INSTITUTIONAL GOVERNANCE RECOMMENDATION FORM

| REC | OMMENDED |) BY | / : | | |
|-----|--------------------|-------|---|---------------|--|
| | CK ONE: CK ONE: | | Individual ☐ Committee Policy Recommendation | | Council/Senate Non-Policy Recommendation |
| 1. | BACKGRO | UNI | D: | | |
| 2. | STATEMEN | NT (| OF RECOMMENDATION: | | |
| 3. | RATIONAL | E. | | | |
| J. | NATIONAL | ∟. | | | |
| 4. | SUPPORTI | ING | DATA AND DOCUMENTS: | | |
| 5. | IDENTIFY I | RES | SOURCES THAT MAY BE REQU | JIRE | D: |
| | Equipment | | | | |
| | Financial | | | | |
| | Personnel | | | | |
| | Space | | | | |
| | Technology | , | | | |
| | Other | | | | |
| 6. | recommenda | ation | PACT ON OTHER COLLEGE EN could impact specific departments are policies and/or procedures). | NTIT and/c | IES: (Briefly describe how the adoption of the or groups within the College, or how adoption |
| 7. | Signature | of C | overnance Committee Chair or | | Data |
| | Individual S | Subn | overnance Committee Chair or nitting the Recommendation | | Date |

| 8. | MANAGEMENT COUNCIL FOR ACADEMIC AFFAIRS AND STUDENT SERVICES RECOMMENDATION: (if applicable) | | | | | |
|-----|--|------|--|--|--|--|
| | □ Approved as Recommended □ Denied Recommendation □ Returned to Committee/Individual for Revision | | | | | |
| | Explanation for Denial or Return: | | | | | |
| | Chair's Signature | Date | | | | |
| 9. | INSTITUTIONAL EFFECTIVENESS COMMITTEE RECOMMENDATION: (if applicable) □ Approved as Recommended □ Approved as Modified □ Denied Recommendation □ Returned to Committee/Individual for Revision | | | | | |
| | Explanation for Denial or Return: | | | | | |
| | Chair's Signature | Date | | | | |
| 10. | EXECUTIVE COUNCIL'S RECOMMENDATION: ☐ Approved as Recommended ☐ Approved as Modified ☐ Denied Recommendation ☐ Returned to Committee/Individual for Revision Explanation for Denial or Return: | | | | | |
| | Explanation for Denial of Return. | | | | | |
| | Chair's Signature | Date | | | | |
| 11. | PRESIDENT'S CABINET RECOMMENDATION: □ Approved as Recommended □ Approved as Modified □ Denied Recommendation □ Returned to Committee/Individual for Revision | | | | | |
| | Explanation for Denial or Return: | | | | | |
| | Chair's Signature | Date | | | | |
| 12. | BOARD OF GOVERNORS RECOMMENDATION: (if applicable) □ Approved as Recommended □ Approved as Modified □ Denied Recommendation □ Returned to Committee/Individual for Revision | | | | | |
| | Explanation for Denial or Return: | | | | | |
| | | | | | | |
| | Chair's Signature | Date | | | | |

Final Decision Copied to:

Submitting Individual, Committee Chairperson, or Council/Senate Chairperson