

East Georgia

STATE COLLEGE®

ROUTING FORM: ADMINISTRATIVE POLICY / REVISION of STATUTES

Attach a complete copy of the proposal for consideration. If changes are made to the proposal prior to approval, details must be provided in the comments section. Copies of supporting documentation should be attached to the form with each submission and should be retained at each level.

NAME OF POLICY/ PROPOSAL: _____

Brief Description:

TYPE of PROPOSAL:

- New Policy Proposal Revision of Existing Policy Removal of Existing Policy
 Revision of Statutes (Requires approval of President's Cabinet and Faculty Senate)

Initiated and Submitted to President's Cabinet Faculty Senate

Name

Signature

Date

FACULTY SENATE

Action: Approved Denied Returned Tabled

Name of Senate President

Signature

Date

Comments:

PRESIDENT'S CABINET

Action: Approved Denied Returned Tabled

Date of Meeting: _____

Comments:

PRESIDENT

Action: Approved Denied Returned Tabled

Name of President

Signature

Date

Comments:

DISTRIBUTION

Name

Signature

Date

Completed copies of the form must be distributed as appropriate.

- Faculty Senate Registrar Provost/VPASA
- Legal Affairs Human Resources Institutional Research
- Webmaster Other _____