



GHANA JOURNALISTS ASSOCIATION

MEMBERSHIP APPLICATION FORM

1. **NAME:** _____
2. **SEX:** MALE ☐ FEMALE ☐ 3. **EMAIL ADDRESS:** _____
4. **PERMANENT MAILING ADDRESS:** _____

5. **CONTACT(S): MOBILE NUMBER(S):** _____



6. **EMPLOYMENT ADDRESS:** _____
7. **POSITION:** _____ 8. **YEARS OF PRACTICE:** _____
9. **PRESENT JOB DESCRIPTION:** _____

10. **FREELANCER:** ☐ 11. **YEARS OF PRACTICE:** _____ 12. **MEDIA HOUSE(S) WORKED FOR:** _____
13. **HIGHEST PROFESSIONAL QUALIFICATION:** _____
14. **REFEREE: (1) Name:** _____
Address: _____ *Email:* _____
(2) Name: _____
Address: _____ *Email:* _____

15. **TYPE OF MEMBERSHIP APPLYING FOR:** _____
16. **SIGNATURE OF APPLICANT:** _____ 17. **DATE:** _____

IMPORTANT NOTES

- Application for membership should be submitted in duplicate.
- Applicants must pay a **Registration Fee of Hundred Cedis (¢100.00)** upon submission of this form.
- Submit **two (2) passport-size photographs** and photocopies of professional certificate(s).
- Current monthly dues: **¢50.00**.
- Eligibility:
 - First Degree, Post Graduate Diploma & above → Minimum 1 year practice.
 - Diploma → Minimum 2 years practice.
 - Trained on the job → Minimum 6 years practice.

OFFICIAL USE ONLY

- **TYPE OF MEMBERSHIP GRANTED:** _____
- **DATE:** _____
- **REMARKS:** _____
- **NAME OF MEMBERSHIP VETTING COMMITTEE OFFICIAL:** _____

- **SIGNATURE OF MEMBERSHIP VETTING COMMITTEE OFFICIAL:** _____
