



## Policy Review Checklist Template

A. Purpose:

- Annual Review
- New Policy
- Revised Policy
- Discontinuance of Policy

B. Policy Name: \_\_\_\_\_

C. Major Requirements:

---

---

---

---

D. Related Documents critical to the policy (List):

- 1.
- 2.
- 3.
- 4.
- 5.

E. Policy Specifics and Procedures Mandatory & Action Requirements:

---

---

---

---

---

---

F. Attestation Required:

- Yes, CMA Only
- Yes, Navigator Only
- Not Required
- Other: \_\_\_\_\_

Date: \_\_\_\_\_ Completed by: \_\_\_\_\_