

## AFFILIATE MEMBERSHIP APPLICATION

**2 YEAR PROGRAM MEMBERS:** 2-year program members are institutions that do not qualify for, or are not seeking, accreditation by NAAB or CACB. Such institutions include North American programs in landscape architecture or other fields related to architecture, and community colleges.

**4 YEAR PROGRAM MEMBERS:** 4-year program members are institutions that do not qualify for, or are not seeking, accreditation by NAAB or CACB. Such institutions include North American programs in landscape architecture or other fields related to architecture, and community colleges.

**INTERNATIONAL PROGRAM MEMBERS:** International members are 2 and 4 year institutions, outside of North America, that do not qualify for, or are not seeking, accreditation by NAAB or CACB. Such institutions include international programs in landscape architecture or other fields related to architecture.

Institution: \_\_\_\_\_

Division / Dept.: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Internet: \_\_\_\_\_

Admin. Head: \_\_\_\_\_ Title: \_\_\_\_\_

## AFFILIATE MEMBERSHIP APPLICATION

### Primary Contact (if different from Admin. Head):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Application Date: \_\_\_\_\_

### Program Information:

Degree(s) or Certificate(s) Awarded: \_\_\_\_\_

Approximate Number of Full-Time Students (for each year of study): \_\_\_\_\_

Number of Full-Time Faculty in Program: \_\_\_\_\_

Admissions Requirements: \_\_\_\_\_

\_\_\_\_\_

Approximate Tuition and Fees: \_\_\_\_\_

Date of Program Inception: \_\_\_\_\_

Brief Program Summary (attach catalog/bulletin or describe below):

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## GENERAL INFORMATION:

Does your school or program have any affiliations with professional schools of architecture?  
 If so, please describe:

Is your school accredited?\*: Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, by what accrediting agency?: \_\_\_\_\_

**The ACSA operates its programs and services on an inclusive basis. Please tell us more about your school and its programs:**

School Demographics (all degree programs):

<b>Full-Time Faculty</b>	<b>Part-Time Faculty</b>	<b>Full-Time Students</b>	<b>Part-Time Students</b>
_____	_____	_____	_____
<b>Foreign Students</b>	<b>Out-of-State US Students</b>	<b>Women Students</b>	<b>Minority Students</b>
_____	_____	_____	_____

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### PLEASE ENCLOSE ANNUAL AFFILIATE MEMBER DUES WITH APPLICATION

Please check one: U.S.D. \$528 2 Year Programs \_\_\_\_\_

U.S.D. \$1200 4 Year Programs \_\_\_\_\_

U.S.D. \$600 International Programs \_\_\_\_\_

**Total Amount Enclosed** \_\_\_\_\_

**Payment must be received in the form of credit card, a check drawn on a bank located in the U.S.A. or Canada, or a wire transfer.**