

PROPOSED NEW POLICY OR CHANGE IN POLICY FORM

Submitted by:	Date:
(Name of Individual o	r Group)
School Name:	
New Policy	
Change in Policy#	
Recommended new policy or change in populicy with track changes in the narrative)	olicy (change in policy requires copy of original written :
Indicate the need for the policy or change	in policy:
Perceived consequences of the new policy	or change in policy:
. ,	. ,

Approved Policy: #	
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Reviewed by:	
Chair, Policy Committee	Date
Principal/Head of School/President	 Date
Reviewed and recommended by the	Board on
Approved by the Pastor in Parish Schools or the Hec	· · · · · · · · · · · · · · · · · · ·
Superintendent in Archdiocesan High Schools for imp	lementation on:
Pastor/Superintendent	 Date