**Appendix Eight**

**Policy/Procedure Rescission Cover Sheet**

**Title of Policy/Procedure:**

**Policy/Procedure Holder:**

**Administrative Contact:**

**To be completed by Administrative Contact**

1. **BRIEF SUMMARY OF RATIONALE FOR RESCINDING POLICY/PROCEDURE**

**To be completed by Policy and Procedure Committee**

# FIRST REVIEW BY POLICY AND PROCEDURE COMMITTEE

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Check Box** | **Date** | **Comments** |
| Approved by Committee |  |  |  |
| Not Approved by Committee |  |  |  |

1. **RATIONALE FOR COMMITTEE DECISION:**
2. **ADDITIONAL CONVERSATIONS:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Check Box** | **Date** | **Comments** |
| Approved by Committee |  |  |  |
| Not Approved by Committee |  |  |  |
| Conversation between Chair and Policy/Procedure Holder |  |  |  |
| Conversation between Policy/Procedure Holder and Senior Team |  |  |  |
| Consensus Reached |  |  |  |

1. **SECOND REVIEW BY POLICY/PROCEDURE COMMITTEE**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Check Box** | **Date** | **Comments** |
| Approved by Committee |  |  |  |

1. **RATIONALE FOR COMMITTEE DECISION:**

**To be completed by Senior Team**

1. **REVIEW BY SENIOR TEAM**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Check Box** | **Date** | **Comments** |
| Approved by Senior Team |  |  |  |
| Not Approved by Senior Team |  |  |  |
|  |  |  |  |
| Second review by Senior Team - Approved |  |  |  |

Notes/Comments: