| | CSN Policy | | Policy Title |
|--------|--|---|--|
| Policy | Category | | Effective Date: mm/dd/yyyy |
| | MOST RECENT CHANG | GES | |
| | | ant Change #1 ant Change #2 | |
| | | | |
| | | | |
| l. | POLICY PURPOSE | | |
| | This section briefly state exist? | es, ideally in 1 or 2 sentences, the purpos | se of the policy. Why does this policy |
| II. | POLICY STATEMENT | | |
| | This section states spec | ifications the policy. Do not include proce | edural elements in this section. |
| III. | PROCEDURE | | |
| | This section describes h | ow the policy should be implemented, if r | necessary. |
| IV. | AUTHORITY AND CRO | SS REFERENCE LINKS | |
| | | ks to the current State laws, the NSHE Bo . Do not copy the content into the policy; | |
| V. | DISCLAIMER (Include i | n All Policies) | |
| | procedure(s). The Pres | scretion to suspend or rescind all or any dent shall notify appropriate CSN person ate Chair, of the suspension or rescission | nel, including the Administrative Code |
| | | icy should be referred to the CSN Admini du, 702.651.7488) and/or the Recommer | |

VI. SIGNATURES

| Recommended by (add additional signature lines as appropriate | <u>)</u> : |
|---|------------|
| Signature | Date |
| Recommending Authority Title | |
| Reviewed for Legal Sufficiency: | |

| Page Header (double click here) – Contains | Policy Number, Title & Version | Last Revis |
|--|--------------------------------|------------|
| | | |
| General Counsel | Date | |
| Approved by: | | |
| CSN President | Date | |
| | | |

VII. ATTACHMENTS

Provide a list of the attachments to the policy, and then start each item on a new page. These addendums may include glossary, appendices, forms and/or templates, as applicable.