

**HARTNELL COMMUNITY COLLEGE DISTRICT
BOARD POLICY AND PROCEDURE
ROUTING/TRACKING FORM**

Review and consideration to approve by the various governance groups is requested Yes ☐ No ☐ Courtesy Review ☐

Policy/Procedure # _____ Policy/Procedure Name _____

☐ New ☐ Revised ☐ Replaces existing policy/procedure: _____

New policy/procedure or revisions initiated/proposed by: _____

Reason for new policy/procedure or revisions: _____

Reviewing Group	Date Out	Forward by
Routed to		
Academic Senate President	_____	_____
HCFA President	_____	_____
CSEA President	_____	_____
L-39 Chief Steward	_____	_____

**Hartnell College Faculty
Association**

Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

Academic Senate

Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

CSEA

Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

L-39

Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

_____ **Council** Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

_____ **Council** Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

_____ **Council** Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

**Superintendent/President
Executive Cabinet**

Date of Action: _____

☐ Recommend approval ☐ Recommend approval with changes ☐ Do not recommend approval

Comments:

First Reading

Second Reading

Board of Trustees

☐ Approved ☐ Approved with changes ☐ Not approved

Comments:

ANTICIPATED TIMELINE

Board of Trustees first reading to occur on _____

Board of Trustees consideration to occur on _____

Additional Comments: