

CHAPTER APPLICATION

This is to apply for the acceptance of our organization, namely: **[proposed name of chapter]** as an official chapter of the **[state/provincial unit]** of the Council for Exceptional Children to cover a geographical area of **[school district, county, college/university, etc.]** and to be composed primarily of the following interest groups: **[insert anticipated membership demographics/locale/interests here]**.

Date present organization was established: ____

Date present organization voted to apply for acceptance as a chapter:

We understand that during the period required by the CEC state/provincial unit to qualify for a charter, we shall enjoy all the rights of a chapter in this state/province.

For the chapter:

Chapter President's Signature

Date

Please complete and return this form to your CEC state/provincial unit to apply for official recognition as a chapter.

To Be Completed by CEC State/Provincial Unit:

Date became an active applicant chapter:	Membership on this date:	
Constitution and bylaws approved: Yes / No	Minimum of 3 member officers:	Yes / No
Chapter number assigned by CEC Headquarters:		
CEC State/Provincial Unit Approval Signature:		

Unit President's Signature

Date