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**Student Member Application**  
(Please print legibly)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Institution or University where currently enrolled: \_\_\_\_\_

Type of Degree(s) being pursued: \_\_\_\_\_ Subject Area(s): \_\_\_\_\_

Date of entry into program (mo. /yr.): \_\_\_\_\_ Anticipated Date of Graduation (mo. /yr.): \_\_\_\_\_

Highest Degree Earned to date: \_\_\_\_\_ Subject Area: \_\_\_\_\_

Please check the types of student programming you are interested in (to inform our development of student services):  Conferences to showcase student work

Mentoring       Listserv    Networking    Public service projects

Leadership Opportunities    Other: \_\_\_\_\_

*Note: Not all programs listed are currently available; call the PSCP office at 215-885-2662 to inquire about current student services.*

I certify that the information given by me in support of this application is true and correct.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please include **scanned or photo'd copy of your student identification.**

Please return application, including discounted new membership dues of \$10.00 to:

Dr. Ronald Fischman, Membership Chair 601 Summit Avenue 3<sup>rd</sup> Floor Jenkintown, Pa 19046  
By email at ronfischman@comcast.net

Dues may be easily paid online: [www.philadephiapsychology.org](http://www.philadephiapsychology.org) under  
"Renew or Join Membership" or send check to above address. Dues period June -May 31.

***Please join us as we further the field of psychology and serve the Greater Philadelphia community.***