Control Cover Sheet

NWS Policy Directive (PD)

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| **NUMBER AND TITLE** | **NWSPD X-XX - Directive Title** | |
| **DESCRIPTION AND**  **RECOMMENDATION** | *(Type a brief description of the directive and the update work being done, plus any recommendations to reviewers).* | |
| **ACTION REQUIRED** | *(Annotate the action being required from reviewers).*  Ex: Please review and concur/sign or provide comments. | |
| **Coordination/CONCURREnce** | | |
| **Routing Code, Name, and Signature/Date** | | **Routing Code, Name, and Signature/Date** |
| W/OPR – | | W/ |
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| *(Add lines/reviewees above, if necessary)* | | |
| **REVIEW/CLEARANCE** | | |
| **GCWSR –** | | **W/OCFO –** |
| **W/CFO2 –** | | **W/OPPSD –** |
| **NWSEO (Union) –** | | **W/OCOO –** |
| **FINAL CLEARANCES/APPROVAL** | | |
| **W/COS –** | | **Wx11/AA –** |
| **Wx1/DAA –** | |
| **Drafted by:** Name of Preparer/OPR **Telephone:** Preparer/OPR Phone# *W/OCOS: After approval signature, please**return to OCAO/MOD (E. DaSilva – T: 301-427-9026). Thank you.* | | |