



Historian Report Form

Name: _____ Chapter: _____
Phone Number: _____ School: _____
Email Address: _____ Officer Term Began: _____
Date: _____ Officer Term Ends: _____

Instructions: *Please complete this form and return it to your chapter President. This form should be submitted two weeks prior to your chapter's scheduled visit. For the meeting, please bring your officer materials and all documentation related to your office.*

Is the Historian an elected position? ☐ YES ☐ NO

Describe the responsibilities and expectations for your office:

How are the chapter's historical documents/items maintained (chapter minutes, meeting agendas, family trees, etc.)?

Are you responsible for organizing events or projects related to chapter history? If so, please provide examples of these events and projects:

How are the membership candidates and the chapter educated about chapter, district, national, and band history?

Is there anything else you would like to discuss with the CFR?