EHEDG Document Proposal or Revision of Existing Document

/Documents include Guidelines, Training Presentations and Certification Schemes/

1. Is this a new document or revision of an existing document?
   - NEW ☐
   - REVISION ☐
   Identify document number and title: __________________________________________

2. If new, provide a draft SCOPE of the document: (use additional pages if necessary)
   __________________________________________________________________________
   __________________________________________________________________________

3. If a revision, provide the topic of the proposed revision: (include the section number in the existing document.)
   __________________________________________________________________________
   __________________________________________________________________________

4. Outline briefly the need/justification for the new document or proposed revision.
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

5. Identify a lead author/document leader for the new document or revision:
   Name: ______________________________________________________________________
   Company or affiliation: ______________________________________________________
   Phone: ____________________________________________________________________
   E-mail: ____________________________________________________________________
6. Identify key members of the working group who have been identified? (If none, why?)

________________________________________________________________________
________________________________________________________________________

7. Are there any cost implications to EHEDG? If so, describe.

________________________________________________________________________

8. What is the projected timeline for completion of the project?
   Completion date: __________________________________________________________

9. Identify the colour code for the proposal:
   □ [ ] Green No special urgency. See completion date under item 8.
   □ [ ] Yellow Document or revision needs development as soon as possible.
   □ [ ] Red Document or revision urgently needed.

Name of proposer: ___________________________________________________________
Affiliation and address: _______________________________________________________
Phone: _____________________________________________________________________
E-Mail: ___________________________________________________________________

________________________________  ______________________________
Signature    Date

(For office use only)
Date received:  
Date reviewed by SubCom Product Portfolio:  
Date assigned to Working Group:  

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