## **MEMBERSHIP APPLICATION FORM**

## The Polish Institute of Arts & Sciences of America, Inc. Polski Instytut Naukowy w Ameryce 208 E 30th Street, New York, NY 10016

Last Name, First Name:			
Place of Birth:	Date of Birth:	Citizen of:	
Education: (Earned degree	e: date, University (College) of	each degree, Discipline of highest degree)	
Honorary Degrees/Award	s/Professional Achievements:		
Areas of Competence:			
Specialty within areas of c	ompetence:		
Fields of work or research			
Publications (if applicable	). Please indicate only the key p	publications and the list others on a separate	sheet.
Employment:			
Academic rank or non-aca	demic position:		
Name and address of empl	loyer:		
Professional references: (I	nclude address) 1.		
2.			
Membership in other acad	demic/professional organizations	s:	
Phone: -		Email:	

(Please attach printed resume or vita.)

**PIASA Annual Dues:** 

Regular or Sustaining Member: \$85; Joint with Spouse: \$105; Student: \$55; Retired: \$60;

Supporting: \$100; Donor Member: \$500; Patron Member: \$1,000; Benefactor: \$5,000

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