

## CITE- Regional/Special Interest Group Application

### Process of starting the regional group:

- [Review CITE's Regional Group Operating Guidelines \(Required\)](#)
- Complete the CITE regional group application form below.
- Send application to the CITE Board's Membership Committee
- The Member Engagement Committee reviews the application and will contact the applicant for clarification as necessary
- Application will be sent to the CITE Board for final approval
- Approval notification will be sent to applicant by Member Engagement Committee upon receipt of group's 1<sup>st</sup> year meeting calendar.



## Regional/Special Interest Group Application

**Date:** \_\_\_\_\_

**Proposed Group Name (Must Include CITE in Name):** \_\_\_\_\_  
\_\_\_\_\_

### **Initial Officers**

Chair (name): \_\_\_\_\_

E-mail: \_\_\_\_\_

Educational Institution: \_\_\_\_\_

Job title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Chair Elect (name): \_\_\_\_\_

E-mail: \_\_\_\_\_

Educational Institution: \_\_\_\_\_

Job title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Secretary/past chair (name): \_\_\_\_\_

E-mail: \_\_\_\_\_

Educational Institution: \_\_\_\_\_

Job title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

### **Objective, Background or Reason for Forming The Group:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Proposed Geographic Area (Region) To Be Served by This Group:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



I acknowledge that I have reviewed the CITE Regional Group Guidelines prior to submitting this application (Initial below).

Chair \_\_\_\_\_

Chair Elect \_\_\_\_\_

Secretary/ Past Chair \_\_\_\_\_

**Email Completed Application To:** CITE Member Engagement Manager, Touda Bentatou  
[Touda.bentatou@cite.org](mailto:Touda.bentatou@cite.org)