Name of Institution: _______________________ Faculty Advisor: _______________________

Choose Sleep Interest Group President: ____________________________________________

____________________________

Number of current members: _______________ Number of meetings held over the past year __________

For each event, please list approximate number of attendees:

<table>
<thead>
<tr>
<th>Type of Event</th>
<th>Month Held</th>
<th>Number of Attendees</th>
<th>Medical Student</th>
<th>Resident</th>
<th>Faculty</th>
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</table>

Please list other types of activities sponsored by the chapter:
____________________________________________________________________________________
____________________________________________________________________________________

Please attach a Choose Sleep Interest Group roster to this report, or list members below:
____________________________________________________________________________________
____________________________________________________________________________________

Did the Choose Sleep Interest Group participate in community service and/or college outreach this year?
____________________________________________________________________________________

Please take a moment to share your interactions with the American Academy of Sleep Medicine (AASM); is there anything additionally we can do to support your chapter?
____________________________________________________________________________________

Did anyone from your Choose Sleep Interest Group enter a sleep medicine fellowship program?
____________________________________________________________________________________

By signing below you verify that all the information provided is accurate.

Signed: _________________________ President: __________________________ Date: __________

Signed: _________________________ Faculty Advisor: __________________ Date: __________

Please submit form to:
Attn: AASM Choose Sleep
2510 North Frontage Road Darien, IL 60561
Phone: (630) 737-9770
Fax: (630) 737-9789 | Email: choosesleep@aasm.org

EOY Report must be submitted by August 31st for the previous academic year.