



We look forward to welcoming you as a member!

AGB Membership provides benefits and services to all voting members of your governing board and nine staff members of the institution. Two of the staff members must be the chief executive and the board professional or staff liaison to the board.

AGB provides additional services for individuals who serve as chairs or members of the following committees: academic affairs, audit, development, enrollment management, executive, facilities, finance, governance, investment/endowment, information technology, and student affairs/services.

Eligibility: Institutions must be accredited (or be candidates for accreditation) by a regional agency recognized by the Council for Higher Education Accreditation (CHEA). Institutional members of AGB are primarily the governing boards of degree-granting universities and colleges, professional schools, and seminaries and theological schools. More details can be found at AGB.org/Membership.

In addition to this completed form, please send:

- Annual dues payment for the dues rate appropriate to your institution’s enrollment (FTE). Please visit AGB.org/How-to-Join under the eligibility tab to identify your institution’s rate. Annual dues invoices for membership renewal will be sent to the chief executive’s office unless otherwise instructed.

For multi-campus or state systems, please provide:

- A complete list of campuses and their chief executives.

**AGB respects the privacy of all members. Information provided will be used to fulfill print and electronic member benefits and other membership-related communications only. Member data are not sold or rented to any outside organization.*

Governing Board

Institution or Organization Name _____

Mailing Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country/Region _____

Telephone _____ Website _____

Please indicate the month of the year your board member transitions occur _____

Full-Time Students

Institution FTE _____

FTE equals full-time students for the most recent fall semester/quarter plus one-third part-time students.

Application (continued)



Membership Category

- Governing Board of College, University, or University System
- Nongoverning/Institution Advisory Board
- Statewide Planning or Coordinating Board
- Education Association or Other Nonprofit Organization

Check One in Each Group as Appropriate

- | | | |
|-------------------|-------------|-------------------------------|
| 2-Year | Public | Single-Campus Institution |
| 4-Year | Private | Multi-Campus Institution |
| 2-Year and 4-Year | Proprietary | State System |
| | | Single Campus of State System |

Chief Executive

Name _____ Title _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country/Region _____ Telephone _____

Email _____ Took office as of _____

Presiding Officer of the Board

Name _____ Title _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country/Region _____ Telephone _____

Email _____ Beginning of Term _____ End of Term _____

Board Professional/Staff Liaison to the Board

Name _____ Title _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country/Region _____ Telephone _____

Email _____

Please Submit Renewal Invoice to:

Name _____ Title _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country/Region _____ Telephone _____

Email _____

Application (continued)



Board Member 1

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Board Member 2

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Board Member 3

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Application (continued)



Board Member 4

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 5

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 6

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Application (continued)



Board Member 7

Name				Title		
Mailing Address						
City		State/Province		Zip/Postal Code		
Country/Region		Telephone		Email		
		Member	Chair	Vice Chair		
Academic Affairs Committee				Facilities Committee		
Audit Committee				Finance Committee		
Compensation Committee				Governance Committee		
Development Committee				Investment Committee		
Enrollment Management Committee				IT Committee		
Executive Committee				Student Affairs Committee		

Board Member 8

Name				Title		
Mailing Address						
City		State/Province		Zip/Postal Code		
Country/Region		Telephone		Email		
		Member	Chair	Vice Chair		
Academic Affairs Committee				Facilities Committee		
Audit Committee				Finance Committee		
Compensation Committee				Governance Committee		
Development Committee				Investment Committee		
Enrollment Management Committee				IT Committee		
Executive Committee				Student Affairs Committee		

Board Member 9

Name				Title		
Mailing Address						
City		State/Province		Zip/Postal Code		
Country/Region		Telephone		Email		
		Member	Chair	Vice Chair		
Academic Affairs Committee				Facilities Committee		
Audit Committee				Finance Committee		
Compensation Committee				Governance Committee		
Development Committee				Investment Committee		
Enrollment Management Committee				IT Committee		
Executive Committee				Student Affairs Committee		

Application (continued)



Board Member 10

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 11

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 12

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Application (continued)



Board Member 13

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Board Member 14

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Board Member 15

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Application (continued)



Board Member 16

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Board Member 17

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Board Member 18

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	Member Chair Vice Chair
Academic Affairs Committee	Facilities Committee	
Audit Committee	Finance Committee	
Compensation Committee	Governance Committee	
Development Committee	Investment Committee	
Enrollment Management Committee	IT Committee	
Executive Committee	Student Affairs Committee	

Application (continued)



Board Member 19

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Board Member 20

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Board Member 21

Name	Title	
Mailing Address		
City	State/Province	Zip/Postal Code
Country/Region	Telephone	Email
	Member Chair Vice Chair	
Academic Affairs Committee		Facilities Committee
Audit Committee		Finance Committee
Compensation Committee		Governance Committee
Development Committee		Investment Committee
Enrollment Management Committee		IT Committee
Executive Committee		Student Affairs Committee

Application (continued)



Board Member 22

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 23

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Board Member 24

Name				Title			
Mailing Address							
City		State/Province		Zip/Postal Code			
Country/Region		Telephone		Email			
	Member	Chair	Vice Chair		Member	Chair	Vice Chair
Academic Affairs Committee				Facilities Committee			
Audit Committee				Finance Committee			
Compensation Committee				Governance Committee			
Development Committee				Investment Committee			
Enrollment Management Committee				IT Committee			
Executive Committee				Student Affairs Committee			

Application (continued)

Senior Administrator 1

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Senior Administrator 2

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Senior Administrator 3

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Application (continued)

Senior Administrator 4

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Senior Administrator 5

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Senior Administrator 6

Name Title

Mailing Address

City State/Province Zip/Postal Code

Country/Region Telephone

Email

Role (select from the following)

Chief Academic Officer	Chief of Institutional Research	Chief Information/Technology Officer
Chief Financial Officer	Chief of Student Services	Chief Development Officer
Chief Enrollment Officer	Chief Diversity Officer	Legal Counsel
Chief Administrative Officer		

Application (continued)



Senior Administrator 7

Name _____ Title _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country/Region _____ Telephone _____

Email _____

Role (select from the following)

- | | | |
|------------------------------|---------------------------------|--------------------------------------|
| Chief Academic Officer | Chief of Institutional Research | Chief Information/Technology Officer |
| Chief Financial Officer | Chief of Student Services | Chief Development Officer |
| Chief Enrollment Officer | Chief Diversity Officer | Legal Counsel |
| Chief Administrative Officer | | |