

## POLICY APPROVAL TRANSMITTAL FORM

Policy Name: \_\_\_\_\_

Policy No: \_\_\_\_\_

- New Policy
- Update of Existing Policy

**Area of Responsibility & Signature** *(choose one):*

- President \_\_\_\_\_
- Provost/VP for Academic Affairs \_\_\_\_\_
- VP for Administrative Services \_\_\_\_\_

SBOE Approval Required     Yes     No  
Legal Review Required     Yes     No

**Review & Recommendation:**

	Ok as is	Revision Suggested	Date	Initials
President	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Provost/VP for Academic Affairs	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
VP for Administrative Services	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Human Resources Services Director	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Legal Review Completed, if needed:     Date: \_\_\_\_\_

If revisions are suggested, forward the recommendations to either the president or responsible vice president.  
If revisions are made, a new draft will be distributed for review.

**Comments:**

**President's Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

After President's approval, Human Resource Services will forward to Administrative Services for distribution and placement in the policy and procedures manual.

**Directions:**

- Complete the policy approval transmittal form.
- If updating an existing policy, attach a copy showing revisions made to the current policy.
  - To show revisions, strike out what is to be deleted and underline and bold additions to the policy.
- If this is a new policy, submit it in policy format.
- Electronic copies of current policies and templates can be obtained from Administrative Services.
- Forward the above information to either the president or responsible vice president for approval.
- After final approval, forward an electronic "clean" copy to Human Resource Services.

<b>Administrative Services Office Use Only</b>	
Date Received _____	
<input type="checkbox"/> SBOE Agenda Submission	Date: _____
<input type="checkbox"/> SBOE Approval	Date: _____
<input type="checkbox"/> Policy Manual Distribution	Date: _____
<input type="checkbox"/> Web Page Submission	Date: _____
<input type="checkbox"/> Other _____	Date: _____