

THE AUSTRALIAN ASSOCIATION OF TEACHERS OF KOREAN (AUATK) MEMBERSHIP APPLICATION FORM FOR 2017

PERSONAL INFORMATION

Title (Miss, Ms, Mrs, Mr, Dr, Prof, etc.):

First Name:

Last Name:

Korean Name (in Hangeul if you have one):

Postal Address:

Number & Street Name:

Suburb/City:

State:

Post Code:

Home Phone:

Mobile Phone:

Personal Email:

JOB INFORMATION

Name of School/University (Circle one) where you teach/research/study (Circle one):

Address of School/University:

Teachers/Researchers: How long have you taught/researched Korean language?
_____ years _____ months

Students: Which program are you in?
Bachelor, Master, Doctoral Program (Circle one) in the field of _____

Suburb/City:

State & Post Code:

Work Phone:

Work Email:

Position (as a teaching or research staff)

MEMBERSHIP OF OTHER ASSOCIATIONS/SOCIETIES

Name of Association/Society:

How long? _____ years since

Name of Association/Society:

How long? _____ years since

MEMBERSHIP FEE PAYMENT & SIGNATURE

- I authorise the verification of the information provided in this form and I would like to join the Australian Association of Teachers of Korean (AUATK) as a **Regular/Associate/Institutional (Circle one) member for the year of 2017.**
- Payment for the annual membership fee of **(\$40/\$20) (Circle one)** is to be made via direct deposit to the following account:
****PLEASE USE YOUR INITIAL OF FIRST NAME AND FULL LAST NAME AS REFERENCE****

BSB Number: 062-284

Account Number: 1069 0631

Account Name: The Australian Association of Teachers of Korean

Signature of applicant:

Date (date/month/year):

Print your name:

(Official Use Only):