**Policy Number #** Click or tap here to enter text.

*Contact the Office of the President for New Policies*

**Policy Title:** Click or tap here to enter text.

|  |  |
| --- | --- |
| GeneseoType_wSig_PMS287 | Approved By: Cabinet  Effective Date: Click or tap to enter a date.  Revised Date: Click or tap to enter a date.  Periodic Review Completed: Click or tap to enter a date. |
| Category: Choose an item.  Policy Owner: Click or tap here to enter text.  Office Number: (585) 245- Click or tap here to enter text. |

**SCOPE** *Identify parties governed by the policy.*

**POLICY STATEMENT** *The policy statement should answer the following question: what is the purpose of the policy?*

**DEFINITIONS** *Define terms that need explanation or that will aid interpretation of the policy.*

**POLICY** *Describe the policy*

**Frequency of Review and Update** Choose an item.

Signature: Click or tap here to enter text.

Name of Policy Owner: Click or tap here to enter text.

Title of Policy Owner: Click or tap here to enter text.

Date of Approval Click or tap to enter a date.