



# GHANA SCIENCE ASSOCIATION

## MEMBERSHIP RECORD FORM

### FULL MEMBERS

Passport Size  
Photograph  
  
(Researcher)

#### I. PERSONAL:

TITLE: \_\_\_\_\_ SURNAME: \_\_\_\_\_

Prof./Dr./Mr./Mrs./Miss.

FIRST NAME: \_\_\_\_\_ OTHER NAMES: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TEL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

#### II. ACADEMIC BACKGROUND: [Starting with the highest qualification]

Institution/University	Major field of Study	Degrees and year awarded

(Continue on Separate Sheet if necessary)

#### III. EMPLOYMENT:

Current Employment:

\_\_\_\_\_

\_\_\_\_\_

Field of Specialization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. RESEARCH**

Area(s) of Current Research: \_\_\_\_\_

\_\_\_\_\_

Are you a Life Member? \_\_\_\_\_

NAME OF YOUR BRANCH [*Accra, Kumasi, Cape Coast, Tamale, Koforidua*]

\_\_\_\_\_

**V. AFFILIATION TO OTHER PROFESSIONAL BODIES**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VI. SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

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**VII. FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Dues Paid: \_\_\_\_\_

Class of Membership: \_\_\_\_\_

Other Remarks: \_\_\_\_\_

\_\_\_\_\_

**GHANA SCIENCE ASSOCIATION**

**MEMBER'S UNDERTAKING**

**FROM:**

**TO:**

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.....  
.....  
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.....  
.....  
.....

**STAFF ID NO. :** .....

**Dear Sir/Madam,**

**I have decided to join / renew my membership of the Ghana Science Association with effect from ..... I hereby authorize you to deduct at source monthly dues of .....**

**(¢.....) from my salary and pay same to the Ghana Science Association with effect from .....till I issue a counter instruction to you to do otherwise.**

**Thank you.**

.....

**(Signature of Applicant)**

**Sign, Name & Stamp  
(Finance Officer)**