



Coeur d'Alene Tribe Early Childhood Learning Center Policy Council Approval Form

Meeting Type: Regular Special Emergency Phone Vote

Date/Time

Issue:

Motion(s):

Moved:

Seconded:

Vote:

_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain

Actions: For: Against Abstentions

Policy Council Chairperson

Date

cc: Policy Council Binder P & P File Budget File Personnel File By-Laws File

Self-Assessment Annual Review Component Plans/Personnel Policies/Recruitment

Other: (Enter)