

Commission Event Proposal (Form A)

COMMISSION ON DISABILITIES Event Proposal & Mission Alignment Worksheet *(To be completed prior to Commission agreement to attend)*

I. EVENT DETAILS

Event Name: _____

Date: _____

Start Time & End Time: _____

Location: _____

II. MISSION ALIGNMENT

Per the City Charter, the Commission exists to "promote greater awareness of, respect for, and total participation of individuals with disabilities". How does this event align?

Commission Visibility: Increases public knowledge of the Commission's existence, mission, and resources

Advisory: Gather information to help us advise the City Council.

Policy Review: Allows us to review community policies, programs, or actions.

Community Awareness: Creates public awareness of needs in specific areas:

Housing

Employment

Transportation

General Inclusion

III. LEVEL OF ENGAGEMENT

To prevent confusion with event hosts, please specify exactly how we will participate:

- **Level 1: Literature Drop.** (No staff. We leave brochures at a shared table/desk.)
- **Level 2: Roaming/Networking.** (Commissioners attend to network. No table. **Badges may be required.**)
- **Level 3: Shared Table.** (Sitting at a table with another Dept/Group. 1-2 chairs.)
- **Level 4: Full Commission Booth.** (Tent, table, banner, full staffing required.)
- **Level 5: Presentation.** (Commissioners present slides at event/conference.)

IV. RESOURCE CHECK

- **Staffing:** Who is the "Lead Commissioner"? _____
- **How many Commissioners are requested for this event?** _____
- **Cost:** Is there a fee for us to be there? [] No [] Yes _____