



University Policy Process Policy Revision Approval Signatures

Name (and #) of Policy: [insert name of policy]
Person(s) Submitting Policy: [insert name(s), contact info]
Responsible Office: [insert office]

Summary of major policy changes:
[insert bulleted list of key changes]

Groups, offices, and positions/individuals consulted during policy review:
[insert those involved]

Responsible Office Policy Coordinator Review:

Signature Title Date

Legal Affairs Review:

Signature Title Date

Approval of Responsible Executive:

Signature (Vice President, Vice Provost, Provost) Date

Approval of Responsible Executive:

Signature (Senior Vice President/Provost) Date

Endorsement of Senior Management Council (attach meeting agenda, cover sheet, or other document):

Signature Title Date

Approval of President's Cabinet (attach meeting agenda, cover sheet, or other document):

Signature Title Date

Policy Director Review:

Signature Date

When required and applicable, approval of Board of Trustees (if applicable, note resolution number, approval date, and attach certified resolution from BOT office):

Resolution Number Date