

MSA - Annual Chapter Report Form

Due at May E-Board meeting

Executive Board meeting Date: _____ 2 _____

Instructions: List the names, term of the position and how long the person has been active on your board

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| Comments: |
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Chapter Board Questions:

Do you have a full active board:

Y/N Names:

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|----------------------|--|--|--|
| President: | | | |
| Vice President: | | | |
| Treasurer: | | | |
| Comptroller: | | | |
| Secretary: | | | |
| Assistant Secretary: | | | |

Chapter Board Member

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| Chapter Board Member | | | |
| Chapter Board Member | | | |
| Chapter Board Member | | | |
| Chapter Board Member | | | |

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|--------------------------------|--|--|--|
| Executive Board Representative | | | |
| Executive Board Representative | | | |

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| Current By-Laws: | | Comments: |
| Date of last revision: | | |
| When are your elections? | | |
| Do you have monthly Board Meetings? | | |
| If no, how often do you have Board Meetings? | | |
| Time allotted for Board Meetings: | | |
| Are they held on the same day as General Meeting? | | |

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| Do you have printed minutes from previous meeting? | | Comments: |
| Do you have a printed Treasurer's report? | | |
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| Monthly meetings: | | |
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| Who chooses the monthly program? | | |
| Do you follow a meeting protocol? | | |
| Do you bring new people into your chapter board and groom/mentor them to go through the board positions? | | |
| Comments: | | |

Thank you for your input on this new membership and chapter review form. This information will be used at the Executive Board level to review the health of the Association and all the chapters. Please provide any suggestions at the Executive Board meeting or through email to all delegates.