Application for Special Interest Group Formation

Proposed SIG Name:

Proposed SIG Chair(s): *

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<tr>
<th>Name</th>
<th>Email address</th>
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Short-Term Goals (years 1-2):

Long-Term Goals (years 3-5):

*Any CNOC member affiliated with a CNOC member site may apply to form and chair a SIG. In the case of Co-Chairs, at least one Co-Chair must be affiliated with a CNOC member site, whereas the other Co-Chair can be a non-affiliated CNOC member (Patient/Caregiver member or SIG/Committee-Only member). See the Membership section of the CNOC website (www.cardiacneuro.org) for information on membership types and associated annual dues.
Knowledge, Clinical, Education, Policy and/or Advocacy Gap(s) the SIG Will Address:

Other Relevant Information (optional):

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The undersigned proposed Chair(s) below has reviewed the CNOC SIG Policies and Procedures and agrees to abide by all SIG Responsibilities. Failure to uphold SIG Responsibilities could result in the termination of the SIG.

Chair Signature(s)                                                                                      Date

*electronic signature acceptable*


Please send completed form via email to the CNOC Members at Large (for current Members at Large contact information, see: www.cardiacneo.org/steering-committee)

__________________________________________________________________________________________________

Steering Committee use only

Date received:

Date approved:

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