
Policy Development

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Policy Template

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Policy Timeline

Initial Effective Date:

Frequency of Review:

☐ Semiannually (twice per year)

☐ Annually

☐ Biennially (every two years)

☐ Other: _____

Date(s) Revised:

Policy Overview

Provide a brief, general descriptive paragraph to overview the policy.

Applies to: (examples—Faculty, Staff, Students, etc)

Table of Contents: (optional; suggested for policies > 8-10 pages)

Definitions: (optional; suggested for terms that have specialized meaning in the policy)

<u>Term</u>	<u>Definition</u>

Policy Details

- I. Example level 1
 - a. Example level 2
 - i. Example level 3

Procedures

- I. Example level 1
 - a. Example level 2
 - i. Example level 3

Responsibilities

<u>Position/Office/Department</u>	<u>Responsibility</u>

Resources (required for any resource referred to in the policy)**Policy Contacts**

<u>Name</u>	<u>Contact Information</u>

POLICY APPROVALS

POC: ☐ **Approved as to Form** ☐ **Not Approved**
POC Chair Signature:
Date:

Policy Sponsor: ☐ **Approved** ☐ **Not Approved**
Signature:
Date:

President: ☐ **Approved** ☐ **Not Approved**
Signature:
Date:

Board of Trustees: ☐ **Approved** ☐ **Not Approved** ☐ **Not Applicable**
Chair Signature:
Date:

