

## **LWVUS 2010-2012 Program Planning Report Form**

*Please select **ONE** option and mail to: LWVN, PO Box 610207, Newton Highlands, MA 02461*

1. \_\_\_ **Recommend a review/update of a current program position**

Name of program position: \_\_\_\_\_

Scope or areas to be considered: \_\_\_\_\_

\_\_\_\_\_

Reasons for recommendation: \_\_\_\_\_

2. \_\_\_ **Recommend a new study**

Focus: \_\_\_\_\_

Scope: \_\_\_\_\_

\_\_\_\_\_

Reasons for recommendation: \_\_\_\_\_

3. \_\_\_ **Recommend a concurrence with another League position**

Position: \_\_\_\_\_

Scope: \_\_\_\_\_

\_\_\_\_\_

Name of League holding position: \_\_\_\_\_

Reasons for recommendation: \_\_\_\_\_

4. \_\_\_ **No Recommendation**