PLEASE TYPE OR PRINT IN INK

SEANC POLICY PLATFORM MODIFICATION FORM

District:	
Issue or concern:	
Language for amendment or proposed objective:	
Need for proposed change:	
ACTION: Favorable Unfavorable District Policy Platform Committee	
District meeting State Policy Platform Committee Annual Convention	(originator/date)
Comments:	(District Policy Platform Chair/date)
	(District Chair/date)
SEANC USE ONLY	
Foundation Statement Objective/ Category Amend Delete Add	
Estimated cost: Source of estimate: Source of funding: Number of employees affected: Agency responsible for implementation:	

IMPORTANT: One (1) completed copy must be mailed or brought to the SEANC Central Office within five (5) working days following the district's adoption. Mail to: SEANC Policy Platform, 1621 Midtown Pl, Raleigh NC 27609. Contact SEANC for more information at 919-833-6436 locally or 1-800-222-2758.

Instructions for SEANC POLICY PLATFORM FORM

DISTRICT

District #: Fill in district number.

Issue or concern: Use short descriptive title of the subject being addressed.

Language for

proposed objective: State the policy or objective as you would have it written in the Policy Platform.

Need for proposed

change: Describe the present situation and why change is needed.

Originator: The name is helpful for future reference. This is not required.

Signatures: Signatures of both the District Chair and the District Policy Platform Chairs are

required.

Action: Indicate the action taken at the district meeting(s).

Mail: Mail or bring one copy to the SEANC central office within 5 days after the action.

SEANC

Foundation statement,

objective: Indicate by checking whether the proposed change deals with a foundation

statement or objective.

Category: Use one of the categories listed below; refer to the Policy Platform.

Amend, Delete or

Add: Indicate by checking whether the proposed change will amend or delete an

existing statement or objective, or will add a new statement or objective.

Estimated cost: Efforts should be made to estimate the cost, if any, of the requested action.

Source of estimate: Indicate where estimate was obtained.

Source of funding: Indicate where the funds should come from; for example, agency receipts,

appropriation, employee.

Number of employees

affected: Estimate the number of employees involved.

Agency responsible for

implementation: Indicate who has the authority to effect proposed change.

POLICY PLATFORM CATEGORIES

Salary: Across-the- board increases, merit, longevity, disability salary continuation

Personnel: Classifications, employee relations, promotional policies, staff levels, leave policies

Retirement: Formula, equality of benefits, death benefit, survivors' alternate benefit

Health Care: Coverage, dental insurance, quality of service

External/Other: Travel expenses, physical facilities

Internal issues: Operating policies and procedures, SEANC studies, membership benefits.