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| **Chapter Name**  | Chattanooga Area |
| **Chapter Number (ex. CH0000)**  | CH4087 |
| **Chapter Location (City, State)**  | Chattanooga, TN |
| **Chapter Membership Size**  | Small (Less than 100) |
| **Contact Person for this Submission:**  | Leanne Barron |
| **Email Address:**  | ljsunc98@gmail.com |
| **Phone Number:**  | (979) - 324 - 2460 |
| **Chapter Board Position:**  | President |
| **Chapter Website URL:**  | [http://www.atdchatt.org](http://enotification.td.org/track/click/30530608/www.atdchatt.org?p=eyJzIjoiS3FtVjg5TTdDZTJXZ3BYZGJFc3pIZU5KdFhNIiwidiI6MSwicCI6IntcInVcIjozMDUzMDYwOCxcInZcIjoxLFwidXJsXCI6XCJodHRwOlxcXC9cXFwvd3d3LmF0ZGNoYXR0Lm9yZ1wiLFwiaWRcIjpcIjhmNGJlMDAyMjNlMjRkNzc5OTAxNGI1YzcyY2E0ODgzXCIsXCJ1cmxfaWRzXCI6W1wiNGFkNzJiNTcyNDFhOGFmYTI1ODM4NDZhNWQ3Y2Y2NTI4MzJmYjkyYlwiXX0ifQ) |
| **Submission Title:**  | CARE update |
| **Submission Description:**  | Our President-Elect is the designated CARE board member and we dedicate time at each board meeting for a CARE update, review of the checklist that we should be working on, and any items that need our attention. |
| **Need(s) Addressed? Please be specific.**  | This initiative addresses our needs to meet the CARE requirements and keep CARE a central part of the chapter's business. |
| **What is your chapter's mission?**  | To steadily increase membership and have at least 35 members at every chapter event. We will fill open board positions in a timely manner and become more active chamber members. We will have a board showcase at every meeting to demonstrate to the chapter the benefits of being a member of ATD and serving on the board. |
| **How does this effort align with your chapter's mission (Please provide specific examples)?**  | The dedicated CARE time allows us to focus on ways to increase our chapter's POWER members and this aligns with the section of the chapter's mission where we want to continuously emphasize the benefits of being a national member of ATD. |
| **National ATD's mission is to "empower professionals to develop talent in the workplace". How does this submission align with ATD's mission? Please provide specific examples.**  | It aligns with ATD's mission to develop talent because it helps keep our local chapter in line with the national organization, encourages board members to realize the benefits of and promote POWER membership, and leads to discussions of how we can promote talent development in the Chattanooga area.  |
| **Target Audience: (Who will benefit/has benefited from this effort?)**  | The board members and all of the chapter members because we are meeting our goals and increasing our chapter's exposure in the local community as well as in the national organization. |
| **Costs/Resources Used: (include any details regarding use of resources including monetary, donations, contributions, volunteer hours, people resources, etc. and how you went about getting these resources)**  | This adds a little time to our monthly board meetings but we have gotten commitment from the board to extend the meeting time in order to cover everything. |
| **How did you implement: (please give a brief description)**  | At the beginning of the year we realized we needed a dedicated time to make sure we are always working towards meeting our CARE goals and requirements. |
| **What were the Outcomes: (Please include hard data regarding financial gains, membership increases, target audience satisfaction levels, publicity for the chapter or for the profession, etc.)**  | We are on track to meet our goals and the CARE checklist and attention that we give it helps the chapter always keep the local and national missions in mind. We are able to focus on ways to increase our circle of influence in the community and beyond.  |
| **Lessons Learned: (hints and tips for other chapters who may be considering a similar effort)**  | -Make sure you have a board member who is your designated CARE representative (it is helpful if it's the President-Elect which allows them to begin to take more responsibility)-Make sure everyone on the board is aware of the yearly CARE requirements and make the information accessible-Dedicate a specific portion of your board meeting to CARE topics |
| **Please list the specific ATD chapter resources that helped guide you in the process of completing this best practice (e.g. people, documents, policies, by-laws, etc.):**  | The CARE checklist and awareness of the yearly requirements provided to all chapters. |
| **How did you become familiar with the Sharing Our Success (SOS) program?**  | Saw or heard of SOS from another Chapter Leader |
| **Would you be willing to present on this submission at the ATD Chapter Leaders Conference (ALC)? \*Participating chapters receive up to two complimentary registrations for presenters.**  | Yes |

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