



## COVERSHEET FOR A NEW OR REVISED POLICY

Please complete and send with the draft Policy/Procedure to [policies@queensu.ca](mailto:policies@queensu.ca). A separate form is required for each Policy and Procedure.

### PROPOSED NAME OF POLICY / PROCEDURE

### FILE #

	<b>Secretariat Use Only</b>
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### SELECT ACTION:

- New Policy/Procedure
- Replacement to existing policy/procedure
- Deletion of existing policy/procedure

If revised, briefly highlight the significant changes (try to limit to five or less):

1.

### RATIONALE FOR SUGGESTING THE POLICY/PROCEDURE OR CHANGES TO THE POLICY/PROCEDURE

*What developments, changes or circumstances indicate that a policy/procedure or change to a policy/procedure is needed? What are the implications of not having the policy/procedure? How would the University and/or its students, staff and faculty benefit from such a policy/procedure? If you are only proposing a procedure and no policy exists to support it, please explain your rationale for this approach.*

### SCOPE OF PROPOSED POLICY/PROCEDURE

*Indicate to which members of the University community the proposed policy/procedure would apply and reference other pertinent policies, legislation, regulations, collective agreements, etc. and explain their relationship to the policy/procedure.*

## **HUMAN RIGHTS, EQUITY, AND ACCESSIBILITY**

*Indicate implications of the policy/procedure on the University's obligations under the Ontario Human Rights Code, Accessibility for Ontarians with Disabilities Act (2005) and its Regulations, the Queen's Multi-Year Accessibility Plan, and established human rights and equity-related policies such as the Employment Equity Policy and the Educational Equity Policy.*

## **CONSULTATION**

*Describe any consultation undertaken to date or proposed, including the dates and names of committees / staff / student meetings.*

- |                                |  |
|--------------------------------|--|
| Human Resources                | <input type="checkbox"/>                             |
| Labour Relations               | <input type="checkbox"/>                             |
| Faculty Relations              | <input type="checkbox"/>                             |
| Advancement                    | <input type="checkbox"/>                             |
| Communications                 | <input type="checkbox"/>                             |
| Queen's Community              | <input type="checkbox"/>                             |
| Audit                          | <input type="checkbox"/>                             |
| ORS                            | <input type="checkbox"/>                             |
| Finance/Faculty Budget Officer | <input type="checkbox"/>                             |
| ITS                            | <input type="checkbox"/>                             |
| Deans                          | <input type="checkbox"/>                             |
| Other                          | <input type="checkbox"/> Please provide detail _____ |

## **APPROVAL PROCESS**

*What is the recommended approval body(ies) and the steps required to achieve final approval of the proposed policy/procedure?*

## **COMMUNICATION PLAN**

*Indicate how the policy / procedure will be communicated to allow for implementation. Note that publishing on the central policy webpage by the Secretariat is assumed; information about additional communication strategies should be provided.*

**RISK MANAGEMENT**

*What type of losses (financial, legal, reputation, injury, property damage) could occur if this policy/procedure is not implemented.*

*How likely is it that they will occur and how significant might they be? Conversely, what opportunities might be missed if this policy/procedure is not enacted? Please consult with the Risk Management Office, if unsure.*

*Indicate resources required to implement the policy/procedure (funding, staff time, space).*

*Indicate how this policy/procedure will be implemented. Note that proactively implementing a policy/procedure is required to decrease liability.*

*Are there time constraints which require implementation of the policy/procedure on an expedited basis?*

**PROCEDURES**

*List required Procedures and attach, if drafted.*

**RESPONSIBLE OFFICER / COMMITTEE**

Officer / Committee:  
*(Insert name and title of Senior Administrative Officer responsible for the policy/procedure)*

Signature: \_\_\_\_\_  
*(For a Committee, the Chair is to sign)*

Date:

Contact Officer:  
*(Insert name and title of Contact Officer)*

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**POLICY ADVISORY SUBCOMMITTEE (PASC) SIGN OFF**

**Secretariat Use Only**

Reviewed by PASC on: [DATE]

Conforms to Requirements? YES / NO *If NO:*

Next Steps: \_\_\_\_\_

**APPROVAL AUTHORITY DECISION**

**Secretariat Use Only**

Name of Approval Authority: \_\_\_\_\_ Approved? YES / NO

*If NO:*

Next Steps: \_\_\_\_\_

*If approved:*

Date of Approval: \_\_\_\_\_

Date of Commencement: \_\_\_\_\_

Date for Next Review: \_\_\_\_\_

Contact Officer: \_\_\_\_\_

Position: \_\_\_\_\_

**Submit this Form with a Word version of the final approved Policy/Procedure to:**  
[policies@queensu.ca](mailto:policies@queensu.ca)