



Application for Membership

Name _____ (Eng.)
Dr. Mr. Ms. First Middle Last

_____ (укр.)

Address _____

City _____ State _____ Zip code _____ - _____

Home. Telephone: (____) ____ - _____, Fax: (____) ____ - _____, e-mail: _____

Profession _____

Present Position _____

Employed at _____

Address _____

City _____ State _____ Zip code _____ - _____

Work. Telephone: (____) ____ - _____, Fax: (____) ____ - _____, e-mail: _____

Education (highest degree) _____, Year _____

Name of institution _____

Topics of Interest? Research Areas/ Specializations: _____

To which section of Shevchenko Scientific Society are you seeking membership?

Arts Mathematics and Sciences Law Social Sciences
 Medicine & Biology History Philology

Signature: _____

Date _____

Please submit to Shevchenko Scientific Society the following:

1. Completed and signed application
2. Curriculum vitae
3. Two letters of recommendations from existing Shevchenko Scientific Society Members
4. Photograph, preferably head shot
5. Membership Fee (Membership is renewed annually on May 1)
6. Member \$60; Graduate student \$20—indicate expected degree, year _____

Payment can be made by check made payable to "Shevchenko Scientific Society, Inc." or online at www.shevchenko.org by clicking the Donate button.

Mail your membership packet to:

Shevchenko Scientific Society, Inc.
Attn: Membership Committee
63 Fourth Avenue
New York, NY 10003-5202

OR you can scan and send your packet to:
info@shevchenko.org.

Do not write below this line:

Disposition of the Governing Board

Sponsors (Society members) 1. _____
2. _____

Accepted as a regular members on (date) _____

Signed _____ Date _____, _____
Chair, Membership Committee