

# COLORADO ASSESSMENT SOCIETY

## RENEWAL/APPLICATION FOR MEMBERSHIP

(Please print or type)

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

New Member?  Degree: \_\_\_\_\_ License (State/#): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you currently a member of the Society for Personality Assessment?

Education: Graduate School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Professional Interests (if not previously provided or if changed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Suggestions for Continuing Education: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### MEMBER CATEGORY

Check One (Read the criteria under each category to determine your appropriate membership)

- **make check payable to Colorado Assessment Society**
- **OR, to pay via PayPal, open the blue link below that reflects your member category**

#### Full Member

**\$40** \_\_\_\_\_

a) Education, training, and experience at or above the doctoral level and who are involved in teaching, research or clinical practice in psychology or closely related fields.

- OR -

b) Licensed Psychologist in the State of Colorado

#### Associate Member

**\$25** \_\_\_\_\_

Open to all individuals who may not meet all the professional requirements for full membership, but whose interests are commensurate with those of CAS and whose credentials are otherwise acceptable (e.g. post-doctoral level)

#### Student Member

**\$15** \_\_\_\_\_

Open to all individuals who are enrolled in a program of study leading to a Doctoral degree in psychology or a related field.

Mail completed renewals/applications to:

Colorado Assessment Society  
c/o GSPP  
2450 S. Vine Street  
Denver, CO 80208

By submitting this form, you affirm that you are a licensed psychologist or a doctoral student/post doc trainee to become a psychologist.