



<http://www.sfi.org/>

CHAPTER CHANGE OF COMMAND FORM

Please fill out this form when changing the Chapter Commanding Officer, Executive Officer, or both. Distribute to the people referenced below.

If you have any questions, contact:

STARFLEET OPERATIONS

E-mail: ops@sfi.org

CHAPTER INFORMATION

CHAPTER NAME:

REGISTRY NUMBER:

REGION:

COMMANDING OFFICER INFORMATION

NEW CO NAME:

MAILING ADDRESS:

DATE OF BIRTH:

CITY:

STATE/PROVINCE:

POSTAL CODE:

COUNTRY:

TELEPHONE:

E-MAIL:

SCC NUMBER:

CURRENT RANK:

FORMER CO NAME:

SCC NUMBER:

INCLUDE COPY OF OTS AND OCC CERTIFICATES FOR NEW CO

MANNER OF CHANGE

ELECTION

APPOINTMENT

OTHER

EXECUTIVE OFFICER INFORMATION

NEW XO NAME:

MAILING ADDRESS:

DATE OF BIRTH:

CITY:

STATE/PROVINCE:

POSTAL CODE:

COUNTRY:

TELEPHONE:

E-MAIL:

SCC NUMBER:

CURRENT RANK:

FORMER XO NAME:

SCC NUMBER:

INCLUDE COPY OF OTS AND OCC CERTIFICATES FOR NEW XO

MANNER OF CHANGE

ELECTION

APPOINTMENT

OTHER

VERIFICATION SIGNATURES

INCOMING COMMANDING OFFICER:

SIGNATURE:

DATE:

OUTGOING COMMANDING OFFICER:

SIGNATURE:

DATE:

INCOMING EXECUTIVE OFFICER:

SIGNATURE:

DATE:

OUTGOING EXECUTIVE OFFICER:

SIGNATURE:

DATE:

Email this form to the following Personnel/Departments:

- Regional Coordinator
- STARFLEET Chief of Operations

APPROVE DENY
 APPROVE DENY