



APPLICATION FOR MEMBERSHIP

(Please type or print clearly)

Name: _____

Office Address: _____ Home Address: _____

Office Phone: _____ Home Phone: _____

Fax: _____ Preferred Mailing Address: Office Home

E-Mail: _____ Preferred Communication: Mail E-Mail Fax

Date of Birth: _____ Sex: Male Female

Medical School Graduation Year: _____ Degree Received: _____

Residency Institution: _____

Residency Completion Date (if not completed, please provide anticipated completion date): _____

Fellowship: _____

Fellowship Completion Date (if not completed, please provide anticipated completion date): _____

Primary Specialty: Dermatology Dermatologic Surgery Dermatopathology Other

Board Eligible: Yes No Plan to take Board Examination in: _____

Date of Certification: _____ Practice Start Date: _____

State Licensure(s): _____ Year(s): _____

Membership Classification (see reverse side for eligibility requirements)

Fellow (Dues - \$250)

Early Career Physician (Dues – \$75 Year 1; \$125 Year 2; \$200 Year 3)

When will you complete your third year of practice? _____

Resident Fellow (Note Exceptions: dues are free and a sponsor is not required)

Sponsor - Required (Must be a current active member of PAD)

1. _____

Name (print)

Signature

Do not send payment for membership dues with this application. You will be billed upon enrollment. Applications are acted upon by the Membership Committee of the Academy. Applicants will be notified of their application status within 30 days following the Committee's decision. Dues are payable within 60 days after billing.

Applicant's Signature _____ Date _____

Please mail completed form and curriculum vitae to:
 Pennsylvania Academy of Dermatology and Dermatologic Surgery
 777 East Park Drive, PO Box 8820
 Harrisburg, PA 17105-8820
 Questions? Call 866-650-3376.

Fellow:

Fellows must be Board eligible or Board Certified Dermatologists, having the degree of M.D. or D.O., meeting the criteria of the American Board of Dermatology or the American Board of Osteopathic Dermatology. Fellows shall hold full voting privileges.

Early Career Physician:

The Early Career Physician is a subcategory under the Fellow membership class. Any physician who meets the Fellow membership requirements above and is in the first three years of medical practice shall be designated as an Early Career Physician and shall hold full voting privileges.

Resident Fellow:

Resident Fellows must be active full time in a dermatology residency or fellowship approved by the American Board of Dermatology or the American Board of Osteopathic Dermatology. Resident Fellows shall have no voting privileges.