

## **Syracuse University APICS Student Chapter**

The Syracuse University APICS Student Chapter is focused on learning about Operations Management within industry. The chapter has an organizational meeting at the beginning of each semester in addition to two company visits and a prep class for the first APICS certification exam. Contact Professor Pat Penfield ([pcpenfie@syr.edu](mailto:pcpenfie@syr.edu)) or Professor Fred Easton ([ffeaston@syr.edu](mailto:ffeaston@syr.edu)) for more information.

### **Five steps to become a member of the Syracuse University APICS Student Chapter**

1. Fill out the student membership application (see the following page). You will also need to print a copy of your current class schedule (Make sure page setup is landscape) and your SUID card.
2. Turn in your application along with a check for \$25 or fill in credit card information (APICS annual membership fee) to Shannon Hiemstra in Suite 111C.
3. Expect to receive your APICS membership materials within 4-6 weeks after you have submitted your application. If you need to find out your membership number sooner (you may need it to take a certification exam) please contact APICS Customer Service at (800) 444-2742 (APICS)
4. After submitting your application to Shannon you will receive an email from Professor Fred Easton notifying you that you have been added to chapter Blackboard site.
5. Enjoy the benefits of SU APICS membership and get involved in chapter activities.

# Student Membership Application

Today's date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please complete all sections. Please print or type.

## 1. Member Information

Are you a former APICS member and/or have we assigned you an ID number?  Yes  No

MEMBER ID NUMBER \_\_\_\_\_

Please print your legal name and address as they should appear on a mailing label.

- Mr.       Mrs.       Ms.       Miss  
 CPIM       CFPIM       CIRIM       CSCIP

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_

The following information is requested for identification purposes only.  Female  Male

DATE OF BIRTH (OPTIONAL) \_\_\_\_\_ LAST FOUR DIGITS OF YOUR SOCIAL SECURITY NUMBER (OPTIONAL) \_\_\_\_\_

Please check your preferred mailing address.  School housing  Home

### School Housing (Temporary)

NAME OF SCHOOL (REQUIRED) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP + 4/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ BUSINESS FAX \_\_\_\_\_

SCHOOL PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

Expected Graduation Date: Month \_\_\_\_\_ Year \_\_\_\_\_

### Home (Permanent)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP + 4/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

HOME PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

Please do not include my name on any rented or traded APICS mail lists. Telemarketing use of mail lists by sources other than APICS is strictly prohibited.

What is your current academic concentration? (Check all that apply.)

- a. Accounting/Finance       e. Management       h. Integrated Supply Mgmt  
 b. Business Administration       f. Materials Mgmt  
 c. Engineering       g. Marketing       i. Information Systems  
 d. Production/Operations Mgmt

What is your current degree objective? (Check one only.)

- a. AA       c. MA/MS       e. Doctorate  
 b. BA/BS       d. MBA       f. Other

Why are you joining APICS? (Check all that apply.)

- a. Networking       d. Recommended by professor/fellow student       g. APICS publications/magazine  
 b. Career enhancement/professional development       e. Certification       z. Other  
 c. Education       f. Leadership opportunities

Membership Involvement (Check all that apply.)

Please indicate the chapter activity in which you would like to participate.

- a. Education       d. Membership       g. Treasurer  
 b. Publicity       e. Employment       h. Secretary  
 c. Programs       f. Seminars       i. Newsletter

## 2. Annual Dues

Student Membership Dues \$25.00

### Student Chapter Affiliation

I wish to be affiliated with the S137 Chapter.  
List the student chapter code above per the chapter locator on the following page.

TOTAL = \$25.00\*

### 2c. Payment (in U.S. dollars only)

Check enclosed for \$ \_\_\_\_\_  
(Checks must be payable to APICS and drawn on a U.S. bank.)

Charge to:  MasterCard  VISA  American Express  Discover

ACCOUNT NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_

SIGNATURE \_\_\_\_\_

\* A discounted \$13 subscription to APICS magazine is included in your dues and cannot be deducted from your dues amount.

APICS student membership offers full-time students significantly reduced membership dues while they pursue a degree, at an accredited college or university – undergraduate or graduate. Regardless of the number of credit hours taken, a person is not eligible for APICS Student Membership if gainfully employed on a full-time basis.

**REQUIRED:** This application will not be processed unless individuals renewing or applying for student membership complete and submit the following documentation:

• University/College Name (please no abbreviations):

Syracuse University

• Expected Date of Graduation: \_\_\_\_\_

• Attach a copy or fax of current student ID card.

• Attach a copy or fax of a current class schedule/curriculum provided by the registrar with name of the institution, name of student, and date including the year.

### APICS USE ONLY (DO NOT WRITE IN THIS SPACE)

Batch # \_\_\_\_\_

Check # \_\_\_\_\_ Check Amount \$ \_\_\_\_\_

Dues Amount \$ \_\_\_\_\_

Return to: APICS, Membership Dues, P.O. Box 75381 Baltimore, MD 21275



CELEBRATING 50

Campaign Code: 7BMB4D