



## Individual Doctoral Student Application

Prefix	<hr/>
First Name	<hr/>
Last Name	<hr/>
Honorific	<hr/>
Address	<hr/>
Apartment #	<hr/>
City	<hr/>
State	<hr/>
Zip Code	<hr/>
Email address	<hr/>
Phone Number	<hr/>
University	<hr/>
Program Director Name	<hr/>
Program Director Email address	<hr/>
Program Start Date	<hr/>
Expected Graduation Date	<hr/>

## **Doctoral Student Membership Information**

### **To join**

Email the completed application to [aupha@aupha.org](mailto:aupha@aupha.org). AUPHA will contact your program to verify your status. Once your status is verified, AUPHA will send you an invoice via email for the membership dues.

### **Eligibility\***

Individual Doctoral Student membership is available to any student pursuing a doctoral degree in Health Administration Education.

### **Member dues**

The [dues](#) for the three-year Doctoral Student membership are the same as dues for the regular one-year AUPHA Individual membership.

### **Term of Membership**

The Doctoral Student membership is a three-year, non-renewable membership. At the end of the three-year term, you will receive an invoice for a regular, one-year AUPHA membership. If at any time you become a faculty member of an AUPHA member program, contact AUPHA and you can receive membership benefits through the program membership.

\*Doctoral Student Program Membership – If your Doctoral program is a [member of AUPHA](#), you are eligible to join AUPHA through the program membership, at no cost to yourself.

### **Questions?**

Contact Chris Anne Sanyer, Director of Membership, if you have any questions about Individual Doctoral Student membership or Doctoral Student Program membership.

Chris Anne Sanyer  
Director of Membership  
[csanyer@aupha.org](mailto:csanyer@aupha.org)

