

Randolph College Policy Proposal/Revision Cover Sheet

(Text will re-size as you type)

POLICY NAME	PROPOSAL TYPE	NAME OF LEAD POLICY DRAFTER
	New policy	
	Revision to existing policy	
	Retirement of existing policy	
BRIEF POLICY DESCRIPTION	POLICY TYPE	OTHER INDIVIDUALS INVOLVED
	Standalone	
	Part of Larger Policy Document:	
	RESPONSIBLE DEPARTMENT OR OFFICE	ORIGINAL SUBMISSION DATE
		DESIRED IMPLEMENTATION DATE

BRIEF RATIONALE FOR POLICY

Include any external mandates, regulations, accreditation factors, reporting, etc.

DEPARTMENTS OR OFFICES OF THE COLLEGE IMPACTED

EXISTING COLLEGE POLICIES IMPACTED BY OR OVERLAPPING THIS ONE

OFFICES RESPONSIBLE FOR FIVE-YEAR POLICY REVIEW

Include brief description of how five-year policy review will be conducted.

ASSUMING PASSAGE, YEAR AND TERM OF FIRST FIVE-YEAR REVIEW:

RESOURCES NECESSARY FOR IMPLEMENTATION

Include necessary training as well as operational costs.

NEW COMMITTEES OR GROUPS NECESSARY FOR IMPLEMENTATION

Describe the composition of necessary committees.

APPROVAL TIMELINE

Entering a name and approval date below signifies that written approval has been communicated.

Approval Stage	Name	Approval Date
(1) Direct Supervisor of Lead Policy Drafter (if applicable)		
(2) Appropriate President’s Leadership Team (PLT) Member (if other than policy drafter)		
(3) First PLT Approval (prior to Public Comment Period)		
(4) Second PLT Approval (following Public Comment Period)		
(5) Board of Trustees (if applicable)		

BEFORE SUBMISSION TO THE PLT, ENSURE THAT ● THIS FORM IS FULLY COMPLETED (I.E., IF A QUESTION IS NOT APPLICABLE, PLEASE INDICATE THAT); ● THE APPROVAL TIMELINE DIRECTLY ABOVE IS COMPLETED THROUGH STEP 2; ● IN THE POLICY ITSELF, (A) ALL SPECIALIZED TERMS ARE CLEARLY DEFINED AND (2) AN APPEALS PROCESS IS ADDRESSED AS APPROPRIATE.



VPIE COMPLETES UPON FINAL APPROVAL

Date of final approval

Date policy goes into effect

Individual responsible for implementation