



www.SaveColoradoSummers.com

Petition for a later school start date for Colorado Public Schools

Petition summary and background	Save Colorado Summers is a volunteer coalition of parents, grandparents, education professionals and other concerned citizens seeking to restore a more traditional school calendar with a start date after Labor Day but no earlier than August 28th.
Action petitioned for	We, the undersigned, are concerned citizens who urge our leaders to act now to make the first day of school start anywhere between late August and the day after Labor Day.

Name	Address	Phone	Comment	Date
_____ (PLEASE PRINT)	_____ RESIDENCE ADDRESS	(____)____ (____)____ TELEPHONE CELL PHONE		____/____/____
_____ SIGNATURE	_____ CITY, STATE, ZIP	_____ E-Mail Address		
_____ (PLEASE PRINT)	_____ RESIDENCE ADDRESS	(____)____ (____)____ TELEPHONE CELL PHONE		____/____/____
_____ SIGNATURE	_____ CITY, STATE, ZIP	_____ E-Mail Address		
_____ (PLEASE PRINT)	_____ RESIDENCE ADDRESS	(____)____ (____)____ TELEPHONE CELL PHONE		____/____/____
_____ SIGNATURE	_____ CITY, STATE, ZIP	_____ E-Mail Address		
_____ (PLEASE PRINT)	_____ RESIDENCE ADDRESS	(____)____ (____)____ TELEPHONE CELL PHONE		____/____/____
_____ SIGNATURE	_____ CITY, STATE, ZIP	_____ E-Mail Address		

Name	Address	Phone	Comment	Date
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____
_____ (PLEASE PRINT) _____ SIGNATURE	_____ RESIDENCE ADDRESS _____ CITY, STATE, ZIP	(____)_____ TELEPHONE (____)_____ CELL PHONE _____ E-Mail Address		____/____/____

