



APPLICATION FOR MEMBERSHIP

Protection & Advocacy System, Inc. (P&A) PAIMI Advisory Council

Return to:

7344 Stockman Street
Cheyenne, WY 82009
1-307-635-7817
1-800-654-7972

wypanda@wypanda.com
www.wypanda.com

PERSONAL DATA:

Name: _____

Address: _____
Street _____

City/Town _____ State _____ Zip _____

Telephone: _____ Email: _____

Check box(es) that apply:

Presently Employed Full-Time Part-Time
 Presently Unemployed Retired Volunteer

Present or Past Occupation, Profession, or Job Title, if applicable: _____

Briefly describe the paid or volunteer work: _____

If you are presently employed, will you be able to take time off from work to attend PAIMI Advisory Council meetings?

Yes No SOMETIMES

Are you willing to travel to various Wyoming locations, with P&A reimbursement, to attend meetings?

Yes No SOMETIMES

EDUCATION: _____

OTHER:

List organizations, boards, commissions, and councils on which you are presently serving or have served in the past: _____

Briefly describe why you would like to serve on the PAIMI Advisory Council and what you would hope to achieve as a PAIMI Advisory Council Member: _____

Briefly describe any assistance you may need in order to attend PAIMI Advisory Council meetings (such as attendant care, specialized transportation, etc.): _____

Please check below what applies to you:

Attorney; Mental health professional; Individual knowledgeable about mental illness; Provider of mental health services; Individual receiving or who has received mental health services; Individual with a family member receiving or who has received mental health services.

Please disclose any potential conflicts of interest: _____

Print Name

Signature

Date

(Applications will be kept on file for one year)

Federal funding sources require the collection of the following information. Your response is **STRICTLY VOLUNTARY**.

ETHNICITY

Hispanic/Latino _____ Non-Hispanic/Latino _____ Prefer not to answer _____

RACE

American Indian/Alaskan Native _____ Asian _____ Black/African American _____

Native Hawaiian/Pacific Islander _____ White _____ Two or more races _____

Some other race _____ Prefer not to answer _____

GENDER IDENTITY AND SEXUAL ORIENTATION

Female/Woman _____ Male/Man _____ Prefer not to answer _____