

SCORE Association Office
409 3rd Street, SW, 6th Floor
Washington, DC 20024
1/800-634-0245



Chapter Number _____

District Number _____

APPLICATION FOR MEMBERSHIP

Name: _____ Social Security Number _____
Spouse Name (optional) _____
Street Address _____ City _____ State _____ Zip _____
Home Phone _____ Fax _____ Email _____

BRIEFLY DESCRIBE YOUR PROFESSIONAL BUSINESS EXPERIENCE [Can attach a resume or bio]

(Provide supplementary sheets if needed): _____

Are you currently working: Yes [] No [] If Yes, Full-time [] or Part-time []

OPTIONAL: (this information is used for statistical purposes only)

GENDER: Female [] Male []

ETHNICITY: Caucasian/White [] Black/African American [] Hispanic American [] Asian American []
Native American or Alaskan Native [] Native Hawaiian or other Pacific Islander [] Other [] _____

PLEASE RANK YOUR AREAS OF BUSINESS EXPERTISE 1 - 5 (5 being the highest):

- Administrative/Office Support 4300-4310
Agriculture 4500
Business and Finance 1300-1375
Community and Social Service 2100-2110
Public Administration 2120
Construction 4700
Education and Training 2500-2530
Engineering and Architecture 1700-1720
Food and Hospitality 3500-3520
Healthcare/Medical 2900
Legal 2300-2320
Management 1100-1120
Media and Entertainment 2700-2710
Personal Care and Service 3900-3920
Production 5100-5120
Sales 4100-4120
Technology and Computer 1500-1530
Transportation 5300-5310

Approved for Membership YES [] NO []

Signature _____
(Chapter Chair or designee)

Foreign Language Skills (Specify) _____ Read _____ Write _____ Speak _____

PLEASE CHECK THE CHAPTER ACTIVITIES THAT INTEREST YOU:

- | | | | | | | | |
|----------------|--------------------------|------------|--------------------------|-----------------------|--------------------------|-------|-------|
| Administration | <input type="checkbox"/> | Leadership | <input type="checkbox"/> | Public Relations | <input type="checkbox"/> | Other | _____ |
| Computer | <input type="checkbox"/> | Marketing | <input type="checkbox"/> | Seminars/Workshops | <input type="checkbox"/> | | |
| Counseling | <input type="checkbox"/> | Mentoring | <input type="checkbox"/> | Volunteer Development | <input type="checkbox"/> | | |

SCORE MEMBERSHIP GUIDELINES

SCORE suggests that candidates for Membership meet the following guidelines. **Your chapter may have specific additional requirements.**

- Management, administrative, business ownership or professional business experience;
- Knowledge of contemporary business practices;
- Ability to relate to and communicate with SCORE's diverse client base;
- Agree to complete forms necessary to maintain chapter and SCORE Association office records;
- Commit to actively participate in chapter committees, operations and programs, national and chapter counselor training programs.

SCORE Volunteers must also agree to conform to the SCORE Code of Ethics and Conduct, SCORE Association and chapter bylaws, rules and standards. Volunteers are required to annually sign the SCORE Code of Ethics and Conduct. Your chapter will provide you with a copy of these documents.

STATEMENT OF UNDERSTANDING AND CERTIFICATION

I understand that SCORE has a 90-day introductory period, during which I will receive orientation and training and that my full participation as a SCORE Volunteer is contingent upon my satisfactory completion of this training.

I may withdraw my membership at any time upon written notice to the chapter chair. I understand SCORE may terminate my membership, if I fail to fulfill my responsibilities as a SCORE Volunteer.

I certify that all of the statements on this application are true and complete to the best of my knowledge and belief.

Signature of SCORE Applicant _____ Date _____

Non-Discrimination Policy: It is the policy of SCORE to afford equal opportunities to all applicants for membership on the basis of individual qualifications, without regard to race, color, religion, gender, age, national origin, physical or mental disabilities unrelated to SCORE membership requirements.

TO BE COMPLETED BY THE CHAPTER

Date Approved for Membership	Chapter Number	Chapter Location	District Number
Chapter Chair or Designee (signature):			Date
SCORE District Director (signature if appropriate):			Date