

**Resolution Submission Form**

**This form must be postmarked and sent to the National Office no later than July 9, 2017. An email will also be accepted on July 9th.**

**Submitting Resolutions:**

1. *All resolutions must be related to one or more of the four goals of CLUW as stated in the CLUW constitution:* participation of women in their unions, affirmative action in the work place, organizing unorganized women and political action and legislation.
2. All resolutions must be submitted to the CLUW National President by mail or email 60 days before the start of the convention. **The July 9, 2017 deadline** will be strictly enforced. Resolutions may be emailed as attachments in MS Word document form to [cleak@cluw.org](mailto:cleak@cluw.org) with a cc to CLUW@cluw.org (Subject: CLUW Convention Resolutions); or mailed (send flash drive and hard copy) to: CLUW Convention Resolutions, ATTN: President Connie Leak, 815 16th Street, NW, Second Floor South, Washington, DC 20006.
3. Resolutions may be submitted by an individual member(s), standing committees, chapters or the National Officers Council. Submissions by a standing committee must be signed by at least one co-chair of the committee. Submissions by a chapter must be signed by the chapter president.
4. Resolutions must include a resolutions contact person who can answer questions about the submission, in case the resolutions committee needs additional information or has questions.
5. Resolutions should include a title (which may be changed by the committee) and action items for CLUW implementation at the national, state or chapter levels, and as individual members.
6. Documentation of statistics, relevant legislation or other statements of fact referenced in the resolution should be included — copy of legislation, magazine articles, union publications, etc
7. Resolutions should be submitted with background information made as statements of fact instead of “whereas” clauses, but with as many “resolved” clauses as needed.

**(Detach form and submit with proposed resolution) (PLEASE PRINT CLEARLY)**

Date:

Name of Resolution:

Submitted by: Name and Union or Chapter and President’s Name

Documentation Attached? Yes No

Resolutions Contact Person for questions:

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Remarks: