



NAfME Collegiate Chapter Update Form

This form is to be completed by the Collegiate Chapter President and submitted via email to the Florida NAfME Collegiate State Secretary at flnafmecollegiate@gmail.com.

The names and contact information presented in this form will be used for Florida NAfME Collegiate communication purposes only. Please make sure that all information is accurate.

Current Semester (circle/highlight one) : Fall Spring

Date completed:

Chapter College/University:

The following information will be used for communication among Florida Collegiate Chapters, the State Executive Board, and the FMEA Executive Board. It is necessary that all names are those of the MOST RECENT Advisors, Officers, and Members and that all email addresses are those MOST OFTEN CHECKED by their owners.

Chapter Advisor

Chapter Advisor's Name:

Chapter Advisor's Primary Email Address:

Chapter Advisor's Primary Phone Number:

Chapter Executive Board

| <u>Position</u> | <u>Name</u> | <u>Email Address</u> | <u>Phone Number</u> |
|------------------------|--------------------|-----------------------------|----------------------------|
| President | | | |
| President-Elect | | | |
| Secretary | | | |
| Treasurer | | | |
| Parliamentarian | | | |
| Historian | | | |
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