



Please complete the form to request a new policy, or to revise, reaffirm or rescind an existing policy or University Executive Directive (UED).

Following approval, forward Policy Approval Form and the approved policy or UED to the Compliance & Policy Coordinator. For revisions, provide a clean copy and a redlined version. For any questions, please contact the Compliance & Policy Coordinator (CPC) at policies@sfsu.edu.

REQUESTED BY: _____ DATE: _____

CONTACT INFORMATION: Email: _____ Phone: _____

RESPONSIBLE DEPARTMENT(S): _____

New

Revised

Reaffirmed
*(No Changes or
only Minor Edits)*

Rescinded

POLICY TITLE: _____

POLICY NUMBER (new numbers assigned by the CPC): _____

PROPOSED EFFECTIVE DATE: _____

BRIEF SUMMARY of new policy or revisions to an existing policy, results of reaffirmation, or reason for rescinding an existing policy:

INDICATE METHOD(s) used to gather input and provide an opportunity for notice and comment, as applicable:

APPROVAL SIGNATURES:

	Date		Date
<i>Title of Responsible Official (Dean, Director, or Appropriate Administrator)</i>		<i>Title of Responsible Executive (Provost or Vice President)</i>	

ATTACHMENTS:

1. Policy in final format,
2. Policy in redline format, if revised, and
3. Previously approved policy, if revised.