

Knoxville Area Psychological Association Membership Application

I wish to become a member of Knoxville Area Psychological Association as a:

I. Full Member (Please check; at least one must apply):

- a. Licensed or eligible to be licensed by Tennessee Board of Examiners in Psychology as: Psychologist or Psychological Examiner
- b. Faculty member in Department of Psychology at a recognized college or university
- c. Master's Degree or higher in psychology from a recognized college or university
- d. Full member of the Tennessee Psychological Association
- e. Associate or full member of the American Psychological Association
- f. Certified as a School Psychologist by the Tennessee Department of Education

Highest Degree: Bachelor's Master's Doctorate

Degree Earned in (year) _____ From (school) _____

II. Student Affiliate (Must meet both of the following):

- a. Currently qualified graduate student in psychology or educational psychology in recognized area university
- b. Provide recommendation for membership in writing from departmental chairperson or faculty advisor

III. Retiree:

- a. Former KAPA member who has retired from full-time work in Psychology while in good ethical standing.

Name _____ **Degree(s)** _____

E-Mail _____

(this address is used for the newsletter & program announcements and will not be posted on the web site)

Business Address (this address will be published in the membership directory on the KAPA web site)

Mailing Address (this address will be used for business related KAPA mailings)

Office Phone _____ **Fax Number** _____

Today's Date _____ **Are you interested in volunteering services to KAPA?** Yes No

Please indicate special area(s) of interest to serve: _____

Full Membership: \$40.00 Student Affiliate Membership: \$20.00 Retiree Membership: \$20.00

Checks should be made payable to KAPA and returned with this completed form to the following address:

Attn: KAPA Membership P.O. Box 52293 Knoxville, TN 37950-2293
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