



MEMBERSHIP APPLICATION

Year 2017 (1 July 2017- 30 June 2018)

President / Rector Information

Last Name.....	First Name.....	Prefix.....
Title (Position).....	From.....	To.....
Address.....	City.....	
State/ Province.....	ZIP Code.....	Country.....
Email.....	Phone.....	Fax.....

Secondary Institutional Contact

Last Name.....	First Name.....	Prefix.....
Title (Position).....	From.....	To.....
Address.....	City.....	
State/Province.....	ZIP Code.....	Country.....
Email.....		

Institutional Information

Name of Institution.....	Year Founded.....				
Address.....	City.....				
State/ Province	ZIP Code.....	Country.....			
Email.....	Phone.....	Fax.....			
Website (URL).....					
Student Enrollment Under	<input type="radio"/> 5,000	<input type="radio"/> 5,000 - 10,000	<input type="radio"/> 10,000 - 15,000	<input type="radio"/> 15,000 - 25,000	<input type="radio"/> Over 25,000
Courses	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> PhD/Doctorate	<input type="checkbox"/> Research activities	

Institutional Accreditation

Accredited? Yes In-Process No Name of Accrediting Body

Address City.....

State/Province ZIP Code Country.....

Information update form can be forwarded to the AUAP Secretariat via email:
auapheadquarter1995@gmail.com

Type of Membership

- **Regular membership** is open to the chief executive officers of accredited and recognized universities.
- **Associate Membership** is reserved for Non Education Sectors or their equivalent.

Fee (USD)

AUAP Membership Fee (1 Year) : \$ 800

AUAP Membership Fee (3) Years 2017-2019 : \$ 2,000

Note: Please pay a full membership fee excluding bank charges, in order to have full membership receipt.

** Membership fees are valid from July 1st – June 30th of the payment period.*

Method of Payment

By filling out this section, you are authorizing payment to AUAP for the corresponding membership fees.

Method **Bank Wire Transfer**

WIRE TRANSFERS

To ensure efficient processing of wire transfers, please forward a copy of this application form along with a copy of the bank transfer document to Professor Dr. Ricardo P. Pama, Secretary General, AUAP Secretariat, at auapheadquarter1995@gmail.com. Please make sure the member's name and institution appear on the copy of the bank transfer, to ensure that you are properly credited.

Beneficiary:	SUT-AUAP Petty Cash
Beneficiary Bank :	Siam Commercial Bank Public Company Limited
Address:	Suranaree University of Technology Academic Building 2, Room C2-227 111 University Avenue, Suranaree Sub District Muang, Nakhon Ratchasima Province 30000 Thailand
Beneficiary A/C No:	707-2202054
Swift code:	SICOTHBK