

**POLICY NUMBER:** \_\_\_\_\_

**POLICY NAME:** \_\_\_\_\_

**CRITERIA FOR POLICY ANALYSIS (2410-E1)**

Date of Adoption/Last Amendments: \_\_\_\_\_

**Requester:** \_\_\_\_\_

**Requester Role:**  Student  Parent/Guardian  Community Member  RCSD Employee

Policy Number: \_\_\_\_\_

Policy Name: \_\_\_\_\_

New Policy or  Existing Policy

**INSTRUCTIONS FOR PROPOSED/AMENDED POLICIES:** Please answer ALL questions below.

**BACKGROUND**

How does the policy advance the best education interest of all students?

How does the policy support the mission and the goals of the District?

What does the current literature and research say that is relevant to the policy, if applicable?

**POLICY NUMBER:** \_\_\_\_\_

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**PROPOSAL**

What are the recommended policy changes/proposal?

**Return this form and supporting documentation (if applicable) through one of the following delivery methods:**

<p><u>Email</u> <a href="mailto:boardofeducation@rcsdk12.org">boardofeducation@rcsdk12.org</a></p>	<p><u>US Mail or Central Office Drop Off</u> Attention: Board of Education 131 West Broad Street Rochester, NY 14614</p>	<p><u>Fax</u> Attention: Board of Education 585-262-8381</p>
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