

Regional Director's Checklist for Chapter Revised Bylaws

In accordance with NBoD Policy #3:05, the Regional Director shall certify that all revised Chapter Bylaws have been reviewed and are in compliance with the NBoD approved Model Bylaws for Chapter by checking the appropriate box and signing the below checklist. This checklist shall be included with the submission of revised bylaws to the NBoD Bylaws Committee.

Responsibility of Regional Director:

Name of Chapter: _____

Name Change (If Applicable) _____

Region: _____

	Yes	No
1. Article I – Name	<input type="checkbox"/>	<input type="checkbox"/>
2. Article II – Goals & Objectives	<input type="checkbox"/>	<input type="checkbox"/>
3. Article III - Organizational Structure	<input type="checkbox"/>	<input type="checkbox"/>
4. Article IV – Membership	<input type="checkbox"/>	<input type="checkbox"/>
5. Article V – Duties of Officers, Standing and Special Committees and Appointments	<input type="checkbox"/>	<input type="checkbox"/>
6. Article VI – Meetings and Quorum	<input type="checkbox"/>	<input type="checkbox"/>
7. Article VII – Nomination, Elections, Terms of Offices, and Vacancies	<input type="checkbox"/>	<input type="checkbox"/>
8. Article VIII – Dues and Assessments	<input type="checkbox"/>	<input type="checkbox"/>
9. Article IX – Expulsions, Terminations, or Removals	<input type="checkbox"/>	<input type="checkbox"/>
10. Article X – Rules of Procedure	<input type="checkbox"/>	<input type="checkbox"/>
11. Article XI – Incorporation	<input type="checkbox"/>	<input type="checkbox"/>
12. Article XII – Limitation of Liability	<input type="checkbox"/>	<input type="checkbox"/>
13. Article XIII – Amendments	<input type="checkbox"/>	<input type="checkbox"/>
14. Article XIV – Ratification	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above documents have been reviewed and hereby submitted in accordance with Policy #3:05

Regional Director

Date

Responsibility of Bylaws Committee:

1. Reviewed Bylaws Date _____

2. Recommendation for Approval [] Yes [] No

Bylaws Committee Chair
If no, provide reasons.

Date

3. Upon approval by the National Board of Directors, send the original to Chapter President and copy to Regional Directors & National Office:

Date sent _____