



National Alliance of

Concurrent Enrollment Partnerships

Advancing quality college courses in high school

2014 Membership Application

Institution Name: _____
Program Name: _____
Program Website: _____
Primary Contact: _____ Title: _____
Address: _____
City: _____ State: ___ Zip: _____ Phone: _____
E-Mail: _____

Categories of New Membership (Please select a category)

- ___ **Post-Secondary Institution (\$450):** Any public or private post-secondary institution that supports the mission of NACEP and concurrent enrollment.
- ___ **Partner (\$125):** Any secondary institution, government/state agency or professional organization that supports the mission of NACEP and concurrent enrollment.
- ___ **Individual (\$50):** Any individual not affiliated with a post-secondary or partner institution who supports the mission of NACEP and concurrent enrollment. If you are affiliated with a post-secondary or partner institution please apply under the appropriate category.
- ___ **Emeritus (No Fee):** Upon outstanding professional service and/or retirement, a person who has been an active member of the Alliance for five (5) consecutive years may be recommended for and/or request Emeritus membership status. Emeritus status is approved by the Board.

All members are encouraged to participate on committees and work in support of the NACEP standards and mission. All memberships include reduced conference fees, access to member resources, access to the NACEP discussion listserv and password-protected sections of the NACEP website, and a NACEP membership certificate.

Please make checks payable to **NACEP, Inc.** and **mail with a copy of this application to:**

National Alliance of Concurrent Enrollment Partnerships
PO Box 578
Chapel Hill, NC 27514

To pay by credit card please contact Tanesha Langhorne at taneshal@nacep.org or 919-593-5205

NACEP is a 501(c)(3) Corporation: TIN# 16-1609101

For more information visit www.nacep.org