



Association of Certified General Ethicists

Application for Membership

Applicant Information

Last Name: First Name: Mid.Initial:

Business Name:

Business Address: Unit/Suite #:

City: Province: Postal Code:

Phone Number: E-mail Address:

Education

Institution: Address:

From: To: Did you graduate?
 Yes No Degree:

Institution: Address:

From: To: Did you graduate?
 Yes No Degree:

Institution: Address:

From: To: Did you graduate?
 Yes No Degree:

References

Please list three professional references:

Full Name: Relationship:
Company: Phone Number:
Address:

Full Name: Relationship:
Company: Phone Number:
Address:

Full Name: Relationship:
Company: Phone Number:
Address:

Employment in Ethics

Company: Phone Number:
Address: Supervisor:
Job Title: Starting Salary: Ending Salary:
Responsibilities:
From: To: Reason for Leaving:
May we contact your previous supervisor for a reference? Yes No

Employment in Ethics

Company: Phone Number:

Address: Supervisor:

Job Title: Starting Salary: Ending Salary:

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? Yes No

Company: Phone Number:

Address: Supervisor:

Job Title: Starting Salary: Ending Salary:

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? Yes No

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Do you subscribe to the Truth as described in the By-Laws of the Association of Certified General Ethicists (4.a)? Yes No

Signature:

I subscribe to the following Ethical Category:

Membership Fee (must be included with application) \$500/year Fee Enclosed

Date:

Please attach business card: