

POLICY / PROCEDURE CHECKLIST

Complete <u>all</u> Sections and send together with the pdf version of the draft Policy/Procedure to the Facilitator.

Indicate who can be contacted regarding this submission.		
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2. TITLE OF POLICY or PROCEDURE		3. POLICY / PROCEDURE NO.
4. REVIEW SUMMARY / DEVELOPMENT Identify what outcome is to be achieved with this revised, deleted, new policy or procedure		
Reason for Submission	Yes	Comment:
New Policy or Procedure		
Update of existing Policy or Procedure due to:		
Legislation change (State or Federal)		
Regulation Change (Title V)		
Procedural change		
• Other		
5. ACADEMIC SENATE (10 +1)		
INFORMATION ONLY		
6. COMMUNICATION AND IMPLEMENTATION PLAN:		
UPON COMPLETION OF POLICY REVIEW OR REVISION, A DISTRICTWIDE EMAIL WILL BE SENT AND THE POLICY AGENDIZED FOR THE NEXT BOARD MEETING FOR REVIEW AND APPROVAL AT THE SUBSEQUENT MEETING.		
7. VETTING STATUS- EA USE ONLY:		
DO-ADMINISTRATIVE COUNCIL:		
DO-CHANCELLOR'S CABINET:		
DO-CONSULTATION COUNCIL:		
8. BOARD USE ONLY:		
First Reading / Recommendation:		
Second Reading / Approval:		
Date Posted to BPM / Website:		
Districtwide Fmail Sent:		