

Wisconsin Swimming Proposal Form - Online Version

NOTE: The enactment of Policies and/or Rules requires detailed coordination and clarity. Changes or additions to Wisconsin Swimming Bylaws, policies, or procedures may be brought to the Rules Committee by any other LSC committee or sub-committee for consideration. As per [LSC Policy 20](#), such proposed changes or additions shall be submitted using the [Wisconsin Swimming Proposal Form](#).

The Rules Committee will present proposed changes or additions to Wisconsin Swimming policies and procedures to the LSC Board of Directors for action. Upon approval by the LSC Board of Directors, the policies and/or procedures will become effective, and the Rules Committee will present the changes or additions at the next LSC House of Delegates meeting.

Email *

amy@wisconsinswimming.org

Reviewed by Standing Committee or Coordinator: *

(check all that apply)

- ☐ Age Group
- ☐ Athlete
- ☐ DE&I
- ☐ Disability
- ☐ Finance
- ☐ Governance
- ☐ Nominating
- ☐ Operational Risk
- ☐ Officials
- ☐ Personnel
- ☐ Rules
- ☐ Senior
- ☐ Safe Sport
- ☐ Tech Planning

☒ Other: LSC Staff

Name of Proposal *

9.4.1 G Forfeiture of Facility Fund Grant Awards
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Vision: Explain what you hope this proposal will achieve. What are your intentions by putting the proposal forward? Example from a travel policy - To ensure the safety and well-being of those who travel on behalf of WISI as well as the effective management of those who travel in groups. *

The Facility Fund policy does not have a provision for the length of time that an award recipient must submit for their award disbursement and what happens to any unclaimed funds.

I recommend an amendment to Policy 9 (specifically 9.4.1 G) that grantee's must submit a reimbursement request for the approved award by August 31 of the year following the grant approval or forfeit the grant. This will give award recipients approximately 16 months to make purchases described in the approved fund application and submit for reimbursement. Any grant awards that are forfeited would be reallocated back into the fund and become eligible for new disbursements at the next Facility Fund Grant Committee review.

Summary of Need: Include background, issues and/or events leading up to this proposal. *

This is an item that was overlooked in the grant set up process and should be implemented as soon as possible. It is not best practice for the LSC to carry allocated grant funds on the financial reports for an indefinite period of time. Updating the policy will also provide a resolution to funds that become forfeited.

Propose Action and Official Language: Provide details of your proposal and how it will address the need that was identified above under Summary of Need. If applicable, what is the official language that is to be adopted and put on record? This should include legal language such as 'shall' and a redlined version if needed. [Use this form](#) if needed. *

9.4.1 G 1. Disbursement of Grant Awards must be submitted to the LSC by August 31 of the year following the grant approval or the grant will be forfeited.

9.4.1 G 2. Any forfeited Facility Fund Grant Awards will be assigned back into the fund balance and become part of the grant allocation for the new fiscal year.

Related Items: Put a list of documents and forms mentioned in the proposal here. What other policies may be impacted? What are the supporting documents or relevant data? *

none

Implementation: How and by whom will this action be introduced to the affected parties, and how will it be sustained? This must include the date of desired implementation, and end date if applicable. *

Finance mgr will monitor reimbursement requests. Facility Fund Grant committee will maintain records of awards. This policy should be effective with the 2025 Facility Fund Grant recipients. Some leniency may be applied to the 2025 recipients since this was not an approved policy at the time of their grant application.

Desired Board Meeting Date for Proposal Discussion: *

Note that Board meetings are typically held the fourth week of every month.

MM DD YYYY

04 / 25 / 2025

Name of Submitter(s): Click or tap here to enter text. *

Amy Balducci

Name of Board Member Sponsor(s): *

This form was created inside of Wisconsin Swimming.

Google Forms