

2022/23 Annual Report—Part I (Professional Faculties)

Student Local Name:

of The Alberta Teachers' Association

Date of Election _____

1. Does your local maintain a local office? Yes _____ No _____
(A) Percentage of time office is staffed Full Time _____ Half Time _____ Other _____
(B) Office contact person _____
(C) Paid Staff _____ Volunteer _____ Both _____
(D) Hours of operation _____

2. Does your local maintain a permanent mailing address? Yes _____ No _____
If yes, the address is _____ Phone _____ Fax _____
3. Does your local maintain a website? Yes _____ No _____
If yes, the address is _____
Local office e-mail _____
4. Does your local maintain social media accounts? Yes _____ No _____
 Twitter _____ Facebook _____
 Instagram _____ Other _____
5. Local operating year _____ to _____
6. Faculty Advisor _____ Phone _____ E-mail _____

The Alberta Teachers' Association requires the information contained on this form to fulfill its statutory obligations and to conduct its professional and business affairs. The Association will collect, use, and disclose the personal information collected here in accordance with its privacy policy available at www.teachers.ab.ca. The Association's privacy officer is available at 780-447-9400 to answer inquiries about the Association's compliance with the *Personal Information Protection Act* or to provide written information on the collection, use, disclosure, storage, or secure destruction of personal information and the Association's use of international service providers for routine e-mail distribution.



Position—Full Name (please print)	Address (please indicate if this is school or home address)	Contact	
President	Street/Box	Phone	
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	1st Vice-President		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	2nd Vice-President		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Past President		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Secretary		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Treasurer		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Sec-Treasurer		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Web Managers/Communication Officer		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home
	Political Engagement Officer		Street/Box
Name	City/Town	E-mail	
	Postal Code		<input type="checkbox"/> Local <input type="checkbox"/> Home

ATA Committees for the 2022/23 School Year

(eg, Area Field Experience, Teacher Ed and Cert, Professional Development, PR, Social etc) – add additional page if necessary

Chair Name (please print)	Address (please indicate if this is school or home address)	Contact
Name of Committee		
Chair Name	Street/Box	Phone
	City/Town	
	Postal Code	E-mail
<input type="checkbox"/> Local <input type="checkbox"/> Home		
Name of Committee		
Chair Name	Street/Box	Phone
	City/Town	
	Postal Code	E-mail
<input type="checkbox"/> Local <input type="checkbox"/> Home		
Name of Committee		
Chair Name	Street/Box	Phone
	City/Town	
	Postal Code	E-mail
<input type="checkbox"/> Local <input type="checkbox"/> Home		

Local Representatives to the 2023 Annual Representative Assembly

Representative Name (please print)	Address	Contact
Name	Street/Box	Phone
Preferred Name	City/Town	
		Postal Code
Name	Street/Box	Phone
Preferred Name	City/Town	
		Postal Code
Name	Street/Box	Phone
Preferred Name	City/Town	
		Postal Code

Local Meetings Held Last School Year

Dates	Purpose or Significant Decisions or Actions
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1. General Meetings

2. Executive Committee Meetings



Save



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