

A CFA Institute member society

GUIDE FOR COMPLETING THE CFASS ASSOCIATE MEMBERSHIP APPLICATION FOR STUDENTS.

Thank you for your interest in joining the CFA Society of Sacramento, a CFA Institute member society.

This packet contains paperwork necessary for the **Student** membership category and must be accompanied with an official transcript from your university.

- .. CFASS's Student Membership is available to those who are matriculating toward a bachelor's or master's degree in finance or business, or other courses of study related to the investment decision-making process.
- .. CFASS Student Members must maintain a GPA of 3.0 or higher and be in good standing at an accredited college or university. (CFASS will waive requirements for all freshman students.)
- .. Student membership is for one year and must be renewed annually.
- .. CFASS's student membership year runs in a 12-month cycle. Your membership year depends on your join date.
- .. CFASS student dues are \$150 annually and are not prorated.
- .. Individuals may maintain student membership status for **one** year after graduation or until the end of the membership year in which the student discontinues his/her studies toward a degree in business or finance.
- .. Student membership is only available to individuals who **do not** qualify otherwise as a Regular or Affiliate member (please see www.cfass.org and go to Membership --> How to join for more information).

Your application will be processed and sent to the CFASS Student Membership Committee for review at the end of the month in which you submit it. Final membership category is subject to review by CFASS. You will receive a new member welcome letter when your CFASS membership is activated.

Membership Application Package Contents:

- .. **CFASS Membership Application**

Before submitting, make a copy of your completed paperwork for your records. Your application will not be processed unless complete. To avoid delays in the application process, please ensure that you sign and enclose the following:

- 1) **CFASS Membership Application**
- 2) **Official University Transcript & Verification of Current Enrollment**
- 3) **Current Resume**
- 4) **Payment**

Send the completed and signed forms with payment (check or credit card information) for dues and fees to:

CFA Society Sacramento
915 L Street, C252
Sacramento, CA 95814

If you have any questions concerning membership or the membership application process, email membership@cfass.org.

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Student Membership Application

CFASS's Student Membership is available to those who are in the process of matriculating toward a bachelor's or master's degree in finance or business, and maintain at least a 3.0 grade point average. The application must be accompanied by an official transcript from your university. Student Membership is only available to individuals who **do not** qualify otherwise as a Regular or Affiliate member of CFASS. See the Membership --> How to Join section at www.cfass.org for more information.

Before completing this application, please review the CFASS Membership Bylaws, also located on www.cfass.org.

HAVE YOU EVER BEEN A CFASS MEMBER?

YES NO

ARE YOU OR HAVE YOU BEEN A MEMBER OF ANOTHER SOCIETY IN THE CFA INSTITUTE? YES NO IF YES, PLEASE NAME THE SOCIETY BELOW:

CFA INSTITUTE NUMBER/CANDIDATE NUMBER _____

THIS APPLICATION WILL BE CONSIDERED ONLY IF COMPLETE. PLEASE PRINT CLEARLY OR TYPE:

MR. MS. OTHER _____ GENDER: FEMALE MALE PROFESSIONAL DESIGNATIONS _____
CFA®, CFP®, CMT, CPA, ETC.

NAME _____
FIRST NAME MIDDLE NAME LAST NAME/SURNAME INFORMAL NAME

CURRENT ADDRESS _____
ADDRESS CITY STATE ZIP COUNTRY

CURRENT PHONE _____ EMAIL _____

PERMANENT HOME ADDRESS _____
ADDRESS CITY STATE ZIP COUNTRY

PERMANENT HOME PHONE _____ ALTERNATIVE EMAIL _____

PREFERRED MAILING/BILLING ADDRESS: _____

BIRTH YEAR _____

EDUCATION

NAME OF COLLEGE OR UNIVERSITY _____

MAJOR _____ MINOR _____

EXPECTED DEGREE _____ EXPECTED DEGREE COMPLETION DATE _____
(BA, BS, MBA, MS, ETC.)

HIGHEST DEGREE RECEIVED _____

OTHER DEGREES COMPLETED:

COLLEGE/UNIVERSITY _____ DEGREE _____ DATE _____

COLLEGE/UNIVERSITY _____ DEGREE _____ DATE _____

WHY WOULD YOU LIKE TO BECOME A CFASS MEMBER?

APPLICANTS **MUST** ENCLOSE \$25 PAYMENT

PAYMENT TYPE: <input type="checkbox"/> Check <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	
CARD# _____	EXP _____
SECURITY CODE _____	BILLING ZIP CODE _____
CARDHOLDER'S SIGNATURE _____	
Note: Applications are reviewed monthly.	

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EMPLOYMENT

ARE YOU CURRENTLY EMPLOYED? % YES % NO

COMPANY NAME _____

JOB TITLE/RESPONSIBILITY _____ DEPARTMENT _____

COMPANY ADDRESS _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ COUNTRY _____

BUSINESS PHONE _____ BUSINESS FAX _____

- ^ Please attach official university transcript and verification of current enrollment
- ^ Please attach current resume

APPLICANT AFFIRMATION

I, _____ hereby assert that I am a matriculating toward a bachelor's or master's degree in finance
(PRINT NAME IN FULL) or business, or other courses of study related to the investment decision-making process. I maintain a GPA of 3.0 or higher and am in good standing at my college/university. I understand that I may maintain my student membership only as long as I remain such. If I am accepted, I agree to comply with all applicable rules, Bylaws, and dues assessments of CFASS.

DATE _____ APPLICANT'S SIGNATURE _____

FOR CFASS MEMBERSHIP COMMITTEE USE ONLY

EXAMINER: _____
APPROVED AS _____ DATE _____
COMMENTS _____