Motion Proposal Form

Please fill in this form with as much information as possible and return it to the Student Voice by handing it into SUSU reception on Singleton or Bay Campus.

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| Motion Title: | (What is your motion called) |
| Proposed by: | (This is your name) |
| Seconded by: | (This is the name of another student who agrees with the policy) |
| The Union Believes: | |
| (background/history of issue: please use a numbered list)  Here you put the basic starting point of the idea.  What’s the problem?  What is it you’re looking into? | |
| The Union Further Believes: | |
| (What we think: please use a numbered list)  Here you put your thought process.  What’s the next thing you thought about? | |
| The Union Resolves: | |
| (What we will do: please use a numbered list)  This is the action we will take. | |