

Instructions: Complete and sign this application.

Mail to: MPA, 124 W. Allegan, Suite 1900, Lansing, MI 48933. Enclose a check made payable to "MPA" or complete the credit card information on the reverse side.

Name: _____
(last) (first) (middle)

Address: _____
Street

City State Zip

Home Zip Code: _____ **Home county:** _____

Phone: () - - **Fax:** () - -

E-Mail: _____ (e-mail addresses are not shared with others)

PROFESSIONAL APPLICANTS

Highest Degree Institution Year

Michigan License #: _____

Other State licenses: _____

Current Position: _____

Please check and complete if applicable:

I am competent to offer services in the following languages (other than English)

I am willing to provide clinical supervision

I am willing to provide Pro Bono services

STUDENT APPLICANTS:

Institution: _____ Program: _____

PROFESSIONAL ETHICS DECLARATION: Have you ever been (a) convicted of a felony, (b) sanctioned or reprimanded by the APA Ethics Committee, the Ethics Committee of a state psychological association or a state licensing board, (c) relinquished professional responsibilities in connection with an ethical or legal issue (d) or are you currently under review or investigation by any professional organization or state ethics/licensing/credentialing board? Yes No (If yes, please explain and attach additional pages.)

_____ I hereby make voluntary application to the Michigan Psychological Association (MPA) for membership at the level indicated and I agree to be bound by the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association and the Bylaws of the Michigan Psychological Association. I agree that non-payment of dues for two consecutive years is the equivalent of a resignation from MPA and that during such two-year period I will continue to be bound by the ethics of the profession as described in the Bylaws of the Michigan Psychological Association and the Rules and Procedures of its Ethics Committee. I understand that my membership is entirely voluntary and I agree to make no claim against the Michigan Psychological Association, its officers, committees, members, or agents for failure to issue membership or for any action taken in connection with this application or my membership. Whenever it is deemed appropriate, I authorize MPA to exchange information concerning my membership or my application (before or any time after action is taken on my application) between the American Psychological Association, state psychological associations, and state licensing boards or certifying agencies. In the event of an investigation, I authorize MPA, its officers, committees or its agents to conduct an investigation regarding my character and professional standing, and I authorize any person contacted by the MPA to respond to an inquiry. MPA DOES NOT DISCRIMINATE ON THE BASIS OF RACE, GENDER, SEXUAL ORIENTATION, OR OTHER PROTECTED CLASSES.

Signature: _____ Date: _____

Please tell us who recommended MPA membership to you: _____

MEMBERSHIP CATEGORY

- Regular Member (doctorate)
- Associate Member (master's degree)
- Student Affiliate (graduate student)
- Student E-member (graduate student)

MICHIGAN LICENSE

- Full Limited None

NATIONAL REGISTER CPQP

- Yes No Yes No

BOARD CERTIFICATION

- Yes No **Circle: ABN ABPP**

Ar- _____ ea: _____

APA MEMBER

- Fellow Member Associate Student

AREAS OF PRACTICE

- Adult Industrial organizational
- Adolescent Neuropsychology
- Children Public Sector
- Academic School
- Marriage & Family Substance Abuse
- Forensic Assessment Oth-
- er.

Membership Requirements:

MEMBER– The minimum standard for election to Member status shall be the receipt of the doctoral degree from a program in Psychology that is conferred by a regionally accredited graduate school. Candidates for member status shall be engaged in study or professional work that is primarily psychological in nature.

ASSOCIATE– The minimum standard for election to Associate status shall be (a) completion of at least two years of graduate work in psychology in a regionally accredited graduate school or (b) a master's degree in psychology from a regionally accredited graduate school plus twelve months of acceptable experience in professional work that is psychological in nature.

STUDENT AFFILIATE and STUDENT E-MEMBER– Shall be persons enrolled in a regionally accredited graduate program in psychology and not working in a professional capacity, other than an internship. Student Affiliates and E-Members may participate in all activities of the Association but may not vote nor hold office in the Association.

Application:

1. Fill out and sign application

2. Check Member Category and enclose dues. Make check payable to: **Michigan Psychological Association**

3. Send to: Michigan Psychological Association
124 W. Allegan, Suite 1900
Lansing, MI 48933

Phone: (517) 347-1885 **Fax** (517) 484-4442

E-Mail: Office@michiganpsychologicalassociation.org

Web Site: www.michiganpsychologicalassociation.org

Membership Category:

Please **CHECK** correct category:

Sustaining Membership..... \$350.00

Regular Membership

Doctorate, Full License.....\$ 295.00

No License or Academic.....\$165.00
(Academic psychologist= 90% of income from teaching)

Doctorate, limited license (2 years).....\$165.00

◆ Doctorate, Reduced Income(< than \$30,000/year)

By application only. Contact MPA office.

Associate Membership (Master's Degree).....\$140.00

Student Affiliate (Graduate Student).....\$50.00

Student E- Member (Graduate Student)..... \$25.00

(Student E- Members receive information via website only, no mailings)

Credit Card Payment:

Charge \$ _____ to my:

MasterCard American Express

Visa Discover

Exp. Date: _____

Acct. Number: _____

CVV@ (3 digit # on back of card): _____

(For A.E.— 4- digit code on front of card)

Signature: _____



**Michigan
Psychological
Association**

Membership Application:

Straight to the Point:



MPA Membership offers you:

- ◆ Information
- ◆ Publications
- ◆ Educational Resources
- ◆ Advocacy
- ◆ Benefits
- ◆ Public Education Programs
- ◆ Statewide Network
- ◆ Statewide Referral Service

MPA is an organization for all Psychologists working to advance Psychology as a science and profession and to promote humane welfare by encouraging the highest level of standards in all branches of psychology.