

# SOUTHEASTERN PSYCHOLOGICAL ASSOCIATION MEMBERSHIP APPLICATION FORM

## OFFICE USE ONLY

Date Rec'd. \_\_\_\_\_  
Cash/Check # \_\_\_\_\_  
Total Paid \$ \_\_\_\_\_  
LYPD/Pays \_\_\_\_\_  
Dues \_\_\_\_\_  
Registration \_\_\_\_\_  
Program Book \_\_\_\_\_  
Other \_\_\_\_\_  
Date Processed: \_\_\_\_\_

### **Please print clearly or type information below:**

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I. \_\_\_\_\_

COMPLETE Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Highest Degree Obtained: \_\_\_\_\_ Year Awarded \_\_\_\_\_ Institution \_\_\_\_\_

### **Please check the eligibility status below that applies to you:**

#### **Full Member** (\$45 membership fee/dues)

\_\_\_\_\_ I am presently in good standing as a professional Member \_\_\_\_\_, Fellow \_\_\_\_\_, or Dues Exempt Member \_\_\_\_\_ (not student member) of the American Psychological Association, another national psychological organization, or another regional psychology organization. **DO NOT** check this category unless your name is listed in the current membership directory of one of the above organizations.

**Please enclose verification of this current membership** (e.g., photocopy of current membership card).

OR

\_\_\_\_\_ I have earned the minimum of a Master's degree in psychology AND am either continuing graduate study in psychology OR employed full-time as a psychologist.

**Please enclose documentation of your status as described above** (e.g., confirmation of degree status).

OR

\_\_\_\_\_ I have completed at least 2 years of graduate study in psychology at an accredited college or university AND am either continuing graduate study in psychology OR employed full-time as a psychologist.

**Please enclose documentation of your status as described above** (e.g., photocopy of current academic registration, signed statement from department chair or advisor, confirmation of degree status).

#### **Affiliate Member** (\$45 membership fee/dues)

\_\_\_\_\_ I am not a psychologist, but am interested in the scholarly aspects of psychology. I understand I may participate in SEPA meetings and serve on ad hoc committees, but may NOT vote, hold office, or sponsor program submissions.

#### **Student Affiliate** (\$30 membership fee/dues)

**PLEASE NOTE** that graduate students eligible for Full Membership are NOT eligible for Student Affiliate status.

\_\_\_\_\_ I have completed less than 2 years of graduate study in psychology.

**Please enclose documentation of your status as described above** (e.g., photocopy of current academic registration, signed statement from department chair or advisor, confirmation of degree status).

OR

\_\_\_\_\_ I am an undergraduate in psychology or a related field.

**Please enclose documentation of your status as described above** (e.g., photocopy of current academic registration, signed statement from department chair or advisor, confirmation of degree status).

### **Signature of Applicant**

*My signature indicates that my statements  
herein are accurate,  
and proper documentation is enclosed.*

You may apply for membership online at [www.sepaonline.com](http://www.sepaonline.com) and pay by credit card.

OR

You may complete this form. Be sure to **enclose documentation required for your particular membership status**, and enclose a check for your dues, made payable to SEPA.  
Mail to:

SEPA / Department of Psychology / University of West Florida  
Pensacola, FL 32514