Responsible Office: [illegible]
Contact Number: [illegible]
Contact Email: [illegible]
Revision Date: [illegible]

BREASTFEEDING/LACTATION ROOMS ON CAMPUS
OREGON TECH PROCEDURE

1. Purpose

[illegible]

Lactation Area: [illegible]

Lactation Breaks: [illegible]

Mother's Room: [illegible]

University Procedure [illegible]

6. Links To Related Policies, Forms, or Information