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Form for Proposed Resolution or Platform Item

Deadline: November 1 (at the Iowa PTA office)

Name of PTA/PTSA Unit or Council _____

City _____ Zip _____

Contact Person _____ Phone _____

Resolution or Platform Item:

Rationale (if Platform Item):

** Attach additional pages if necessary **

For Office Use

Is Proposed Action:

- In accordance with PTA Mission and Purpose?
- Related to education, health, or welfare of children and youth?
- Accompanied by background data, table of contents, and reference sheets. Are pages numbered consecutively?
- Signed by the unit or council president and secretary?
- (if legislative) Related to state rules, regulations, agencies, or legislature's action?
- Related to state and local statutes?

Signatures:

President

Secretary

Date