

PIHRATM

Professionals In Human
Resources Association

1515 W 190th St. Ste 530, Gardena, CA. 90248
(310)416-1210 ext.810 • fax (310)416-9055 • www.pihra.org



STUDENT MEMBERSHIP APPLICATION*

Preferred PIHRA District #: _____

Personal Information

Name: (Last, First): _____ Date: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Email: _____

Are you a SHRM member? NO YES If YES, what is your SHRM ID #: _____

Educational Information

Name of College/University: _____

Category: A.A. Undergraduate Graduate Expected Date of Graduation: _____

Student Status: Freshman Sophomore Junior Senior Graduate Units Completed: _____

Student Advisor: _____ Telephone: _____

Employment Information

*An eligible Student Member of PIHRA is a person attending an accredited university with a full schedule of classes (8+ units), working 20 hours or less per week and not receiving benefits.

I am working I am not presently working If working: Job Title: _____

Company Name: _____ Telephone: _____

Address: _____ City/State/Zip: _____

Principal Duties: _____ Total Hours Worked: _____

I wish to become a PIHRA Student Member because: _____

I agree to abide by the Bylaws and guidelines of Professionals in Human Resources Association to help carry out the objectives of the association. I understand and agree that I will not use my membership for monetary gain.

Signature

Recommendation of Faculty Advisor (signature)

\$30 Annual Membership include PIHRAScope monthly e-newsletter

Payment Information: Check (payable to PIHRA) Mastercard Visa

Card Number: _____ Exp Date: _____

Name on Card: _____

Signature: _____

For office use only

PIHRA ID# _____

Amt. Rcvd: _____

Date Entered: _____

Completed By: _____

Send completed application, copy of current class schedule and payment to PIHRA