

Louisiana Society of Certified Public Managers
APPLICATION FOR MEMBERSHIP
(New__ or Renewal__)

2010 Membership Year

See privacy act information below

NAME _____

Check if you are a new member

HOME ADDRESS _____

CITY/STATE/ ZIP _____

Check if your home address has changed in the past year.

DEPARTMENT/AGENCY/OFFICE _____

Check if you have changed agencies in the past year.

WORK ADDRESS _____

WORK PHONE HOME PHONE WORK FAX _____

E-Mail Address _____ RECRUITER NAME _____

(Recruiter Name is the person who asked you to join the society)

Check appropriate membership status for both LSCPM and AACPM. You must hold at least one of the following certifications to become a member.

LOUISIANA SOCIETY STATUS (LSPM):

Check the certificate(s) you hold:

- | | |
|--|---|
| <input type="checkbox"/> Certified Public Manager Certificate (CPM) | <input type="checkbox"/> Certificate for Managing People |
| <input type="checkbox"/> Certificate for Managing People | <input type="checkbox"/> Certificate in Supervisory Techniques (CST) |
| <input type="checkbox"/> Certificate for Building Effective Teams | <input type="checkbox"/> Professional Certificate |
| <input type="checkbox"/> OCDD Direct Care Supervision Certificate | <input type="checkbox"/> Corrections Security Supervision Certificate |
| <input type="checkbox"/> Certificate in Teaching and Learning | |
| <input type="checkbox"/> Affiliate Member (faculty and staff of an accredited CPM program) | |

AMERICAN ACADEMY STATUS (AACPM):

FELLOW (CPM) ASSOCIATE (CST) AFFILIATE

DUES: \$40.00 - Covers your membership in both the LSPM and the AACPM

If you are a RETIRED LSPM member - Dues are \$20 (AACPM Enrollment)

NOTE: If you are an HONORARY member of LSCPM, there are no dues to be paid.

Please copy this form to serve as your invoice.

RETURN THIS FORM WITH CHECK PAYABLE TO:

LSCPM

Treasurer

Louisiana Society of Certified Public Managers

Post Office Box 44021

Baton Rouge, LA 70804-4021

Amt Rec'd Check No. Date Deposit Date Entered

AMOUNT ENCLOSED \$ _____

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