



**TUSCALOOSA HUMAN RESOURCE PROFESSIONALS**  
**SOCIETY FOR HUMAN RESOURCE MANAGEMENT**

**MEMBERSHIP APPLICATION**  
PLEASE PRINT

Applicant's Full Name Mr. Ms. Mrs. \_\_\_\_\_  
Name Preference \_\_\_\_\_  
Workplace Mailing Address \_\_\_\_\_  
City/State/Zip Code \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_, (\_\_\_\_) \_\_\_\_\_, (\_\_\_\_) \_\_\_\_\_  
E-mail Address \_\_\_\_\_

**MEMBERSHIP**

The organization has six membership categories (*no corporate or institutional membership exists*). Please indicate which membership category you are applying for:

1. \_\_\_\_\_ **PROFESSIONAL MEMBER:** Individuals engaged in human resource management with at least three years experience at the exempt level or certified by the Human Resources Certification Institute. These members may hold office and have voting privileges.
2. \_\_\_\_\_ **GENERAL MEMBER:** Individuals engaged in human resource management at the exempt level but do not meet the requirements for Professional member. General members have voting rights but may not hold office.
3. \_\_\_\_\_ **ASSOCIATE MEMBER:** Individuals in non-exempt, human resource management positions or academic professionals or academic professionals whose primary field of study or responsibility is associated with human resource management and practices. Associate members shall not have voting privileges or hold elected office, but may serve in special committees or functions as provided herein. At no time shall any Associate member use the organization to secure personal advantage or promote any personal business interests.
4. \_\_\_\_\_ **HONORARY MEMBER:** Any person so designated by the Board of Directors.
5. \_\_\_\_\_ **SPECIAL MEMBERS:** Human Resource practitioners who have held a Professional, General, Associate, or Honorary membership who are actively seeking employment in the Human Resources field. Special members have voting rights but may not hold office.
6. \_\_\_\_\_ **CONSULTANTS:** Individuals with at least three years experience in counseling and advising clients on matters relating to the HR profession. Consultant members shall not have voting privileges or hold elected office, but may serve in special committees or functions as provided herein. At no time shall any Consultant member use the organization to secure personal advantage or promote any personal business interests.
7. \_\_\_\_\_ **STUDENT MEMBERS:** Individuals who are actively enrolled in a degree program at the college or university level and are members of the affiliated student chapter. Students who are employed as full-time professionals will not qualify for student membership. Student members shall have no vote, and may not hold office.
8. \_\_\_\_\_ **VENDOR:** Individuals who are not otherwise classified but whose organizations provide goods and services associated with the Human Resource profession. Vendor members shall not have voting privileges or hold elected office, but may serve on special committees or functions as provided herein. At no time shall any Vendor member solicit business during business meetings unless otherwise approved by the board. Vendor members may not sell or provide membership information to any other individual or organization and may not use such information for any kind of mass marketing activity. No more than 15% of membership may be comprised of Vendor members.

**Note: Transfer of employment out of the Human Resources field may revoke membership.**

**Membership dues are:**

- \$150 for a member of SHRM\*\* \*\*I am a member of SHRM\_\_\_\_\_ (Please Initial)
- \$200 for non-members of SHRM SHRM Membership Number: \_\_\_\_\_
- Dues may be waived for Special and Honorary members.
- Any members approved after July 1 of each year will be subject to a pro-rated annual dues amount.

Payment is due after membership is approved by the board for the current year and each subsequent January for the following year. If applying for national membership simultaneously, dues will be charged at the SHRM non-member rate. Upon approval of national membership, present your national membership number to a member of the board of directors and you will be reimbursed for the difference between member and SHRM non-member rate. If THRP is unable to verify your SHRM membership, dues will be charged at the SHRM non-member rate.

**CAREER HISTORY** (Please attach information for clarification)

Total Numbers of Years in HR: \_\_\_\_\_ Accreditation: PHR SPHR CP SCP

**Present Employer:** \_\_\_\_\_ Hire Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Department Size: \_\_\_\_\_  
Month Year

Total # Employees: \_\_\_\_\_ Total # Employees in AL: \_\_\_\_\_ Total Employees in West AL: \_\_\_\_\_

Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Former Employer:** \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_  
Month/Year Month/Year

Position: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

\_\_\_ High School                      \_\_\_ College                      \_\_\_ Bachelor's Degree  
\_\_\_ College Beyond Bachelor's Degree    \_\_\_ Master's Degree                      \_\_\_ Doctorate

In applying for membership in the Tuscaloosa Human Resource Professionals, I recognize and accept the responsibilities incumbent upon me as a member of the Human Resource Profession. I pledge myself to constantly observe, practice, and maintain the ethical practices of the profession and agree to abide by the bylaws, rules, regulations and objectives of the Tuscaloosa Human Resource Professionals.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Any applicant applying for a membership category other than Professional must have a Professional member serve as a sponsor for the applicant.

Sponsor Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

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**For Committee Use Only**

Approval: \_\_\_ Yes \_\_\_ No                      Membership Category Approved: \_\_\_\_\_

Signature of VP Membership: \_\_\_\_\_ Date: \_\_\_\_\_