

2010 NPA Membership Form

The following is the information NPA currently has on file for you. This information was provided by HHS files. Please **CROSS OUT AND CORRECT** any outdated or incorrect information, and **FILL IN BLANK AREAS** on this form. Both sections B and C (Home AND Business contact info) must be completed. **ONLY** the contact information you indicate in section D will be published in the Directory. **NOTE: an EMAIL ADDRESS IS ESSENTIAL** in order to receive NPA communications and Newsletter! Return with your NPA Membership Dues to NPA, P. O. Box 6785, Lincoln, NE 68506-6785 or fax toll free to 877-355-9234. Thank You!

A _____
 First Name Last Name Middle Initial

B Home Contact Information

Home Address

City State Zip

Home Phone Home Cell

Home Email

C Business Contact Information

Place of Employment

Business Address

City State Zip

Business Phone Fax

Business Email

D Which address do you want: Home Business

Published in the NPA Directory?

To receive NPA Mailings at?

E Your affiliation with NPA is considered part of the public record. The provided contact information will be listed in the NPA Membership Directory. **If you want *only your name* in the directory, please check here:**

F Degree _____ Year of Degree _____

G License # (if applicable): _____

H APA Full Member APA Affiliate Member

I Professional Settings where you work (all that apply)

Private Practice Residential or Group Home Facility

Academic Other

Outpatient _____

Hospital _____

Full-Time Student

J Professional Activities (all that apply)

Psychotherapy Supervision

Assessment Administration

Teaching Student

Research

K Professional Ethics Declaration.

1. Have you ever been found guilty of an ethics violation by any professional organization, society, regulatory board or institution?
 _____ Yes _____ No

2. Have you ever been convicted of a felony? _____ Yes _____ No

If yes to either, please explain: _____

I agree to uphold and abide by the ethical principles of psychologists of the American Psychological Association.

Signature _____ Dated this _____ day of _____, 20_____

Pay by October 9, 2009 and receive a \$20 discount on your membership dues!

L Membership Category*

Active Member	\$210	Payment: Check # _____ or Credit Card: Visa Mastercard
Early Career Psychologist	\$100	
Full-Time Academician	\$130	\$ _____
Affiliate	\$80	
Student Associates	\$35	Amount Card Number Expiration Date Card Verification #
Life Member/Emeritus	\$0	
<u>Optional Program</u>		
Sustaining Club†	\$100	

*See Next Page for descriptions
 †Contributors to the Sustaining Fund will receive a commemorative lapel pin.

_____ Name on card (please print) _____ Cardholder Signature

PLEASE COMPLETE BACK SIDE.

M Membership Categories

Active Member:

1. Individuals with a doctoral degree in psychology and are licensed in Nebraska or other state.
2. Must actively engage in the practice, research, teaching of psychology.

Early Career Psychologists: Individuals who are provisionally licensed, OR individuals who have been independently licensed for less than 2 years.

Academician: Individuals with a doctoral degree in psychology and primary professional activity is faculty of an education institution.

Affiliate:

Individuals who are interested in the work of NPA, but don't meet the qualifications for the earlier categories; for example,

1. Clinicians registered as Associate Psychologists with HHSS Regulation and Licensure, or
2. Clinicians licensed as Mental Health Practitioners

Student Associates: Individuals who are undergraduate, graduate, or postdoctoral students majoring in psychology.

Life Member/Emeritus Status: Past Full Member now retired from full-time practice as a psychologist.

N Divisions/Committees/Issues Please indicate which you would be willing to assist in any capacity and an NPA member will contact you.

- Legislative & Regulatory Ethics Newsletter Academic Affairs Disaster Response
 Continuing Ed Programs Membership Professional Affairs Prescription Privileges

Additional Membership Directory Information

O Check up to 15 Areas of Practice Interest that apply:

- | | | |
|---------------------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="radio"/> Abuse/Neglect | <input type="radio"/> Dissociative Disorders | <input type="radio"/> Pain Management |
| <input type="radio"/> ADD/ADHD/Hyperactivity | <input type="radio"/> Domestic Violence: Perpetrators | <input type="radio"/> Personal Injury |
| <input type="radio"/> Addictive Behaviors | <input type="radio"/> Domestic Violence: Victims | <input type="radio"/> Personality Disorders |
| <input type="radio"/> Adolescent Issues | <input type="radio"/> Dual Diagnosis | <input type="radio"/> Physical Disabilities & Illness |
| <input type="radio"/> Adoption/Foster Care | <input type="radio"/> Eating Disorders | <input type="radio"/> Post Traumatic Stress Disorders/ Violence/Trauma |
| <input type="radio"/> Adult Survivors | <input type="radio"/> EMDR | <input type="radio"/> Psycho-educational Evaluation |
| <input type="radio"/> Aging/Alzheimer's Disease/Dementia | <input type="radio"/> Employee Assistance | <input type="radio"/> Psychological Testing |
| <input type="radio"/> AIDS/HIV | <input type="radio"/> Ethnic Minorities/Cultural Issues | <input type="radio"/> Psycho-pharmacology |
| <input type="radio"/> Anger Management | <input type="radio"/> Family Issues/Therapy | <input type="radio"/> Rehabilitation |
| <input type="radio"/> Anxiety/Phobia/Panic/OCD | <input type="radio"/> Forensic Evaluation | <input type="radio"/> School Problems/Educational Assessment |
| <input type="radio"/> Autism/Pervasive Developmental Disorders | <input type="radio"/> Gambling | <input type="radio"/> Self Esteem/Self Concept |
| <input type="radio"/> Bilingual (Spanish/English) | <input type="radio"/> Gay/Lesbian/Bisexual Issues | <input type="radio"/> Severe Mental Illness |
| <input type="radio"/> Biofeedback | <input type="radio"/> Gender Identity | <input type="radio"/> Sexual Abuse |
| <input type="radio"/> Brain Injury/Organic Brain Syndromes | <input type="radio"/> Geriatrics | <input type="radio"/> Sexual Disorders |
| <input type="radio"/> Career Assessment & Counseling | <input type="radio"/> Giftedness | <input type="radio"/> Sleep Disorders |
| <input type="radio"/> Child/Pediatric Psychology | <input type="radio"/> Group Therapy | <input type="radio"/> Smoking Cessation |
| <input type="radio"/> Chronic Illness | <input type="radio"/> Health Psychology Issues | <input type="radio"/> Social Skills Development |
| <input type="radio"/> Co-Dependency Issues | <input type="radio"/> Impaired Professionals | <input type="radio"/> Spirituality/Religious Issues |
| <input type="radio"/> Corporate Coaching/Consultation | <input type="radio"/> Impulse Disorders | <input type="radio"/> Sports Psychology |
| <input type="radio"/> Crisis Intervention | <input type="radio"/> Individual Psychotherapy | <input type="radio"/> Stress Management |
| <input type="radio"/> Custody Evaluations | <input type="radio"/> Industrial & Organizational Psychology | <input type="radio"/> Substance Abuse/Dependence |
| <input type="radio"/> Death and Dying/Grief | <input type="radio"/> Learning Disabilities | <input type="radio"/> Suicide: Evaluation/Intervention |
| <input type="radio"/> Depression/Affective Disorders | <input type="radio"/> Marital/Couples/Divorce | <input type="radio"/> Transitions/Life Changes |
| <input type="radio"/> Developmental Disabilities/Mental Retardation | <input type="radio"/> Memory Disorders | <input type="radio"/> Weight Loss |
| <input type="radio"/> Disability Determinations | <input type="radio"/> Men's Issues | <input type="radio"/> Wellness |
| <input type="radio"/> Disorders/Mood Disorders | <input type="radio"/> Neuropsychology | <input type="radio"/> Women's Issues |

Dues to the Nebraska Psychological Association are not deductible as a charitable contribution for tax purposes, but may be deductible as an ordinary and necessary business expense. A portion of the dues, however, is not deductible as an ordinary and necessary business expense because the Association engages in lobbying activities. NPA estimates that 40% of dues are allocated to lobbying activities and are nondeductible. If you have any questions, please contact the NPA Central Office, 402-475-0709.