

# ASU Operating Policy and Procedure

## Routing Sheet

Double "click" on the square to mark your answer:

|   |  |                      |   |
|---|--|----------------------|---|
| New Policy <input type="checkbox"/> ❖   Scheduled Revision: Changes <input type="checkbox"/> No Changes <input type="checkbox"/> ❖   Off-Schedule Revision <input type="checkbox"/> ❖   Deletion <input type="checkbox"/>       |  |                      |   |
| (New policy: a number will be provided by the VPSPP)  |  |                      | ❖   Temporary Suspension <input type="checkbox"/> |
| OP #  |  | Policy Title         |   |
| Director/Administrator Responsible:   |  | Dept./Unit/Division: |   |
| If a new policy, recommended location in the ASU Operating Policies & Procedures Manual:  |  |                      |   |
| Provide the name(s) and number(s) of all applicable statutes, laws, rules & regulations associated with this policy.<br>Applicable <input type="checkbox"/> Not applicable <input type="checkbox"/> If applicable, name/number: |  |                      |   |
| Are the forms mentioned in the policy approved and available on Rampport?   Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>  |  |                      |   |
| If no, when will they become available? (Date)  |  |                      |   |
| Purpose of New Policy:  |  |                      |   |
| Reason for Revision:   Substantive Revision <input type="checkbox"/> Non-substantive Revision <input type="checkbox"/> (check one)  |  |                      |   |
| Other department(s) that may be affected by new policy/revision:  |  |                      |   |
| Review:   |  |                      |   |
| Board approval required: Yes <input type="checkbox"/> No <input type="checkbox"/>   |  | Meeting Date:        | Board item #:                                     |
| Executive Assistant (originating division) _____  |  | Date _____           |   |
| Recommended Approvals:  |  |                      |   |
| (1) Vice President (originating division) _____   |  | Date _____           |   |
| <i>(Forward to VPSPP for review)</i>  |  |                      |   |
| (2) Vice President for Strategy, Planning & Policy _____  |  | Date _____           |   |
| (3) Vice Presidents ( <i>initials</i> ):   ASA _____ ; FA _____ ; VPSPP _____   |  |                      |   |
| <i>Date</i>   |  | <i>Date</i>          |   |
| <i>Date</i>   |  |                      |   |
| Comments:   |  |                      |   |
| Approved:   |  |                      |   |
| President _____   |  | Date _____           |   |
| <i>(Forward to VPSPP for distribution)</i>  |  |                      |   |
| Posted on Website by VPSPP:   Date: _____   |  |                      |   |
| Copy to: President _____; PVPASA _____; VPFA _____; Other _____   |  |                      |   |