

University Non-Smoking Policy

POLICY I.4.2

Volume I Facilities and Lands
Chapter 4 Use of Facilities
Issuing Office: Office of the President
Responsible Officer: Morgan R. Olsen
Responsible Office: Executive Vice President
and Treasurer
Originally Issued: August 1, 2005
Most Recently Revised: NA

Non-Smoking Policy Campus Concern Form

Date:

Implementation and enforcement of the University Non-Smoking Policy falls on the deans, directors, department heads, and chairs. However, if you have a complaint or concern about a person or people violating the Purdue University Non-Smoking Policy, you may use this form to provide information to the policy administrator. You may complete this form anonymously, if you wish.

1. Building:
2. Location/room:
3. Time of day/day(s) of week problem occurs:
4. Concern/complaint:
5. Have any other people been contacted regarding this complaint? If so, what was the outcome of that contact?
6. What outcome would you like to see?

Optional (for follow-up purposes only)

Name:

Phone:

E-mail:

Please submit electronically, or send to:

Carol Shelby

Senior Director, Environmental Health and Public Safety

LMSB

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