

University of Louisiana at Monroe Chapter
of the
American Pharmacists Association Academy of Student Pharmacists
1800 Bienville Drive
Monroe, LA 71201
www.ulmaphaasp.weebly.com

BYLAWS AMENDMENT FORM

Purpose:

Use this form to submit bylaws amendments to the executive committee for review and approval.

Instructions:

1. Make copies of this form as needed.
2. Use a separate form for each amendment.
3. In Part 1,
 - a. indicate the Article and/or Section of the Bylaws, including the current wording, you wish to amend and to what it relates (e.g. Elections, Rules of Order, etc.), or
 - b. indicate the Article and/or Section you wish to add to the Bylaws and to what it relates (e.g. Elections, Rules of Order, etc.).
4. In Part 2:
 - a. write the current wording of the Article and/or Section of the Bylaws combined with your proposed wording, clearly indicating any changes (SEE NOTE), or
 - b. write the wording of the Article and/or Section of the Bylaws you wish to add.
5. In Part 3, if adding to an Article and/or Section, indicate the new numbering of said Article and/or Section as it would appear upon adoption.
6. In Part 4, indicate the rationale for your proposed amendment.
7. In Part 5, please read the disclaimer and include your name and e-mail address in the indicated fields so that you may be contacted by the Executive Committee should further information concerning your proposal be necessary.
8. All portions of this form must be completed in order for your proposed amendment to be considered by the APhA-ASP ULM Chapter Executive Committee.
9. Submit the original copy of your proposed amendment to the Chapter Secretary.



American Pharmacists Association®
Improving medication use. Advancing patient care.

Part 1. An amendment to the BYLAWS of the University of Louisiana at Monroe Chapter of the American Pharmacists Association Academy of Student Pharmacists
(ADDING/AMENDING) Article(s) _____, Section(s) _____ relating to _____
(indicate one)

Part 2. Article(s)/Section(s) _____ of the BYLAWS of the University of Louisiana at
(indicate one)

Monroe Chapter of the American Pharmacist Association Academy of Student Pharmacist to read as follows (**NOTE:** Strike through or cross out text to indicate any deletions to the current language; underline any new language):

Part 3. Article(s)/Section(s) _____ is/are renumbered
(indicate one)

_____ respectively.

Part 4. Rationale (Provide a concise explanation of the reasons/background for your proposed change):

Part 5. Contact Information and Submission

I _____ hereby certify that I am a member of the American
(Name, Please Print)

Pharmacists Association Academy of Student Pharmacists, and, as such, am entitled to all the rights and privileges appertaining. I further certify that I have complied, to the best of my ability, with the instructions of this form and all other regulations and directions communicated to me either verbally or in writing by a member of the Executive Committee regarding amending the Chapter Bylaws. I understand that my submission of this form does not in any way guarantee that my proposed amendment will be acted upon and that it is the privilege of the Executive Committee to act on proposed amendments in a manner which it deems fitting and proper. Finally, I will provide the Executive Committee, in person or in writing, with any additional information requested so that they may take informed action on my proposed amendment.

Signature: _____ Date: _____

E-Mail: _____ Phone #: _____
(optional)

For Executive Committee Use Only:

Secretary's Verification

I _____, Chapter Secretary, hereby certify that this form has
(Name, Please Print)

been completed correctly and in its entirety. Furthermore, I attest that all procedures outlined in the ULM APhA-ASP Chapter Bylaws have been followed prior to consideration of this proposed amendment by the Executive Committee.

Signature: _____ Date: _____

Ratification:

Pursuant to Article XIII Section D of the ULM APhA-ASP Chapter Bylaws, the Executive Committee APPROVES/APPROVES WITH CHANGES/REJECTS this proposed amendment. (Any changes to the above proposal shall be attached to this form for recording purposes)

Signature: _____ Date: _____
(Chapter President)

Signature: _____ Date: _____
(Chapter Secretary)