



Policy Framework

PolicyFramework_IEQA_POL_V02.01

August 2024

Contents

MBZUAI Policy Framework	4
1. Scope.....	4
2. Overview	4
3. Policy Hierarchy.....	4
4. Policy Governance.....	5
5. Roles and Responsibilities	6
6. Policy Development.....	6
7. Policy Review Process	7
8. Policy and Procedure Guidelines	7
1. Objective	7
2. Scope.....	8
3. Terminology and File Name Conventions	8
3.1. Terms	8
3.2. File Coding Convention.....	8
3.3. Administrative Policy Version Numbering.....	10
4. Policy and Procedure Development	10
4.1. Policy Statement(s)	11
4.2. Scope.....	11
4.3. Policy.....	11
4.4. Procedure(s)	12
4.5. Definitions.....	12
4.6. Reference(s) and Related Document(s)	13
4.7. Document Control Information	13
5. IEQA Framework Policy Document Control Information	15
Appendix A – Policy Template	16
Appendix B – Procedures Manual Template.....	18

Department	IEQA	Approval Date	2024/08/28
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Document name	Policy Framework	Document owner	Head of IEQA

MBZUAI Policy Framework

1. Scope

This framework applies to all Mohamed bin Zayed University of Artificial Intelligence policies, procedures, and associated instruments.

2. Overview

This framework describes the requirements and principles governing policy documents and their implementation at Mohamed bin Zayed University of Artificial Intelligence (MBZUAI) to ensure appropriate content, governance, and consistency. MBZUAI recognizes that policies serve as the promoter of the institutional mission, operational efficiencies, effectiveness, and excellence. This policy framework addresses MBZUAI commitment to ensuring that all policies shall be developed, approved, and issued in a consistent manner in compliance with the university's mission.

3. Policy Hierarchy

3.1. Policy Hierarchy: All MBZUAI policy documents are part of a hierarchy that governs university activities. National and Emirate rules and legislation is at the hierarchy's highest level, which takes precedence over policy.

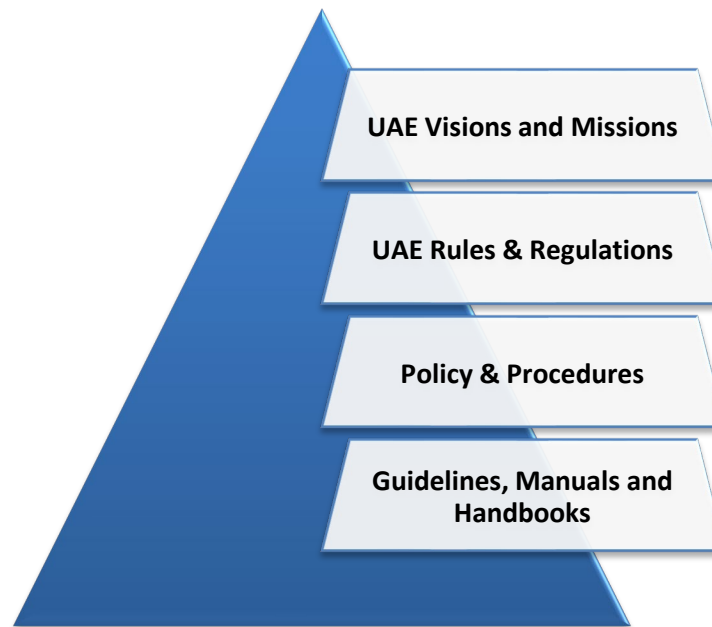


Figure 1: MBZUAI Policy Framework

3.2. Policies are university-wide instruments governing all academic, administrative, and operational functions of the University. They must comply with all relevant National and Emirate legislation and are approved by the appropriate delegated authority.

3.3. Procedures, guidelines, manuals and handbooks are instructional documents that set out

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

processes and information when implementing policies. They must be consistent with the policies that take precedence over them. They are endorsed by the relevant accountable policy owner and approved by the appropriate delegated authority as per the current approved delegation of authority (DoA).

3.4. Document Types and Application:

Document	Scope	Description
UAE Rules & Regulations	Nation-wide	The set of legislative instruments that apply to the UAE in general. Those that directly or indirectly affect MBZUAI must take precedence over any MBZUAI policy, procedure, or guideline.
Policy [POL]	University-wide	A statement of principles, beliefs, or intentions guides decision-making and administration. A policy may identify roles and responsibilities. They describe “what” we do.
Procedure [PRO]		Outlines the interconnected steps describing how to implement and monitor a policy and includes the assignment of accountabilities, tasks, and compliance reporting requirements. They describe “how” we do things.
Guidelines [GDL]		Offer approved and recommended approaches. They often give practical examples of how specific policies may be applied.
Manual [MAN]		A collection of related documents (e.g., policies, procedures, guidelines) with specific tasks/steps that help staff and management conduct institutional activities.
Handbook [HDBK]		A collection of related documents (e.g., policies, procedures, guidelines) that help give general instructions covering a wide range of subjects to students, staff, and management on how to conduct institutional activities.

4. Policy Governance

Policies, procedures, guidelines, manuals and handbooks are to be developed, approved, amended, and reviewed in consultation with all relevant stakeholders and in accordance with the Policy Framework and the Delegation of Authority (DoA) matrix. All records of new, amended, or old documents shall be maintained indefinitely.

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

5. Roles and Responsibilities

Role/Decision/Action	Approver	Accountability	Conditions and limitations
Approval of Policy & Procedures	<ul style="list-style-type: none"> Board of Trustees Or President (as per DoA) 	<ul style="list-style-type: none"> IEQA President/ Chairs/ Directors/ Section heads 	<ul style="list-style-type: none"> Approver according to the Delegation of Authority. Coordinated and announced by IEQA. Created only where there is a justifiable need. Publicly available on the MBZUAI intranet or other relevant location.
Approval of Guidelines, Manuals & Handbooks	<ul style="list-style-type: none"> President/VPs Or IEQA Or VPs/ Chairs/ Directors/ Section heads (as per DoA) 	<ul style="list-style-type: none"> IEQA VPs/ Chairs/ Directors/ Section heads 	<ul style="list-style-type: none"> Approver according to the Delegation of Authority. Created only where there is a justifiable need. Endorsed by the relevant policy owner. Available via the MBZUAI portal/intranet. Access may be restricted to staff only. Managed according to MBZUAI's document management principles and appropriate templates or guidelines.

6. Policy Development

6.1. Every policy must have an individual policy owner. The policy owner will be responsible for the policy's development, dissemination, implementation, maintenance, and review. The policy owner is usually the head of the department. When a need for a new and/or amendment policy is identified, the department, and/or staff shall submit a policy proposal ([Policies and Procedure SharePoint](#)) to the MBZUAI Institutional Effectiveness & Quality Assurance Department (IEQA).

6.2. A template is available to assist staff with policy and procedure development in word format (Appendix A – Policy Template) on the MBZUAI intranet.

6.3. A policy should include features, characteristics, statements, and structure outlined in the MBZUAI policy framework and associated guidelines.

6.4. Policy development, approval, and implementation stages are as follows:

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Needs analysis	Identify the need for the development of a new policy / procedure or review of an existing policy / procedure
Assign policy author/approver or policy committee	Management will determine and nominate an author/committee for the policy
Draft a document	A policy should include features, characteristics, statements, and structure as outlined in the MBZUAI policy framework and associated guidelines.
Benchmark	Policies should be benchmarked against good practice. The below Table is MBZUAI policies benchmark with local and international universities.
Consultation with stakeholders	Stakeholders must be consulted and, if any revision is required, the policy must be updated and returned for final review.
Policy approval	To be approved by the appropriate delegated authority, a policy must meet the identified need and comply with the requirements of the framework and guidelines.
Communication & Implementation	The policy owner ensures that the new or revised policy is communicated to stakeholders and the policy is correctly implemented.

MBZUAI policy implementation methodology

7. Policy Review Process

- 7.1. All policies and procedures should be reviewed every 2 years. Policies may be reviewed and may not necessarily require an amendment and/or update. In this case, revision justification shall be classified as review for compliance.
- 7.2. In some instances, the review may be required earlier if there is a legislative or regulatory requirement for a specific change from external stakeholders.
- 7.3. Minor changes can undergo an update without the DoA approval process. In all circumstances a circular shall be made to the MBZUAI for any updates.
- 7.4. An annual policy compliance check is the policy owner's responsibility. Compliance will be assessed against criteria including, but not limited to, alignment with any legislation, relevance and conformance with the policy framework, alignment with other university policy instruments, etc.
- 7.5. IEQA is responsible for ensuring the policy owner is advised of the timeframe when a policy is due for revision annually.

8. Policy and Procedure Guidelines

1. Objective

The purpose of these guidelines is to define a process for the effective and consistent development, review, publication, approval, and administration of university policies & procedures. These guidelines have been designed according to good international practices to contribute positively to the development process of policies and ensure robust consultation.

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

2. Scope

The guidelines apply to all members of the MBZUAI community who are involved with any aspect of policy & procedures development and implementation.

3. Terminology and File Name Conventions

Set out below is a glossary of terms and standardized conventions that should be used when developing policies and/or policy related documents. Using a MBZUAI's standardized naming convention will facilitate uniformity within and across policies, enable a consistent communication method, and mitigate against confusion.

3.1. Terms

Abbreviation	Document Type
POL	Policy (and procedure)
PRO	Procedure
GDL	Guideline
MAN	Manual
HDBK	Handbook

3.2. File Coding Convention

The file coding convention of all policies or policy related documents will include the following in the below order:

1. The file name: e.g. PolicyFramework, StaffManual, StudentHandbook
2. The abbreviation of the department/ division. For example, Academic Affairs = AA (see abbreviations)
3. The abbreviation for the type of document. The most common abbreviations are policy (POL), guideline (GDL), manual (MAN) and handbook (HDBK)
4. A version number in the format Vnn.nn (e.g. V01.00)

Formal ratified documents e.g. policies, manuals, guidelines, catalogs, handbooks etc.

Element	Document Title	Dept/Committee	Document Type	Version Control*
Format	UpperCaseDelimit	_ACRONYM	_ABBREVIATION	_V00.00
Example 1	Communications_IT_POL_V01.01			
Example 2	StaffManual_HR_MAN_V02.00			
Example 3	StudentHandbook_EA_HDBK_V02.01			

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Each policy must have the following at the footer of the second page after Document Control (as shown below)

- Department Name
- Document Reference
- Document Name
- Approval Date
- Next Revision Date
- Document Owner

A Footer example is shown below for the Institutional Effectiveness and Quality Assurance Department:

Department	IEQA	Approval Date	2024/MM/DD
Document Reference	PolicyFramework_IEQA_POL_v01.01	Revision Date	2026/MM/DD
Document name	Policy Framework	Document owner	Head of IEQA

Each policy must have the following at the header of the second page (as shown below)

- Top Left: Page Number (e.g. Page 2 of 23)
- Top Right: Abbreviated University Name followed by Document Name

Page 2 of 23

MBZUAI Policy Framework

The abbreviation for Division/Department/Section names should follow the list below:

Division / Department Abbreviations and Acronyms

Acronym	Department / Division Name	Acronym	Department / Division Name
OP	Office of the President	IEQA	Institutional Effectiveness and Quality Assurance
AA	Academic Affairs (Provost's Office)	IT	Information Technology
AADM	Academic Administration	LA	Legal Affairs
AL	Alumni	ML	Machine Learning
AR	Archives and Records	MC	Marketing and Communications
CI	Careers and Internships	NLP	Natural Language Processing
CS	Computer Science	OR	Outreach
CV	Computer Vision	PROC	Procurement
CS	Corporate Services	PROT	Protocol
CB	Computational Biology	PS	Professional Services
EA	Educational Affairs	PAAR	Public Affairs and Alumni Relations
MEP	Executive Education Program	RO	Registrar Office
FM	Facilities Management	RES	Research
FIN	Finance	ROB	Robotics
GS	General Services	SP	Special Projects
HCI	Human Computer Interaction	SF	Strategy and Future
HR	Human Resources	SL	Student Life
IA	Internal Audit		

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

3.3. Administrative Policy Version Numbering

This detail will be at the end of the document. The aim of creating administrative policy numbering for each department/unit is to:

- Identify the policy.
- Communicate the version number indicating major/minor amendments.
- Communicate the draft or final status of the policy.
- Facilitate the organization of all policy documents.

Major Release

A major release is required in a policy if the change impacts the content of the policy. This is reflected by increasing the whole version number, e.g., V01.00, V02.00, V03.00, etc.

Minor Release

A minor release is where small changes such as grammar, spelling, or minor corrections occur but do not impact the content of the policy. This is reflected by increasing the decimal version number, e.g., V01.01, V01.02, V01.03, etc.

Versioning Convention

Release	Examples
A major change occurs when a document undergoes approved substantive changes.	V01.00 (first approved version) V02.00 (second approved version)
A minor change occurs when clarifications or typographical modifications are made.	V01.01 (minor amendment of first approved version) V02.01 (minor amendment of second approved version)

4. Policy and Procedure Development

The policy template must be used for all policies to ensure that all required policy elements are present and set out in a consistent format. All required items must be included in a policy without making any changes in the structure or order unless an exception is granted. The policy and procedure template (Appendix A) is available on the MBZUAI staff intranet. MBZUAI shall adapt a standardized policy format to guarantee uniformity and consistency. Therefore, MBZUAI policies, with procedures when applicable, shall be written according to the following format upon implementation of this framework:

1. **Cover page:** Should have the MBZUAI logo, followed by the document name, with reference number and date of release in the form of month and year e.g. *February 2024*.
2. **Table of Contents:** All headings and sub-headings should be hyperlinked to page numbers.
3. **Policy statement and purpose:** (mandatory element) is a statement that describes the main purpose of the policy.
4. **Scope:** (mandatory element) is a statement that identifies all parties bound by the policy.
5. **Policy:** (mandatory element) a set of general rules and management directions that labels the policy topics and may comprise of duties and responsibilities assigned to designated department or staff as needed; and if applicable explicit authority to impose disciplinary actions and penalties, or other remedies when noncompliance with the policy takes place.
6. **Procedure:** (if applicable) Procedure means a group of processes typically done in a standard order to achieve an objective/task.

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

7. **Definitions:** (if applicable) a set of explanation of terms and abbreviations used in the policy.
8. **Reference(s) and Related Document(s):** (mandatory element) a statement that gives information about where the policy writer sourced information e.g. law, article, etc. showing where particular information was sourced.
9. **Document Control Information:** (mandatory element) shall include the following information after the table of contents:
 - a. Version Number
 - b. Role Responsible (Job title)
 - c. Comments (summary description of the changes)
 - d. Date of change YYYYMMDD (the approval date)
10. **Approval list:** (mandatory element) this list is needed for initial approvals in addition to all subsequent updates. The approval list shall follow the Delegation of Authority (DoA) Matrix which include dates of each of the sequence steps: (1) policy owner, (2) IEQA review, (3) initiators, (4) endorsers and (5) approvers. The responsible role (job title, committee, etc.) for each sequence step shall be included.

To summarize, the policy, and if applicable the procedure, should include the items below:

1. **Cover Page**
2. **Table of Contents**
3. **Policy Statement**
4. **Scope**
5. **Policy**
6. **Definitions**
7. **Reference(s) and Related Document(s)**
8. **Document Control Information**
9. **Approval List**

4.1. Policy Statement(s)

This is an introductory statement that should give an overview of the policy, it's purpose and how it is situated within the context of MBZUAI. In addition, it should list the objectives of the policy, and if appropriate; list the aims or intended outcomes of the policy.

4.2. Scope

The scope is a statement that identifies all parties bound to the policy or who will be affected by the policy:

- Who is the primary audience? (Who needs to follow the policy?)
- In what situation(s) does this policy not apply?
- Are there any significant conditions or restrictions?

4.3. Policy

The policy will set general rules and management directions that labels the policy topics and may comprise of duties and responsibilities assigned to designated department or staff as needed; and if applicable explicit authority to impose disciplinary actions and penalties, or other remedies when noncompliance with the policy takes place.

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Below are points to consider in the policy section:

- Be concise, readable, easily applied and interpreted, and expressed using plain English.
- Use strong action words (will, must, are responsible for, etc.). Do not use “shall” in a policy statement.
- Create transparency; and
- Reduce ambiguity.

4.4. Procedure(s)

Procedure is a group of processes/steps typically taken in order to achieve an objective/task. Procedures are marked with the same policy number with an alphabetical order subsequent to the policy number.

Below are points to consider in the procedure section:

- Describe how the procedure will achieve policy implementation
- What are your objectives for this procedure?
- What does the procedure aim to do?
- Methods are developed in coordination with all stakeholders
- Do not include information that may be outdated (e.g., names)
- Include job roles, committees, departments, etc. for each procedure
- If you use an acronym, identify it the first time you use it
- Include step-by-step instructions
- Not too technical, brief enough to be understood by a new user

The procedure may be divided into different sections or procedure areas to delineate the various aspects of the overall procedure.

4.5. Definitions

The table of definitions follows the approval list. A table providing definitions of terms in the policy will ensure all users understand the terminology and can use it consistently. Terms and definitions should be reviewed and updated as appropriate. All terms and definitions should be given in simple language understandable by any reader. If an abbreviation is utilized throughout the document, then this may be added to this section.

A simple example is given below:

Terminology	Definition
MBZUAI	The Mohamed bin Zayed University of Artificial Intelligence.
Board of Trustees (BoT/Board)	The Board of Trustees formed through a resolution issued by the chairman of the Executive Council. The Board shall exercise all the powers required to conduct the work of the university, supervise the management of its affairs, and achieve its objectives.

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

President	The President is the Chief Executive Officer of MBZUAI. The President shall, subject to the direction, and under the supervision of the Board of Trustees, have the necessary powers to manage the university, discharge the affairs and represent it before other parties and judiciary.
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4.6. Reference(s) and Related Document(s)

Information should be included about where the policy writer sourced information, e.g. law, article, standards, Board of Trustees directives, President Directives, etc.

Include a list of other documents referenced within the policy or which should be read in conjunction with the policy. If appropriate, identify the section to which the related document corresponds e.g. Section 6.2, Student Handbook or Section 1.5, HR Manual, etc.

If applicable, file naming conventions should be utilized (see Section3, PolicyFramework_IEQA_POL_V02.00).

4.7. Document Control Information

This section is placed at the end of the document. Document control information and version history information is essential when issuing new documents and any documents that undergo a revision process. This will help identify the document correctly, identify when key decisions were made, track revision numbers with different users if applicable, and ensure that the most current document version is being used.

Each item in a left-hand column must have a corresponding number, text, or date, depending on the requirement. NB: Dates should be written in month/year format.

Version number	File Name	Responsible Role	Comments	Date of change
V01.00	FileName_Dept_Document_VersionControl e.g. PolicyFramework_IEQA_POL_v02.00	Job position Or Committee Name	List of Changes	Feb 2024
V01.01				
V02.00				

The status of all policies will be entered on the tracker and located on the IEQA tasks SharePoint or designated software.

Approver list:

This section will be under the document control information at the end of the document. It is a historical record for the reviewal process of the policy/procedure that has a list of the persons responsible, workflow and the date. The approval list shall refer to the document as per the table below. The process shall start with policy owner and IEQA, prior to proceeding to the authorized DoA matrix (Initiator, Endorser and Approver).

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

The date shall follow the format as described below YYYY-MM-DD.

Approval List: DocumentName_Dept._DocumentType_V01.00				
Sequence Number	Sequence Roles	Responsible Role	Comments	Date
1	Policy Owner / Initiator			YYYY-MM-DD
2	IEQA Review			
3	Legal Review			
4	Endorser			
5	Approver			

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

5. IEQA Framework Policy Document Control Information

Document Control Information for Policy Framework IEQA

Version number	File Name	Responsible Role	Comments	Date of change
V01	PolicyFramework_IEQA_POL_V01.01	Head of IEQA	First approved version	Jan 2022
V01.01	PolicyFramework_IEQA_POL_V01.01	Head of IEQA	Aligned Departments to approved MBZUAI Org Chart, added 7.5 point, updated footer example, and added Policy review List and Revision History.	Nov 2022
V02	PolicyFramework_IEQA_POL_V02.00	Head of IEQA	Framework updated to meet requirements of internal audit, The Ministry of Education (MOE) Inspection Directorate and the Commission of Academic Accreditation (CAA) Regulatory Bodies. Policies and Procedures merged, file name conventions aligned with records and archives.	Feb 2024
V02.01	PolicyFramework_IEQA_POL_V02.01	Head of IEQA	Introduction of Appendix B for procedures. Revision of Appendix A to align appendices.	September 2024

Approval List

Approval List: PolicyFramework_IEQA_POL_V02.01				
Sequence Number	Sequence Roles	Responsible Role	Comments	Date
1	Policy Owner	Head of IEQA		2024-02-19
2	IEQA Review	N/A		
3	Initiator	Head of IEQA		2024-02-19
4	Endorser	Acting Director of Strategy and IEQA		2024-02-22
5	Approver	President		2024-08-28

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Appendix A – Policy Template

Note: All body text shall be Calibri size 11, with bold font (in blue) implemented for titles and headlines.

Titles and headlines can exceed font size of 11 in Calibri font.

In policy related documents which contain overarching procedure(s) the respective policy and procedure can be combined. Detailed procedures or procedures not linked can be developed into their own manual (Appendix B).

1. POLICY STATEMENT

1.1.

1.2.

2. PURPOSE

2.1.

2.2.

3. SCOPE

3.1.

3.2.

4. POLICY

4.1.

4.2.

3.2.A See (Name) PROCEDURE ([Link to Procedure Manual](#))

5. DEFINITIONS

5.1

5.2

6. REFERENCE(S) AND RELATED DOCUMENT(S)

6.1

6.2

7. Document Control Information

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Document Control Information

Version number	File Name	Responsible Role	Comments	Date of change

Approval List (as per DOA)

Approval List: DocumentName_Dept._DocumentType_V01.00				
Sequence Number	Sequence Roles	Responsible Role	Comments	Date
1	Policy Owner / Initiator			YYYY-MM-DD
2	IEQA Review			
3	Legal Review			
4	Endorser			
5	Approver			

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Appendix B – Procedures Manual Template

Note: All body text shall be Calibri size 11, with bold font (in blue) implemented for titles and headlines.

Titles and headlines can exceed font size of 11 in Calibri font.

In documents which contain multiple detailed procedures, the procedure(s) can be separated and hyperlinked to the policy manual. Objective Section 2 can be removed if the procedures manual is linked to a policy manual.

Procedures not linked to policies may also follow the format of Appendix B.

1. PROCEDURES MANUAL STATEMENT

1.1.

1.2.

2. SCOPE

2.1.

2.2.

3. PROCEDURE

3.1.A PROCEDURE 1

3.2.B PROCEDURE 2

OR

3.1 PROCEDURE 1

3.2 PROCEDURE 2

4. REFERENCE(S) AND RELATED DOCUMENT(S)

4.1

4.2

5. Document Control Information

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
Document name	Policy Framework	Document owner	Head of IEQA

Document Control Information

Version number	File Name	Responsible Role	Comments	Date of change

Approval List

Approval List: DocumentName_Dept._DocumentType_V01.00				
Sequence Number	Sequence Roles	Responsible Role	Comments	Date
1	Manual Owner / Initiator			YYYY-MM-DD
2	Reviewer 1			
3	Reviewer 2			
4	Approver			

Department	IEQA	Approval Date	2024/08/28
Document Reference	PolicyFramework_IEQA_POL_V02.01	Revision Date	2026/07/28
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