Student Membership Application Form

Instructions
Please print or type. Submit to:
Linda S. Law-Saunders *Treasurer* NEAFCS-NYA
415 Lower Main Street
Hudson Falls, NY 12839

Date: _____

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. **Dues $55** ($50 National Dues, $5 State Dues)

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

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: _____	

For Student membership, submit this form directly to your State Affiliate Treasurer along with Affiliate Dues;
Also, send a copy of this form along with your National Dues to:
NEAFCS National Office, 14070 Proton Rd, Suite 100, Dallas, Texas 75244