



Revision or Decommission of Current Policy Proposal Form

Policy Name:

Policy Number:

1. Reason for Policy Revision or Decommission and Desired Result:

A concise summary of what the revision or decommission is meant to accomplish or fix and why.

(This portion must be completed)

2. Timeline and Communication/Implementation Plan:

Describe steps for communicating and implementing the policy: Be precise and specific!

(This portion must be completed)

3. Responsible Parties and Stakeholders

It is essential that all Responsible Parties and Stakeholders area aware of this and action and concur before submitting the Proposal.

(This portion must be completed)



4. Proposed Revision:

A clear description of the proposed changes, including new language, tracked edits, etc.

(This portion must be completed)



5. Impacts of Decommissioning/Revising

What changes will occur as a result of the policy being decommissioned/revised? Will any university operations or procedures be affected? How will students, faculty and staff be affected?

(This portion must be completed)

6. Endorsement (see below)

Names and signatures of Issuing Unit/Department, respective Vice-President(if applicable) and Director of Institutional Effectiveness and Planning.

Name

Title

Date

Signature _____

Name

Title

Date

Signature _____

Name

Title

Date

Signature _____