**Board Report**

Submitted by**:**  Leadership position

Email**:** Telephone:

Date Submitted:

**Required Information:**

Title:

Please identify how this should be categorized on the agenda

❑ Consent *(informational, no discussion needed)*

❑ Discussion *(requires discussion/decision by the board)*

Description:

If this is a Discussion item, please identify:

If you are requesting a **motion**, state it here:

If you wish only to make **recommendation**, please state it here:

**Strategic Goals it helps to achieve** - *useful when it becomes necessary for the board to decide which projects to continue and which projects are discarded or postponed:*

|  |  |
| --- | --- |
| **Check and Prioritize** | **Current ACAPT Goals** |
|  | ACADEMIC INNOVATION:Institutions and partners will recognize ACAPT as the premier resource to utilize for ongoing reflection and continuous improvement in academic physical therapy |
|  | DIVERSITY, EQUITY AND INCLUSION: ACAPT will equip institutions with resources to facilitate growth in diversity, equity and inclusion in the academic physical therapy workforce and student population. |
|  | INFLUENCE:ACAPT will be the leading influential voice for excellence in academic physical therapy. |