CSCE Student Chapter Information

Name of University: 
Mailing Address: 
E-mail Address: 
Chapter web site: 
Other online site(s): 

Important Contacts

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Phone/E-mail</th>
<th>Mailing Address</th>
<th>Comments</th>
</tr>
</thead>
</table>

(Please print & sign names)

Report submitted by: 
Contents approved by: 

_________________________  _________________________
Secretary of CSCE Student Chapter  President of Student Chapter

_________________________  _________________________
President of CSCE Student Chapter  Faculty Advisor

_________________________
Date  Practitioner Advisor
Advisor Information

Faculty Advisor Name: 
Faculty Advisor E-mail Address: 
Faculty Advisor Phone Number: 
Practitioner Advisor Name: 
Practitioner Advisor E-mail Address: 

CSCE Student Chapter Executives

CURRENT
From (date): To:

<table>
<thead>
<tr>
<th>Name</th>
<th>Program Year (1st, 2nd, 3rd, or 4th year)</th>
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<tbody>
<tr>
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INCOMING
From (date): To:

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SECTION 1: CSCE Student Chapter Goals & Objectives

Summary statement:

Goals and Assessment:
Goal #1:
Action Plan:
Assessment of Goal #1:
Follow-up Plan for Goal #1:

Goal #2:
Action Plan:
Assessment of Goal #2:
Follow-up Plan for Goal #2:

(add additional goals and pages, as necessary)
SECTION 2: Student Chapter Membership and Meetings

2.1: MEMBERSHIP

Is attendance at CSCE Student Chapter meetings obligatory?  Yes / No

Total number of Freshmen (Fr) eligible to join CSCE: (1) __________

Total number of Continuing Students (CS) eligible to join CSCE: (i.e. number of CS with CE declared major) (2) __________

Number of Freshmen (Fr) in your CSCE Student Chapter: (3) __________

Number of Continuing Students (CS) in your CSCE Student Chapter: (4) __________

Statistical information:

What percentage of eligible students are Chapter members? \[ \frac{(3)+(4)}{(1)+(2)} \]

What is the percentage increase (or decrease) in members over last year? __________

Note: Please provide membership lists in an Attachment.
### 2.2: CSCE STUDENT CHAPTER MEETINGS

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity Type (Use abbreviations below)</th>
<th>Program (Briefly describe program. Include name of speaker if applicable.)</th>
<th>Attendance</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
<td>Students</td>
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**Meeting Abbreviation**

- **PRM**: Professional Meetings (business & technical presentations): __________
- **SPP**: Student debates/talks or Paper Presentations at Chapter meetings: __________
- **CPC**: Meeting with Professional Conduct (Licensure/Ethics) programs: __________
- **CFT**: Student Chapter sponsored Field Trips: __________
- **CSF**: Student Chapter sponsored Social Functions: __________
- **COP**: Officers’ or Planning Meetings: __________
- **SB**: CSCE Section meetings: __________

**Statistical Information:**

Average attendance at 5 most populated Student Chapter meetings: __________

(if fewer than 5 meetings were held, average all meetings)

(Average attendance) / (Total Student Chapter members) = __________
PROVIDE DATA/INFORMATION ON THE FOLLOWING:
(use sample activity summary sheet on following page)

SECTION 3: PARTICIPATION IN MULTI-CHAPTER EVENTS

SECTION 4: STUDENT CHAPTER NEWSLETTER AND ONLINE PRESENCE

SECTION 5a: PARTICIPATION IN STUDENT PAPER COMPETITION

SECTION 5b: PARTICIPATION IN CAPSTONE COMPETITION

SECTION 5c: PARTICIPATION IN OTHER STUDENT COMPETITIONS

SECTION 6: PARTICIPATION IN SOCIETY-LEVEL EVENTS
## Activity Summary Sheet

(Use a separate sheet for each activity under sections 3-6)

<table>
<thead>
<tr>
<th>Activity:</th>
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<tbody>
<tr>
<td>Date:</td>
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<td>Location:</td>
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**Attendance:**
- **Students:**
- **Faculty:**
- **Faculty Advisor:**
- **Practitioner Advisor:**
- **Other:**

**Report Prepared By:**

**Activity Summary:**

**Activity Assessment:**

**Suggestions for the Future:**

**Include Photographs, Images, etc.**
Project Title: ________________________________________________________________________________

Project Participation (Number of people who worked on the project):
  Students: ______
  Faculty (incl. Faculty Advisor): ______
  Practitioners (incl. Practitioner Advisor): ______

  Total Person-Hours Spent on the Project: ______
  Percent of CSCE Student Chapter Membership That Worked on the Project: ______

Was the project a credited course? Yes / No

Project Abstract: (A brief description of the project)

Goals and assessment: (Describe Student Chapter goals and objectives that were addressed during the course of this project. Assess the degree to which goals were attained)

Engineering component: (A brief description of engineering skills used to complete this project)

Project impact: (Briefly describe the potential short- and long-term impacts of this project beyond the CSCE Student Chapter)

Use additional pages, as necessary, to describe the project and provide photo documentation.
Student Chapter at: (Name of University or College)

For the period: 

**REVENUES**

- Brought forward (A) 
- Income (list sources)

**TOTAL INCOME** (B) 

**EXPENSES** (List sources) 

**TOTAL EXPENSES** (C) 

**BALANCE**
(B minus C) (D) 

**SURPLUS (DEFICIT)**
(D minus A) 

Chapter Treasurer (sign)  Print Name  Date 

Faculty Advisor (sign)  Print Name  Date 

The Canadian Society for Civil Engineering