

Adams County Collaborative Management Program (ACCMP)
Interagency Oversight Group (IOG)
Optional Proxy Appointment
State Fiscal Year 2024-2025

To: ACCMP Mandatory and Non-Mandatory Voting Members, ACCMP Coordinator

Re: ACCMP IOG attendance, voting rights

IOG Members are not required to have proxy appointments. This form is optional to complete. However, without completing this form, any proxy or proxy representative sent in a member's absence will not have voting rights.

I, _____ when unable to attend a scheduled ACCMP IOG
meeting Name
will be sending _____ who is the _____ at
Job Title
_____ to act as a proxy in all voting matters before the ACCMP.
Organization/agency/district

If the above-mentioned proxy is unable to attend a scheduled ACCMP IOG meeting, I will be sending

_____ who is the _____
Name Job Title
at _____ to act as my proxy's representative in all voting
Organization/agency/district
matters before the ACCMP.

SCOPE OF THE POWER OF REPRESENTATION

- I. The MOU signer acknowledges that designating a proxy to attend and vote in one's place must be an appropriate representative serving within the same domain (child welfare, juvenile justice, education, physical/mental health, and family voice domains).
- II. The MOU signer, proxy, and proxy representative (if one is appointed) abides by the 75% attendance process measure, and acknowledges that a proxy attending in place of the signer (if from another agency/organization) does not preclude the agreement to still attend 75% of the IOG meetings and all other Membership Requirements and Performance Expectations as stated in ACCMP Bylaws, [Article IV, Section 3](#).
- III. The proxy and proxy representative (if one is appointed) are authorized to cast votes in line with the suggestions of the management of the organization/agency/district and at their own discretion.
- IV. The proxy and proxy representative (if one is appointed) understands that they must recuse themselves from a voting matter that is perceived to be a conflict of interest.

DATE:

NAME AND TITLE:
ORGANIZATION:

MOU Signer Signature