

APPLICATION FOR SUBSCRIBERSHIP

Applicant information								
Title	Prof	Dr	Mr	Mrs	Ms	Other:		
First Name (s)								
Last Name								
Date of Birth								
Ethnic Origin								
Sex	Female	;		Male				
Present employer								
Address Information								
	Street o	or PO Box:						
Mailing Address	Suburb	:						
	City:					Postcode:		
Work Phone								
Mobile Phone								
Email								
Qualification Informa	ition							
Please list all your academic qualifications								
Declaration								

I declare that I have read Rule 5.1 of the Society's Rules (overleaf) and am not eligible for Full Membership of the NZPsS. I undertake to advise the Society should I become eligible for Full Membership under the Rules.

(Note:Subscriber status is not available to anyone qualified to become a full member under Rule 5.1 of the Society's rules. Subscribership will be valid for 12 months from the date of approval. You will be required to verify annually, your continued eligibility for this membership status under the Rules).

Applicant Signature:

Date:

Please read the sections overleaf

SUBSCRIBER STATUS

As per Rule 13 of the NZPsS Rules, the Executive Director may admit persons who are not qualified for membership but who have a professional interest in psychology as Subscribers. Subscribers are not members of the Society and will not be eligible to vote but will receive notices of and be entitled to attend general meetings of the Society and to enjoy such privileges of membership as the Executive may from time to time determine.

Subscriber status offers access to all Society publications, as well as registration at member rates at the Society's annual conference and professional development events.

NOTE: SUBSCRIBER STATUS IS NOT AVAILABLE TO ANYONE QUALIFIED TO BECOME A FULL MEMBER UNDER RULE 5.1 OF THE SOCIETY'S RULES.

RELEVANT RULE EXTRACTS

5.1

To qualify for election as a Full member an applicant must have satisfied the Executive that he or she possesses one of the following qualifications:

- (a) a Doctorate in the field of psychology; or
- (b) an Honours or Masters degree in the field of psychology, or
- (c) an Honours, Masters, or other approved postgraduate qualification in which at least two courses (equivalent in total credit weight to one half of a full academic year of study) on psychological topics have been passed at postgraduate level, and that either
 - (i) a thesis on a psychological topic has been accepted, or

(ii) at least one year of relevant supervised experience or training acceptable to the Executive has been completed.

(d) such equivalent qualifications, skills or knowledge in psychology as may be approved by the Executive after consultation with the Membership and Status Committee.

5.2

Qualifications gained at overseas institutions will be accepted if they are deemed by the Executive Director in consultation with the Membership and Status Committee as equivalent to the Society's published membership criteria. Any person holding overseas qualifications recognised as sufficient for registration as a psychologist by the New Zealand Psychologists Board will be deemed to have qualifications meeting the requirements of this rule 5.2.

PREPAYMENT OF SUBSCRIPTION FEE IS REQUIRED WITH APPLICATION.

The current fee for Subscribers is NZ\$225.00.

Please send your completed application form along with payment to:

Membership Administrator NZ Psychological Society PO Box 10536, The Terrace, Wellington 6143



SUBSCRIBERSHIP INVOICE

GST No. 42-486-868

Name:

Subscribership fee (incl. GST) payable with application

\$ 225.00

You will be advised of your acceptance as a Subscriber and the date on which your Subscriber status falls due for renewal. Renewal is dependent on your continuing to meet the criteria noted above. If you achieve the minimum educational requirement for Full Membership you cannot renew as a Subscriber.

Method of payment:

	Cheque enclosed for subscription fee due as above							
	Direct credit to NZ Psychological Society Inc. Bank Account Deposit date:	No. 02- 0560- 0262471- 00						
	Credit Card payment (VISA or Mastercard only)							
Card N								
Cardho	older name	Expiry Date/						
Signati	ure							

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