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|  | AMSSM FACULTY CHAMPION  |
|  | **4000 W. 114th Street, Suite 100 ● Leawood, KS 66211 ● (913) 327-1415 ● (913) 327-1491 (Fax) ●** [**www.amssm.org**](file:///C%3A%5CUsers%5CMLane%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5C39NW90HI%5Cwww.amssm.org)  |

**Thank you for agreeing to serve as an AMSSM Faculty Champion.**

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| **As an AMSSM Faculty Champion (Faculty Advisor/Faculty Contact), your role would include:*** Maintaining contact with your home institution’s student-led sports medicine interest group or

encouraging students to start a “new” sports medicine interest group and agreeing to serve as their Faculty Advisor/Faculty Contact. * Tell your group about AMSSM and encourage them to join AMSSM as a Student member
* Encourage your group to register as a Charter Medical School connected with the AMSSM MSIG, an opportunity to become affiliated with a national organization and share ideas with other sports medicine interest groups around the country.
* Receiving *The Rookie Report*, a one-page AMSSM e-publication with pertinent information for medical students and residents.
* Help ensure a smooth transition of leadership from year to year within your school’s sports medicine interest group, reintroducing new students to AMSSM each year.
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*Please fill out the following details.*

*\* indicates a required field*

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| \***Name of AMSSM Faculty Champion:**  |  |
|  (Faculty Advisor/Faculty Contact)  |  |

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| \***Email Address of Faculty Champion:** |  |

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| \***Name of Medical School:** |  |

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| \***City and State of Medical School:** |  |

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| \***Affiliated Student Interest Group Name:** |  |

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| \***Student Interest Group Leader:** |  |

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| \***Student Interest Group Leader:** |  |

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| \***Email Address of Student Interest Group Leader:** |  |

**PLEASE RETURN THE FORM TO** **JOAN BROWN** **AT AMSSM**