

USWT BOOK OF FORMS



The mission of the United States Women of Today is to provide state and local member chapters opportunities in the areas of leadership training, personal growth, community service and work in partnerships with established foundations.

JUNE 2017

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United States Women of Today

General Information



United States Women of Today

Motion Slip

Motion Slip – Secretary’s Copy

Date _____

I move that _____

Passed Amended

Motion by _____

Defeated Tabled

Second _____

Motion Slip – Parliamentarian’s Copy

(give to Parliamentarian before making motion)

Date _____

I move that _____

Passed Amended

Motion by _____

Defeated Tabled

Second _____

Motion Slip – President’s Copy

(give to President before making motion)

Date _____

I move that _____

Passed Amended

Motion by _____

Defeated Tabled

Second _____



United States Women of Today

How Does Your Newsletter Rate?

The main goal for a chapter newsletter is to communicate with your membership and to keep them informed of the chapter's activities. If the newsletter successfully incorporates information that is valuable to the members, it will provide a good reason for continued membership. Poor communication will eventually decrease the number of active members. Check the appropriate column if these items are included in your newsletter or not.

Content

People	Yes	No	Sometimes
Every member's name appear at least once during the year, other than on a roster			
Write up on your member of the Month/Trimester/Year			
Welcome each new member with a brief biography			
Happenings of your members, such as promotions, births, hospital stays			
Good & Welfare, a section for pats on the backs and thanks			
Thank you to committee members by project chair			
Feature articles by officers and members			
Events	Yes	No	Sometimes
Minutes of the last general membership meeting			
Agenda of the upcoming general membership meeting			
Articles about upcoming projects			
Requests for upcoming committee activities & volunteer needs			
Upcoming visitations and reports on visitations made			
Topics to be discussed at the next chapter meeting			
Reports on upcoming district, state and national events			
Reports from members attending district, state or national events			
Programming	Yes	No	Sometimes
Reports from committee chair on upcoming projects			
Dates and location of committee meetings			
Final reports on completed projects			
Member's ideas for projects			
Articles about state and national programming areas			
Regular articles by local program managers			
Editorial	Yes	No	Sometimes
Humor used in good taste			
Only positive remarks			
Regular message from Chapter President			
Do members make positive comments about the newsletter?			
Would your chapter want respected community leaders to judge your organization based solely on your chapter newsletter?			
Do you print comments and letters without taking away from their true meaning?			

Distribution

Subscriptions	Yes	No	Sometimes
Prospective members			
New members within the first 30 days of joining			
All members on your active roster			
District director, district and state newsletter editor, state president, and national secretary			
Community and business leaders			
Frequency	Yes	No	Sometimes
Monthly issues			
Members receive newsletter one to two weeks prior to general membership meeting			
Deadlines for publication and distribution set and met			
Mode	Yes	No	Sometimes
Mailed to subscriber's homes			
Delivered in person			
Attached to an email or included on your chapter's website			
Costs	Yes	No	Sometimes
Newsletter budget sufficient to supply all subscribers for the year			
Solicited advertising or business sponsor			
Donated printing			
Thank you to those who donate printing			

Format

Standards	Yes	No	Sometimes
Heading section with newsletter's title, chapter name and date			
Brief and concise articles			
Relevant clip art, original art, photographs that goes with articles or president's theme			
Six pages or less, using the front and back of all pages			
Newsletter editors address, and contact information in the return address section			
Calendar of Events			
Aesthetics	Yes	No	Sometimes
Is it laid out so that people will want to pick it out of a stack of publications?			
Is it easy to read and attractive to look at?			
Is there plenty of white space so the reader doesn't have a hard time reading, but not too much that it looks empty?			
Does your newsletter reflect the image you want to project to prospective members?			



United States Women of Today

Miscellaneous Voucher

Mail this form to USWT Treasurer.

Vendor _____ Date _____

Address _____ Total Amount \$ _____

City _____ State _____ Zip _____

Authorizing Officer _____

Please itemize and state purpose of each expense in the table below. Be sure to attach all receipts.

Explanation of Expense	Amount

For Treasurer's Use Only

Annual Budget _____ Date Paid _____

Paid Year to Date _____

Paid This Voucher _____ Check No. _____

Total Paid _____

Remaining Budget _____

Approved by _____



United States Women of Today

US Founders Charities Scholarship

The United States Women of Today Founders Charities Scholarship is open to any Women of Today member in good standing as defined by the USWT Bylaws. Application must be mailed to the USWT Charities President, postmarked no later than May 15.

Personal Data

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Chapter _____ State _____

Educational Information

Name of High School _____

Date of High School Graduation/GED _____

List any post High School educational institutions attended:

I hereby certify this application to be true and correct to the best of my knowledge.

Applicant's Signature _____

Date _____

Attachments

1. Attach a statement addressing your educational objectives and future career plans.
2. Women of Today Chapter President must complete a letter of recommendation that includes applicant's Women of Today involvement.
3. Provide an additional letter of recommendation from someone other than a relative.



United States Women of Today

Charities Chapter Grant Application

The United States Women of Today Founders Charities Chapter Grant Program is open to any Women of Today chapter that has already donated \$100 to the Foundation. Please send application and attachments to the USWT Charities President by May 15.

Chapter _____ State _____

Contact Name _____

Phone _____

Address _____

City _____ State _____ Zip _____

Email _____

Our \$100 Foundation contribution was made to:

- | | |
|--|--|
| <input type="checkbox"/> Chapter Grant Fund | <input type="checkbox"/> Founders Club |
| <input type="checkbox"/> Friends of the Foundation | <input type="checkbox"/> Scholarship |

Amount requested _____ Proposed date of project _____

Please attach:

1. A detailed description of the proposed activity. Please include who will benefit from the project and how.
2. An explanation why Foundation funds are needed and what other efforts have been/will be undertaken to raise funds for the project.
3. A proposed budget.

Please read and sign the following:

4. Funds awarded will be spent on the project described in the Chapter Grant application.
5. Grantee will be held liable for funds if not spent as approved.
6. The Foundation will not be held liable for any claims or project losses.
7. Grantee will account for expenditure of Foundation funds separately from regular project funds.
8. Within 30 days of project completion, the grantee will forward two copies of the final report, including actual budget, indicating how all funds were used, what the project accomplished, and an evaluation of how the project was managed. The final report is due to the Foundation President.
9. Grantee will return all unused Foundation funds.

I have read and understand the above conditions and the attached guidelines for this grant and I agree to comply with both.

Signature _____ Date _____

Office _____



United States Women of Today

US Founders Charities Pledge Form

Contributor _____

Contact Person, if applicable _____

Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

[] YES, I will pledge my Support to the United States Women of Today Founders Charities by investing in:

- \$100 for Curator Membership
- \$25 for Curator Membership Payment Plan
- \$_____ for the Chapter Grant Program
- \$_____ as a Friend of US Founders Charities
- \$_____ for the Scholarship Program

Please indicate how your contribution should be recorded:

- Individual
- Chapter Organization
- State Organization
- Corporation or Business
- In Memory of _____
- In Honor of _____
- Other _____
- Please record my gift as an anonymous contribution.

In-kind gifts or services are also appreciated and may be contributed in the same manner as cash. A statement of current fair market value should accompany the gift.



United States Women of Today

USWT Award Forms



United States Women of Today

Outstanding Achievement in Programming

Any member of the United States Women of Today may certify. Complete the form below and return it to the USWT Programming Vice President by September 1 for recognition at Mid Year or by May 1 for recognition at Annual Convention.

Name _____

Chapter _____ State _____

Address _____

City _____ State _____ Zip _____

Email _____

_____ Certify in Health & Wellness (Date Completed) _____

_____ Certify in Personal Development (Date Completed) _____

_____ Certify in the STEP Area that applies to you (Date Completed) _____

_____ Participate in a program involving Domestic Violence Awareness

Fundraising Educational Service Project

Event _____

Date Completed _____

_____ Participate in a program offered in your chapter or state (i.e. Ronald McDonald House, Flood for Crisis, March of Dimes, Relay for Life, Food Shelf, etc.)

Fundraising Educational Service Project

Name of Event _____

Date Completed _____

_____ Participate in one competition on the State or National Level. This includes Speaking, Writing or a Mid or Year-end Evaluation.

Type of Competition _____

Place _____

Date Completed _____



United States Women of Today

Outstanding Officer Nominations

Each year at National Convention, the USWT President wants to recognize those outstanding local and state officers or program managers for their areas. This form should be submitted by the State Presidents to the USWT President. Postmarked by May 1st. Submit one form per entry. Check the appropriate boxes.

State Officer

Local Officer

Submitter's Name _____

Chapter _____ State _____

Address _____

City _____ State _____ Zip _____

Email _____

Position:

- | | | |
|---|---|--|
| <input type="checkbox"/> Membership Vice President | <input type="checkbox"/> Personal Development Program Manager | <input type="checkbox"/> Treasurer |
| <input type="checkbox"/> Programming Vice President | <input type="checkbox"/> Health & Wellness Program Manager | <input type="checkbox"/> Secretary |
| <input type="checkbox"/> Extensions Contact | <input type="checkbox"/> STEP Program Manager | <input type="checkbox"/> Parliamentarian |
| <input type="checkbox"/> Public Relations Contact | | <input type="checkbox"/> External Foundation Program Manager |

Please include a brief synopsis telling why you feel this individual is deserving of this honor. Be specific in describing their accomplishments and contributions this year.

- List major responsibilities (job description) of this officer
- Significant accomplishments (programs implemented, materials developed, travel, etc.)
- What has this officer done that was “**above and beyond** their job duty” to be a part of the “whole team”? (i.e., signing members, working on an extension, programming participation, chapter participation)
- Words that describe why this individual is outstanding
- Short paragraph telling why you feel this individual is deserving of the honor

Name of nominee _____ Date _____

Chapter _____ State _____



United States Women of Today

All American Chapter

This award is designed to provide national recognition for those Women of Today chapters who have planned and accomplished a well-rounded program of projects and activities that exemplify the US Women of Today creed. Accomplishment of these activities will help the chapter provide the opportunities of leadership, training, community service, personal enrichment and fellowship for its members. Take pride in your accomplishments and share the completion of this All-American Chapter program with your chapter members. Upon completion of the following criteria, the Chapter President must sign the form and mail it to USWT President, postmarked no later than May 10.

Chapter _____ State _____

President _____

- Conduct an officer orientation/training for local officers, program managers, chairmen, etc.
Date _____ Number attending _____
Conducted by _____
- Hold an orientation of the general membership, including an overview of your state organization and the U.S. Women of Today.
Date _____ Number attending _____
Conducted by _____
- Have a prepared budget for your chapter. (Include a copy)
- Complete three (3) **external** projects, programs or activities; these may be national programs, state or local priorities. List project/program, date and description.
a. _____
b. _____
c. _____
- Conduct three (3) **internal** programs or activities; these may be national programs (Health & Wellness, Personal Development, or STEP.), state programs or local opportunities. List program, date and description.
a. _____
b. _____
c. _____
- Conduct a Mid-Year Evaluation with chapter officers or the general membership to take a look at the progress made to date, suggested changes, etc. Attach an agenda or brief synopsis of evaluation.
Date _____ Number attending _____
- Offer a fun social activity for chapter members. Attach a brief description of the event.
Date _____ Number attending _____
- Hold a Ways and Means fundraiser (to add money to chapter treasury for operating funds.) Attach a brief description of the event.
Date _____ Amount Raised _____
- Have two or more chapter members attend a Women of Today meeting other than the local chapter; examples are a visitation to another chapter or attendance at a district, region, state or national meeting.
Date _____ Number attending _____
Meeting attended _____
- Add at least four new members to your chapter or complete an external extension between May 1 and April 30. Verification will be obtained from US Membership Vice President or US Extensions Director.



United States Women of Today

US Presidential Pin Nomination

Nominee _____

Chapter _____ State _____

Describe the impact that this member has made on the Women of Today both locally and throughout your state. Please use specifics to describe the accomplishments and contributions this year and why this member is deserving of this recognition. Please submit to the USWT President at least two (2) weeks prior to presentation.

Current offices held (local, district or regional, state, national)

Significant accomplishments (i.e., members signed, programs prepared, chapters helped, manuals written, travel, etc.)

Describe why this individual is outstanding

Write a short paragraph telling why you feel this individual is deserving of this honor

Submitter _____

Preferred date of presentation _____



United States Women of Today



Ambassador Award Nomination Outline

The Ambassador Award is the highest recognition the United States Women of Today may bestow on a local member. A nominee must have membership in Women of Today for a minimum of five (5) years in order to be eligible.

This form must be typed and used as is. Do not alter space allotted for cover page. Form may be retyped on a computer but format must remain the same. Space between each requirement may be increased or decreased as needed. Use Word format font of 10 or 12 points. (1) Please attach two letters of recommendation, one from local chapter and one from state. (2) Submit six copies of entire entry and mail to Ambassador President at least six weeks prior to presentation. (3) Enclose a check for \$60.00 made payable to USWT Ambassadors.

Upon approval of the Ambassador Review Committee, notification, pin and plaque will be sent to the person submitting the nomination at the address listed.

Nominee's name _____

Address _____ Phone _____

City _____ State _____ Zip _____

Email Address _____

Present Chapter of Nominee _____ District, if applicable _____ Date Joined _____

Nominee Marital Status _____ Spouse Name, if applicable _____

Children's Name and Ages, if applicable _____

Nominee Occupation _____

Name of Nominating Chapter or other Representative _____

Nominating Chair or Local President Name _____

Address _____

Email _____ Phone _____

When You Would Like Presentation To Be Made _____

Name as it should read on the plaque _____

Endorsement by nominator or local chapter

I hereby attest that all information provided in this nomination is reliable and true to the best of my knowledge

Nominator or Local President Signature _____

Endorsement by local chapter if nomination is made from other than her local chapter

I hereby attest that our chapter endorses the nomination of the above-named nominee.

Local President Signature _____ Chapter _____

Endorsement by current state officer, preferably the President, unless they are being nominated

I hereby attest that our state endorses the nomination of the above-named nominee.

State President Signature _____ State _____



United States Women of Today

1. Local Meetings:

List meetings nominee has attended since joining; you may give an average or percentage. <u>A minimum of 50% must have been attended.</u>	Number Held	Number Attended
Chapter Meetings		

2. Local offices held and dates:

3. List major local chairmanships of projects, programs and/or standing committees held by nominee and dates:

4. State Meetings (if applicable – i.e.: states that only have one or two chapters may not hold state meetings):

List meetings nominee has attended since joining; you may give an average or percentage. <u>A minimum of 50% must have been attended.</u>	Number Held	Number Attended
State Meetings		

List state meetings attended and dates. List meeting participation, attendance as general member or board member.

5. List state offices or program manager or director positions the nominee has held and dates:

6. List state committees the nominee has served on and the dates:



United States Women of Today

7. National Meetings:

List meetings nominee has attended since joining; you may give an average or percentage. <u>A minimum of 50% must have been attended.</u>	Number Held	Number Attended
National Meetings		

8. List national offices or program manager positions held and dates: (You may include any national committee memberships in this section.)

9. What lasting and unique contributions did the nominee make to the development of her local **chapter**? (i.e.: consider chapter management, membership, internal or external programming, new projects or improvements to the local chapter initiated by the nominee.)

10. What lasting and unique contributions did the nominee make to the **state** organization and/or how has she utilized the opportunities provided by the state organization? (i.e.: if she was a state officer or program manager, what were her contributions? – how did she involve people in the state organization, meetings and programs?)

11. How has the nominee utilized the opportunities provided by the **national** organization?

12. Please make a final **summary statement** clarifying why your chapter feels that this Woman of Today is an Ambassador.



United States Women of Today

Membership Forms



United States Women of Today

Membership Fast Start

State _____

Name _____

President Membership Vice President

Complete the following requirements, and return to USWT Membership Vice-President **postmarked** no later than August 15. States completing this Fast Start will be recognized at the USWT Mid-Year Convention in October.

- Complete the Membership Information Sheet.
- Have your New Member Adds sent to USWT Membership Vice President, **postmarked** no later than the first of each month (June, July, August).
- Have your First Trimester Renewals sent to USWT Membership Vice President, **postmarked** no later than September 1.
- Send USWT Membership Vice President a copy of a Women of Today promotional brochure or flier from your state, not one produced by the USWT.
- Send a copy of your goals for this year.
- Submit the following information:
 - May 1 state membership base
 - List of all local chapters and their May 1 membership base
 - Completed Grow with People Plan
 - Name, address, phone number and email address of your states dues billing contact (yourself or Treasurer)



United States Women of Today

New Member Information Sheet

Name _____

Spouse _____

Address _____

Home Phone _____

Work Phone _____

[] It is OK to call me at work. If so, please list the best time to call _____

Birth date _____

Wedding Anniversary _____

Children (Names, Ages, Birth dates) _____

Occupation _____

Favorites

Hobbies _____

Food _____

Color _____

Other _____

Are you active in other organizations? If so, please list:

What special interest areas do you have (specific community projects, youth, senior citizens, personal development programming, etc.)?

Other comments



United States Women of Today

Friendship Day Certification Form

The first Sunday in August is Friendship Day. In order to recognize the importance of the fellowship we have within our chapters, an incentive will be awarded to all chapters who celebrate Friendship Day by holding a special event in honor of this day. It can be a social, Ladies Night Out, picnic, overnight trip to the city, etc. These are only a few examples; the possibilities are unlimited. The sole purpose is to get to know your fellow members a little better and to take the time to have some fun with them. Your event can be held any time during August. Send this completed form to USWT Membership Vice President, postmarked no later than September 1st, for recognition at Mid-Year Convention.

Chapter _____ State _____

Name of Event _____

Date Held _____

Number of Members Attending _____

Description of Event



United States Women of Today

Fellowship Builder Award

The Fellowship Builder Award will be given to those chapters that take Friendship Day a step further by holding three more events during the year. These events are meant to be social, to encourage our members to get to know each other a little better and to have fun in the process. These events are not fundraisers, nor are they orientations or personal enrichment courses. They are meant for you, our chapter members, to have just a little more fun in Women of Today. Recognition will be distributed at Annual Convention. Send this completed form to USWT Membership Vice President, postmarked no later than May 1st.

Chapter _____ State _____

Name of Friendship Day Event _____

Date Held: _____ Number Of Members Attending _____

Brief Description Of Event:

Name of Event #2 _____

Date Held: _____ Number Of Members Attending _____

Brief Description Of Event:

Name of Event #3 _____

Date Held: _____ Number Of Members Attending _____

Brief Description Of Event:

Name of Event #4 _____

Date Held: _____ Number Of Members Attending _____

Brief Description Of Event:



United States Women of Today

UNITED STATES WOMEN OF TODAY - ADD AND CHANGE FORM -

All new members and member name and address changes must be submitted to your state organization on one of these forms. Please make 4 copies of your form and keep one for your files. Send 3 copies to the state. The state will send 2 copies to the national membership vice president.

State name	
Chapter name	Chapter number
Submitted by	Date

N (new) C (change) LR (late renewal)	*Member's ID Number <small>For office use only</small>	Member's Last Name	Member's First Name	Member's Address City, State, Zip	Area Code + Phone Number	Email Address	Birth day M/ D / Y
				Recruiter:			
				Recruiter:			
				Recruiter:			
				Recruiter:			
				Recruiter:			
				Recruiter:			
				Recruiter:			
				Recruiter:			

Enter only Chapter
Address change here

Chapter Name	Address (PO Box) City, State, Zip code

* The member's number will be used as an ID# in the files. A number will be assigned to each member.

Rev 6-2014

Membership Information



United States Women of Today

Thank you for thinking about these questions, and answering them. It will help the USWT Membership Vice-President to better understand the way things are done in your state. We will make every effort to help you in any way we can to insure success for all of us this year. Submit with Fast Start to USWT Membership Vice President.

How does your state work/promote membership?

What reporting system do you use within your state? (Chapter to MVP? Other?) Describe

How do you find out about new members, final reports?

When do you find out?

Do you have a policy for chapters that need TLC? If so, what?

Will you encourage all chapters in your state to subscribe to the National Newsletter?

If you have any specific questions, please include them on this form and an answer will be provided.



United States Women of Today

Monthly State Membership Report

Please send this to the USWT Membership Vice President, postmarked no later than the first of each month.

For month of _____

Submitted by _____

Position _____

- How was membership promoted in your state this month?

- Any communication sent by you?

- Are there any areas that you need help with?

- Special request? (Any calls you would like me to make, or notes to write? This could be for encouragement, to discuss a problem, to congratulate, etc.) Include names and addresses, please.

- Will there be any chapters in your state dropped this month? Please list them and explain.

- Is there anything else you would like to tell me?



United States Women of Today

Monthly Membership Dues Submission

Check made payable to the **United States Women of Today**. Mail one copy of this form and the new member and/or renewal forms to the US Membership Vice-President. New member dues are due postmarked no later than the **1st of the month** following recruitment. Renewal dues are due postmarked no later than the **1st of the month** following the end of the trimester.

Name of State _____

Month _____

Submitted by _____

Address _____

Phone Number _____

Number of New Members _____

Number of Renewals _____

Total Number of New Members/Renewals _____

Times Amount Due Per Member _____ x \$5 = **Total Amount Due \$** _____



United States Women of Today

Dropped Chapter

The United States Women of Today has voted to drop any local chapter whose membership drops below 5 members for two consecutive trimesters. If this occurs, the State President will receive a letter (sample below,) informing her of the status of the chapters. Any members remaining on the roster when the chapter is dropped will be listed as "at large" members until their dues are to be renewed. If a local chapter voted to disaffiliate, the State President must submit a Dropped Chapter form informing the USWT Membership Vice President and the National President.

The following is a sample letter to be sent to states, if necessary.

Date

Dear:

As you are probably aware, the United States Women of Today voted and adopted a policy whereby local chapters having less than FIVE members for a period of two trimesters will be dropped from the roster of member chapters. The remaining members of the dropped chapter will become "members-at-large" on the National billing roster until such time as their individual dues expire. Each state should have an established policy for handling at-large members.

At this time, the following chapter from your state is in danger of being dropped

Please contact the local chapter president and make sure that she understands this policy. Then complete the enclosed DROPPED CHAPTER FORM, if the chapter named has indicated that they intend to drop.

If the chapter has signed any new members, please let me know. If you have any questions, please call me. It is important to have accurate records, and if your figures do not agree with mine, I need to know immediately. Thank you.

Sincerely,

USWT Women of Today
Membership Vice President



United States Women of Today

Dropped Chapter Form

The United States Women of Today will officially drop a chapter upon receipt of this form. Send ORIGINAL to USWT Membership Vice President, and copies to USWT President, State Membership Vice President, and ??.

Date _____

State _____

Name of chapter to drop _____

Charter Date _____

Reasons chapter is dropping _____

Steps taken to assist the chapter, and by whom

Will any members be transferring to another chapter? [] Yes [] No

If yes, please complete TRANSFER FORMS and send to United States Women of Today Membership Vice President with this request.

Requested by _____
State President



United States Women of Today

One a Month Club

Become A Member Of The United States Women Of Today "Elite" One A Month Club!!

Can your chapter accept the challenge of signing ONE NEW MEMBER A MONTH THIS YEAR? Each chapter that accomplishes this ongoing commitment to membership recruitment will receive special recognition at our Annual Convention. Please list the names of your chapter's new members below and mail monthly to the United States Women of Today Membership Vice President.

Chapter _____ State _____

Local President's Name _____

New Members:

May _____

June _____

July _____

August _____

September _____

October _____

November _____

December _____

January _____

February _____

March _____

April _____



United States Women of Today

Celebrating Successes Year End Recognition

Send this completed form to USWT Membership Vice President, postmarked no later than May 1.

State _____

Submitted By _____

Double Up Chapters - List Chapter, beginning and ending membership

5 Member Recruiters - List name and chapter

10 Member Recruiters - List name and chapter



United States Women of Today

Membership Survey

You are an important part of our USWT organization and your opinions are valued. In an effort to strengthen our chapters and states, please give your honest input on the following questions. This will enable us to recognize our strengths and identify areas we need to improve. This can be done anonymously, so please be honest. Check as many as apply in the boxes below.

Chapter Name & State _____ Date _____

Why did you join Women of Today?

What do you like best about your chapter?

General Membership Meetings

- | | |
|---|--|
| <input type="checkbox"/> Meetings are too long | <input type="checkbox"/> Need more programs or speakers |
| <input type="checkbox"/> Meetings are too short | <input type="checkbox"/> Meetings are being run smoothly |
| <input type="checkbox"/> We have programs &/or speakers | <input type="checkbox"/> Meetings could be run more smoothly |

Suggestions

Chapter Membership Socials & Membership-Nights

Socials are for the members; M-nights are to get new members.

- | | |
|---|--|
| <input type="checkbox"/> Number of membership socials held yearly | <input type="checkbox"/> Need more M-nights |
| <input type="checkbox"/> Need more membership socials | <input type="checkbox"/> Need fewer M-nights |
| <input type="checkbox"/> Need fewer membership socials | <input type="checkbox"/> We are doing the right number and balance of socials and m-nights |
| <input type="checkbox"/> Number of M-nights held yearly | |

Suggestions for upcoming socials or M-nights

Chapter Projects

Member participation in chapter projects: [] High [] Low [] Just right

- | | |
|--|--|
| <input type="checkbox"/> We need more projects | <input type="checkbox"/> We have project variety |
| <input type="checkbox"/> We need fewer projects | <input type="checkbox"/> We need project variety |
| <input type="checkbox"/> We are doing the right number of projects | <input type="checkbox"/> Stale projects |

Suggestions for upcoming project to be added or ones to be deleted

Programming Areas

- Doing too much Doing too little Just right

Suggestions for changes in any of the programming areas

Membership Growth/Activation/Retention

- | | |
|---|--|
| <input type="checkbox"/> We need to spend more time on membership growth/activation/retention | <input type="checkbox"/> I understand my responsibility in the role of membership growth/activation/retention |
| <input type="checkbox"/> We need to spend less time concentrating on membership growth/activation/retention | <input type="checkbox"/> I would like more information on how I can help with membership growth/activation/retention |
| <input type="checkbox"/> We are doing everything we can towards membership growth/activation/retention | |

Suggestions for membership growth/activation/retention

Personal Membership Satisfaction

I have been a member of this chapter for:

- | | |
|--|--|
| <input type="checkbox"/> Less than 2 years | <input type="checkbox"/> Over 5 years |
| <input type="checkbox"/> More than 2 years | <input type="checkbox"/> Over 10 years |

If your membership with your Women of Today chapter expired today, would you renew it?

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Probably | <input type="checkbox"/> No, If no, why not? |

I enjoy being a member but would like:

- | | |
|--|---|
| <input type="checkbox"/> To have more time to work on projects | <input type="checkbox"/> More phone calls "just for fun", not just requesting project help or meeting reminders |
| <input type="checkbox"/> More help with the projects | <input type="checkbox"/> More information as to what is expected of me |
| <input type="checkbox"/> More advance notice about upcoming projects &/or events | <input type="checkbox"/> A better understanding of the programming areas |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> More information on the state and national organization |

What could be changed or improved to better your chapter?

STATE

State Involvement

- I receive adequate information regarding state events
- I would like more information regarding state events
- As a chapter, I think we are adequately involved with the state activities
- As a chapter, I would like to see us more involved in state activities

State Staff Role

- Liaison with the United States Women of Today
- Distributor of information from the United States Women of Today
- Distributor of state information, events and activities
- Other _____
- Coordinator of state meetings
- To provide newsletters to chapters
- Assist chapters with training, problem solving, coordinator so chapter activities can be shared, visitor, supervisor

State Newsletters

- Our state provides one to each chapter
- Our state does not provide one
- Currently receive one
- Do not receive one
- Provides good information
- Needs improvement

Suggestions for newsletter content _____

State Meetings

- Our state holds _____ meeting per year
- Our state does not hold meetings
- Give the number of state meetings you feel should be held yearly _____

Is there a charge for your state meetings? [] Yes [] No

Would you be willing to pay to cover speakers or other costs? [] No [] Yes, how much? _____

Would a meeting charge discourage you from attending? [] Yes [] No

Have you ever attended a state meeting? [] Yes [] No

If yes, what did you like best?

What did you like the least?

If you have never attended a state meeting, why not?

What would you like to see at state meetings?

- Outside speakers on various topics
- Outside speakers in our programming areas such as Personal Development, Health & Wellness Issues for Women, our foundations, etc.
- Training (list suggestions) _____

- Chapters bidding and taking turns in hosting the state meetings
- A chapter taking turns planning some fun activities for the meetings such as themes, skits, games, etc.
- An opportunity to have fun, learn something new, share ideas, meet new people, etc.

List other expectations you have for state meetings

NATIONAL

Do you have a good understanding of the USWT and what they provide the membership? Yes No

Would you like to learn more about the USWT? Yes No

National Meetings

Are you informed about national meetings? Yes No

Have you ever attended a national meeting? Yes No

National Programs

Are you informed about the national programs? Yes No

Would you like more information about the national programs? Yes No

How could the USWT be of more assistance to you, your chapter and state?

Additional comments about Women of Today.



United States Women of Today

Extensions Forms



United States Women of Today

Intent To Extend

Complete this form when a decision has been made to work on extending a new Women of Today Chapter. Use this form only if your state does not have your own Intent to Extend. Mail to USWT Extensions Director and USWT Membership Vice President

Chapter/Individual _____

State _____

Information About Prospective Chapter

Community Name: _____ Population _____

Distance from your community to extension _____

Extension Chairman _____

Phone _____

Address _____

City: _____ State: _____ Zip _____

Have any contacts been made? (Summarize any phone calls or meetings that have been held)

What plans have been made? (List any meetings that are set up, public relations plans, phoning to be done, etc.)

Do you need a USWT Extensions Manual? Yes No
(This manual gives suggestions on how to proceed with your Extension.)

Do you need a USWT Extension Media Kit? Yes No
(This kit has ample posters, invitations, announcements, Public Service Announcements, and is copy-ready for use in Extensions work)

Proposed date for completion of Extension _____

Is your chapter willing to work with the new chapter for a full year after it receives its charter? Yes No

Chapter President Signature _____ Date _____

Extensions Chairman Signature _____ Date _____



United States Women of Today

Application For Extension Funding

The United States Women of Today has funds available to assist chapters and/or individuals with an extension. Up to \$30 per extension can be applied for. The following guidelines must be met in order to qualify: Send application immediately upon starting extension work to the USWT Extensions Director

- Intent to Extend form must be on file with the USWT Extensions Director.
- The Application for Funding must be complete and on file with the USWT Extensions Director.
- New Chapter form must be sent upon completion of the extension.
- Funds will be disbursed upon completion of the extension.
- Applications will be approved at the discretion of the National President, Membership Vice President and Extensions Director.
- Receipts must accompany this application.

Chapter/Individual _____

Extension _____

State _____

Begin Date _____

Chairman _____

Budget

Income		Expenses	
Chapter appropriation	\$	Phone Calls	\$
State appropriation	\$	Postage	\$
Other Donations/sources	\$	Copies	\$
Personal Expenses	\$	Room Rent	\$
Other Income (<i>List below</i>)	\$	Publicity	\$
		Other Expenses <i>List below</i>	\$
Total Income	\$	Total Expenses	\$

Other Income _____

Other Expenses _____



United States Women of Today

Intent To Charter

The newly formed Women of Today do hereby express their intent to be recognized as a member chapter of the Women of Today, with all the responsibilities and privileges, which accompany membership in this organization.

Dated _____

Signed _____

Charter Member(s) _____



United States Women of Today

Intent to Follow Up

The Women of Today, as the extending chapter of the Women of Today, do hereby express their intent to continue the "follow up" through orientations, guidance, support and encouragement to help this new extension become a strong member of the Women of Today. Complete this form and send to your State Membership Vice President with the charter fee.

Dated _____

Signed _____

Chapter President _____

Extension Chairperson _____



United States Women of Today

New Chapter Form

Submit this form to USWT Extension Director and USWT Membership Vice President for newly extended chapters. Chapter becomes an official member of the United States Women of Today upon receipt of membership dues from at least five (5) new members. Each new chapter will receive an engraved gavel within three (3) weeks of receipt of this form by the USWT Extensions Director.

Please attach a list of charter member names and addresses to this form. Each charter member will receive a welcome gift from the USWT at either Mid-Year Convention or Annual Convention.

New Chapter _____

Charter President _____

Address _____

City _____ State _____ Zip _____

Email _____

Charter Date _____

Extending Chapter: _____ Chairman _____

Should a USWT New Chapter Guide be sent? Yes No

This is a manual that gives basic start-up information for a chapter, including officer duties, membership, chapter management, sample agendas, and more.

Do you need the USWT Funding Application Form? Yes No

When filing the funding application, attach all receipts to this form to verify extension expenses. A check will be mailed to the chapter/individual stated on the Funding form.

Form Submitted By Name _____

Position _____



United States Women of Today

Public Relations Forms



United States Women of Today

Founder's Day Participation Form

Return completed form to USWT Public Relations Director, postmarked no later than September 1st.

Chapter _____ State _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Was a press release submitted to your local newspaper for Founder's Day? Yes No
If yes, please attach a copy.

Description of Event



United States Women of Today

Shout Out With Pride

This Award is for programming run during Women of Today Week. This is celebrated the last full week in September. Send completed form to USWT Public Relations Director, postmarked no later than December 10th.

Name _____

Chapter _____ State _____

Address _____

City _____ State _____ Zip _____

Email _____

1. Run a Public Relations Campaign -- Date _____

2. Hold a membership social -- Date _____

3. Hold a Special Event -- Date _____

4. Please include a brief synopsis of your public relations campaign and/or special event on the back of the form. Include copies of materials or media coverage if possible.

a) Community Size _____

b) How many people do you feel were reached? _____

c) Public Relation resource(s) used:

Newspaper

Radio

Television

d) It has been proven that marketing, advertising and participation in community events has an impact. Have you signed new members, had requests for information about the organization, etc. from this campaign? Please provide details.



United States Women of Today

Buckets Of Sunshine Participation Form

Send completed form to USWT Public Relations Director postmarked no later than May 1st.

Name _____

Chapter _____ State _____

Address _____

City _____ State _____ Zip _____

Email _____

Date of Project _____

Project Chair/Contact Person _____

Number of members participating _____

Other organizations participating _____

Name, address, type of facility/agency receiving donation _____

Type of bucket donated & contents _____

Cash value of donation \$: _____ No. of buckets donated _____

Source of buckets and contents (i.e. member donations, purchased with chapter funds, outside donations, special project held to raise funds, etc):



Women of Today

Buckets of Sunshine



United States Women of Today

Programming Forms



United States Women of Today

Programming Fast Start

State _____

Name _____

Programming Vice President State Programming Manager

Complete the following requirements, and return to USWT Programming Vice-President and USWT Program Manager, **postmarked** no later than August 15th. States completing this Fast Start will be recognized at the USWT Mid-Year Convention.

- Send a letter of introduction and plan of action to the USWT Program Manager or USWT Programming Vice President. Date sent _____
- Begin to implement at least one (1) of your goals; include a brief description of what you have done.
- Send a copy of at least one (1) of the materials you have prepared for promotion of your area within your state. This may be a mailing, article in the state newsletter, information to chapters, outline for a forum, etc.
- Make an “official” contact with the foundation or organization with whom you will be working. If you work with a program promoted by the USWT, please make contact with the appropriate national program manager or programming vice president. Briefly describe the contact information.



United States Women of Today

THE PROJECT RECOGNITION LIBRARY GUIDELINES

There will be a page on the website labeled 'Project Recognition Library'.

There will be five sections with a link established for each.

1. Internal
2. Ways & Means
3. Community Involvement – Fundraising
4. Community Involvement – Non-fundraising
5. Chapter Publications

Under each section, the corresponding project reports will be opened through a link. Each project will be listed in the following order:

Name of Project
Chapter, District, State
Date of Project

1. The reports will be listed under each section in alphabetical order by the name of the project.
2. Chapters/Districts/States that would like their projects added to the library must submit them to the current PVP. The PVP will send reports to webmaster for uploading to the website.
3. NO DUPLICATES will be allowed. The current PVP will be responsible for making sure that the project doesn't already exist on the website. The Webmaster will work with the PVP to make sure the project reports are not duplicated.
4. The chapter/district/state who originally submitted the project may update it every year if they wish so that it is current for others to review.
5. The PVP will have final say if the reports are to be added to the library.
6. If further information about the project is needed, contact the chapter/district/state that submitted the project.



United States Women of Today

Project Report Form

The Project Report Library is designed as a way for chapters/districts/states to share projects, events, fundraising ideas, etc. with other United States Women of Today (USWT) chapters. Submitting a one page report on projects that were outstanding can help other chapters, who are often looking for new ideas/projects to keep their chapters energized. Project Report forms are submitted to the United States Women of Today Programming Vice President. To be completed by project chairperson and submitted to USWT Programming VP for Project Report Library, with copy kept by chapter/state/district. **Please fill in chapter/district/state information.**

_____ CHAPTER _____ DISTRICT _____ STATE

PROJECT NAME: _____

TYPE OF PROJECT:

___ **INTERNAL** (membership drives/socials/awards/public relations/personal enrichment)

___ **WAYS & MEANS** (raise funds to operate state or chapter: monies raised goes into general fund)

___ **COMMUNITY INVOLVEMENT (FUNDRAISING):** (money raised for another organization or specific community service project)

___ **COMMUNITY INVOLVEMENT (NON-FUNDRAISING):** (projects run within community for betterment or education)

___ **CHAPTER PUBLICATIONS:** (includes Plan of Action, chapter/state newsletters, and membership handbooks)

Purpose/Goal of Project: _____

Start Date of Project: _____ How long did it take to complete: _____

Description of Project: _____

Total number of members needed to complete this project: _____

Budget: Income: _____ Expenses: _____

Recommendations &Notes: _____



United States Women of Today

HEALTH AND WELLNESS CERTIFICATION FORM

Health and Wellness is designed to help each individual be aware of their physical, mental, and spiritual well-being. This form may be completed once each USWT year. Complete a minimum of 15 out of the following 30 items and submit it to your state contact postmarked no later than May 1.

Name _____ Date Joined _____ Date Certified _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

- _____ Have a physical exam
- _____ Have an eye exam or hearing tested
- _____ Know your numbers {cholesterol, blood pressure, glucose, and body mass index}
- _____ Have a dental check up
- _____ Have a mammogram or Pap test
- _____ Have a colorectal cancer test
- _____ Have a bone density test
- _____ Have a flu or pneumonia shot
- _____ Perform monthly self breast or testicular exams
- _____ Be a registered organ donor
- _____ Quit smoking or support someone else
- _____ Donate blood or participate in an awareness walk (i.e. March for Babies, Relay for Life, Autism)
- _____ Wear your seatbelt or helmet
- _____ Do not text while you drive or use a hands free device while talking on your cell phone
- _____ Have a home fire drill or assemble an emergency preparedness kit
- _____ Certify in CPR or First Aid
- _____ Check your medication cabinet for out-dated items and dispose of them properly
- _____ Update your medical history
- _____ Eat breakfast everyday for at least a month
- _____ Keep a diary for at least a week of everything you eat
- _____ Exercise a minimum of 3 times per week for one month
- _____ Wear a pedometer for 2 months
- _____ Attend a seminar, health fair, or read an article on a health topic (i.e. stress management, exercising, weight loss, etc.)
- _____ Keep a journal for at least one month on diet, time management, mood or exercise
- _____ Watch a funny TV show or movie
- _____ Attend a fellowship breakfast
- _____ Participate in a prayer chain
- _____ Visit a nursing home, hospital, or shut in.
- _____ Attend a spiritually orientated program or project
- _____ Other _____



United States Women of Today

PERSONAL DEVELOPMENT CERTIFICATION FORM

Personal Development is designed to help each individual advance in personal growth, careers, and citizenship. This form may be completed once each USWT year. These items can be done anywhere; such as in church, school, or other organization. Complete a minimum of 15 out of 30 items. Submit it to your state contact so as to be postmarked no later than May 1.

Name _____ Date Joined _____ Date Certified _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

_____ Complete an Effective Speaking impromptu

_____ Present a speech (4-6 minutes)

_____ Enter a writing or speaking competition

_____ Write an article for a chapter, state or national newsletter or a local newspaper

_____ Write an essay or short story (300-500 words)

_____ Write or update your resume

_____ Hold a Women of Today office at any level

_____ Participate in a leadership exercise

_____ Participate in a teambuilding exercise

_____ Participate in a listening exercise

_____ Participate in a family activity

_____ Participate in a chapter project

_____ Participate in a chapter social

_____ Attend a Women of Today seminar or forum

_____ Attend a continuing education class, seminar or pursue your GED

_____ Attend a seminar or update your own estate plan, will, or trust

_____ Attend a parenting, elder care, or foster parenting class

_____ Attend a program honoring outstanding women

_____ Attend a State or United States Women of Today Convention

_____ Be a member of another organization

_____ Learn about power of attorney, durable power of attorney, or guardianship

_____ Learn about the United States flag, the United States Currency, or visit a United States Historical Site

_____ Learn about the care of your vehicle

_____ Learn how a bill becomes a law or another aspect of the government

_____ Interview a member of an older generation about changes they have seen in their lifespan

_____ Reconnect with a relative or friend

_____ Create a PowerPoint presentation

_____ Create a Facebook page and update regularly

_____ Create or work on a chapter website

_____ Other suggestions: _____



United States Women of Today

PERSONAL DEVELOPMENT COMPETITION STAT SHEET

Name: _____

Chapter: _____ State: _____

Date Submitted: _____

____ Speaking ____ Writing ____ Other

____ Yes ____ No \$5.00 entry fee included

Topic as set by USWT PD PM: _____

Name of Speech or Essay: _____



United States Women of Today

STEP I

SUCCESS THROUGH ENTHUSIASTIC PARTICIPATION

STEP I is designed to promote the orientation and activation of the new member. All steps of the program must be completed during the member's **first 120 days** (date from when dues are paid). By participating in the required activities, the new member becomes familiar with all levels of the organization. To certify in STEP I the individual must complete all of the mandatory requirements and two of the optional requirements. The certification form should be sent to the State Contact within 30 days of the completion of the program. REMEMBER THESE REQUIREMENTS MUST BE COMPLETED WITHIN THE FIRST 120 DAYS OF JOINING THE LOCAL CHAPTER.

Name _____ Date Joined _____ Date Certified _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

MANDATORY REQUIREMENTS - Please record the date of completion.

Introduce yourself at your local meeting as a member Date _____

Attend an orientation and/or local membership meeting Date _____

Attend a chapter social or project (circle one) Date _____

OPTIONAL REQUIREMENTS - complete two of the following and please record the date of completion.

Submit an idea for a new project (idea) _____ Date _____

Visit another chapter and/or attend a state meeting (circle one) Date _____

Bring a prospective member to a local membership meeting
(Name) _____ Date _____

Participate in a Domestic Violence Awareness activity Date _____

Join a Women of Today Face book page Date _____

Know and recite your, State or USWT Creed (circle one) Date _____



United States Women of Today

STEP II

SUCCESS THROUGH ENTHUSIASTIC PARTICIPATION

STEP II is designed for the member who has been a member for **12 months or less**. By participating in this program the member will become activated on all levels of the organization. To certify in STEP II, the member must complete all of the mandatory requirements and four of the optional requirements. The certification form should be sent to the State Contact within 30 days of the completion of the program. {It is not necessary to complete STEP I to complete STEP II}

Name _____ Date Joined _____ Date Certified _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

MANDATORY REQUIREMENTS - Please record the date of completion.

Know and recite the USWT Creed Date _____

Bring a prospective member to a meeting
(Name) _____ Date _____

Certify in Personal Development or Health & Wellness (circle one) Date _____

Participate in a Domestic Violence Awareness project Date _____

OPTIONAL REQUIREMENTS - Complete four of the following and please record the date of completion.

Sign a new member (Name) _____ Date _____

Certify in Personal Development or Health & Wellness (circle one) Date _____

Attend another chapter, district, regional, state or national business meeting (circle one) Date _____

Give a report at a meeting (Type) _____ Date _____

Join a Women of Today Face book page Date _____

Give an invocation, benediction or lead the Pledge of Allegiance
or the Creed at any USWT function (circle one) Date _____

Write an article for local newsletter or community newspaper for publication (circle one) Date _____

Attend a Women of Today social Date _____

Participate in a local Women of Today project (type) _____ Date _____

Participate in the National President Challenge Date _____

Create a Women of Today You Tube video (topic) _____ Date _____



United States Women of Today

STEP III

SUCCESS THROUGH ENTHUSIASTIC PARTICIPATION

STEP III is designed for the member who has been a member for 1 to 5 years and for any past member in good standing that leaves the organization for any length of time and then rejoins the organization at a later date. This program is for continual activation of those members in all areas of the organization. To certify in STEP III, the member must complete all of the mandatory requirements and eight of the optional requirements. This can only be completed once per year. The certification form should be sent to the State Program Manager within 30 days of the completion of the program. **{It is not necessary to have completed the earlier STEPs}**

Name _____ Date Joined _____ Date Certified _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

MANDATORY REQUIREMENTS - Please record the date of completion.

- Know and recite the USWT Creed Date _____
- Sign a new member (Name) _____ Date _____
- Certify in Personal Development, Health & Wellness or participate in a Domestic Violence Awareness project (circle one) Date _____
- Attend another chapter or a district, regional, state or national business meeting or state committee meeting (circle one) Date _____
- Serve as a local officer or committee chair Date _____
- Participate in a local Ways and Means project (project) _____ Date _____

OPTIONAL REQUIREMENTS - complete eight of the following and please record the date of completion.

- Certify in Personal Development or Health & Wellness or participate in a Domestic Violence Awareness project (circle one) (in addition to the mandatory requirement) (circle one) Date _____
- Attend another chapter, district, regional, state or national business meeting or state committee meeting (in addition to the mandatory requirement) (circle one) Date _____
- Participate in a state or national Ways and Means project _____ Date _____
- Attend a forum at a local, state or national meeting (circle one) Date _____
- Give a report at a meeting (type) _____ Date _____
- Bring an additional prospective member (Name) _____ Date _____
- Chair or Co-Chair a Membership-Night (circle one) Date _____
- Attend a USWT Midyear or Annual Convention (circle one) Date _____
- Create and/or maintain a webpage or Face book page Date _____
- Speak at a function on behalf of Women of Today Date _____
- Reactivate a member or participate in an extension Name _____ Date _____
- Participate in Women of Today Week or Volunteer Recognition Week (circle one) Date _____
- Participate in a state and/or national competition (circle one) Date _____
- Serve as a state or national officer (position) _____ Date _____
- Complete Outstanding Achievement in Programming (OAP) Date _____
- Participate in a local or state external foundation activity
Foundation _____ Date _____
- Participate in the National President Challenge Date _____
- Create a Women of Today You Tube video (topic) _____ Date _____



United States Women of Today

STEP IV

SUCCESS THROUGH ENTHUSIASTIC PARTICIPATION

STEP IV is designed for the member who has been a member for 6 years or more and for any past member in good standing that leaves the organization for any length of time and then rejoins the organization at a later date. This program is for continual activation of those members in all areas of the organization. To certify in STEP IV, the member must complete all of the mandatory requirements and eight of the optional requirements. This can be completed once per year. The certification form should be sent to the State Contact within 30 days of the completion of the program.

Name _____ Date Joined _____ Date Certified _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Chapter _____ State _____

MANDATORY REQUIREMENTS - Please record the date of completion.

Know and recite the USWT Creed Date _____

Sign a new member Name _____ Date _____

Participate in Women of Today or Volunteer Recognition Week Activity (circle one) Date _____

Present or organize a training/forum at a Women of Today function (topic) _____ Date _____

Certify in Personal Development, Health & Wellness or participate in Domestic Violence Awareness project (circle one) Date _____

Attend another chapter or a district, regional, state or national business meeting or state committee meeting (circle one) Date _____

Chair a local project (project) _____ Date _____

Participate in a local Ways and Means project Date _____

Chair or co-chair a chapter Membership night or social Date _____

Participate in a National President's Challenge Date _____

OPTIONAL REQUIREMENTS - complete eight of the following and please record the date of completion.

Serve as a mentor to a new member (Name) _____ Date _____

Speak at a function on behalf of Women of Today Date _____

Bring an additional prospective member (Name) _____ Date _____

Participate in a state or national Ways and Means project (project) _____ Date _____

Reactivate a member or participate in an extension (Name) _____ Date _____

Participate in a local or state external foundation activity (foundation) _____ Date _____

Participate in a state and/or national competition (circle one) Date _____

Create and/or maintain a webpage or Face book page Date _____

Give a report at a meeting (type) _____ Date _____

Create a Women of Today You Tube video(topic) _____ Date _____

Serve as a state or national officer or committee member (position) _____ Date _____

Write an article for your community newspaper Date _____

Attend a USWT Midyear or Annual Convention Date _____

Participate in a USWT function other than above, i.e. Founder's Day, etc (activity) _____ Date _____



United States Women of Today

Domestic Violence Awareness Transmittal Form

Each educational, fundraising or service project for Domestic Violence Awareness should be submitted on this form. Make (3) copies of this form. Maintain one copy for your chapter files, send one copy to your State Program Manager or Project Chair and submit one copy to the United States Women of Today Domestic Violence Awareness Program Manager as form is completed during the year. Final submissions to be **Postmarked no later than May 1st**.

Chapter : _____ **State:** _____

Name of Program Manager or Project Chair: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Name of Project:

Type of project: **Educational** **Fundraising** **Service project**
(check all that apply)

Recipient of Donation- Name: _____

Speaker Shelter DV agency Other

Describe: _____

Amount raised \$

Estimated total items donated \$

Total Service hours for this project: _____ Project / Donation Date: _____

Brief description of this project:



United States Women of Today



United States Women of Today

Community Connections Report

Chapter _____ State _____ Trimester 1 _____ 2 _____ 3 _____

Person Submitting _____ Position _____

Mailing Address _____ City _____ State _____ Zip _____

Email _____ Phone _____ Year _____ to _____

Project	Recipient	Service Area	Dollars	Education/ Service/Fundraiser	Service Hours	Community Impact

USWT SERVICE AREAS ARE ONLY FOR:

State Programs—External/Internal Chapter Projects—External/Internal Make A Difference Day Projects

{NOTE Please fill out the appropriate forms for the Domestic Violence Aware and Buckets of Sunshine,}

Please submit form to Programming Vice President



United States Women of Today

Officer Forms



United States Women of Today

National Staff Monthly Report

Send the completed form to the USWT President, postmark by the fifth day of the month.

Name _____

Position _____

What are your significant accomplishments in the past month?

What are your plans for the coming month?

List significant communications you have had this month. Attach your communications log, copies of articles, committee reports, or other mailings and incentives, etc.

What problems should the USWT President be made aware of?

What requests or suggestions do you have for the USWT organization or staff?

List your major goals and the progress, or lack thereof, you have made so far.

What travel have you completed this month? What are your plans for travel next month?

List any other comments, questions or concerns you may have.



United States Women of Today

National Staff Mid-Year Review

The purpose of this evaluation/review is:

1. To recognize and feel good about what has been accomplished to date.
2. To focus on what remains to be done and to form plans to implement and complete the year successfully.
3. To provide information on how the supervising officer can better serve you.

Using another sheet of paper, provide the information requested following the outline provided. Be brief but concise. This does not need to be complicated. Be as detailed as you desire in order to provide a Plan of Action for the remainder of your year. **Please mail to the National President, postmarked no later than November 30th. .**

I. GOALS AND IMPLEMENTATION

- A. List your major goals for the year.
- B. For each goal listed, explain the progress that has been made and further plans for accomplishing them.

II. LEADERSHIP

- A. List your strengths as a leader in your area.
- B. Are there areas of your leadership that need improvement?
- C. List specific ways you will be providing leadership to those you work with this year.

III. STATUS OF YOUR AREA

- A. Provide a personal evaluation of the status of your area.
 1. Any major challenges
 2. Highlights
 3. Frustrations/disappointments
- B. After six months experience in the position, do you see a need to change the focus of your promotion?
- C. List specific programs/promotions that you will emphasize the remainder of the year.

IV. YOUR ROLE AS A USWT OFFICER

- A. Evaluate your performance in your position
- B. Do you feel you are being provided with the information and support needed to perform your job?
- C. Specifically list any ways in which I, and/or your supervising officer can better serve you.
- D. Evaluate the following:
 1. Today's Leader
 2. Board Newsletters
 3. Reach Out and Touch Program
 4. Mid-Year Convention including training sessions/speakers/presenters
 5. Your suggestions for convention forums, etc.

V. ADDITIONAL COMMENTS



United States Women of Today

State President Monthly Report

Send the completed form to the USWT President, postmark no later than the fifth of the month.

Name _____

Date of Next Meeting _____ Location _____

State _____ Month _____

What are your significant accomplishments in the past month?

What are your plans for the coming month?

List significant communications you have had this month. Attach your communications log, copies of articles, committee reports, or other mailings and incentives, etc.

What problems should the USWT President be made aware of?

What requests or suggestions do you have for the USWT organization or staff?

List your major goals and the progress, or lack thereof, you have made so far.

What travel have you completed this month? What are your plans for travel next month?

List any other comments, questions or concerns you may have.



United States Women of Today State President Annual Report

Send the completed form to the USWT President, postmark no later than May 1st.

Name _____

Position _____ State _____

What are your significant accomplishments in this year?

What programs have you run for the Internal programming areas? How many certifications were received in these areas?

What programs have you run for the External programming areas? How many chapters participated in these areas? How much money was raised?

List the beginning membership base, year-end membership base, year-end retention figures for each chapter and for the state organization. What was the NMA totals for the year? What work was done for extensions?

What was promoted for Chapter Management?

What significant programs were run for improvement to your states administration?

List any other comments, questions or concerns you may have.



United States Women of Today

Program Manager & Directors Bid Form

The following information must be completed by the prospective program manager or director and returned to the Elections Committee Chair, submitted no later than Wednesday prior to Annual Convention. With this form, the prospective manager or director must include three (3) pages of information: a detailed Plan of Action, letter of support from their state organization, and a proposed budget.

Position Filed for _____

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email _____

Chapter _____ Date Joined _____

Do you plan to attend all national meetings this year? Yes No_ Are you free to travel during the year? Yes No

Office Held	Enter the year(s) in the appropriate level(s)			
	Local	District or Region	State	National

List experience you may have that pertains to the position for which you are bidding.

List other facts about you and your family that you think we should know.



United States Women of Today

Expense Voucher

Send completed form to USWT Treasurer, postmarked May 1st. Attach all receipts and itemize expenses below.

Name _____ Date _____

Position _____ Total Expenses \$ _____

Address _____

City _____ State _____ Zip _____

Signature _____

Expenses	Description of Expense	Quantity	Amount
Phone			
Postage			
Copies & Supplies			
Other Officer Expenses			
Incentives			
Travel			
Miscellaneous			

For Treasurer's Use Only

Annual Budget _____ Date Paid _____

Paid Year to Date _____

Paid This Voucher _____ Check No. _____

Total Paid _____

Remaining Budget _____

Approved by _____



United States Women of Today

State Visitation Report

Please complete this form after making a State Visitation. Your observations can be an important part of servicing each state. Be thorough with your remarks. Send the completed form to USWT President within one week of visit.

Name _____ Date of Visit _____

Position _____ State Visited _____

Event(s) Attended _____

DESCRIBE PURPOSE OF VISIT (Speaker, training, extension, etc.)

EVALUATE VISIT (Did you achieve your purpose?)

EVALUATE THE EVENT

Was the event well planned?

What were your impressions/reactions of the leaders & participants?)

Were there needs/concerns/questions expressed by state officers or local members?

WHAT FOLLOW-UP IS SUGGESTED/NECESSARY? (If there are individuals who would benefit from a call or note, please include their name and address/phone number.)

OTHER OBSERVATIONS



United States Women of Today

Committee Meeting Synopsis

Send the completed form with an attached copy of minutes and return to USWT President.

Committee _____ Chairman _____

Date _____ Recording Secretary _____

Attendees

Items discussed

Action taken by committee

Policy changes/additions to be presented

Bylaw proposals to be made



United States Women of Today

Forum/Training Evaluation Form

Forum Title _____

Presenter _____ Position _____

What did you like?

What didn't you like?

What would you still like to learn that wasn't covered?



United States Women of Today

Forum/Training Attendance Sheet

Forum Title _____

Presenter _____ Position _____