# ONTARIO COLLEGES ATHLETIC ASSOCIATION

**MOTION/STATEMENT FORM**

**Please print this form on coloured paper**.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DATE: | Click or tap to enter a date. | | | | | | | | TIME OF DAY: | | |  | | | | | | | MEETING (eg. Golf, Plenary): | | | | | | | Choose an item. | | |
| SECTION: | | |  | | | | | | | | | ARTICLE: | | | | | |  | | | | | | ITEM #: | |  | | |
|  | | | (eg. P & P, Committee Policies, Appendix) | | | | | | | | | | | | |  | | (eg. Fines) | | | | | |  | | (eg. 10.2.1) | | |
|  | | | | | | | **MOTION** | | | | | **STATEMENT** | | | | | | | | | | |  | | | | | |
| MOVED BY: | | | |  | | | | | | | |  | | SECONDED BY: | | | | | | |  | | | | | | | |
|  | | | | (First Initial, Last Name) | | | | | | | |  | |  | | | | | | | (First Initial, Last Name) | | | | | | | |
| **When writing the motion, think about what you want to accomplish with it, and ensure this is clearly conveyed in the motion. Be specific and concise. If a by-law, rule, or policy is affected, indicate if there is an addition, deletion, or change to the wording. Please quote the original motion with a strike-through of deleted portions and indicate additions in bold lettering. Review your motion to see if it asks for clear action to be taken. State a timeframe where applicable. Indicate all sections of the Operations Manual that need to be changed including appendices and examples.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Motion:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Rationale:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Financial:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is there a financial cost if the motion carries? | | | | | | | | | | | | | YES | | | | | | | NO | | | | | | | | | |
| If yes, how will this be funded? *(Ex. OCAA* *administrative* *budget*, *sport budget, individual* *members)* | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| What is the total cost? | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Is there a saving/cost benefit to the OCAA and/or members? | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| FORM WRITTEN BY: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | (Please Print) | | | | | | | | | | | | | | | | | | | | | | | |
| **CARRIED** | | | | | **DEFEATED** | | | | | | | | | | **WITHDRAWN** | | | | | | | | | | **TABLED** | | | |
|  | | | | |  | | | | | | | | | |  | | | | | | | | | | Tabled until: | | | |
| ***For use by Meeting Chair:*** | | | | | | | | | |  | MOTION #: | | | | | |  | | | | | | | | | |  | |
| RECORDED VOTE: | | | | | | FOR: | |  | | | AGAINST: | | | | | |  | | | | | ABSTAIN: | | | |  | |  |
| ***NOTES:*** | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  |