



DEC Standing Committee Report Form

Date _____ Committee Name _____

Committee Chair (or reporting member's name) _____

Did the Committee meet since the last DCDEC Meeting? Yes No

Do you need time at the DCDEC Meeting to Report? Yes No

Meeting Report:

Are there any resources the DCDEC can help you with for your district before your next meeting? If yes – please request here

Date of next meeting _____

Thank you!!