Sharing Our Success (SOS) Submission Form

| Chapter Name: | Central Pennsylvania |
|---|--|
| Chapter Membership Size: | Medium (101-299) |
| Chapter Contact Person: | Phyllis Metzler |
| Email Address: | pmetzler@psecu.com |
| Phone Number: | |
| Chapter Board Position: | Past President |
| Chapter Website URL: | https://centralpaatd.org |
| Submission Title: | New Member Guide |
| What did you do? (a 2-3 sentence summary of your effort): | Our VP of membership created a guide for new members to explain the chapter structure, types of events, volunteer opportunities, resources, and more. |
| Who benefitted from this effort (Target Audience) Check all that apply: | Chapter Members Potential Chapter Members |
| Why did you do it? What chapter needs were addressed? | Our VP of Membership created the guide to help new members get the most out of their membership and to identify potential future volunteers which leads to potential future board members. |
| What were the measurable outcomes? (May include data regarding financial gains, membership increases, target audience satisfaction levels, publicity for the chapter or for the profession, etc.) | We identified new volunteers, and our power membership continued to stay above CARE Plus expectations at 42%. |
| What steps did you take to implement this effort? (Remember that other chapter leaders will use this to replicate the effort. Be specific) | Our VP of Membership shares the guide with new members at each quarterly new member orientation. |
| Is there anything you would do differently? | The guide needs to be updated for the new branding, but nothing inherently needs to be changed or have been done differently. |
| When did you start working on this effort? | Aug 01, 2023 |
| When did this effort go live? | Aug 31, 2023 |

Approximately how many hours were 10 spent working on this? Include an estimate of hours spent across all board members and volunteers.

Board Members

Which board positions were involved in VP of Membership the effort?

What resources did you use? Check all

that apply:

Please attach any documents that help support this submission. It is highly encouraged to submit editable files (ex. Word, Excel, etc): (additional documents and documents over 2MB

https://www.formstack.com/admin/download/file/17404420823

How did you become familiar with the **Sharing Our Success (SOS) program?** Select all that apply:

should be sent to sos@td.org)

Chapter Leader NAC Area Call

Would you be willing to apply to present No on this submission at the ATD Chapter Leaders Conference (ALC)? *Request for Proposals (RFPs) open in May of each year at td.org/alc. Selected session facilitators receive complimentary registration.