



**Application for Student Membership**

Student Fee: \$60

Date \_\_\_\_\_

Name: \_\_\_\_\_  
*First Middle Last*

Billing Address/Address: \_\_\_\_\_

\_\_\_\_\_ *City State Zip*

Daytime Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Education/Training

Current year in study/training? \_\_\_\_\_

What is your major area of study? Anticipated year of graduation? \_\_\_\_\_

Educational Institution \_\_\_\_\_

Address (C/S/Z): \_\_\_\_\_

Please list previous education:

<u>INSTITUTION</u>	<u>DATES ATTENDED</u>	<u>DEGREE EARNED</u>
_____	_____	_____
_____	_____	_____

List those courses you have taken that have some orientation to vocational/occupational content:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any current or previous job duties that relate in some way to providing vocational/occupational information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your occupational plan?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Statement of Student Status:**

*In applying for acceptance at Student status with the American Board of Vocational Experts, I understand that this is a **membership category** only and acceptance in this category does not constitute certification as a vocational expert and does not make acceptance as a member eligible for certification. I understand this difference between membership and certification. I am aware that if accepted for membership status, I will not state nor imply that my membership with ABVE in any way constitutes certification as a vocational expert.*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please print:** \_\_\_\_\_

*Given my understanding of membership status, I wish to proceed with my application in the category of membership as identified on page 1 of this document.*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Application Checklist:**

- \_\_\_\_\_ Complete Application
- \_\_\_\_\_ Documentation of current enrollment from college
- \_\_\_\_\_ Application fee/payment

**Payment:**

Check#: \_\_\_\_\_

-OR-

Credit Card: VISA/MasterCard/AMEX (Circle One): \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CV Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Please return with payment to: **American Board of Vocational Experts**  
**Student Application Processing**  
**3121 Park Ave., Ste C.**  
**Soquel, CA 95073**  
**Phone: (831) 464-4890 | Fax: (831) 576-1417**  
**Email: [abve@abve.net](mailto:abve@abve.net)**

**\*Please enclose documentation of current enrollment in college.**