

State Advocacy Day Request Form

To be completed by Chapter GR Liaison

Chapter Information

Chapter Name:	Chapter GR Liaison:	
Email:	Phone Number:	
ATSSA Staff Liaison:		
Event Details		
Proposed Date(s) (keep in mind the legislative calendar and session dates):		
Expected Number of Attendees:		
Is the chapter interested in hosting the ATSS Foundation's National Work Zone Memorial at the state capital during the advocacy day? YesNo The chapter is responsible for all costs and logistics associated with hosting the Memorial such as the hosting fee, fees associated with reserving space at the state capitol, and assembly, disassembly, and shipment of the Memorial.		
Please attach a budget for your chapter's advocacy day that includes the following, keeping in mind that all costs associated with the advocacy day are the sole responsibility of the chapter: • Briefing room near the capitol • AV (screen and projector) for briefing presentation • Optional food and beverage for participants • Printing and shipping costs		
Advocacy Day Objectives		
What is the primary goal in holding an Advocad specific legislation, etc.)	cy Day? (raise general awareness, advocate for	
What specific issues are you wanting to address/focus on?		

(Continue form on page 2)



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Additional Information

What state legislators would you like to meet with? (local reps/ House and Senate Leadership/ Committee Leadership)		
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Has your Chapter held an Advocacy Day before? Yes	No	
If yes, when was your last Advocacy Day held?		
Has your Chapter met with any legislators within the last two	years? YesNo	
If yes, please list:		
Approval		
Chapter President Signature	Date	
ATSSA Member Engagement Liaison	 Date	

Submission

Send all completed forms and supporting documents to ATSSA's Associate Director of State Government Relations Mady Marks, Madeline.Marks@atssa.com:

- 1. This State Advocacy Day Request Form
 - a. Budget for Advocacy Day
- 2. Advocacy Action Plan Template with SMART Goals