



**The National Association of
Negro Business and Professional Women's Clubs Inc.**

1806 New Hampshire Ave. NW ♦ Washington, DC 20009-3206 ♦ 202-483-4206 ♦ 202-462-7253 (fax)
E-mail: nanbpwc@aol.com ♦ Website: <http://www.nanbpwc.org>

Please type or print
OMBUDSMEN MEMBERSHIP APPLICATION

Club Name:			District:		Date:	
Name:	Last:	First:	Middle:		Suffix:	
Home Address:			City:		State:	Zip Code:
Telephone:	This is: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell		E-Mail Address:			
<i>Work Background, Education, and Organizational Affiliations is not required for Ombudsmen membership by providing this information will assist the Association in identify skills and experience that can be supportive of our mission.</i>						

Work Background:

Name of Employer/Business:			Telephone:	
Work Address:		City:	State:	Zip:
Occupation:		Title:		
Certifications:				
Have you ever been a member of NANBPWC, Inc.?		<input type="checkbox"/> No <input type="checkbox"/> Yes		Dates:
Brief Job Description (List Supervisory/Administrative Skills):				

Education:

College(s)	Name:	City, State:	Degree/Major:	Date:
	Name:	City, State:	Degree/Major:	Date:
Other Schools	Name:	City, State:	Degree/Certification:	Date:
High School	Name:	City, State:	Diploma: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date:

Organizational Affiliations:

Name:	City:	Office Held:
Name:	City:	Office Held:
Name:	City:	Office Held:
List special skills or interests:		
Sponsor	Name of Club	

Signatures:

Applicant:		Date
Acceptance:	Local President/Membership Chair	Date
Approval:	Governor/Vice Governor:	Date
Authorization:	National Director of Membership:	Date

Club Instructions: After receiving signature of National Director of Membership, submit original application package, New Member Roster, Adult Department Dues Transmittal, and Check for New Member Joining fees to National Office.

Office Use:	Dues Received:	Date	Amount	\$
	Posted to Database:		Welcome Letter Sent:	