**MINNEAPOLIS UNIVERSITY ROTARY CLUB**

**615 WASHINGTON AVENUE SE**

**MINNEAPOLIS, MN 55414**

**(612) 362- 6695 ext. 6024**

APPLICATION FOR MEMBERSHIP DATE:

*I am applying for membership in the Minneapolis University Rotary Club. I am aware of the objectives, benefits, and obligations of membership and accept the importance of regular attendance. As a member of the Minneapolis University Rotary Club, I will serve, as time permits, and encourage others to consider membership.*

**Section A** (To be completed by the applicant.)

1. Name:

 Title First Middle Initial Last Date of Birth

2. Home Address:

3. Home Phone Office Phone Mobile Phone

4. Occupation / Business Title:

5. Name of Company, Employer or Business:

 Address:

6. e-mail address

7. How long have you held the above stated position?

If less than 2 years, please list previous position or employer and length of employment:

8. Past and present civic, charitable, non–profit, organizational activities:

9. Other memberships (clubs or professional organizations:

10. Hobbies and Special Interests:

11. Hometown:

12. Name of significant other:

 First Middle Initial Last Date of Birth

 Married Yes[ ]  No [ ]

12. Children:

 Name(s) Birthdate

**Section B** (To be completed by the first sponsor and signed and dated by both sponsors.)

1. How long have you known the applicant?

2. Does the applicant have good standing in the community and his/her profession? [ ] Yes [ ] No

3. Does the applicant meet the Four Way Test in both his/her professional and personal life? [ ] Yes [ ] No

4. Do you believe this person will accept and carry out committee assignments? [ ] Yes [ ] No

5. Is the applicant's business or profession well thought of and regarded as ethical by its competitors and associates? [ ] Yes [ ] No

6. Are you sufficiently acquainted with the applicant's professional standing to be of the definite opinion that he/she would be a valuable and interested Rotarian? [ ] Yes [ ] No

**Signature of Sponsors**

**I have read the foregoing answers and believe them to be true to the best of my knowledge, ability and belief. I join in proposing such person, assuming joint responsibility as a sponsor.**

# Signature of 1st Sponsor: Date:

# Signature of 2nd Sponsor: Date:

**Section C** **Board Action**

Action of the Board of Directors: Date:

 Approval: [ ]

 Disapproval: [ ]

Classification:

Membership Category: Active[ ]  Associate[ ]  Affiliate[ ]  Shared[ ]  Non-Resident[ ]  Senior Active[ ]  Honorary[ ]

Signature

 President or Secretary Date

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