



AASW

Australian Association
of Social Workers



Aspire Your True Potential

Student Membership Application Form

Section 1

Personal Details

.....
Title First Name Surname

/ / MALE FEMALE OTHER
Date of Birth Gender
(DD/MM/YYYY)

YES NO
Are you of Aboriginal or Torres Strait Islander origin?

Section 2

Contact Details

.....
Postal Address

.....
Suburb / Town State / Territory Postcode

.....
Country Mobile Phone

.....
Email Address

Section 3

Education Details

.....
Name of Higher Education Provider

.....
Qualification - Name of Course Anticipated Year of Completion (YYYY)

Section 4 Membership

Select Your Membership Category

		Fee (GST included)
Student	<input type="checkbox"/> Entry Level Course	\$51.00
	<input type="checkbox"/> Postgraduate Course	

ELIGIBILITY

Please ensure that you meet the eligibility requirements before proceeding with your application

- **Student – entry level course** - is available to students enrolled in an AASW accredited Bachelor of Social Work degree or Master of Social Work (qualifying) degree.
- **Student - postgraduate course** - is for social workers already eligible for full AASW membership and are undertaking full time Masters or Doctoral social work studies to further advance their skills.

Please refer to www.aasw.asn.au/membershipinfo/membership-eligibility for more information.

PROOF OF ENROLMENT

Proof of enrolment must demonstrate registration in an accredited entry level social work program. When applying for student membership please provide evidence of your eligibility i.e. confirmation of enrolment, transcript or similar.

PRIVACY POLICY

I have read the AASW Privacy Policy (see: www.aasw.asn.au/privacy)

YES NO

Section 5 Payment Method

Select Your Payment Method

<input type="checkbox"/> Cheque	(A tax invoice will be emailed with payment instructions)	
<input type="checkbox"/> BPay	(A tax invoice will be emailed with payment instructions)	
<input type="checkbox"/> Credit Card	Credit Card Type	Name on Credit Card
	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa	<input type="text"/>
	Card Number	<input type="text"/>
	Card Expiry (MM/YY)	CVV
	<input type="text"/> / <input type="text"/>	<input type="text"/>
	Cardholder's Signature	<input type="text"/>

Section 6 Completed Form

Submit your completed membership application with payment to the AASW Membership Department by



AASW
Unit 9, Block C
Trevor Pearcey House
28-34 Thynne Street
Bruce ACT 2617



membership@asw.asn.au

Aspire Your True Potential

AASW student membership is your connection to a network of over 10,000 members

For further information visit www.aasw.asn.au or contact the Membership Team on T: **1800 630 124** or E: membership@asw.asn.au

Connect With Us

