



# Advocacy Voucher

Representative's name and work site: \_\_\_\_\_

Member name(s): \_\_\_\_\_

Date: \_\_\_\_\_ Duration of meeting: \_\_\_\_\_

Type of Meeting: (circle one)

- Pre-disciplinary    Disciplinary    Monthly w/ Admin.  
 Dispute Resolution    Grievance    Other: \_\_\_\_\_

Summary of Meeting intent and contents (please, do not use complete names of students, parents or other non-administrative employees in the summary)

---

---

---

---

---

---

---

---

---

---

---

Attach a copy of any notes taken to the back of this form. Submit this and other Voucher forms to the NTEA President in late May of the school year for proper processing.