



ASA Student Chapter Application

Name of New ASA Student Chapter: (for example, MyState University ASA Student Chapter)

School Information

Institution Name:

Faculty Advisor Information

Name:

Title:

Email:

Phone:

Student Chapter President Information

Name:

Level (Grad, UG, or High School):

Email:

Mailing address:

City:

State:

Zip:

Make sure to attach this PDF to your email.

Return to Studentchapters@amstat.org