

REQUEST FOR REVIEW BY CRJ

*The proposal must adhere to the specifications detailed below.
Failure to do so will result in the return of the proposal and a delay in the review process.*

Please send electronic copies of this form and all attachments
to Stephanie Makhoulf (smakhlou@uci.edu), CRJ Analyst

Contact Information

Name _____ Email _____
Title _____ Date _____
Department/Unit _____

Proposal

Title: **Proposed Modifications to...** or (if new) **Proposed Bylaws for the...**

Statement of Rationale

Briefly explain why the proposed modifications are necessary to the existing legislation or organizational practice. (If additional space is needed, a separate document may be attached.)

Category (Please Select One)

School Bylaw	Date Approved _____	Faculty Vote _____
Committee Bylaw	Date Approved _____	Committee Vote _____
Other		

Proposed Language (Bylaws) Attached

Document format should be in Microsoft Word (letter size with 1" margins), Arial Font, size 12 (please do not change font size within the document).

Please attach two copies:

One markup copy, indicating deletions by ~~strikeout type~~ and additions by underscore type.

One clean copy with the proposed modifications already in place (no mark ups).