

Shared Interest Group Application

The following information must be assembled and submitted by the identified Shared Interest Group chair for review by the AAPM Executive Committee. Submit your completed application to info@painmed.org.

1. **Name:** Proposed name for this SIG?

2. **Purpose:** Description of the need for and expected contributions of this SIG?

3. **Relevance:** Describe how this SIG supports AAPM's mission and strategic goals.

4. **Activities:** Describe the potential activities and focus of the SIG.

5. **Expected Membership:** Describe who would be likely to be interested in joining this SIG, and estimate the number of anticipated members.
