



國際博士後協會
www.IPostdocA.org
INTERNATIONAL POSTDOCTOR ASSOCIATION

N0. 50 GF HA Tsuen Shi Tsuen, Yuen Long, New Territories, Hong Kong.

Email : info@ipostdoca.org

Tel : (852) 6875 4898

Fax: (852) 2712 8255

For Official Use Only

Membership No. _____

APPLICATION FOR MEMBERSHIP :-

Fellow / Full Member / Affiliate Member

Photo

Part I: Personal Particulars

Title (Mr. / Mrs. / Miss / Ms / Others*) _____ Nationality _____

Surname _____ Date of Birth (DD/MM/YY) _____

Other Names in full _____

Name in Chinese _____ ID Card No. _____

(if applicable) _____ (if applicable) _____

Home Address: _____

Office Address: _____

Correspondence Address: (Home/Office*) Please give detailed address if other than home or office

Telephone Number: (Office) _____ (Home) _____

(Mobile or Pager) _____

Fax Number: _____ e-mail address: _____

*Please delete as appropriate

Part II: Profession or Occupation

(Principal profession or occupation in which you are engaged and present or appointment)

Profession	Present Position (or appointment)

Part III: Academic and professional

Name of University/Institutions etc	Details of Qualification	Date of Obtained (DD/MM/YY)

Part IV: Nomination

We, the undersigned, from personal knowledge or careful enquiry, recommend that the application is in every respect worthy of admission as a Fellow / Full Member / Affiliate Member * of the International Postdoctor Association and propose him/her to the Council as a proper person to be admitted into the Association.

Signature of two proposers of the International Postdoctor Association. Please complete all the details.

Name in full	Name of Organization (or office address)	Job Title Or Position	Tel. No.	Grade of Membership and Institute	Signature

*please delete as appropriate

FEES

	HKD	HKD
Founder Life's Membership fee		
Entrance Fee (One Time)		
Fellow/Full Member (Per Annum)		
Affiliate Member (Per Annum)		
	Total	

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Membership category

Fellow ☐

Full Member ☐

Affiliate Member ☐

Fee Received HKD _____

Secretariat _____

SUBMISSION

After completing this Application Form, please send the Form, together with a cheque (being application fee and made payable to 'International Postdoctor Association') and the supporting documentation (copies only please, they will NOT be returned) to

INTERNATION POST DOCTOR ASSOCIATION

N0. 50 GF HA Tsuen Shi Tsuen, Yuen Long, New Territories, Hong Kong.

Email : info@ipostdoca.org Tel : (852) 6875 4898 Fax: (852) 2712 8255

Or Bank in to HANG SENG BANK 024-783-044266-883

DECLARATION

1. I declare that all information given in this Application Form and the attached documents are, to the best of my knowledge, true, accurate and complete.
2. I undertake to observe and abide by the Code of Ethics and Memorandum and Articles of International Post Doctor Association. In the event of my resignation from membership, I agree to pay all arrears of subscription due to International Post Doctor Association to the date of the surrender of my membership certificate.

Signature: _____ Date: _____

Application Procedures

1. Application

Application can be done in person or by mail to International Post Doctor Association. By completing the Application Form together with the application fee and relevant supporting documents

2. Check list for application

Application will only be accepted if the following requirements are met:

- Application form signed and dated;
- Application fee enclosed;
- Your photos;
- Supporting documentation for education and work experience qualifications enclosed;
- Signed recommendation from two Referees; and

Incomplete applications will not be processed until all requirements have been met.

3. Submission

- Application fee must be submitted with the form together with a crossed cheque made payable to 'International Post Doctor Association' at:

N0. 50 GF HA Tsuen Shi Tsuen, Yuen Long, New Territories, Hong Kong.

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- Upon receipt of the Application Form, and acknowledgement letter will be issued to the applicant

4. Notification of Application Result

Results of Applications will be sent to the applicants within ONE MONTH upon receipt of application.

5. Unsuccessful Application

- The paid fees will be fully refunded to the applicant for unsuccessful application.

6. Membership Category Requirements

Fellow :	Completed Postdoctoral Program with certificate in an accredited universities
Full Member :	Pursuing Postdoctoral programs or completed Visiting Researcher in an accredited universities
Affiliate Member :	Honorary Doctorate, Completed Doctorate degree, Doctorate candidates or Master degree holders with an intention to study Doctorates within one year in an accredited universities

7. Designation title after your name

Fellow	: FIPostdocA (Voting member)
Member	: MIPostdocA (Voting member)
Affiliate Member	: AIPostdocA (non voting member)