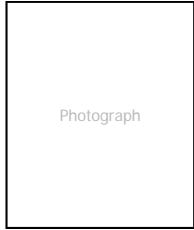


# ACADEMIC membership Application



## STEP 1: Member Information

(Please print or type)

Please print your legal name and address as they should appear on a mailing label.

Dr.  Mr.  Mrs.  Ms.  Miss

First Name	Middle Name	Last Name	
Job Title	College/University/Institution Name		
Business Address			
City	State / Province	Zip / Postal Code	Country
Business Phone	Business E-mail		
Home Address			
City	State / Province	Zip / Postal Code	Country
Home Phone	Home E-mail		

Please check your preferred mailing address.  Work  Home

The following information is requested for identification purposes only.

Male  Female \_\_\_\_\_  
Date of Birth Nationality  CNIC Number /  Passport Number

Who referred you to SCAP membership? (Leave blank if not applicable)

Referring Member's Name Referring Member SCAP ID Number

## STEP 2: Membership Fees

### Annual Fee

Application will be processed upon full payment.

(a) Academic Membership fee Rs. 2,500.00

(b) I wish to join SCAP for  1 year  2 years  3 years  Other

Total Fees = Rs. \_\_\_\_\_ (a) x No. Years (b) \_\_\_\_\_ = TOTAL Rs. \_\_\_\_\_

Payment Pak rupees only. For out of Karachi cheques, add Rs. 100/- as processing charges

Demand Draft  Cheque Cheque # \_\_\_\_\_ Cheque Amount Rs. \_\_\_\_\_

Cheques must be payable to Supply Chain Association of Pakistan and drawn on a PK Bank

See reverse side for  
Eligibility Criteria and  
Undertaking.

**Eligibility Criteria for SCAP Academic Membership**

To be eligible for academic membership, individuals must be employed full-time by one or more accredited academic institutions in one of the following capacities:

- ◆ Professor
- ◆ Assistant/Associate Professor
- ◆ Researcher
- ◆ Dean
- ◆ Lecturer/Instructor
- ◆ Equivalent International Title

Adjunct professors or consulting/part time instructors are not eligible for academic membership.

**General Instructions:**

Kindly attach the following along with the completed membership form:

- ◆ Attach One (1) passport size photograph
- ◆ Attach One (1) copy of CNIC
- ◆ Cheque / Demand Draft should be made in favor of Supply Chain Association of Pakistan
- ◆ Send the completed form along with payment to the address given below

**STEP 3: Member Undertaking**

I, \_\_\_\_\_, certify that the above particulars provided are correct. I undertake to abide by the SCAP Act, Bye-laws, relevant rules, and Code of Ethics and Conduct, prescribed for the members of the Association.

Further, I affirm that I meet each of the below requirements:

I **am** currently employed full-time by one or more accredited academic institutions.  
and

I **am not** presently as solely adjunct professor or consulting/visiting instructor.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
University/College/Institute Name

Affix  
University/College/  
Institute  
Stamp

**SCAP USE ONLY** (Do not write in this space)

Amount Received: \_\_\_\_\_

Membership  Approved  Rejected

Membership Number: \_\_\_\_\_

Return to:  
Supply Chain Association of Pakistan  
Suite No 404, 4th Floor Building No. 53-C  
Commercial Area "A" DHA Phase-II Karachi  
Phone: +92 21 35892602 Fax: +92 21 35892603