**ISPOR STUDENT NETWORK CHAPTER LEADER UPDATE FORM**

Please complete the information below and email it to ISPOR Staff at StudentNetwork@ispor.org.

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| **Incoming President Name** |  |
| **University** |  |
| **ISPOR Committee (if any)** |  |
| **Anticipated Graduate Date** |  |
| **School Email address** |  |
| **Secondary Email Address (for use post-graduation)** |  |

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| **Vice President Name** |  |
| **University** |  |
| **ISPOR Committee (if any)** |  |
| **Anticipated Graduate Date** |  |
| **School Email address** |  |
| **Secondary Email Address (for use post-graduation)** |  |

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| **Secretary Name** |  |
| **University** |  |
| **ISPOR Committee (if any)** |  |
| **Anticipated Graduate Date** |  |
| **School Email address** |  |
| **Secondary Email Address (for use post-graduation)** |  |

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| **Treasurer Name** |  |
| **University** |  |
| **ISPOR Committee (if any)** |  |
| **Anticipated Graduate Date** |  |
| **School Email address** |  |
| **Secondary Email Address (for use post-graduation)** |  |