

UNT Dallas Policy Routing & Approval Form

INSTRUCTIONS: Please attach the proposed policy revision or deletion, procedural change or new policy to this completed form and route to the appropriate offices for approval.

| | | |
|---|--------------------------------|------------------------|
| GENERAL | DATE NEEDED BY: | |
| Policy Title: | Policy Number: | Date Submitted: |
| <input type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Deletion <input type="checkbox"/> Procedure | Desired Effective Date: | |
| Requesting University Officer: _____ Phone: _____ Email: _____ | | |
| Policy Proponent/Owner (Responsible for administering the policy): _____ Phone: _____ Email: _____ <input type="checkbox"/> Forwarded to _____, Member of Policy Committee Date: _____ | | |

APPROVAL BY UNT DALLAS POLICY COMMITTEE

| Policy Committee Members | Date Reviewed | Approval | Reviewer's Signature |
|--|---------------|--|----------------------|
| H.D. Stearman Thad Anglin Brenda Robertson | | <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> More Information Needed | |
| Comments: _____ _____ | | | |
| <input type="checkbox"/> Forwarded to _____ | | Date: _____ | |

APPROVAL BY PROVOST (policies pertaining to academic affairs or student affairs)

| Date Reviewed | Approval | Comments | Reviewer's Signature |
|--|--|--------------------|----------------------|
| | <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> More Information Needed | | |
| Comments: _____ _____ | | | |
| <input type="checkbox"/> Forwarded to President | | Date: _____ | |

APPROVAL BY EXECUTIVE VICE PRESIDENT (policies not pertaining to academic affairs or student affairs)

| Date Reviewed | Approval | Comments | Reviewer's Signature |
|---|--|-------------|----------------------|
| | <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> More Information Needed | | |
| Comments: _____ _____ | | | |
| <input type="checkbox"/> Forwarded to President | | Date: _____ | |

PRESIDENT

| | |
|--|--------------------|
| <input type="checkbox"/> Approved | |
| <input type="checkbox"/> Not Approved | |
| Signature: _____ | Date: _____ |
| Comments: _____ _____ | |
| <input type="checkbox"/> Forwarded to Office of General Counsel by _____ Date: _____ | |

APPROVAL BY OFFICE OF GENERAL COUNSEL

| | |
|---|--------------------|
| Approval by the Office of General Counsel indicates that the policy does not contain legally prohibited provisions, meets all legal requirements, and is not otherwise objectionable on legal, as opposed to business or administrative, grounds. | |
| Is Board approval required? <input type="checkbox"/> No <input type="checkbox"/> Yes – if yes a copy of signed Board Order must be attached | |
| <input type="checkbox"/> Approved | |
| <input type="checkbox"/> Not Approved | |
| Signature: _____ | Date: _____ |
| _____ _____ | |
| <input type="checkbox"/> Forwarded to _____ Date: _____ | |

PRESIDENT

| | |
|-----------------------------------|--------------------|
| <input type="checkbox"/> Adopted | |
| <input type="checkbox"/> Rejected | |
| Signature: _____ | Date: _____ |