

2023-2024 Program Criteria

Program Chair: Open

Contact for Questions: Linda Wiegand Email: program@ohiobpw.org

Deadline to submit report: April 21, 2024

**Every Local who meets the three criteria categories will receive $25.**

This year we’re focusing on Activism. By accomplishing each of the three criteria categories in the timeframe from September 2023 – April 2024 the Local will receive $25

Criteria 1: Local will determine their priority and focus on that area at meeting(s). Meeting(s) can be either In-person or via Zoom.

Criteria 2: Local will define how legislation is important to their members. Educate on platform issues and the Ohio legislative process.

Criteria 3: Promote BPW. Tell others who we are and what we do.

**How to report your Local’s activities?**

**Fill out the information in the fields below for the criteria category. Email the form to Linda Wiegand @** program@ohiobpw.org **before 4/21/2024.**

***EXAMPLE***

|  |  |
| --- | --- |
| **Local Name** | *ABC* |
| **Submitter** | *Cindy Atkinson* |
| **Criteria Category #** | *3* |
| **Description of activity** | *Article written by ABC Local President and published in News Sun (local newspaper) speaking to the pay differential between women & men for the same job. Provided insight on how to negotiate for a better salary using pay scales for the position. Article mentioned how BPW lobbies for Equal Pay.* |
| **Date** (mm/dd/yyyy) | *3/24/2024* |
| **If the activity was a meeting include number of attendees** | *NA* |
| **Type of Meeting** (In-person or Zoom) | *NA* |
| **Name & Title of Speaker** | *NA* |
| **Topic or Name of Presentation** | *NA* |

**Use the next pages to provide information for each of the criteria categories.**

**Fill out the information in the fields below for the criteria category. Email the form to Linda Wiegand @** program@ohiobpw.org **before 4/21/2024.**

|  |  |
| --- | --- |
| **Local Name** |  |
| **Submitter** |  |
| **Criteria Category #** | Criteria 1: Local will determine their priority and focus on that area at meeting(s).  |
| **Description of activity** |  |
| **Date** (mm/dd/yyyy) |  |
| **If the activity was a meeting include number of attendees** |  |
| **Type of Meeting** (In-person or Zoom) |  |
| **Name & Title of Speaker** |  |
| **Topic or Name of Presentation** |  |

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|  |  |
| --- | --- |
| **Local Name** |  |
| **Submitter** |  |
| **Criteria Category #** | Criteria 2: Local will define how legislation is important to their members. Educate on platform issues and the Ohio legislative process. |
| **Description of activity** |  |
| **Date** (mm/dd/yyyy) |  |
| **If the activity was a meeting include number of attendees** |  |
| **Type of Meeting** (In-person or Zoom) |  |
| **Name & Title of Speaker** |  |
| **Topic or Name of Presentation** |  |

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**Fill out the information in the fields below for the criteria category. Email the form to Linda Wiegand @** program@ohiobpw.org **before 4/21/2024.**

|  |  |
| --- | --- |
| **Local Name** |  |
| **Submitter** |  |
| **Criteria Category #** | Criteria 3: Promote BPW. Tell others who we are and what we do. |
| **Description of activity** |  |
| **Date** (mm/dd/yyyy) |  |
| **If the activity was a meeting include number of attendees** |  |
| **Type of Meeting** (In-person or Zoom) |  |
| **Name & Title of Speaker** |  |
| **Topic or Name of Presentation** |  |