Title of Policy

1. Introduction and values
	1. Insert text here.
	2. Insert text here.
	3. Insert text here with sub-points:
		1. First sub-point
		2. Second sub-point
	4. Insert text here.
2. Purpose
	1. Insert text here.
	2. Insert text here.
3. Legislative context
	1. Insert text here.
4. Scope
	1. This policy is applicable to:
		1. List of who it applies to
		2. Test
		3. Test
5. **Principles**
	1. Insert text here.
	2. Insert text here.
6. Roles and responsibilities
	1. Insert text here.
	2. Insert text here.
7. Policy details section
	1. Insert text here.
	2. Insert text here.
8. Policy details section *(add more if/as required)*
	1. Insert text here.
	2. Insert text here.
9. Appeals and complaints *(if relevant/applicable)*
	1. Insert text here.
	2. Insert text here.
10. Associated information
	1. Include any information here about another procedure or guidance that might be related to this policy and how it is implemented.
11. Review
	1. This policy will be reviewed at least every three years.
	2. Minor updates to this policy that do not affect the rules, principles or intent of this policy may be approved by [insert title of staff member here] on behalf of [insert approval body/group/level for this policy here].

Policy Information and Document Control

|  |  |
| --- | --- |
|  |  |
| Policy title | *Insert the name of the policy.* |
| Version number | *Inset the version number of the policy.* *If there have been significant changes e.g. requiring sign off by the approval body, increase the first of the two numbers e.g. v1.4 becomes v2.0. If the changes are minor edits, change the latter number e.g. v1.4 becomes v1.5.* |
| Related policies and procedures | *If the policy refers to other policies, procedures or guidance, list the names of these here (and include hyperlinks?)* |
| Superseded policies | *If this policy replaces another policy (other than being an updated version of the same policy) please note here which other policies this replaces.*  |
|  |  |
| Approval level | *Name of the approval body or level for this version.* |
| Approval date | *Date approved by the above person or body.* |
| Effective date | *(If the policy is not taking effect from the date of approval e.g. for the start of the next academic year, enter the date it becomes effective.*  |
|  |  |
| Next review due | *Date of the next review of the policy. This can be a month e.g. July 2026, or can be more flexible e.g. Summer 2026. Avoid anything less specific e.g. just 2026.*  |
|  |  |
| Policy owner | *Name and job title of the policy owner.* |
| Policy contact | *Name and job titles or team name / email for where queries related to this policy should be directed.* |

Version Control

|  |  |  |
| --- | --- | --- |
| **Version** | **Date** | **Reason for updates/Summary of key changes** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |