

# Chapter Reporting Request - 2020-2021

## Chapter/Region Information:

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1. Today's Date \*

 

2. Chapter/Region Name: \*

3. Chapter/Region E-mail:

4. Chapter/Region Website:

5. If your chapter/region does not have a website, would you be interested in help setting up a simple website?

Yes

No

6. Instructions on how to join your Chapter:

**Current President Information**

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7. Current Chapter/Region President Demographics:

First Name \*

Last Name \*

Title \*

Company Name \*

Street Address \*

City \*

State \*

Zip \*

Email Address \*

Phone Number \*

Fax Number

8. Current Chapter/Region President's Term Start Date: \*



9. Current Chapter/Region President's Term End Date: \*



**President-Elect Information:**

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10. President-Elect Chapter/Region President Demographics:

First Name \*

Last Name \*

Title

Company Name \*

Street Address \*

City \*

State \*

Zip \*

Email Address \*

Phone Number \*

Fax Number

11. Chapter/Region President-Elects' "Presidential" (**when they become the President**) Term Start Date: \*



12. Chapter/Region President-Elect's "Presidential" Term End Date: \*



**Chapter/Region Information:**

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13. Chapter/Region Federal ID#

14. Annual Meetings/Events/Programs (**please see the scroll bar below to navigate to the left and to the right**):

**Please Note:** Once you complete this survey, you will receive a confirmation e-mail that will include a link to share your meetings/events/programs on IPMA-HR's Event page.

	Program	Date	Location	Description
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 15. Annual IPMA-HR Financial Information:

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Fiscal Year:

Date Prepared:

Total Income (from most recently completed fiscal year):

Total Expenses (from most recently completed fiscal year):

Fiscal Year (Surplus/Deficit):

Checking Account Balance (at end of the most recently completed fiscal year):

Savings Account Balance (at the end of the most recently completed fiscal year):

### Chapter/Region Board Members:

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#### Page description:

Please do not include your Chapter/Region President or Chapter/Region President-Elect.

## 16. Chapter/Region Board Member - 01:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:





## 17. Chapter/Region Board Member - 02:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## 18. Chapter/Region Board Member - 03:

First Name

Last Name

Email Address

Board Title:

- Past President
- Vice President
- Secretary
- Treasurer
- Board Member
- Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## 19. Chapter/Region Board Member - 04:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



20. Chapter/Region Board Member - 05:

First Name

Last Name

Email Address

Board Title:

- Past President
- Vice President
- Secretary
- Treasurer
- Board Member
- Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## 21. Chapter/Region Board Member - 06:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## 22. Chapter/Region Board Member - 07:

First Name

Last Name

Email Address

Board Title:

- Past President
- Vice President
- Secretary
- Treasurer
- Board Member
- Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



### 23. Chapter/Region Board Member - 08:

First Name

Last Name

Email Address

Board Title:

- Past President
- Vice President
- Secretary
- Treasurer
- Board Member
- Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## 24. Chapter/Region Board Member - 09:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:





## 25. Chapter/Region Board Member - 10:

First Name

Last Name

Email Address

Board Title:

Past President  
Vice President  
Secretary  
Treasurer  
Board Member  
Other

Board Title: Other (please specify):

Board Start Date:



Board End Date:



## Chapter/Region Uploads:

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26. Chapter Roster - Only Chapters must submit changes/additions using the Excel Spreadsheet sent to you. No other format will be accepted. In addition, please incorporate individual IPMA-HR ID numbers into your database (this will cut-down on data entry time and ensure better accuracy).

Browse...

27. Current Chapter/Region Bylaws:

Browse...

### Chapter/Region Affiliation Agreement

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**28. Download your Agreement - Please open a new browser tab, cut, and past the following URL - <https://www.ipma-hr.org/membership/regions-chapter-network> into your browser.**

**Receipt of the Chapter/Region Affiliation Agreement** - Please check the appropriate box for either a chapter or region.

The box you check will also indicate the type of **Affiliation Agreement** (chapter or region) you will **Acknowledge** in the next question.

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- For Chapters: Received and Read the Chapter Affiliation Agreement
- For Regions: Received and Read the Region Affiliation Agreement

## 29. Affiliate Agreement Acknowledgement

I am in agreement with the Chapter/Region Affiliation Agreement (**agreement type indicated by the above Receipt of Chapter/Region Affiliation Agreement**).

This agreement sets forth the roles, responsibilities, and expectations between the International Public Management Association for Human Resources (IPMA-HR) and authorized chapters/regions. This agreement will be renewed on behalf of the chapter on an annual basis by the chapter president within 30 days of taking office.

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Sign name using mouse or touch pad

Signature of

### Administration Only

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Total Number of 2020-2021 Chapter Members

Number of 2020-2021 Non-National members to Invoice.

