

**XAVIER UNIVERSITY Policy Title**

**Effective:** (Date)

**Last Updated:** (Date)

**Last Review:**

**Responsible University Office:** (Office with supervision for this policy)

**Responsible Executive:** (Title only)

**Scope:** (Who is affected by this policy or needs to read it)

**A. REASON FOR POLICY** (if applicable)

This section should include the reason or rationale for the policy.

**B. POLICY**

**C. DEFINITIONS** (if applicable)

**D. PROCEDURES** (if applicable)

**E. EXHIBITS** (if applicable)

**F. HISTORY** (if applicable)

Include information about previous policy versions or whether this policy replaces an existing policy.

**G. REVIEW SCHEDULE**

**Other applicable policies and/or resources:**