

National Institute of Governmental Purchasing Columbia Chapter

Serving the Greater Portland Area and Southwest Washington.

STUDENT MEMBERSHIP APPLICATION

NAME (Print or Type):			
ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:	EN	IAIL:	
SCHOOL/UNIVERSITY: _			_
EMPLOYER: _			
MAJOR: _			
Requirements for Free St The applicant must be enro university, and actively purs unemployed or employed o This is a non-voting member	olled part-time or full-time suing a career in the field on a part-time basis, cons	l of Public Purchasing. sisting of less than twen	Applicant must be
Instructions:			
1. Complete and sign the	Student Membership A	pplication	
Include a copy of applicant's current class name of the student.	a copy of applicant's most current transcript, with name of school, OR a copy of it's current class schedule provided by the school, with the name of the institution and the the student.		
Email the completed applic Director, at tessa.godat@n		current transcript to Tes	sa Godat, Membership
If approved for student mer NIGP. I understand that if during the calendar year.			nd Regulations and Ethics of teer time for the Chapter
I agree to the terms of Co statements are true.	olumbia Chapter's Stud	lent Membership and o	certify that the above
APPLICANT SIGNATURE	:	DATE:	