

N.2 (Rider Education) GWRRA Officer Change/Appointment form

GWRRA Officer Change/Appointment Worksheet

Please fill in the information below and return to the Home Office for all officers changes *via the Regional Director.*

Supporting documentation is to be kept on file at the District/Region office.

Position Appointed to:
 _____ **O**(CD) _____ **S**(DD) _____ **R**(RD)
 _____ **L**(ACD) _____ **M**(ADD) _____ **N**(ARD)
 _____ **H**(SCD) _____ **P**(SDD) _____ **V**(SRD)
 _____ **G**(CRE) _____ **F**(DRE) _____ **C**(RRE)
Other: _____

Retiring Officer
(Returning to Active Status)

Name: _____

Member #: _____

Title: _____

Send President's letter of thanks for a job well done
 Yes No

Chapter: _____ **Member #:** _____ **Exp. Date:** _____

Applicant's Name: _____ **# of Recruits** _____

Co-applicant's Name: _____ **# of Recruits** _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

District: _____ **Region:** _____

Appointment Date: _____ **Effective Date:** _____

Approved by: (please sign *and* print name)

District Director's signature: _____

Regional Director's signature: _____

Executive Director's signature: _____

FOR RIDER EDUCATION USE ONLY DE APPROVAL: _____ DATE: _____ RE APPROVAL: _____ DATE: _____ IDRE APPROVAL: _____ DATE: _____
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Appointing Officer Use Only

The following paperwork needs to be filled out, filed and maintained at the District or Regional office. Please initial to certify the following information is on file and complete. Incomplete forms will be returned to the Regional Director.

_____ Officer MOU	_____ Officer Oath of Office
_____ MOU Membership information	_____ Tax payer Identification Number
_____ Knowledge Level	_____ 8822 IRS Change of Address
_____ Chapter Financial Report/Signature Cards	

This is a double-sided document. See the back of this form for New Chapter and Charter Fee information.

Home office use only

Date Rec'd _____
 DE _____
 WW _____
 CERT/Mailed _____
 Zip Codes maintenance _____
 Notes _____

TBF