APS SPECIAL INTEREST GROUP APPLICATION

Name of SIG Organizer/Chair: __________________________________________

Your email address: __________________________________________________

Proposed Special Interest Group topic: __________________________________

APS is an international group of basic and clinical scientists dedicated to the rigorous study of mind-body interactions and biopsychosocial pathways influencing health and disease. Our mission is to advance understanding of biological, psychological, behavioral and social processes that affect human health and well-being.

Five core values guide our work: Scientific Rigor; Clinical Relevance; Multidisciplinary Collaboration; Membership Diversity; and a Nurturing Community.

These core values underlie the Society's primary goals, which are to

• Promote and sustain scientific excellence in psychosomatic medicine
• Translate our scientific findings for clinical application and relevance
• Grow and nurture a vibrant, diverse membership
• Ensure sustainability of APS through leadership development opportunities and fiscal responsibility

1. Please attach a summary of the purpose of the proposed SIG, and your plans for SIG activities. To ensure APS activities and programs reflect our values and help us achieve our Society goals, we ask that you specifically address how the proposed SIG will meet each of the 4 goal areas listed.

2. Please attach a listing of names and email addresses for members interested in belonging to this SIG.

3. Please review and acknowledge your compliance with the APS SIG Guidelines.
   a. SIG membership is open to all APS members.
   b. Each SIG shall have at least one Chair. The SIG is responsible for appointing Chair(s).
   c. The SIG Chair is responsible for:
      1) Requesting space at the APS Annual Meeting for a SIG meeting, if so desired, using forms and mechanisms provided by the APS office;
      2) Developing the SIG agenda;
      3) Maintaining the SIG membership roster in conjunction with the APS office;
      4) Coordinating correspondence among its members;
      5) Submitting updates to the APS Council at least twice a year on SIG activities;
      6) Maintaining bi-directional communication with the membership and leadership of APS regarding SIG activities.
   d. APS will provide support for reasonable SIG activities including appropriate email access to the membership and coordination of information regarding the SIG placed on the APS website. Unusual expenses may be submitted to the APS office for special consideration. These requests will require pre-approval by the Executive Director or Council.
   e. Solicitation of outside funding to support SIG activities requires approval by the APS Council. All monies raised by the SIG will be submitted to the APS Office for crediting to their appropriate account.
   f. SIG Chairs may be asked to participate in other APS activities, as needed.

By signing here I acknowledge that I will adhere to the above guidelines: ______________________________

Date: ______________________

This request for the formation of a new SIG will be reviewed by the APS Council, which reserves the right to request additional information regarding the proposed SIG.