



This form should be completed prior to initiating the development of a new policy or the revision or rescission of an existing policy (“policy action”). Please consult the [Policy on Policies](#) and the [Policy Development Guidelines](#) for additional information. Please email [policy@uncg.edu](mailto:policy@uncg.edu) with questions.

**Policy Name:**

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*Select One*

**Action Requested:**

- New Policy
  - Revision to Existing Policy
  - Rescission of Existing Policy
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**Responsible  
Administrator/Unit:**

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**Responsible Executive:**

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**Date Submitted:**

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**Desired Effective Date:**

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*If there are legal requirements, strategic priorities, or other factors that impose time constraints on the issuance of this policy, please explain.*

## STEP ONE: INITIAL ACTION

Complete sections 1-3 and submit it to the Policy Administrator before drafting the policy.

### 1. ASSESSMENT OF NEED

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#### 1.1. REASON FOR REQUEST

*Address the following points, as applicable:*

- *Explain why the proposed action is requested.*
- *Indicate if a change in local/state/federal/system law or regulation has prompted this action.*
- *State what legal, regulatory, financial, operational, accreditation, technological, and/or social requirements this policy action addresses.*
- *Identify what advantages this policy action will bring to the university.*
- *Identify what risks this policy action helps control.*

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## 1.2. REQUESTS TO RESCIND AN EXISTING POLICY

Complete this section if the requested policy action is rescission of an existing policy. For all other requests, write "N/A" in this section.

- Explain the risks addressed by the current policy. Explain how those risks will be managed after the policy is rescinded.
- If the content of the policy will be posted online as a guideline, procedure or other guidance document, please attach or include a URL for the document.
- Describe how and to whom the rescission will be communicated.

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## 1.3. REQUESTS TO DEVELOP NEW OR REVISED POLICIES

Complete this section if the requested policy action is to create a new policy or to revise an existing policy. For all other requests, write ("N/A") in this section. Address the following points, as applicable:

- Write 2-5 sentences summarizing the principles of the proposed policy/policy revision and briefly outline the procedures to be used to implement it.
- State clearly the problem this policy is targeting. At a high level, but precisely, state the way(s) this policy will solve this problem.
- Outline (some of) the procedures this policy requires of the university community that will deliver this solution.
- You may want to indicate, generally, the scope of the policy, e.g., what operational activities of the university will be affected, and what related areas will not be affected.

## 2. IMPACT ASSESSMENT

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### 2.1. STAKEHOLDERS

- What categories of individuals (e.g., students, staff, faculty, etc.) will be most affected by the policy action?
- What other units, if any, will be affected by the policy action?

Academic Affairs

Athletics

Business Affairs

General Counsel

Human Resources

Information Technology Services

Public Safety

Research

Student Affairs

University Advancement

University Communications

Other \_\_\_\_\_

Other \_\_\_\_\_

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### 2.2. SYSTEMS AND PROCESSES

- *What changes in existing systems and/or processes should take place in order to ensure compliance with this request, if granted? Consider your area and those of stakeholders impacted by the proposed policy action.*
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### 2.3. RESOURCES

- *What resources (human, financial, physical, operational, technological, and other) might be needed to implement and maintain compliance with this policy action? For a request to rescind an existing policy, explain the impact the proposed action may have on existing resources, if granted.*
- *Identify what change, if any, to UNCG's culture and/or behaviors may be needed to ensure compliance.*
- *If the request is to rescind a policy, how will existing resources be impacted by the rescission?*

## 3. DRAFTING PLAN

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### 3.1. DRAFTING GROUP

- *List the individuals who will or have been involved in the development of this policy along with their unit and title.*
  - *For requests to rescind an existing policy, identify individuals who will or have been consulted and provided an opportunity to share feedback on the request.*
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### 3.2. BENCHMARKING

- *List other institutions whose policies that may be used as models in the development of this new or revised policy. Include URLs if available.*
- *For requests to rescind an existing policy, please provide benchmarking information highlighting the approach taken by other institutions relevant to the policy topic. Include URLs if available.*

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### 3.3. REVIEW AND APPROVAL OF POLICY ACTION REQUEST

- *The Policy Administrator and Policy Advisory Group will review the request and may provide feedback on the proposed policy action in this section.*

<b>Department/VC</b>	<b>Date Submitted</b>	<b>Approval</b>	<b>Date Reviewed</b>
Policy Administrator		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	
Policy Advisory Group (“PAG”)		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	

## STEP TWO: FINAL ACTION

Please complete section 4 and forward this form with the policy/policy revision. For requests to rescind a policy, please complete section 4.2.

### 4. IMPLEMENTATION

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#### 4.1. REVIEWERS

- *List the names and functions or title of each unit and/or individual who provided feedback on the proposed draft.*
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#### 4.2. COMMUNICATION AND TRAINING

- *Describe the communications and training activities that will be conducted to build awareness and support implementation.*
  - *Indicate whether there are federal, state, local or other requirements for training related to this policy.*
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#### 4.3. COMPLIANCE

- Regulatory Compliance.** *Is there a state, federal, or UNC system compliance obligation associated with this policy? If so, list the regulatory body (OSHA, EPA, etc.) and the name of the law or regulation.*
- Procedures.** *Are there procedures associated specifically with compliance? If so, list them or provide an online reference.*
- Reporting Requirements.** *Are there reporting requirements to government agencies or the UNC system? If so, at what frequency?*
- Audits.** *Are there external audits? Does internal audit need to audit against this policy? At what frequency? What costs are associated with the audits?*
- Risks.** *What are the institutional risks of noncompliance? What are the consequences for an individual who does not follow this policy?*

## 5. FINAL REVIEW AND APPROVAL OF POLICY ACTION

The Policy Administrator will forward the draft and this form through the approval process.

Department/VC	Date Submitted	Approval	Reviewer's Signature and Date Reviewed
Policy Owner		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	
Policy Administrator		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	
General Counsel*		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	
PAG		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	
Chancellor's Council		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> See recommendations	

\*Indicates that review should occur prior to forwarding the proposed policy/policy revision to PAG.