Form for Proposed Resolution or Platform Item

Deadline: November 1 (at the Iowa PTA office)
PO Box 10634, Cedar Rapids, IA 52410

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