



Proposed Resolution and Bylaw Amendment Submission Form

SUBMISSION INSTRUCTIONS: This form must be emailed directly to NYSSBA Governmental Relations at advocacy@nyssba.org. Please include your district's name in the subject line of the email.

RESOLVED:

RATIONALE:

SUBMITTED BY:

I, _____, Board President Superintendent Board Clerk
(Select one - no substitutions)

am submitting this resolution on behalf of _____ on _____
(District/BOCES Name) (Date)

Name of the designated contact person available on the day of the Resolution Committee Meeting 9 a.m. to 5 p.m. to respond to any questions/concerns of the Resolutions Committee:

Name _____ Board Position _____
 Phone Number _____ Email Address _____