

# Annual Chapter Information Report

## Alpha Epsilon Delta

*The Health Preprofessional Honor Society*



To help us better serve you, please provide as much information as possible.

\_\_\_\_\_ to \_\_\_\_\_  
 College/University AED Chapter (State/Greek Letter) School Year

Office Title	Name	Mailing Address	E-mail	Phone
President				( )
Vice President				( )
Secretary				( )
Treasurer				( )
Historian				( )
Scalpel Reporter				( )
Chapter Advisor				Telephone ( ) Fax number ( )

### Chapter Website:

<p><b>Scalpels — Mailing Address</b>                  Address to which bulk mailing of Scalpels for chapter distribution will be sent.</p>	<p><b>Membership Certificates — Shipping Address</b>                  Certificates will be delivered via UPS ground.                  UPS requires a street address. They will not deliver to PO boxes.</p>
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Total Number of Initiates **THIS** School Year \_\_\_\_\_ Total Number of Initiates **LAST** School Year \_\_\_\_\_

New chapter officers will be elected again \_\_\_\_\_

(Date) Submitted by:

\_\_\_\_\_ to \_\_\_\_\_  
 Name Title Date