



Are you currently a member of the American Psychological Association?  Yes  No

Category:  Member  Associate APA Membership # \_\_\_\_\_

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.**

- |   |       |
|---|-------|
| <input type="checkbox"/> Rostered Mental Health Care Provider                                 | \$125 |
| <input type="checkbox"/> Academic/Research (full time)  | \$200 |
| <input type="checkbox"/> Associate Member (non-psychologist licensed provider)                | \$250 |
| <input type="checkbox"/> Licensed Psychologists in Licensure Years 1 & 2                      | \$200 |
| <input type="checkbox"/> Licensed Psychologists in Licensure Years 3 and over                 | \$300 |
| <input type="checkbox"/> Sustaining Member—Demonstrate your commitment to mental health care! | \$350 |

**Please attach a copy of your *curriculum vitae* to this application.**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return to: VPA, PO Box 1017, Montpelier, VT 05602-1017 or to [vpaed@vermontpsych.org](mailto:vpaed@vermontpsych.org)