**New Policy/Procedure  Revised Policy/Procedure**

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| --- | --- |
| **Document Type:** |  |
| **Document Title:** |  |
| **Category:** |  |
| **Associated Documents:** |  |

|  |  |
| --- | --- |
| **Policy Sponsor:** |  |
| **Policy Contact:** |  |

## Approvals

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| --- | --- |
| **Approval Process:** |  |
| **Approval Date:** |  |
| **Effective Date:** |  |

## Summary of Due Diligence

|  |  |
| --- | --- |
| **Major impact and overall goal of new/revised policy /procedure** |  |
| **Risks of not establishing /revising the policy/procedure** |  |
| **Will the new/revised policy /procedure be impacted by or impact any of the following: legislation, collective agreements, existing policy/procedure** |  |
| **Financial Impact** |  |

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| --- | --- |
| **Consultations/Stakeholders** | **Describe involvement and results for each Consultation/Stakeholder** |
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