars in restoring doors instead of replacing
Jennifer Gebhart	Initiated and facilitated new program Everyday Practices for Resiliency Series
Johnson Controls, Inc	Johnson Controls has provided access to one of their private documentation platforms to obtain random test reports and documentation not required by TJC but needed for setting up testing that is required. Added more team members to my monthly meeting group to provided quick answers and more enhanced communication. Changed some formats of documentation processes at my direct request to ensure easier recognition/review by TJC.
Lane Champa	Helped expand musician performances to James Outpatient Care
Language Line Solutions	We have expanded our usage and utilization of language line services to include translation services as well as on site interpreting services and they have been very responsive to any negative encounter feedback we have sent.
Laurel Health Care Company (direct bill agreement)	The Laurel Health Care Company has made a number of investments in enhancing the care provided at their SNFs. In May 2025, the Laurels invested in hiring their own phlebotomists and switching lab services to Ohio State University. This has allowed for more reliable and quicker lab results (same day) for the SNF. The Laurels has also introduced new remote monitoring technology at the bedside to identify changes in patient vital signs.
Leica Microsystems	Bug fixes

Amergis	We've seen excellent progress in partnership with our coding vendor, focusing on improvements in quality, risk adjustment capture, and overall alignment with our organizational goals, particularly around Vizient and US News & World Report rankings. <u>Quality Improvements and Accuracy Gains</u> The vendor has demonstrated steady improvement in coding accuracy, compliance, and alignment with documentation standards. Through targeted audits, coder feedback loops, and educational efforts, there has been a consistent improvement in coding accuracy and query compliance. The vendor has shown a strong commitment to ensuring queries are clinically supported, guideline-compliant, and effectively address documentation gaps. These efforts have contributed to a reduction in denials related to DRG downgrades and an overall improvement in coding integrity. <u>Risk Adjustment Capture Progress</u> The vendor has actively supported our initiatives to enhance risk adjustment capture by ensuring accurate documentation and coding of high-impact chronic conditions and comorbidities, including sepsis, respiratory failure, chronic kidney disease (CKD), malnutrition, and heart failure. They've provided strong support in aligning documentation practices with risk-adjusted models, including Vizient and Elixhauser frameworks, and have contributed to better risk-adjusted mortality and reliability scores. <u>Impact on Organizational Goals</u> These combined efforts have positively impacted our quality metrics and supported improvements in our Vizient Quality Scores and US News rankings. The vendor has shown responsiveness in addressing feedback, identifying opportunities for improvement, and aligning their work with our strategic priorities. <u>Next Steps</u> While the progress has been positive, we will continue to work with the vendor to refine documentation practices further, address emerging coding challenges, and maintain momentum in reducing query volumes and denials. We'll also focus on expanding targeted education on high-impact DRGs. In summary, the vendor has been a valuable partner in supporting our goals for documentation and coding integrity. Their work has contributed to measurable improvements in our quality outcomes, and I look forward to building on this foundation in the months ahead.
MCG	Annual upgrades
Medline	Medline has partnered with OSUWMC to make improvements to their kits which includes size/type of dressing and a change to the type of gloves in the standard kit.
MGC Diagnostic	Improved and installed Ascent software. Provided clinical education for staff and have been available for additional improvements and clinical questions
Michael Lester	Helped expand musician performances to James Outpatient Care
Midwest Elevators	Improved communication and perform PMs on time.
Nexxspan	This vendor was brought onboard for the Tower project and was able to provide the products needed for a large and complicated project.

Ohio Medical Transportation, Inc.	Labor Efficiency and improved revenue cycle collections.
ONCO, Inc	EHR Integration
One Lamda, Inc.	Timely response for any queries.
Pharmacy	Qlik Dashboard
Plunkett's Pest Control	Send service reports at each call
Pro-Flow Plumbing and Drain Cleaning	Inclusion into the work order database for metric recording
Provation	Documentation of advanced procedures; documentation of research procedures; Maintenance of ICD-10 & CPT codes relevant to CMS
Riverview Hotel LLC	Has redefined hotel shuttle operations to increase availability.
Scioto Services	Summary of Our Wins (2023 vs. 2024): Safety Checkpoint Completion increased by 108% (double the target), Near-Miss Reporting increased by 92%, TRIR improved by 21%
Scottcare	Scottcare was purchased by 91 Life and remote adjudication has improved.
SDG Partners, LLC	New flavors for guest satisfaction
Soloinsight	Reduced computer crashes, improved search capability, improved visitor badge picture quality, and decreased CPU spikes
STRYKER SALES CORPORATION	The vendor has adjusted the testing schedule and communicates any issues identified to their research lab. They provide recommendations for repairs, replacements, and upcoming changes as needed.
Teladoc (formerly InTouch)	New devices for use, upgrades to current cart models.
Teleflex	Provide online training modules now for competencies in addition to in person training.
Thai Palace, Inc	Menu upgrades
Towne Park Holdings	Improved lane traffic devices, Podiums at location and key rooms in multiple garages. Staffing increases, along with management level increases.
Us Together	Increased the amount of coverage they can provide. Even though they have the same percentage overall, since our requests have increased by 15%, they have been able to provide more coverage for appointments then they have in previous years in overall numbers. They have also added new languages such as Haitian creole to keep up with our changing patient population and needs.
Veris Health, Inc.	Resolved software bug in thermometer during pilot phase, also improved patient information input fields on web-based portal
Vernon Inc	We have reinvested in the company getting some new vans and we purchased new washers and new buggies. The greatest improvement has been our infrastructure, like the performance installer KPI's mentioned above. We are in the process of transitioning to a new HRIS internal system with onboarding, training and performance tracking programs
Versiti Blood Center	Request to review the standing order and make adjustment to the amount of products received weekly was made. Versiti presented historical ad hoc orders and pitch an increase for each product type for review. Adjustments made 9/1/24.
VIDATAK, LLC	Adding Language Line availability to allow translation services through the app
VIZ AI, Inc	Added modalities

APPENDIX XXXIV



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

Hospital Administration

Accreditation

168 Doan Hall

410 W 10th Ave

Columbus, OH 43210

617-293-9700 Phone

wexnermedical.osu.edu

**CONTRACTED SERVICES EVALUATION
NEW ALBANY AND DUBLIN SURGERY CENTERS
COMPLETED: CALENDAR YEAR 2023**

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CONTRACT OVERVIEW

For calendar year 2024, there were 13 services contracted between each surgery center and (DASC and NAASC) and OSUWMC.

Contracted Services
Management
Laboratory
Radiologic
Central Sterile Processing
Medical Information Management
Nutrition
Registration and Scheduling
Clinical Engineering
Legal
Pharmacy
Epidemiology
Patient Experience
Environmental Management

An evaluation of each services was completed for both DASC and NAASC. All services were reported as improving over the past year and follow up from Supply Chain or Legal services was not requested.

CONCLUSION

Overall, operational owners are monitoring the contracts within their scope.

An area of improvement would be to have performance/efficiency/quality data submitted on a more defined basis rather than as needed.

Efforts will continue to monitor, streamline, and maximize contracts across the enterprise.



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