

## Request to Form a Special Interest Group

To remain a member-driven association, AAMSE offers members the opportunity to propose the creation of new Special Interest Groups (SIGs) based on a subgroup or area that is not covered by a current SIG. To view a list of current SIGs, visit [aamse.org/SIGs](http://aamse.org/SIGs).

### Proposal Process:

1. Any current AAMSE member may begin procedures to create a SIG by submitting this *Request to Form a Special Interest Group* application to AAMSE.
2. All applications will be submitted to the AAMSE Board of Directors for review and approval.
3. A new SIG must be compatible with AAMSE's mission and strategic plan and must cover a subject area that cannot reasonably be addressed by an existing SIG.
4. Applicants will be notified of the status of their proposal within 60 days of submitting an application. If approved, AAMSE staff will provide the applicant with assistance to launch the SIG, including the development of online community space.
5. A minimum of 10 participants are needed for a new SIG to begin operations.

---

### Applicant Information:

Name : \_\_\_\_\_  
Title: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
  
Submission date: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

---

### Proposed SIG Information:

*Please supply the following information in the space provided or attach it as a separate document:*

1. What is the proposed name and/or subject area of the SIG (e.g., "State Medical Society Membership Directors")?

2. Describe the need/purpose for the proposed SIG.

3. What types of members do you expect will be interested in this SIG? Will the SIG be open to all members, or only to a specific segment of members (e.g., state medical society CEOs, county medical society membership directors, etc.)?

4. How does the proposed SIG align with AAMSE's mission (*To educate and support medical society professionals to advance the profession of medical society management, medical societies, and the physicians they serve*)?

**As a reminder, a SIG must have the participation of at least 10 members to begin operations.**

- I know of at least 10 members who are interested in this SIG  
(please list their names in the space below if possible)
- I would like AAMSE to conduct a survey of members to gauge interest in this proposed SIG  
(you will be contacted by AAMSE staff with further information)

Names of Interested Participants	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

*You will be notified of the status of your proposal within 60 days  
of submitting this application.  
All proposals are subject to the approval of the AAMSE Board of Directors.*

**Please return this form via email, mail or fax to:**

**American Association of Medical Society Executives**

1000 Westgate Drive, Suite 252  
St. Paul, Minnesota 55114  
Phone: (651) 288-3432 • Fax: (651) 290-2266  
Email: aamse@aamse.org • Web: aamse.org

**For AAMSE administration use only.**

Date received: \_\_\_\_\_ Completion date of Board of Directors review: \_\_\_\_\_

Date applicant notified of status: \_\_\_\_\_