



CETPA- Regional Group Guidelines

The purpose of CETPA Regional Groups is to foster deeper engagement and mutual support among educational technologists at the local level.

CETPA Regional Group Requirements:

- The purpose and goals of the regional group should be consistent with the CETPA mission and vision
- Regional group officers must be CETPA educational members
- Participants of the CETPA regional group do not need to be CETPA educational members
- The regional group must be sustainable
- The regional group will be open to all K-20 educational technologists in the region
- CETPA affiliate members and other vendors may attend, but only by invitation, and they will not have access to the regional group listserv
- Selection of vendor/presenters will be made based on the current interests and needs of group participants. Member surveys can be very helpful in this regard.
- The regional group will include a CETPA Update section on their meeting agenda to provide members with information about the Annual Conference and other CETPA initiatives
- Regional groups are invited to participate in a regional meeting at CETPA Annual conference
- The regional group will have a minimum of 4 Meetings per Year
- The regional group will provide the CETPA Membership Committee with regional meeting dates and locations
- Regional group officers will participate in a quarterly conference call with the CETPA Membership Committee

Process of starting the regional group:

- Complete the CETPA regional group application form
- Send application to the CETPA Board's Membership Committee
- Membership Committee reviews the application and will contact the applicant for clarification as necessary
- Application will be sent to the CETPA Board for final approval
- Approval notification will be sent to applicant by membership committee upon receipt of group's 1st year meeting calendar.



Regional Group Membership Application

Date: _____

Proposed Group Name:

Initial Officers

Chair (name): _____ E-mail: _____

Educational Institution: _____ Job title: _____

Address: _____ City: _____ Zip: _____

Phone: _____

Chair Elect (name): _____ E-mail: _____

Educational Institution: _____ Job title: _____

Address: _____ City: _____ Zip: _____

Phone: _____

Secretary/past chair: _____ E-mail: _____

Educational Institution: _____ Job title: _____

Address: _____ City: _____ Zip: _____

Phone: _____

Objective, Background Or Reason For Forming The Group:

Proposed Geographic Area (Region) To Be Served By This Group:

Email Completed Application To: CETPA Membership Committee
membership@cetpa.net