**Template Form for a Power to Act Request**

|  |
| --- |
| *Instructions for using the form:* * *Select the entire form below the red box*
* *Copy the entire form*
* *Paste the entire form into the body of an email*
* *Fill in the form in the email*
* *Copy the email address* *cabpapers@dpmc.govt.nz* *into the “to” line of the email*
* *Send the email*
 |

|  |
| --- |
| *Power to Act for a Committee Request* [SEEMAIL] |
| **Name and portfolio of Minister:** |  |
| **Confirm that this request has been made by the Minister:** | Check box to confirm [ ]  |
| **Title of paper** | Click here to enter text. |
| **Portfolio(s) of paper** | Click here to enter text. |
| **Intended Cabinet meeting date for request** | Click here to enter a date. |
| **Intended committee meeting to take Power to Act** | Choose an item. |
| **Intended committee meeting date** | Click here to enter a date. |
| **Reason for request** | Click here to enter text. |
| **Comments (optional)** | Click here to enter text. |
| **Minister’s office contact name and #** | Click here to enter text. |
| ***Write ‘Power to Act request for [insert committee identifier]’ in the subject line and email this form to:*** cabpapers@dpmc.govt.nz |