



CHAPTER FORMATION PETITION

The National Veteran Small Business Coalition (NVSBC or National) is committed to establishing local chapters as appropriate. To be considered for eligibility, please respond to the following and provide the documents as required herein.

Date:

To: The NVBSC National Office

The following group of individuals, who are current NVSBC members, agree to undertake the responsibilities described in the Performance Requirements for Chapters and Affiliation Charter between the NVSBC and Local Chapter and are therefore submitting this petition.

It is understood that the NVSBC Executive Director, who will approve or deny the petition, or request additional information, will review the petition.

1. Provisional NVSBC chapter description

Name of Individual Submitting Application: _____

Name of the Chapter*: _____

* *Note: Naming of a Chapter must comply with guidelines contained in the Affiliation Charter between the NVSCB and Local Chapters.*

Geographic boundaries (Describe which state and counties this area encompasses):

This petition is submitted in the knowledge that, upon approval, the signers of their petition will be designated as the organizing committee for the provisional chapter.

SIGNED BY:

	PRINTED MEMBER NAME/ MEMBERSHIP TYPE	COMPANY NAME	SIGNATURE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Note: Membership types include the following: Member (Small); Associate Member (Mid-Tier); Supporting Member (Non Profit); Member (Large); Associate Member (Other small business); Supporting Member (PTACs); and Supporting Members (Large). Definitions for each type are located at <https://www.nvsbc.org/membership/>.

Identify individual from one Member who will act as the initial primary point of contact for the proposed chapter and be responsible for all documentation, required paperwork, etc.:

Business Name	
Business POC	
Phone	
Email	
Address	



Identify individual from one Member who will serve as a non-voting representative to National NVSBC Board:

Business Name	
Business POC	
Phone	
Email	
Address	

Submit this completed and executed Chapter Formation Petition to NVSBC, Inc., Attn: Executive Director – New Chapter Application, 14001-C St. Germain Drive, #652, Centreville, Virginia 20121, together with the following:

- Performance Requirements for Chapters
- Affiliation Charter Between NVSBC and Local Chapters

By signing below, I hereby certify that I have the authority on behalf of the Members identified above to act as the initial primary point of contact and to bind the proposed chapter. I also agree, if the chapter is approved by the National Board of Directors, to ensure that the Chapter abides by, fulfills, meets, satisfies, agrees, and is formed, governed, and bound by the terms, provisions, conditions, and requirements of:

- Performance Requirements for Chapters
- Affiliation Charter Between NVSBC and Local Chapters
- National NVSBC By-Laws
- Chapter NVSBC By-Laws (once established)

Signature/Date

Printed Name: _____

Phone: _____

Email: _____