

## The Council on Chiropractic Education (CCE)

### Proposed Revision of the CCE *Policies*

Please use this form to propose revisions to current policies or additions of new policies to the Council on Chiropractic Education (CCE) Manual of Policies. Please copy this form and use a separate form for each proposal.

#### 1. Contact Information

Date \_\_\_\_\_  
(mm/dd/yy)

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ \*Email address: \_\_\_\_\_

\* - Optional

#### 2. Location of proposed revision

**CCE Policy #:** \_\_\_\_\_ Page(s) \_\_\_\_\_ Paragraph(s) \_\_\_\_\_

(Example: CCE Policy 64, Page 47, Paragraph 3)

This proposal is submitted by:

\_\_\_\_\_ 1) CCE Member Representative

\_\_\_\_\_ 2) CCE Councilor

\_\_\_\_\_ 3) CCE Administrative Office Staff

#### 3. Rationale for the proposed addition or revision (use attachment if necessary):

**4. Proposed addition or revision**

**A. Current version; FROM the following (use attachment if necessary):**

**B. Proposal; TO the following (use attachment if necessary):**

Please return to:  
The Council on Chiropractic Education  
Attn: Proposed Revision of CCE Policies  
8049 N. 85<sup>th</sup> Way  
Scottsdale, AZ 85258  
danner@cce-usa.org