

STANDARD OPERATING PROCEDURES CHANGE FORM

All motions to amend Standard Operating Procedures shall first be to the By-Laws Committee. Please complete all information to the best of your ability and submit to By-Laws Committee.

Please complete the following information regarding the Standard Operating Procedure(s) you are submitting for change:

Article Number:		Article Title:	
Section Number:		Section Title:	
Sub-Section Letter:		Sub-Section Title:	
Additional Title within Sub-Section (If applicable):			

1. In the space below, please write the SOP as it currently appears in the in the Operating Procedure if it is currently there. **use red highlight** to indicate the verbiage you would like to change or add:

2. In the space below please re-write the entire SOP as it would appear if the change is approved. **use green highlight** to indicate where the proposed new verbiage would appear: NOT NECESSARY IF STATED ABOVE

3. Please state in detail, why you think this SOP should be changed.

4. If this SOP change is approved, how will it impact the organization?

5. If this change is approved, will it be necessary to design any new forms, revise any currently used forms, or additional paperwork to put this change into place? If so, have you attached a sample? Do you have any suggestions for the SOP Committee?

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6. Other comments:

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7. Change Request Author Information:

Author:		Phone #:	
Email Address:		NCCC #	
Co-Author (If applicable):		NCCC#	
Region:		Date Submitted:	

Thank you for completing the above information. Your request will be reviewed at the next By-laws Committee meeting. A confirmation will be sent to you by the By-Laws Committee upon receipt of your Change Request Form.

Bylaws Committee Review

Date Request Received for Review:		Standard Operating Procedures Request Number issued:	
Date Request Reviewed by By-Laws Committee:		<input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Further Action Required	If further action required, date Change Request returned to Author:
Comments:			

