Routing Form Number [21.08.26-01]:

Faculty Senate Routing Form

1. Item Description
   a. Initiated by: N/A
   b. Type:

   X Action □ Resolution □ Recommendation

2. Faculty Senate Action

   X Approved □ Not Approved □ Other

   Senate Vote [Yes-No-Abstain]: 12-5-4 Date of Meeting:

   Senate Chair Signature: ______________________________ Date:
   Senate Secretary Signature: __________________________ Date:

3. Provost
   a. Provost Action:

      □ Approved □ Not Approved □ Acknowledge Receipt

         Comments:

         Provost Signature: ______________________________ Date:

4. Chancellor
   a. Requested Action:

      □ For Action □ For Information □ Recognition of Receipt

   b. Chancellor Action:

      □ Approved □ Not Approved □ Acknowledge Receipt

         Comments:

         Chancellor Signature: _____________________________ Date:
Once finalized, copies will be returned to Special Assistant to the Chancellor who will scan and distribute electronically to: Chancellor, Provost, Chair of Faculty Senate, and Secretary of the Faculty Senate. The latter will post the Proposal/Recommendation/Resolution on the Faculty Senate Website.