



Associate Membership Application

Associate membership is available for not-for-profit organizations, agencies, or institutions outside of Arkansas who have purposes parallel with those of ArkACRAO and who desire to participate in the Association's nonvoting activities. Candidates for associate membership must be approved by the Membership Committee and subsequently approved by a majority vote of the general membership in October at the Fall Conference. Approved institutions will pay an annual fee of \$100, due before July 31st.

Organization Information

Institution: _____

Mailing Address: _____

City, State, Zip: _____ FICE Code: _____

Web Address: _____

Check one of the following: We are a _____ for-profit organization _____ not-for-profit organization

Select your regional accrediting agency:

____ Middle States Association of Colleges and Schools

____ Northwest Commission on Colleges and Universities

____ New England Association of Schools and Colleges

____ Western Association of Schools and Colleges

____ North Central Association of Colleges and Schools

____ Southern Association of Colleges and Schools

Year of accreditation expiration _____

Contact Information

Name: _____

Title: _____

Office Phone and Extension: _____ Office Fax Number: _____

Email Address: _____

I certify the information I have provided in this application is accurate to the best of my knowledge. I understand that the falsification of any of the information I have provided can result in denial of membership to ArkACRAO, or in immediate dismissal should the falsification be discovered after membership approval. I also understand that membership decision will not be made prior to annual meeting in October each year.

Signature _____ Date _____