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|  | Student Membership Application Form |

**Instructions** Date:

Please print or type. If you are joining as a Student member, please submit this form along with your payment of Affiliate dues to the Affiliate Treasurer in the state of the school you are attending, and also a copy of the form with $55 (half of national dues) to the national office at NEAFCS, 325 John Knox Rd. Suite L103 Tallahassee, FL 32303.

**Category**

[ ]  Student Membership—To qualify, you must be a full time graduate or undergraduate student enrolled in a University, College, or other educational setting, studying family consumer sciences or related field with an interest in Extension Education as a future career, who is not currently employed as an Extension Educator. Membership may be obtained by submitting a student status statement verifying their full time student status.

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|       |       |       |
| First Name | Middle Name | Last Name |
|       |       |
| Field of Study, and Full-Time Graduate or Undergraduate Status? | University, College, or Other Educational Setting |
|       |       |       |       |
| Your **Mailing** Address at School | City | State/Territory | Zip |
|       |       |       |       |
| Your **Physical** Address at School (if different from your mailing address) | City | State/Territory | Zip |
|       |       |       |       |
| Home Address | City | State/Territory | Zip |
|       |       |
|  Email Address |  |
|       |       |       |
| School Phone/Extension | Home Phone |  |
|  |
| Send mail to my (check one): | [ ]  School Address | [ ]  Home Address |  |  |
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| Please check the ONE box that BEST describes **YOUR ROLE**: |
| [ ]  Full-Time Undergraduate Student | [ ]  Full-Time Graduate Student |  |  |  |
|  |
| Please check the ONE box that BEST describes your **AREA OF FCS STUDY/CONCENTRATION**: |
| [ ]  Nutrition | [ ]  Parenting Education | [ ]  Community Development | [ ]  Aging |
| [ ]  Food Safety | [ ]  Child Development | [ ]  Administration | [ ]  Health |
| [ ]  Financial Management | [ ]  Housing | [ ]  4-H Youth Development |  |
| [ ]  Human Development | [ ]  Clothing/Textiles | [ ]  Other:  |       |
|  |
| Please indicate UP TO 3 (three) **MAJOR AREAS OF PROGRAMMING** for which you have interest: |
| [ ]  Nutrition | [ ]  Parenting Education | [ ]  Community Development | [ ]  Aging |
| [ ]  Food Safety | [ ]  Child Development | [ ]  Administration | [ ]  Health |
| [ ]  Financial Management | [ ]  Housing | [ ]  4-H Youth Development |  |
| [ ]  Human Development | [ ]  Clothing/Textiles | [ ]  Other:  |       |