

**DELEGATE/DO CHILD/FAMILY SERVICES  
POLICY COMMITTEE REPORT**

Agency \_\_\_\_\_ Month \_\_\_\_\_

Please meet with your center representatives to fill out this form so you will be able to share your centers' activities with SHSPC.

1. Special Activities at Centers

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2. Guest Speakers

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3. Field Trips

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4. Fund Raisers

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5. Concerns or Questions

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**Bring this form to Policy Council meeting.**

**CHILD/FAMILY SERVICES  
REPORTE DEL COMITÉ DE POLÍTICA DE LA DELEGADA/DO**

Agencia \_\_\_\_\_ Mes \_\_\_\_\_

Para completar ésta forma, favor de reunirse con sus representantes del centro para que puedan compartir con el SHSPC lo que su centros están haciendo.

1. Actividades Especiales en el Centro

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2. Oradores Invitados

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3. Excursiones

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4. Actividades Para Recaudar Fondos

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5. Preguntas ó Preocupaciones

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***Favor de traer ésta forma a la junta del Consejo de Política.***