



Amendment Request Form

This form is to be used for submitting a Proposed Amendment to a resolution that has been recommended by the Resolutions Committee.

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.

CURRENT RESOLUTION:

RESOLUTION WITH REQUESTED AMENDMENTS:

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 to respond to any questions/concerns:

Name _____ Board Position _____

Phone Number _____ Email Address _____