# ASCILITE SIG Annual Renewal Form

|  |  |  |
| --- | --- | --- |
| SIG name |  |  |
| Submitted by |  |  |
| Date |  |  |

#### SIG Leaders

|  |  |  |  |
| --- | --- | --- | --- |
| Current SIG Leader / Co Leader names\* | Email | Leader = A Co-leader = B | Current ASCILITE Member? Y/N |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\*Maximum 4 leaders and co-leaders

#### SIG Committee names (if applicable):

|  |  |
| --- | --- |
| Committee member name | Institution |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

#### Describe the SIG activities undertaken during the year and what was achieved (please include quantitative data where applicable):

|  |
| --- |
|  |

#### What, if any, was the SIG’s greatest achievement this calendar year?

|  |
| --- |
|  |

#### Do you wish to continue as an ASCILITE SIG next year? (Y/N)

|  |
| --- |
|  |

#### What are the SIG’s reasons for renewing/discontinuing as an ASCILITE SIG?

|  |
| --- |
|  |

#### If renewing, what are your SIG plans for next year, e.g. type of activity, frequency, dates and costs (if applicable)?

|  |
| --- |
|  |

#### Please email this competed form, together with any relevant supporting documents to the ASCILITE Secretariat [secretariat@ascilite.org](mailto:secretariat@ascilite.org) by the due date.