

Member-to-Member (M2M) Form

Name: _____

Senior or junior member: _____

Organization: _____

Mailing address: _____

City/State: _____ Zip code: _____

Country _____

Phone: _____ E-mail: _____

Type of employment (e.g., academic, consulting, industry, etc.): _____

Topical interests/Areas of specialty (e.g., selection, diversity, coaching, etc.):

Degree type (e.g., MA, MS, PhD, DBA, PsyD, etc.): _____

Degree area (e.g., I-O, OB, HR, Social, Clinical, etc.): _____

Are you an ethnic minority?* Yes No

**Note:* Ethnicity will only be used for matching purposes in case a member prefers to be matched with someone from a similar ethnic background.