



Application for Student Membership

We're delighted that you are joining or renewing your connection to SCUP. We are a community of professionals dedicated to advancing integrated planning in higher education. Please take a moment to complete this application form. Completing the entire application will help us to serve student members better.

Today's Date: _____

Joining SCUP for the first time

Renewing my SCUP membership. SCUP ID: _____

NOTE: Student memberships are limited to four consecutive years. See qualifying criteria in Part 1. If you are beginning your fifth year of membership, then you need to select an individual or group membership.

1 QUALIFYING FOR THE STUDENT MEMBERSHIP RATE

This membership requires approval by the Director of Member Relations. It can only be processed by email or fax. Send the completed student application form and proof of enrollment to:

Email (fill in the application, save, and attach in an email to):

membership@scup.org

Fax:

Member Relations

734.527.6069

To qualify for a student membership, you must provide SCUP with proof of enrollment or a letter from your faculty advisor confirming work on a master's thesis or doctoral dissertation. Documentation must be provided at time of application and with each subsequent renewal.

Student memberships are limited to four consecutive years total. After completion of the fourth year, the individual must choose an individual or group membership.

Questions? Contact SCUP Member Relations at 734.764.2016 or membership@scup.org.

Student Membership Benefits:

- All members are assigned to one of five geographic regions: Mid-Atlantic, North Atlantic, North Central, Pacific, or Southern.
- Student members may register for SCUP events at a student rate, if one is offered. Student members receive a member rate for all other SCUP products.
- Student members will be provided access to all areas of the SCUP website, including the member-only sections.

2 YOUR CONTACT INFORMATION

Please print or type.

Prefix (Mr, Mrs, Ms*): _____ First Name: _____ Middle Initial: _____

Last Name: _____ SCUP ID (if known): _____

I am employed:

Full-Time Part-Time

If you are employed, please complete the fields below. Your official job title and organization name should not be abbreviated. Please use the version of your organizational name that appears in press releases or the *Higher Education Directory*[®].

Official Job Title (no abbreviation): _____

Department/Office/School (no abbreviation): _____

Organization (no abbreviation): _____

Address (street address—no PO Box): _____

Address (continued): _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone (country code, if applicable): _____

Fax: _____ Email: _____

Organization's Website: _____

** In the spirit of equality, SCUP has chosen not to use "Dr" as a prefix.*

3 YOUR EDUCATIONAL ASPIRATIONS

Faculty Advisor's Name: _____

Faculty Advisor's Official Job Title (no abbreviation): _____

Institution Name (no abbreviation): _____

Department/School (no abbreviation): _____

City: _____ State/Province: _____

I am pursuing the following degree:

Doctorate Bachelor's Other: _____
 Master's Associate's

Enrollment status:

Full-Time Part-Time

Anticipated graduation date: _____

What is your major/course of study? _____

4 TELL US ABOUT YOURSELF

Please help us to understand and serve our student members better. The information gathered below will be used to provide you with personalized information about SCUP benefits and events and will be analyzed only in aggregate.

A. Please share your reasons for joining SCUP: _____

B. If you are employed, what types of planning do you do in your current position, if any? (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Faculty member (research, teaching) | <input type="checkbox"/> Financial planning (budget/fiscal) | <input type="checkbox"/> Residential life planning |
| <input type="checkbox"/> Academic planning | <input type="checkbox"/> Institutional research | <input type="checkbox"/> Space management planning |
| <input type="checkbox"/> Campus/master planning | <input type="checkbox"/> IT or technology planning | <input type="checkbox"/> Strategic planning |
| <input type="checkbox"/> Capital planning | <input type="checkbox"/> Learning spaces planning | <input type="checkbox"/> Student housing planning |
| <input type="checkbox"/> Community relations (town/gown) | <input type="checkbox"/> Open spaces/landscape planning | <input type="checkbox"/> Student services planning |
| <input type="checkbox"/> Emergency planning | <input type="checkbox"/> Parking/transportation planning | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Enrollment management | <input type="checkbox"/> Policy & governance | <input type="checkbox"/> I do not do planning in my current position. |
| <input type="checkbox"/> Facility planning | <input type="checkbox"/> Recreational facilities planning | |

C. From the list above, please tell us the ONE planning responsibility that most occupies your time:

(The answers to items D–E and I–K below will not be published.)

D. Birth year: _____

E. Gender:

- Male Female

F. Highest educational degree attained:

- | | | |
|--------------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Associate's | <input type="checkbox"/> Master's | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Bachelor's | <input type="checkbox"/> Doctorate | |

G. In what discipline is your highest degree?

- | | | |
|---|--|---|
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Higher education administration | <input type="checkbox"/> Urban design or planning |
| <input type="checkbox"/> Business | <input type="checkbox"/> Landscape architecture | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Education administration | <input type="checkbox"/> Public administration | |

H. What certifications or licenses requiring continuing education do you presently hold?

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Architect's license | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Certified Public Accountant (CPA) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> American Institute of Certified Planners (AICP) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Landscape architect's license | <input type="checkbox"/> Other: _____ |

I. Please indicate the certifying body(ies) for these continuing education units:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> American Institute of Architects (AIA) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> American Institute of Certified Planners (AICP) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> American Society of Landscape Architects (ASLA) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> National Association of State Boards of Accountancy (NASBA) | |

J. What other associations do you belong to? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> American Educational Research Association (AERA) | <input type="checkbox"/> Association of University Architects (AUA) |
| <input type="checkbox"/> American Institute of Architects (AIA) | <input type="checkbox"/> APPA: Leadership in Educational Facilities (APPA) |
| <input type="checkbox"/> American Planning Association (APA) | <input type="checkbox"/> EDUCAUSE |
| <input type="checkbox"/> American Society of Landscape Architects (ASLA) | <input type="checkbox"/> National Association of College and University Business Officers (NACUBO) |
| <input type="checkbox"/> Association for the Advancement of Sustainability in Higher Education (AASHE) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Association for Institutional Research (AIR) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Association for the Study of Higher Education (ASHE) | <input type="checkbox"/> Other: _____ |

K. Salary range (in US dollars):

- Below \$30,000
- \$30,000–\$49,999
- \$50,000–\$74,999
- \$75,000–\$99,999
- \$100,000–\$124,999
- \$125,000–\$149,999
- \$150,000 and above

5 TELL US ABOUT YOUR EMPLOYER

If you are not currently employed, please skip to Part 6.

A. I work for a: (Choose one)

- Higher education institution
- Federal government agency
- Accrediting agency
- Governing board
- State government agency
- Foundation
- Systems office
- Local government agency
- Non-profit organization
- Not-for-profit organization
- For-profit business

B. If you work for a college or university, please answer this question:

Degree-granting status: (Check all that apply)

- Doctoral
 - Master’s
 - Baccalaureate
 - Associate’s
 - Minority-serving (e.g., HBCU, HSI, Tribal College)
 - Special focus (e.g., seminary, military, technical)
 - Faith-based or religiously affiliated
 - Other: _____
- Public
 - Private

C. If you work for a for-profit business, please answer this question:

What services does your firm provide? (Check all that apply)

- Academics
- Acoustics
- Architecture
- Construction
- Engineering
- Environmental
- Estimating/costing
- Facilities management
- Food service
- Furnishings
- Housing
- Interiors
- Laboratories/health care
- Landscape architecture
- Life safety
- Lighting
- Master planning
- Media
- Parking/transportation
- Parks/recreation
- Performing arts
- Planning
- Scheduling/classroom design
- Site furnishings
- Space management
- Sports/athletics
- Strategic consulting
- Technology/information management
- Wayfinding/signage/graphics
- Other: _____

6 MISCELLANEOUS INFORMATION

A. How did you hear about SCUP? (Choose one)

- Advertisement
- Annual, international conference
- Book
- Booth
- Colleague
- Membership brochure
- Planning for Higher Education* journal
- Postcard
- Regional conference/event
- SCUP Alert
- SCUP Award
- SCUP Email News*
- SCUP Member News*
- SCUP Planning Institute
- SCUP website
- Trends in Higher Education*
- Webcast
- Workshop
- Other: _____

B. I have read the SCUP Culture Statement and Guidelines found at www.scup.org/page/membership/culture:

- Yes
- No

7 PAYMENT INFORMATION (FEIN 38-6147432)

Student Membership (\$50 USD)

Total Amount Remitted in USD: \$ _____

Credit card payments are required for international student members.

Please choose a payment method:

1 Credit Card

MasterCard Visa American Express

Card Number: _____

CSC (Card Security Code): _____

(The CSC is the 3- or 4-digit code located on the back of MasterCard or Visa cards, and on the front of American Express cards.)

Card Expiration Date: _____

Name on Card *(Please print)*: _____

Signature: _____

(If filling in form on screen, omit signature.)

2 Check

[Check enclosed; make payable to SCUP. Funds must be in US dollars and drawn on a US bank.]

You may fill in this application form on screen, save it, and email it to Member Services at membership@scup.org.
Or, print the form, fill it in, and fax it to 734.527.6069.

THANK YOU FOR JOINING SCUP!

Your membership will become active upon receipt and processing of payment.

Please allow SCUP five business days to complete the application process.

Visit the My SCUP area of the website to update your contact and demographic information, access member-only benefits, and set your communication preferences.

In an effort to be more sustainable, SCUP's primary vehicle for communications is through email; please add communications@scup.org to your address book to ensure you receive updates and other important information from us.

Thank you again for becoming part of the community of higher education planners from across campus and around the world!



Society for College and University Planning

INTEGRATED PLANNING FOR HIGHER EDUCATION

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734.764.2000 | www.scup.org