A.2 DOCUMENT CHANGE CONTROL FORMPacific Swimming Document Change Form

Title of Change:				Doc. Change No.	
Type of Change			New	Revised	Archive
(check applicable) Does Change affect other Documents:			No	Yes	
			_110	103	
If Yes: List other Document					
Are changes to other Document to be	e made:			Concurrent	Consecutive
Doc Change No. of affected doc	ument				
Information of Change					
Motion Proposing Change: Title:					
Motion No.			Motion Date		
Rationale for Change		-	,		
Rationale for Change					
Date Motion Passed (Attach meeting minutes)	BOD			HOD (If reqd.)	
, ,					
Effective Date of Implementation					
Governance Document Changed (check aplicable Document)		By-Law		Policy & Procedure	Rules & Reg.
Location of Change					
Wording Change					
Governance Committee Approval:				Date:	
(attach copy of Gov. Comm. Minutes)					
Motion Originator Approval:				Date:	
		For By_I	aw Change	•	
For By-Law Change:					
Request of Change sent to USA-S, C (attach copy of Request letter)	hair of Rul	es & Reg (Committee	Date:	
Response from USA-S Rules & Reg. (attach copy of Request letter)	Chair	Outcome		Date	
Document Change Made:	Date			Resp. Person	
Removal of old version:	Date	_		Resp. Person	
Notification of Change					
posted on website	Date			Resp. Person	

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