

# RESOLUTION COVER SHEET (GEORGIA PTA)



**Purpose:**

This cover sheet must accompany any resolutions proposed for action by delegates to the Georgia PTA Convention.

**Instructions:**

- Make copies of this form as needed.
- Use a separate form for each resolution.
- Fill in the information requested below. Please print.
- Must be postmarked by **the first Friday in January that is a business day.**
- **Mail to Georgia PTA, 114 Baker Street, NE, Atlanta, GA 30308-3366.**

Date		Local Unit ID #	
District	Council	PTA Name	
Contact Person		PTA Position	
Address			
City		State	Zip
Cell Phone		Home Phone	
Email			

## RESOLUTIONS CHECKLIST

Georgia PTA reviews submitted resolutions against criteria established by National PTA. More information about these requirements can be found on National PTA’s website, [www.pta.org](http://www.pta.org).

**This resolution:**

- Concerns a field of interest of Georgia PTA and is in agreement with the Purposes and basic policies of National PTA.
- Concerns a matter that is statewide in scope and requires statewide action for solution.
- States a position not previously adopted by National or Georgia PTA.
- Is written in language appropriate for state consideration.
- Includes a table of contents.
- Is accompanied by background material that is statewide in scope and from a variety of sources.
- Does not use PTA materials as a reference.
- Uses current resource material (less than 6 years old).
- Included background references from accurate sources for each *Whereas* statement. (Newspaper articles, abstracts, and editorials alone are not adequate documentation.)
- Includes a reference sheet that substantiates each *Whereas* statement.
- Provides sufficient background to give a person with no knowledge of the subject enough information to make an intelligent decision.
- Does not contain more than 25 double-sided pages of documentation (numbered consecutively, in no smaller than 12 pt. Times New Roman).

President’s Signature: \_\_\_\_\_