



## SHRM OF CENTRAL NEW JERSEY, INC. STUDENT MEMBERSHIP APPLICATION

*All applications subject to Board approval. Memberships are individual and not transferable.*

Name (last, first, middle initial): \_\_\_\_\_

Are you a full-time student? Yes \_\_\_ No \_\_\_ Expected date of Graduation \_\_\_\_\_

Of which Student SHRM Chapter are you a member? \_\_\_\_\_

National SHRM Student Member Number: \_\_\_\_\_  
(Maintaining National Membership is required for Chapter Membership)

Enclose a check for Student \$15 calendar year dues payable to:  
SHRM of Central New Jersey

School or Home Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Are you currently working? Yes \_\_\_ No \_\_\_ How many hours per week? \_\_\_\_\_

Briefly describe your job duties \_\_\_\_\_

Company: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

**I certify that the foregoing information is true and correct and that I have read and understand the Guidelines for Student Membership below.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### GUIDELINES FOR STUDENT MEMBERSHIP

Membership in this category includes those individuals pursuing a bona fide course of study in human resources and eligible for and maintaining Student Membership in the National organization. Students are not eligible to vote, hold office, or serve as committee chairpersons. Membership is defined on an individual basis, not on a Corporate or Group basis, and is not transferable.

Please mail completed application and dues payment to:  
SHRM of Central NJ, Inc.  
P.O. Box 6151  
Somerset, NJ 08875