

IAAP Division/Chapter Cooperative Marketing Assistance Program 2007-2008

In alignment with IAAP's Strategic Plan "to conduct meetings with employers, influencers and other organizational decision makers and bring awareness and support to IAAP and its programs," Headquarters has established the IAAP Division/Chapter Cooperative Marketing Assistance Program. This program makes available IAAP educational and marketing resource materials that chapters and divisions may apply for via an application form to be used in external (outside of IAAP) educational and marketing events, not IMPACT meetings. This is an excellent and cost effective way for chapters and divisions to reach out to corporations and individuals in the community and educate them about the profession and IAAP; thereby growing the association.

Twenty thousand dollars worth of IAAP educational and marketing materials has been set aside to be allocated to qualifying chapters and divisions that receive approval of their application, for implementation of the Cooperative Marketing Assistance Program for the inaugural year. A panel of judges at HQ will review the Applications submitted; all applicants will be notified of the judges' decisions.

Only fully completed Applications for the Cooperative Marketing Assistance Program will be accepted and considered. The Applications will be reviewed on a first-come, first-served basis and will also be judged on information that reflects the scope or extent of the outreach of the event and whether it has the potential to reach numerous non-member individuals for consideration of receipt of the free materials. Chapters and/or divisions may work together to participate in an event and may apply together on one application form. Also, chapters and divisions may apply more than once for different external events requiring assistance.

Please allow a minimum six-week application-processing period. In the case of a chapter event, the chapter president must sign the application form before forwarding it on to the division president for her/his signature; unsigned Applications will not be considered. A tabletop display and table cover are also on loan from HQ pending availability. These items are due back to HQ immediately after the event at the expense of your chapter or division.

This new Division/Chapter Cooperative Marketing Assistance Program should encourage chapters and divisions to achieve excellence by developing a strategic plan for educating and marketing to corporations and individuals throughout the year and future years. A Division/Chapter Cooperative Marketing Assistance Program Follow-Up Form is also attached along with the Application. The individual conducting the event should submit the Follow-Up Form back to HQ no later than one month after the event is conducted.

Questions? Email Robin Parrish, Manager, Membership & Distribution at rparrish@iaap-hq.org.

IAAP Division/Chapter Cooperative Marketing Assistance Program 2007-2008 Application

Submit completed and signed Application to Robin Parrish, Mgr. Membership/Distribution
rparrish@iaap-hq.org or fax 816.801.1374

(Check one)

Division External Event

Chapter External Event

Date of External Educational/Marketing Event _____

Division Name _____ Division Number _____

Division President Name _____ Email Address _____

(if this is a chapter event)

Chapter Name _____ Chapter Number _____

Chapter President Name _____ Email Address _____

Name of Business/Event _____ Location (city/state) _____

Number of Nonmember Attendees Expected _____

Number of Chapter/Division Attendees Expected _____

Is your event target audience potential new members or business executives? (explain)

Thoroughly explain the event, your objectives and what is to be accomplished

Information available that can/may be sent includes:

- √ Membership Applications
- √ Benefits Brochures
- √ Associate Membership Brochures
- √ Corporate Brochures
- √ Certification Information
- √ OPTIONS (Office Professionals Training for Information, Organization, and Networking Skills)
Training Program Flyers
- √ Complete Office Handbook Flyer
- √ Back issues OfficePro® Magazine

Do you need an IAAP tabletop display and table skirt? Yes No (check one)

Send materials to (no PO Boxes):

Name: _____ Address _____

City _____ State/Province _____ Zip/Postal _____

Email _____

Signatures: Chapter President _____ Division President _____

IAAP Division/Chapter Cooperative Marketing Assistance Program 2007-2008 Follow-Up Form

Submit completed Form to Robin Parrish, Mgr. Membership/Distribution
rparrish@iaap-hq.org or fax 816.801.1374 no later than one month after the event

(Check one)

Division External Event

Chapter External Event

Date of External Educational/Marketing Event _____

Division Name _____ Division Number _____

Division President Name _____ Email Address _____

(if this is a chapter event)

Chapter Name _____ Chapter Number _____

Chapter President Name _____ Email Address _____

Name of Business/Event _____ Location (city/state) _____

Number of Actual Attendees _____

Did you use the IAAP tabletop display and table skirt? Yes No (check one)

How many packets of material were given out? _____

Were the objectives accomplished and what was the overall outcome?

What follow-up if any, is needed and who will carry it out?

Additional Comments:

Your Name: _____ Address _____

City _____ State/Province _____ Zip/Postal _____

Email _____