

**Stakeholder Standards Revision Request Form**

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| --- | --- |
| **Name:** |   |
| **Title:** |  |
| **Facility/Organization:** |  |
| **Phone #:** |  |
| **Email:** |  |
| **Date:** |  |

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| --- | --- |
| **Name of Standards Document:** |  |
| **Standard # or Standard Section #:** |  |
| **State suggested revision:** |
| **Specify rationale for revision:** |
| **Indicate appropriate reference to substantiate request: (attach pertinent documentation)** |

**For submission e-mail to: Kim.Skrypnyk@cps.sk.ca**