

AASG

Resolution Cover Sheet

Resolutions must be submitted with this cover sheet in order to be brought before the general assembly. A GA approved resolution will be sent only to agencies/individuals with complete addresses included.

Title of the Resolution: _____

Name of the Author: _____ School: _____

1. Has the member school approved the resolution? _____
(If so, the resolution will bear the name of the school. If not, it will bear the name of the author only.)

2. What action do you want AASG to do?

Who do you wish to receive a copy of this resolution? **Attach the name and addresses of the individual(s) and/or agencies that are to receive a copy of this resolution.**

- Local School Board
- Local Mayor/City Council
- State Board of Education & Early Development
- Alaska School Activities Assoc.
- Professional Associations
- State Legislature
- Other: _____

3. How would this resolution benefit from the support of AASG?

4. What have you/your school/your district already done to address this issue?

5. Have you cited sources accurately? __Y __N