

Institutional application for membership with the Canadian Federation for the Humanities and Social Sciences

*required field

Section A: Ge Institution name (
Institution name (French):		
Acronym (English)):	Acronym (French)*:	Year established:
*Only provide official the institution name,		cronyms used on the institution w	vebsite (i.e. if there is no official French version of
Website:		Twitter:	
Objectives or purp	oose:		
Please fill in conta form. For any pos President* The president of t	itions that are not a	each of these positions OR a applicable, leave the fields b the official representative	to the Federation.
Salutation: Email*:	First name*:	Last	name*:
Job title:			
Department/Facu	lty:		
Mailing address*:			
Telephone:		Is th	is a work or home address?



Primary administrative contact*	and to the country of
Receives a copy of all communications the Federation se	
Salutation: First name*: Email*:	
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Billing contact* Receives Federation invoices.	
Salutation: First name*: Email*:	
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Executive Assistant to the President (recomme Salutation: First name*: Email*:	· · · · · · · · · · · · · · · · · · ·
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Vice-President, Academic (recommended) Salutation: First name*:	Last name*:
Email*:	



Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Vice-President, Research (recommended) Salutation: First name*: Email*:	Last name*:
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Dean, Arts/Humanities/Social Sciences (recorn Salutation: First name*: Email*:	
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?
Communications contact (recommended) Coordinates with Federation team to disseminate infor	mation.
Salutation: First name*:Email*:	Last name*:
Job title:	
Department/Faculty:	
Mailing address*:	
Telephone:	Is this a work or home address?



Other	contact (optional)	
Salutation: First name*:		Last name*:
Email*	:	
Job titl	e:	
Depart	ment/Faculty:	
Mailin	g address*:	
Telephone:		Is this a work or home address?
Other	contact (optional)	
		Last name*:
Email*	:	
Job titl	e:	
Depart	ment/Faculty:	
Mailin	g address*:	
Teleph	one:	Is this a work or home address?
Secti	on C: Eligibility	
	indicate whether the institution meets	each of these membership criteria:
	supports the vision, mission and goals	•
	has a program of activities with substa the objectives of the Federation	antial humanities and/or social science content relating to
		nt legal permission by the relevant Canadian t for-profit postsecondary education and/or research
	accepts the by-laws of the Federation,	subject to regular amendment procedures
	agrees to pay membership fees as set	by the Federation Board of Directors
	on D: Supporting documenta attach copies of the following to this ap	
	constitution or charter	
	list of current officers and members o	f governing board
	the last annual report	



 $\hfill \square$ $\:$ evidence of corporate and non-profit status

Please indicate the total number of students and faculty at the institution in all disciplines:					
Full-Time Students: Part-Time Students:					
Faculty:					
Section F: Federation's membership fees					
Membership fees for institutions are based on total enrolment figures as obtained by Universities Canada and is levied on each fulltime equivalent (FTE) student, with each part-time student counting as 0.26 of FTE. These fees are subject to change as determined by the Federation Board of Directors.					
Fee schedule for the membership year January 1 to December 31, 2025: \$0.70 / FTE student					
*Minimum fee charged: \$500.00					
Section G: Agreement statement					
Please sign this application and return it along with supporting documentation to the Federation.					
The institution agrees to:					
· · · · · · · · · · · · · · · · · · ·					
become a member of the Canadian Federation for the Humanities and Social Sciences					
 pay the annual Canadian Federation for the Humanities and Social Sciences membership fees 					
 ensure that the Canadian Federation for the Humanities and Social Sciences has up-to-date contact information for the institution's president and key contacts 					
I certify that the information provided in this application is accurate to the best of my knowledge and that I am authorized to submit this application of behalf of the institution.					
Signed*: Date*:					
Name (print) *:					
Email*:					
Job title:					
Department/Faculty:					
Organization/Institution:					
Mailing address*:					
Telephone:					



Please send completed form and requested documents to:

Federation for the Humanities and Social Sciences 200-141 Laurier Avenue West Ottawa, ON K1P 5J3

Tel: 613-238-6112 Fax: 613-238-6114

E-mail:

membership@federationhss.ca

www.federationhss.ca

Please note: All membership applications must be approved by the Federation Board of Directors. The first invoice for membership fees will be sent after the application has been approved.