

Cover Report Checklist

Report Title:			
Report For:	Please state who the report is for.		
Unitary/BAU:	Please state if this report reports to BAU or Unitary.		
Meeting Date:			
Proposed Report Schedule (please state not applicable where report is not required):	Meeting	Date (dd/mm/yyyy)	Actual Date Signed off
	Workstream		
	Resources Board		
	Communities Board		
	Housing, Growth and Economy Board		
	Chief Executive Implementation Group		
	Shadow Executive (Informal)		
	Shadow Executive (Formal)		
Purpose of Report:	For Information/Consideration/Decision (Delete as required)		
Responsible Officer:	Insert name of accountable officer presenting the report.		
Report Author:	Insert officer name, contact number, email.		
Finance advice provided by:	Insert the name and contact of who provided any finance advice.		
Legal advice provided by:	Insert the name and contact of who provided any legal advice.		
Equalities Impact assessment required?	Yes/No – Please refer to appendix 8 for full guidance. Further advice can be sought from		
Data Protection Impact assessment required?	Yes/No – Please refer to appendix 23 for full guidance. Further advice can be sought from .		
<i>Please consider from the list below who needs to be consulted in the preparation of this report prior to submission to the relevant meetings. If you are in doubt please consult your programme leads or the PMO.</i>			
	Member Portfolio Holder	Yes/No (date)	
	Programme Lead/Task and Finish Group Lead Member (As required)	Yes/No (date)	
	Section 151 – (All Reports)	Yes/No (date)	
	Monitoring Officer – (All Reports)	Yes/No (date)	