

## Application for Dues Waiver for Unemployed Members

Transitioning between positions can be difficult financially. During this time, your membership with ACHE is more important than ever. That's why ACHE offers a dues waiver for any active Member or Fellow who becomes unemployed and who meets the requirements listed on the reverse side of this application.

When the form is completed and approved, your dues will be waived until the end of the year. You may receive the waiver for a maximum of **two years**. **To receive this waiver again next year, you must meet the requirements and reapply by completing a new application**. To request a new application, contact ACHE's Customer Service Center at (312) 424-9400 or at contact@ache.org.

MEMBER ID NUMBER			
MEMBER ID NOMBER			
FULL NAME			
PHONE NUMBER			
PREVIOUS TITLE			
PREVIOUS EMPLOYER	CITY	STATE	
LAST DATE OF EMPLOYMENT			
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If you have not recently updated your address wit		information below. If you	preier, you
may update your contact information at my.ache	.org.		
ADDRESS	CITY	STATE	ZIP
	<del>-</del>	<del></del>	
EMAIL ADDRESS			

I am a current Member of ACHE and have become unemployed
I have been a Member or Fellow for two years and have paid full dues the last two consecutive years or
I received the unemployed dues waiver last year
I will continue to actively seek employment in healthcare management
I am not employed as a consultant or working in any paid capacity

You must meet the following requirements to be eligible for this waiver. Please check the following:

I understand that I can receive a dues waiver for up to two years. Next year I will receive a bill for dues. If I wish to receive the dues waiver, I must complete a new application to confirm my continued eligibility. Upon employment, I will notify ACHE immediately and will continue my membership on a paid basis.

I represent and warrant that the information provided on this application is accurate and complete. I agree that if I am granted this waiver, I will continue to abide by ACHE's *Bylaws, Code of Ethics* and other rules and regulations (found on **ache.org**).

SIGNATURE DATE

Send this completed form to:

Fax: (312) 424-9405

Mail: ACHE

Division of Member Services 300 S. Riverside Plaza, Suite 1900 Chicago, IL 60606-6698

## The unemployed dues waiver will not apply if you are:

- Employed outside of the healthcare field
- Retired or unable to work
- An ACHE Student Associate

If you are retired or unable to work because of an injury or illness, you may be eligible for retired status. Please contact ACHE for a Retired Status Application at (312) 424-9400 or contact@ache.org. Thank you for your dedication to ACHE.