Agenda Item Requests

Use this form to request items for your upcoming agenda. Do not include STANDING ITEMS Submit this form on the same day that you email your Minutes to Admin. (within 7 days after meeting)

* Indicates required question

1. YOUR NAME (EVEN IF NOT PRESENTING THE ITEM) *

2. THIS AGENDA ITEM IS FOR THE: _____. * Dropdown

Mark only one oval.

- GENERAL ECAC
- EXECUTIVE LEADERSHIP SUBCOMMITTEE
- COMMUNICATIONS AND ENGAGEMENT SUBCOMMITTEE
- DATA SUBCOMMITTEE
- FAMILY LEADERSHIP AND ENGAGEMENT SUBCOMMITTEE
- POLICY AND FINANCE SUBCOMMITTEE
- WORKFORCE DEVELOPMENT SUBCOMMITTEE

3. DATE OF THE MEETING *

Example: January 7, 2019

4. REQUESTED AGENDA ITEM TITLE *

5. Choose one Agenda Item Type: * Dropdown

Mark only one oval.

- (Discussion For Possible Action)
- (Informational and Discussion)
- (Informational and Review)

6. **Agenda Item Description:** *

Describe the requested Agenda item in one brief sentence overview.
Begin with:
"The Members will "
"This Subcommittee will "
"The Council will"
Capitalize "Names"
Check for correct spelling
Check for repetitive use of words
Use present continuous tense (not past tense)

7. **Who is presenting this item?** *

Co- Chairs of _____
OR
First and Last name of presenter (if not the Co-Chairs)

AND
Title of the Presenter (if presenting a topic that is representing an agency/brand/organization)
Other titles can include:
Parent, Family Member, Family Leadership Graduate, Subcommittee Co-Chair, Subcommittee Member
General ECAC Member
ECAC Partner

8. **How much time are you requesting be allocated for this item?** (this is not guaranteed, we just need an idea) * Dropdown

Mark only one oval.

- 2-5 MINUTES
- 6-8 MINUTEES
- AROUND 10 MINUTES
- 10-12 MINUTES
- 12-14 MINUTES
- 15+ MINUTES (WE WILL EMAIL YOU TO CONFIRM AMOUNT OF TIME NEEDED AND AVAILABILITY OF THE AGENDA)

9. **Will there be materials or websites to screen share?** Select as many items as are applicable: *

Check all that apply.

- [ ] No, there is not anything to view or hand out to participants
- [ ] YES! There are websites / links to share on screen during this item
- [ ] YES! There is documents (PDF or WORD) to share on screen during this item
- [ ] YES! I have a PowerPoint/Slideshow to share on screen during this item
- [ ] Other: _____

10. Will assistance be needed to screenshare the items? *

Mark only one oval.

- ◯ Yes, Please!!!
- ◯ No, Thank you anyway!

11. DO YOU NEED TO REQUEST ANOTHER AGENDA ITEM? *

Mark only one oval.

- ◯ Yes *Skip to question 12*
- ◯ No *Skip to question 43*

SECOND AGENDA ITEM REQUEST

12. REQUESTED AGENDA ITEM TITLE *

_____

13. Choose one Agenda Item Type: * Dropdown

Mark only one oval.

- ◯ (Discussion For Possible Action)
- ◯ (Informational and Discussion)
- ◯ (Informational and Review)

14. **Agenda Item Description:** *

Describe the requested Agenda item in one brief sentence overview.
Begin with:
"The Members will "
"This Subcommittee will "
"The Council will"
Capitalize "Names"
Check for correct spelling
Check for repetitive use of words
Use present continuous tense (not past tense)

_____
_____
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15. **Who is presenting this item?** *

Co- Chairs of _____
OR
First and Last name of presenter (if not the Co-Chairs)

AND
Title of the Presenter (if presenting a topic that is representing an agency/brand/organization)
Other titles can include:
Parent, Family Member, Family Leadership Graduate, Subcommittee Co-Chair, Subcommittee Member
General ECAC Member
ECAC Partner

_____

16. **How much time are you requesting be allocated for this item?** (this is not guaranteed, we just need an idea) * Dropdown

Mark only one oval.

- ◯ 2-5 MINUTES
- ◯ 6-8 MINUTEES
- ◯ AROUND 10 MINUTES
- ◯ 10-12 MINUTES
- ◯ 12-14 MINUTES
- ◯ 15+ MINUTES (WE WILL EMAIL YOU TO CONFIRM AMOUNT OF TIME NEEDED AND AVAILABILITY OF THE AGENDA)

17. **Will there be materials or websites to screen share?** Select as many items as are applicable: *

Check all that apply.

- [ ] No, there is not anything to view or hand out to participants
- [ ] YES! There are websites / links to share on screen during this item
- [ ] YES! There is documents (PDF or WORD) to share on screen during this item
- [ ] YES! I have a PowerPoint/Slideshow to share on screen during this item
- [ ] Other: _____

18. Will assistance be needed to screenshare the items? *

Mark only one oval.

- ◯ Yes, Please!!!
- ◯ No, Thank you anyway!

19. DO YOU NEED TO REQUEST ANOTHER AGENDA ITEM? *

Mark only one oval.

- ◯ Yes *Skip to question 20*
- ◯ No *Skip to question 43*

THIRD AGENDA ITEM REQUEST

20. REQUESTED AGENDA ITEM TITLE *

_____

21. Choose one Agenda Item Type: * Dropdown

Mark only one oval.

- ◯ (Discussion For Possible Action)
- ◯ (Informational and Discussion)
- ◯ (Informational and Review)

22. **Agenda Item Description:** *

Describe the requested Agenda item in one brief sentence overview.
Begin with:
"The Members will "
"This Subcommittee will "
"The Council will"
Capitalize "Names"
Check for correct spelling
Check for repetitive use of words
Use present continuous tense (not past tense)

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_____
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23. **Who is presenting this item?** *

Co- Chairs of _____
OR
First and Last name of presenter (if not the Co-Chairs)

AND
Title of the Presenter (if presenting a topic that is representing an agency/brand/organization)
Other titles can include:
Parent, Family Member, Family Leadership Graduate, Subcommittee Co-Chair, Subcommittee Member
General ECAC Member
ECAC Partner

_____

24. **How much time are you requesting be allocated for this item?** (this is not guaranteed, we just need an idea) * Dropdown

Mark only one oval.

- ◯ 2-5 MINUTES
- ◯ 6-8 MINUTEES
- ◯ AROUND 10 MINUTES
- ◯ 10-12 MINUTES
- ◯ 12-14 MINUTES
- ◯ 15+ MINUTES (WE WILL EMAIL YOU TO CONFIRM AMOUNT OF TIME NEEDED AND AVAILABILITY OF THE AGENDA)

25. **Will there be materials or websites to screen share?** Select as many items as are applicable: *

Check all that apply.

- [ ] No, there is not anything to view or hand out to participants
- [ ] YES! There are websites / links to share on screen during this item
- [ ] YES! There is documents (PDF or WORD) to share on screen during this item
- [ ] YES! I have a PowerPoint/Slideshow to share on screen during this item
- [ ] Other: _____

26. Will assistance be needed to screenshare the items? *

Mark only one oval.

- ◯ Yes, Please!!!
- ◯ No, Thank you anyway!

27. DO YOU NEED TO REQUEST ANOTHER AGENDA ITEM? *

Mark only one oval.

- ◯ Yes *Skip to question 28*
- ◯ No *Skip to question 43*

FOURTH AGENDA ITEM REQUEST

28. REQUESTED AGENDA ITEM TITLE *

_____

29. Choose one Agenda Item Type: * Dropdown

Mark only one oval.

- ◯ (Discussion For Possible Action)
- ◯ (Informational and Discussion)
- ◯ (Informational and Review)

30. **Agenda Item Description:** *

Describe the requested Agenda item in one brief sentence overview.
Begin with:
"The Members will "
"This Subcommittee will "
"The Council will"
Capitalize "Names"
Check for correct spelling
Check for repetitive use of words
Use present continuous tense (not past tense)

_____
_____
_____
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_____

31. **Who is presenting this item?** *

Co- Chairs of _____
OR
First and Last name of presenter (if not the Co-Chairs)

AND
Title of the Presenter (if presenting a topic that is representing an agency/brand/organization)
Other titles can include:
Parent, Family Member, Family Leadership Graduate, Subcommittee Co-Chair, Subcommittee Member
General ECAC Member
ECAC Partner

_____

32. **How much time are you requesting be allocated for this item?** (this is not guaranteed, we just need an idea) * Dropdown

Mark only one oval.

- ◯ 2-5 MINUTES
- ◯ 6-8 MINUTEES
- ◯ AROUND 10 MINUTES
- ◯ 10-12 MINUTES
- ◯ 12-14 MINUTES
- ◯ 15+ MINUTES (WE WILL EMAIL YOU TO CONFIRM AMOUNT OF TIME NEEDED AND AVAILABILITY OF THE AGENDA)

33. **Will there be materials or websites to screen share?** Select as many items as are applicable: *

Check all that apply.

- [ ] No, there is not anything to view or hand out to participants
- [ ] YES! There are websites / links to share on screen during this item
- [ ] YES! There is documents (PDF or WORD) to share on screen during this item
- [ ] YES! I have a PowerPoint/Slideshow to share on screen during this item
- [ ] Other: _____

34. Will assistance be needed to screenshare the items? *

Mark only one oval.

- ◯ Yes, Please!!!
- ◯ No, Thank you anyway!

35. DO YOU NEED TO REQUEST ANOTHER AGENDA ITEM? *

Mark only one oval.

- ◯ Yes *Skip to question 36*
- ◯ No *Skip to question 43*

FIFTH AGENDA ITEM REQUEST

36. REQUESTED AGENDA ITEM TITLE *

_____

37. Choose one Agenda Item Type: * Dropdown

Mark only one oval.

- ◯ (Discussion For Possible Action)
- ◯ (Informational and Discussion)
- ◯ (Informational and Review)

38. **Agenda Item Description:** *

Describe the requested Agenda item in one brief sentence overview.
Begin with:
"The Members will "
"This Subcommittee will "
"The Council will"
Capitalize "Names"
Check for correct spelling
Check for repetitive use of words
Use present continuous tense (not past tense)

_____
_____
_____
_____
_____

39. **Who is presenting this item?** *

Co- Chairs of _____
OR
First and Last name of presenter (if not the Co-Chairs)

AND
Title of the Presenter (if presenting a topic that is representing an agency/brand/organization)
Other titles can include:
Parent, Family Member, Family Leadership Graduate, Subcommittee Co-Chair, Subcommittee Member
General ECAC Member
ECAC Partner

_____

40. **How much time are you requesting be allocated for this item?** (this is not guaranteed, we just need an idea) * Dropdown

Mark only one oval.

- ◯ 2-5 MINUTES
- ◯ 6-8 MINUTEES
- ◯ AROUND 10 MINUTES
- ◯ 10-12 MINUTES
- ◯ 12-14 MINUTES
- ◯ 15+ MINUTES (WE WILL EMAIL YOU TO CONFIRM AMOUNT OF TIME NEEDED AND AVAILABILITY OF THE AGENDA)

41. **Will there be materials or websites to screen share?** Select as many items as are applicable: *

Check all that apply.

- [ ] No, there is not anything to view or hand out to participants
- [ ] YES! There are websites / links to share on screen during this item
- [ ] YES! There is documents (PDF or WORD) to share on screen during this item
- [ ] YES! I have a PowerPoint/Slideshow to share on screen during this item
- [ ] Other: _____

42. Will assistance be needed to screenshare the items? *

Mark only one oval.

- ◯ Yes, Please!!!
- ◯ No, Thank you anyway!

Ability to share materials

43. Are you ready to upload the materials or share the links now? *

Mark only one oval.

- ◯ Yes, I'm ready to upload and share! *Skip to question 44*
- ◯ No, I dont have them ready yet, but I will email them soon
- ◯ N/A

Uploads and Links

If available. upload your agenda item materials such as slideshow, Word or PDF

44. **Upload your agenda item materials such as a Slideshow, Word or PDF document. Be sure your file name is saved as "date or meeting. Agenda Item Topic or Title. Subcommittee"**

Files submitted:

45. Type or copy/paste links to be used for screenshare or to share to participants via chat at the meeting. Be sure to write a short title/description for each. **EXAMPLE:**
Nevada Registry website for Data meeting on 6.30.26:
(paste link).com

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