



APPLICATION FOR MEMBERSHIP

APPRENTICE

Name: _____ Date of Birth: _____

Address: _____ City: _____ St: _____ ZIP: _____

Present Employer: _____ Citizenship: USA Other _____

Address: _____ City: _____ St: _____ ZIP: _____

Phone: Home _____ Work _____ Cell _____

e-Mail: _____

PROFESSIONAL EXPERIENCE

Please describe in descending order, starting with your present position.

From	To	Employer	Title	Job Description

EDUCATIONAL BACKGROUND

School	Location	Course	Degree

I, _____ certify the above information is correct and true.

Signature: _____ Date: _____

Application must be submitted with the following:

- a. Application fee of \$50.00, payable to American Society of Perfumers. Application fee will be refunded if application is not accepted.
- b. A passport size photo of applicant.
- c. A biography of applicant, detailing accomplishments, training, schooling, interests, etc.
- d. A paragraph describing the reasons the applicant wants to become a member, and what he or she would like to accomplish with the Society if accepted.
- e. A completed Active Member Endorsement or Sponsor (for Apprentices) Form.

Note: Applications are voted on by the Membership once a year, in June. Deadline for applications is May 1st. Only completed applications, received with all requirements will be considered. Applications will be verified by the Membership Committee, and recommendations will be made to the Board of Directors.



SPONSORSHIP Endorsement

APPRENTICE

All applicants must secure one sponsor. The sponsor must be a full, active member of the American Society of Perfumers, in good standing for at least five years. The applicant must be working full time under the tutelage of his sponsor, and be 100% engaged in perfumer work.

SPONSOR STATEMENT

<i>Name</i>	<i>Title</i>	<i>Company</i>
<i>Company address</i>	<i>Phone number</i>	<i>E-mail address</i>

I certify that the applicant, _____, is under my direct supervision and is engaged in full time perfumery work. In my opinion, this applicant has exhibited the talent and ability necessary to complete an apprenticeship program and become a Perfumer.

Signature: _____ Date: _____ - _____ - _____

Member since: _____ - _____ - _____

Membership Committee use only:

Checked by _____ Date: _____ - _____ - _____

Comments: _____

