

This area for office use only.

Application for Individual Membership

For Ambassador Program member referral participants:
Provide the name of the referring member: _____

1. CHECK INDIVIDUAL MEMBER TYPE

Applications must be approved to assure eligibility criteria are met. Check only one box.

Individuals – Voting Membership

- A** Individuals employed at voting member institutions or organizations whose professional activities consist primarily of counseling, admission or financial aid services.
- B** Non-affiliated professionals who were employed at a voting member institution or organization during the current year or immediately preceding membership year who are no longer employed by any member or member-eligible institution.
 - ✓ Professional activities must have consisted of admission, counseling or financial aid during the current membership year
 - ✓ Is not eligible for any other member category
- C** Retired persons who were actively engaged in providing counseling, admission or financial aid services for at least 10 years and who meet the following requirements:
 - ✓ Last full-time employer must have been eligible for NACAC voting membership.
 - ✓ Not employed full-time in the profession

Previous Employer For Profit Non Profit

Address _____

Dates of employment _____

Title or area of responsibility _____

Individuals – Non Voting Membership

- D** Persons employed by a member institution/organization that is non-voting
- E** Persons who are employed by institutions or organizations that have not joined NACAC, but are eligible for voting or non-voting membership.
- F** Faculty who provide post-baccalaureate/graduate teaching and/or training to professionals who work with students in the transition to postsecondary education, and are employed at member eligible educational institutions.
- G** Students seeking careers in counseling, admission or financial aid services who do not qualify for membership under another category. Student applicants must submit a copy of their current official transcripts or confirmation of course completion.

*Student membership is not related to whether or not their institutions are NACAC members.

Preferred state or regional affiliate _____

If no affiliate is indicated, each member will be counted in the affiliate where he or the institution is geographically located. Principal Representatives must be counted in the affiliate where the institution is geographically located.

Canadian Subscribers:

- By checking this Express Consent checkbox and submitting this form, you are giving NACAC Express Consent to send Commercial Electronic Messages (CEM) to you under the Canadian Anti-SPAM Law.

If you have questions, need more information, or require assistance with the application process, contact membership@nacacnet.org.

2. APPLICATION

First Name _____ Last Name _____

Title _____

Employer _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____ Fax _____

*Ethnicity _____ *Gender _____

NACAC members are dedicated to serving students as they explore options and make choices about pursuing postsecondary education. NACAC is committed to maintaining high standards which foster ethical and social responsibility among those involved in the transition process. The signature of the individual below indicates that the applicant supports the purposes of NACAC and complies with the *Statements and Principles of Good Practice* (www.nacacnet.org/About/Governance/Policies/Pages/default.aspx).

Signature _____

*Ethnicity and Gender Identification codes are optional.

A – Asian American	AA – African American	C – Caucasian
H – Hispanic or Latino American	MR – Multiracial	
NA – Native American or Alaskan Native	PA – Pacific Islander	O – Other
M – Male	F – Female	

3. DUES** (Dues expire December 31 of the current year for applications approved January through September. Applications approved from October to December will expire December 31 of the following year.)

Individuals – Voting Membership	
A Employed at voting member institutions or organizations	\$80
B Non-affiliated professionals	\$60
C Retired persons	\$65
Individuals – Non Voting Membership	
D Employed by a member institution/organization that is non-voting	\$80
E Persons who are employed by institutions that have not joined NACAC, but are eligible for voting (\$105) membership or persons who are employed by organizations that have not joined NACAC, but are eligible for non-voting (\$210) membership.	\$115/\$220
F Faculty employed at member institutions (\$70) or employed at nonmember institutions (\$105)	\$80/\$115
G Students*	\$75
+ International Mail Service Fee (outside of USA)	\$12.50
TOTAL AMOUNT DUE	\$ _____

**The Journal of College Admission, valued at \$30 per year, is included in the price of your membership.

- Check enclosed (payable to National Association for College Admission Counseling)

- I authorize NACAC to charge these dues to my credit card:

AMEX MasterCard Visa

Credit Card Number _____ Exp. Date _____

Printed Name _____

Signature _____ Date _____

Return form with payment to:

NACAC, Attn: Elsa Dizon
1050 N. Highland Street
Suite 400
Arlington, VA 22201
or fax 703/373-2418
or email to edizon@nacacnet.org

It takes seven to ten days for applications to be processed.

