**POLICY COMMITTEE REPORT TEMPLATE**

Name of Delegate Agency:

Date(s) of report:

Please share progress/success/concern in space below.

Summarize and describe information that was shared with the Policy Committee/Parent Committee of your program about what is happening at your Delegate Agency, or State/National level Head Start or early learning environment. Please share The What/Why/Where. You may include activities, meetings, trainings that have occurred.

Does your report require follow up from the Delegate Agency or from DFSS? If so, please detail your request for follow up in the space below.

CONCERN(S) FOR CPPC REVIEW: Community, Programmatic, Fiscal, etc.

*(Please use additional paper if needed.)*

Submitted by:

Policy Committee Delegate Date

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Name of Delegate Agency