



Phi Delta Kappa International
 408 N. Union, P.O. Box 789
 Bloomington, IN 47402-0789
 Phone 800-766-1156 or
 812-339-1156
 Fax 812-339-0018
 www.pdkintl.org
 membership@pdkintl.org

PHI DELTA KAPPA INTERNATIONAL PROFESSIONAL MEMBERSHIP APPLICATION

Why a membership in PDK? Review the benefits; you'll be convinced of the value of this global organization of quality educators.

Because we are your quality source for research. Meeting your need for the latest in research, theory, and practice, PDK brings you the *Phi Delta Kappan* (in paper copy, audio, or electronic version), the most referenced educational journal.

Because we provide connection. You can share experiences with other educators through local chapter networks (optional); regionally and globally, we provide forums for gathering national leaders at the annual summit and at workshops.

Because security in all areas is key to success. There is peace of mind in taking care of the basics; we can help with that. You can benefit from group rates on professional liability, health, life, and auto insurance plans.

Because our website hosts a comprehensive searchable archives database available 24 hours a day. With a PDK membership, you have access to a broad publication archive AND 38 years of results from the Annual PDK/Gallup Polls of the Public's Attitudes

Toward the Public Schools. Why pay a fee to download one article at a time?

Because everyone wants to save money. Our scholarships and fellowships could be an economic benefit you've not considered, and don't forget the considerable discounts on publications, professional development registration costs, and even international travel.

Because professional enhancement is essential to your career. We want to help highlight your excellence in education. PDK service awards and opportunities for volunteer leadership will enhance your record of good works and accomplishments.

Because educators need practical resources. PDK's quick-read e-bulletins offer classroom tips, summaries for informed administrators, and the latest information for the education practitioner—most are available for redistribution without copyright infringement. Take them, use them, love them.

Professional membership is available to persons who demonstrate professional conduct and who hold a baccalaureate degree, are licensed or credentialed as educators, are employed in an education-related field, or are undergraduate education majors who are participating in or have completed student teaching. The purpose of Phi Delta Kappa International is to promote quality education, in particular publicly supported education, as essential to the development and maintenance of a democratic way of life. Completing this application indicates your support of this purpose.

(Please print clearly)

NAME _____		
(Last)	(First)	(Middle)
PREFERRED FIRST NAME _____		PREFERRED E-MAIL ADDRESS _____
HOME ADDRESS _____		WORK ADDRESS _____
STREET / P.O. BOX _____		EMPLOYER (no acronyms please) _____
CITY _____		STREET / P.O. BOX _____
STATE/PROVINCE _____	ZIP/POSTAL CODE _____	CITY _____ STATE/PROVINCE _____ ZIP/POSTAL CODE _____
HOME PHONE _____		WORK PHONE _____

ABOUT YOU

Date of Birth _____ Male Female Student Teacher BS/BA MS/MA Doctorate
(mo/day/yr)

Current Position (check one)

TEACHER

- 10 ___ preschool
- 11 ___ elementary
- 12 ___ middle/junior high school
- 13 ___ high school
- 14 ___ junior/community college
- 15 ___ vocational/technical school
- 16 ___ college/university
- 3H ___ student teacher

ADMINISTRATOR

- 20 ___ preschool
- 21 ___ elementary
- 22 ___ middle/junior high school
- 23 ___ high school
- 27 ___ assistant superintendent/system
- 28 ___ superintendent/system
- 24 ___ junior/community college
- 25 ___ vocational/technical school
- 26 ___ college/university

OTHER

- 31 ___ school psychologist
- 37 ___ library/media specialist
- 39 ___ counselor
- 30 ___ graduate student
- 3A ___ educational consultant
- 3B ___ professional staff
- 3C ___ business/industry
- 3D ___ retired
- 3E ___ other (please specify) _____

REFERRAL INFORMATION (optional)

Please enter the name and ID number of the member who referred you to Phi Delta Kappa.

Member Name (please print) _____ Member ID number [] [] [] [] [] [] [] [] [] []

