



# Inter-City Personnel Associates, Inc.

## APPLICATION FOR MEMBERSHIP

### OPERATIONAL DATA

Legal Name of Agency \_\_\_\_\_  
 DBA (Doing Business As): please explain \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone Number: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Fax Number: (\_\_\_\_) \_\_\_\_\_

### LEGAL DATA

*(Check Appropriate Selection)*

- Incorporated on the date of \_\_\_\_\_ in the state of \_\_\_\_\_  
 Partnership     Individual Proprietorship     Franchise

If franchise, please identify principal \_\_\_\_\_

How many years has your agency been in business? \_\_\_\_\_

How many years have you owned the agency? \_\_\_\_\_ Indicate locations \_\_\_\_\_

Has it always operated under the same name? \_\_\_\_\_

If operation has been under other names, please list them. \_\_\_\_\_

Has your agency ever been involved in a legal matter pertaining to ethics or finances? \_\_\_\_\_

If so, please explain. \_\_\_\_\_  
 \_\_\_\_\_

Do you know of any information that would indicate your agency would not be evaluated as an ethical and professional business operation with an unquestionable reputation? \_\_\_\_\_

Are you licensed in the state in which you are located? \_\_\_\_\_

### REFERENCES

Please provide two references that will attest to your professionalism. I authorize the references noted below and all other references contacted to furnish IPA with any information concerning their relationship with myself and hereby release all references from any liability or damage incurred as a result of furnishing information to IPA.

\_\_\_\_\_  
Signature

List names and phone numbers \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

List names of any IPA members recommending your application. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**→ Please also complete 2<sup>nd</sup> side of application.**

**ASSOCIATION AFFILIATIONS**

Are you a member of the Nat'l Association of Personnel Services (NAPS)? \_\_\_\_\_ When did you join? \_\_\_\_\_

Are you a Certified Personnel Consultant (CPC)? \_\_\_\_\_

**MEMBERSHIP IN COMPETITIVE ORGANIZATIONS**

Have you ever been a member of a network? \_\_\_\_\_ If so, please name. \_\_\_\_\_

Are you presently a member of a network? \_\_\_\_\_ If so, please name. \_\_\_\_\_

If you were, but no longer are associated with a network, please indicate reason for leaving. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL INFORMATION** (If partnership, both partners are to fill out.)

Full Legal Name \_\_\_\_\_

Home Address \_\_\_\_\_

Phone Number \_\_\_\_\_

How many years have you personally been in the Personnel Agency function? \_\_\_\_\_

Full Legal Name \_\_\_\_\_

Home Address \_\_\_\_\_

Phone Number \_\_\_\_\_

How many years have you personally been in the Personnel Agency function? \_\_\_\_\_

Do you carry Errors & Omissions Insurance? \_\_\_\_\_

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**AGREEMENT**

I agree, without any reservations, to subscribe to full membership operations and responsibilities.

Should I desire to resign from IPA, I agree to provide a 30-day notice in advance and to pay all dues and costs incurred by me during my membership including split-fee payments due and not paid. In the event of default of such payments, as herein before provided, I agree to pay all costs of collections including a reasonable attorney fee and court costs. I also understand that giving a 30-day advance resignation notice is the ONLY way to obtain a refund of my Escrow deposit.

Further, I agree to comply with and abide by all operating rules, regulations, policies and to treat all IPA information in a completely CONFIDENTIAL manner and not to share them with any unauthorized and/or non-IPA personnel. This includes any information relative to the IPA system, procedures, form design, and information and data made available to me from any IPA source.

Upon resignation from IPA, I agree to return the IPA Policy Manual and IPA Handbook.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Partner's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Inter-City Personnel Associates (IPA)**  
**1486 Kenwood Drive, Suite 1 ♦ Menasha, WI 54952**  
**Phone (920) 720-5323 ♦ Fax (920) 720-5327 ♦ peter@IPArecruitenetwork.com**  
**www.IPArecruitenetwork.com**