

If you are not a undergraduate or graduate student in the mental health care field, please describe your interest in the field of psychology and mental health care.

Have you ever been convicted of a felony, sanctioned by any professional ethics body, licensing board, or other regulatory body, or by any professional or scientific organization? Yes No (If yes, please attach an explanation on a separate sheet.)

Help us improve your experience as a member:

Please tell us why you'd like to join the Vermont Psychological Association by rating the following benefits in order of importance to you, 1 being the most important, 2 the second most important, etc.

- ___ Collegiality/Networking ___ Communications ___ Legislative Advocacy
- ___ Reduced CE Fees ___ Referrals ___ Ethics/Practice Consultations
- ___ Other:

**Please check your requested membership category.
VPA will bill you for the prorated dues amount once your membership application is accepted.**

- Public Member \$50
- College/Graduate School Student \$40
- High School Student \$25

Applicant Signature: _____

Date: _____

Endorsement of VPA Sponsor (undergraduate/graduate students only):

A VPA member must sign here to endorse your student membership application. Please call the VPA office if you need assistance in locating a VPA member.

Sponsor Signature: _____

Sponsor Name (please print): _____

Please Note: Students must provide a copy of valid student identification with this application.