



*everychild.one voice.*

2525 North Shadeland Ave., D-4

Indianapolis, IN 46219

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November 2009

TO: Local Unit Presidents  
Council Presidents  
Legislative Chairmen

FROM: Legislative Committee Chairman, Theresa Distelrath

RE: Procedure for Amending Indiana PTA Legislative Program

Being a part of the legislative process is one of the most important ways that PTA can impact the lives of children. It is only with your assistance and input that this organization can stay at the forefront of issues affecting our children. This is your opportunity to be the voice of the children in your school, community, city, state and possibly the nation. This is one way to make every child's potential a reality.

Indiana PTA Bylaws require that new or amended items for the State Legislative Program, which are received in writing in the State Office by the January 25, 2010 deadline and are in accordance with the vision, mission, purposes and basic policies of PTA, shall be presented to the convention delegates for their action.

To be appropriate for possible consideration by the convention a proposal must:

1. Pertain to the education, health and welfare of children and youth, be statewide in scope, and be in accord with National PTA's Vision, Mission Purposes and Basic Policies.
2. Be accompanied by background information and rationale. (**Documented background information must be accurate, factual and complete.**)
3. Postmarked or hand delivered to the State Office by January 25, 2010.

Proposals must be signed by the President and Secretary of the submitting group, and include the date on which the local membership voted to submit the proposal. They must be submitted with the completed action cover sheet which is attached.

**Indiana PTA  
Legislative Program Cover Sheet**

Subject: (Check One)

Addition\_\_\_\_\_Deletion\_\_\_\_\_Change\_\_\_\_\_

Originating Group:

Unit\_\_\_\_\_ Council\_\_\_\_\_

Unit or Council Name:\_\_\_\_\_

Local Contact Person:

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Name (Area Code) Phone

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Address Zip Code

Endorsed by other PTA Units or Councils? Yes\_\_\_\_\_ No\_\_\_\_\_

(If yes, attach copy of endorsements and Name of PTA Unit.)

Checklist: **(All four (4) criteria must be met)**

1. Is the proposed action in accordance with PTA Purposes and policies?\_\_\_\_\_
2. Is it related to education, health and welfare of children and youth?\_\_\_\_\_
3. Is it accompanied by background data and rationale?\_\_\_\_\_
4. Is it signed by the group's President and Secretary?\_\_\_\_\_

**Signatures:**

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President Secretary Date

**THE PROPOSAL MUST BE POSTMARKED OR HAND DELIVERED BY  
JANUARY 25, 2010**

Mail to: Indiana PTA  
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