

Chapter Contact Information

School of nursing and campus:

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**Chapter**

* Name:

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* Email:

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* Mailing address:

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* Website:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Social media (Facebook, Twitter, Instagram, etc.):

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**Advisor**

* Name:

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* Email:

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* Telephone number:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**President**

* Name:

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* Email:

(If chapter has a generic email for this position, please list the generic)

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* Term ends:

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**Chapter Representative**

(If position does not exist, a board member, other than the president, whose duties include maintaining contact with the CNSA Board of Directors)

* Name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Email:

(If chapter has a generic email for this position, please list the generic)

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