



Member Application

Applicant Information

Full Name: _____ Date: _____
 Last First M.I.
 Title _____
 Organization _____
 Address: _____
 Street Address Mail Station # _____
 City State ZIP Code _____
 Phone: () _____ FAX () _____
 Alternate Phone () _____ E-mail _____

Reporting Relationships

To whom do you report? (title) _____ How many people report to you? _____ How many levels are you away from the CEO? _____

Organization Information

Give a brief description about your organization's product, services, market or the nature of your business

What is your most pressing organizational/HR issue?

Annual Sales or revenue	Annual Net Income:	Number of employees
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Your information

How many years of HR experience?	Describe your career progression:
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Describe your educational background:

In which of the following areas have you had experience?

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Employee Relations | <input type="checkbox"/> Performance systems | <input type="checkbox"/> Staffing | <input type="checkbox"/> Succession Planning |
| <input type="checkbox"/> Training and Development | <input type="checkbox"/> Organizational Development | <input type="checkbox"/> HRIS | <input type="checkbox"/> Compensation |
| <input type="checkbox"/> Benefits | <input type="checkbox"/> Labor Relations | <input type="checkbox"/> Strategic planning | <input type="checkbox"/> Line management |

What do you hope to accomplish through **hr connection**®?

Small groups set their own agenda. What three things would you want on the agenda?

Describe your most recent developmental opportunity. What was it? When?

2010 Fees

- | | |
|---|--|
| <input type="checkbox"/> \$2075 (\$225 annual savings over quarterly) | <ul style="list-style-type: none"> • fees are prorated depending on the time of the year/quarter in which a member joins • additional 5% discount when there are 2-3 members from the same company • Additional 10% discount when there are 4 or more members |
| <input type="checkbox"/> \$575 per quarter | |

Payment method

- Enclosed is a check for _____ made payable to **hr connection**®
- Please invoice me. You will receive a confirmation/invoice via e-mail.
- Charge to Credit Card Number _____, exp. date _____

Pay by credit card on-line at <https://secure.hrconnection.net/>, or MAIL / FAX your registration. **Do NOT send credit card information via e-mail.**

Mail to: **hr connection**
 2529 Dean Parkway, Suite 300,
 Minneapolis, MN 55416

FAX to: 612 925-8344

E-Mail to: suebergstrom@hrconnection.net

Call Sue Bergstrom at 612 925-8341 with questions