**Policy Template**

Effective: YR/M/D

Next Review: YR/M/D

Policy Number: xxxx

**Insert Policy Title here**

1. **PURPOSE**

This policy:

1. **SCOPE / LIMITS**
2. **PRINCIPLES**

The following principles…

1. **DEFINITIONS**

[*WHERE APPRORIATE,* *MANDATORY FIELD*– list and define applicable words or specific terminology that will aid in the understanding of the policy] **DELETE IF NOT APPLICABLE TO YOUR POLICY**

1. **PROCEDURES, REQUIREMENTS, STANDARDS, GUIDELINES, FORMS…**

[***OPTIONAL FIELDS*** – DELETE IF NOT APPLICABLE]

1. **RELATED LEGISLATED REFERENCES…**

[***OPTIONAL FIELDS*** – DELETE IF NOT APPLICABLE]

1. **LINKS TO RELATED POLICIES, DOCUMENTS, AND/OR WEBSITES…**

[***OPTIONAL FIELDS*** – DELETE IF NOT APPLICABLE]

**Responsibility, Recommendation and Approval Dates**

Executive Responsibility:

Administrative Responsibility:

Recommended by Policy Review Committee or Administrative Policy Review Committee: yyyy-mm-dd

Recommended/Approved by Education Council: yyyy-mm-dd

Approved by President:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature |  | Date |

Linkage to Board Policy: