



APPLICATION FOR MEMBERSHIP

Your Name	Your Job Title		
Company/Organization			
Company/Organization Address	City	State	Zip
Your Email Address (Company)	Your Work Telephone	Your Work Fax	
Your Personal Email Address	Home Telephone	Cell Phone	

MEMBER EMPLOYMENT EXPERIENCE			
Years In Human Resources Field	Years In Current Job Position	Certifications <input type="checkbox"/> PHR <input type="checkbox"/> SPHR	FLSA Classification <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt
Brief Outline of Duties & Responsibilities (<i>Check All That Apply</i>):			
<input type="checkbox"/> Hiring/Recruiting	<input type="checkbox"/> Associate Engagement	<input type="checkbox"/> Training/Facilitating Classes	<input type="checkbox"/> HRIS
<input type="checkbox"/> Grievances/Investigations	<input type="checkbox"/> Benefits/Insurance	<input type="checkbox"/> Time & Attendance	<input type="checkbox"/> HR Management
If Duties & Responsibilities Are Not Listed Above, Please Specify:			

SHRM National Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", Member ID#:
If You Are Not A National Member, Do You Plan To Join? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Annual dues of the SHRM Middle Georgia, Chapter 154 are \$120 per year. New members joining mid-year (June or thereafter) will have a prorated membership dues of \$60. Membership includes local monthly meetings (at designated restaurants) and annual Christmas Event. Membership also provides unique opportunities to meet, chat, and discuss workplace/employment initiatives in the Middle Georgia Area, to include **what's trending now** in HR!

FOR MEMBERSHIP CONSIDERATION, PLEASE FORWARD YOUR COMPLETED APPLICATION TO:

Julia Shadwick
 1007 Boulder Drive
 Gray, GA. 31032
 E-Mail: jshadwick@ethicahealth.org

Chapter-154 Board Review		
<input type="checkbox"/> Membership Approved	Official Signature	Signature Approval Date
<input type="checkbox"/> Membership Denied	Reason Denied	Date Denied