

**APPLICATION FOR AFFILIATION
NATIONAL ASSOCIATION FOR PROFESSIONAL DEVELOPMENT SCHOOLS**

NAME OF AFFILIATE:

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ADDRESS OF AFFILIATE

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REGION, CITY or STATE AFFILIATE IS DRAWING MEMBERS FROM

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NUMBER OF MEMBERS (attach a roster of members)

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	CONTACT #1	CONTACT #2	CONTACT #3
NAME			
MAILING ADDRESS			
EMAIL ADDRESS			
PHONE #			
FAX #			

Description of Affiliate (Each prompt should be addressed and provided as an attachment)

1. **Organizational Structure:**
 - a. **Is the affiliate a formerly incorporated organization (Ex: 501(c)3 corporation)?**
If so, please describe and provide the legal name. If the group is ad hoc, please provide a description of how you are organized and if a university is sponsoring you.
 - b. **Provide a list of officers and their contact information**
2. **Provide the organization's mission and vision statement**
3. **Provide a copy of the Bylaws**
4. **Describe how you will assure a balance between P-12 and higher education members**
5. **Provide a schedule of affiliate meetings including potential state/regional conferences**
6. **Provide your website address (if applicable)**
7. **Provide a brief rationale for becoming an NAPDS affiliate (perceived need, effect on the local area, effect on members, etc.)**