

## INVESTIGATIVE LEAVE MEMO

To: \_\_\_\_\_ myWSU ID: \_\_\_\_\_  
Position: \_\_\_\_\_ Date: \_\_\_\_\_  
From: \_\_\_\_\_ Subject: Investigative Leave

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In order to allow an internal investigation of the issue(s) discussed with you today and determine appropriate action to be taken, you are being placed on Investigative Leave. This leave is effective immediately and continues until you are contacted to return for a follow-up meeting.

During Investigative Leave, you are expected to comply with the following: **<delete any that do not apply or add others as appropriate>**

- You may have access to collect your personal belongings, in coordination with Leadership.
- You will be restricted from accessing secured University technology and accessing secured areas while on campus.
- You will not perform work on behalf of the University.
- You will surrender all University property, including, but not limited to, WSU ID and keys.
- You are able to access the University and participate in activities that are open to the public.
- Consult with an Employee Assistance Program (“EAP”) consultant, and sign a release for the consultant to provide Leadership and/or Human Resources with feedback regarding this situation.
- Cooperate with the internal investigation by sharing knowledge, information, evidence, and documentation.
- No individual involved in the process other than the Investigator may record any part of the investigation process without prior authorization from the Investigator, Leadership, or HR.
- Maintain confidentiality as appropriate due to the sensitive nature of the situation.
- You are advised against engaging in any conduct or making comments that may be perceived as retaliatory against anyone that participates in this review. Examples include, but are not limited to, making disparaging comments, engaging in uncivil behavior, and negative treatment of others.

You [choose one: will or will not] be paid [choose one: with or without] benefits during the Investigative Leave. You will be contacted by telephone to discuss information related to the investigation; therefore, providing a phone number where you can be reached is required. This matter will be treated as confidential by the University. If you have questions during Investigative Leave, please contact [Leadership Name and Phone Number] or Human Resources at 316-978-3065.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Employee Phone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Leadership Signature

\_\_\_\_\_  
Date

Original: Human Resources; Copy: Leadership, Employee