



APHA Schools and Programs of Public Health Student Sponsored Membership Information and Checklist

APHA School Sponsored Membership Information

Who is eligible to participate in the school-sponsored student membership program? Any educational institution that offers a public health curriculum along with allied professions that work within the public health sector can participate in the APHA discounted student membership program.

What is the fee to participate as a school of public health? An eligible school, university or program that offer public health curriculum along with allied professions that work within the public health sector. An eligible school or program can purchase APHA memberships for students at the low price of \$57 per student, which represents a 33% discount from our typical student membership rate.

Note: These are annual fees.

Where does the \$57 rate come from? The \$57 rate represents a 33% discount off of the regular APHA student rate of \$85.

Who is responsible for payment of the membership fees? The college or university is responsible for payment for all its students.

What forms of payment are accepted? Payment may be made from the college or university by check (payable to APHA) or the following credit card options: American Express, Discover, MasterCard and Visa.

Does my educational institution have to provide proof of status to be eligible? Proof of the number of public health students is required.

Once approved, how do I include my students in the APHA membership program? All you need to do is provide us with a list of students and their contact information. We'll give you a form for your school administrator to fill out. Once we have the info, we'll notify students that they're APHA members. **Note:** This is a largely manual process, and it can take up to 4-6 weeks from the time we receive payment and all information requested but we will do our best to get them inputted as quickly as possible.

What benefits does the school, and its students receive? Benefits include:

- One complimentary faculty membership per 100 students enrolled
- Students are automatically enrolled in [APHA's Student Assembly](#).
- Students may participate in two [APHA Sections](#) of their choosing.
- Students may participate in [APHA's Special Primary Interest Groups, Forums and Caucuses](#) of their choosing.
- APHA Annual Meeting student discount
- If their abstract is accepted, students are able to present at the APHA Annual Meeting.
- Discounts on APHA publications
- Public Health CareerMart access and discounts on career services
- Your college or university's logo will be included on [APHA's School-Sponsored Student Memberships](#) page.

Are dues tax deductible? Dues are not tax deductible.

Who do I contact for further information?

For additional information please contact Marsha.Brome-Wimberly@apha.org or 202-777-2426.

APHA School Sponsored Membership Checklist

Welcome to APHA's School Sponsored Student Membership Program! Please provide the following at your earliest convenience:

Number of students to be enrolled (with a minimum of 5 students):

Requested membership start date*:

*Note: This will be contingent on your college or university's information being processed at the beginning or end of the month.

Name of the principle Point of Contact from the college/university (POC):

POC title/position:

POC email address:

POC phone:

If not the POC, who should receive the invoice?

Name:

Email:

Phone:

Complete name of college and/or university and postal mailing address:

Please provide a letter from admissions office (on official letterhead) verifying the number of students to be enrolled.

Please complete the enrollment spreadsheet with student names and applicable contact information (attached). The spreadsheet should be provided to APHA when all shaded columns have been populated with the needed information. **Note:** Please complete only the columns that are shaded and leave others blank. The graduation date must be in the format indicated as month MM/YYYY. Please exclude commas and all other punctuations. Also, if you are renewing students please include them in the appropriate "renew tab" within the spreadsheet. We have a very sensitive database, hence these special instructions.

This is a largely manual process therefore the APHA membership date will be based on when your information is received. Allow for up to 4-6 weeks for processing your college or university's students into the school sponsored program. You will be notified once students have been enrolled and of the start and expiration date. If any students are already enrolled as a member of APHA their membership will be extended one calendar year from their original expiration date.

Please provide square-shaped school logo.

Please provide website URL:

You may request an online APHA Community for your students. It will be your responsibility to have a moderator to maintain this community. A user guide will be provided. The online community is available to the school sponsored members for that specific University/College through APHA. **Please provide the moderators name and contact information below:**

Name:

Title:

Email address:

Phone number:

Special notes:

- Enrollment in this program is annual with a start date agreed upon once students have been downloaded in the APHA database. APHA will make every effort to have enrollment occur within 4-6 weeks of receipt of the spreadsheet and payment.
- It is customary that enrollment take place during the spring and/or fall semester. Any school or program wishing to enroll additional students may do so the following spring and/or fall. No additional students will be eligible for enrollment into the program.
- Schools that pay for 100+ students are eligible to receive one complimentary faculty member per 100 students paid. Example: A school enrolling 190 paid students is eligible to receive one complimentary faculty membership. A school enrolling 240 paid students is eligible to receive two complimentary faculty memberships. The requested faculty contact information must be included at the same time you submit the student spreadsheet. If applicable, please provide faculty contact information below. If you receive more than one complimentary faculty membership please complete the information below for each representative
- No additional discounts are available.

Please list faculty members (based on 1 per 100 paid students) for each complimentary membership.

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2:

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2:

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2:

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2:

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2:

Name:
Title:
Address (if other than listed above):_
Email address:
Phone number:
[Choice of two APHA Section affiliations \(please indicate choices below\):](#)
Section 1:
Section 2: