



Officer Information Form
Academic Year 2011/2012

CHAPTER INFORMATION

Name of Chapter:

Semester (Highlight One): FALL SPRING

OFFICER INFORMATION*

Name:

Chapter Executive Board Position:

Email Address:

Current Address:

Permanent Address:

Telephone Number:

Alternate Telephone Number:

Institution Currently Enrolled:

Expected year of graduation:

Field of study:

Expected career:

Additional comments:

**Information can be submitted in a Word document and emailed to: chaptership@fimrc.org*