**ACSA [insert name]** **Chapter**

**Application**

The Australian Citizen Science Association (ACSA) will only accept Chapter applications on this form. Please answer all questions and attach additional information if necessary.

Applications are to be emailed to [acsamc01@gmail.com](mailto:acsamc01@gmail.com).

*This document outlines the goals and operation of the proposed [insert name] Chapter of ACSA* *(ACSA-[insert name or acronym e.g. ACSA-WA) – effective from [add date].*

# APPLICANT DETAILS

|  |  |
| --- | --- |
| Name of Chapter |  |
| Contact Name |  |
| Phone |  |
| Email |  |

# OBJECTIVES – focus, aims and goals

The key objectives of the ACSA-[insert name] Chapter are:

* ….
* ….

# CHAPTER MANAGEMENT

ACSA-[insert name/acronym] proposes a management structure consisting of:

* Chair – [add individual]
* Vice Chair – [add individual if required]
* Secretary – [add individual if required]
* Members – [add individuals]

This management team will be known as the ACSA-[insert name/acronym] – Chapter Committee. The ACSA-[insert name/acronym] – Chapter Committee will decide amongst themselves the various positions individuals will hold. Terms of office are for [insert duration].

The Chapter will hold [insert frequency] meetings.

# STRATEGIC ACTIONS

1. Please outline how the ACSA-[insert name/acronym] Chapter proposes to contribute to or align with the ACSA Strategic Plan.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ACSA – Strategic Goals (2016-2018)** | | | | |
| **Participation** | **Partnerships** | **Practice** | **Impact** | **Platform** |
| *Encourage broad and meaningful participation in citizen science* | *through facilitating inclusive and collaborative partnerships* | *and a community of best practice, knowledge and tools* | *to ensure the value and impact of citizen science and its outputs are realised* | *enabled by ACSA as an effective, trusted and well recognised organisation and hub for citizen science in Australia.* |
| **ACSA-[insert name/acronym] – Strategic Actions – [0-12] months** | | | | |
|  |  |  |  |  |

1. Please provide an overview of the activities ACSA-[insert name/acronym] plans to undertake.

* …..
* …..

# COLLABORATIONS

Please list any collaborations ACSA-[insert name/acronym] has with existing groups or organisations with similar aims. Include those which ACSA-[insert name/acronym] may wish to pursue in the future.

Current:

* …..
* …..

Desired:

* …..
* …..

**Acknowledgement**

Please tick:

I acknowledge that management of the Chapter will be pursuant to the [ACSA Chapter Protocols](http://citizenscience.org.au/wp-content/uploads/2017/09/ACSA-Regional-Chapters-protocol-August-2017_FINAL.pdf) and any additional details provided in this document and updated from time to time.

Name: ………………………………………………………………………………………………………………. Date: …………………………………………..

Signature: ……………………………………………………………………………………………………………………………………………………………………….