



## Effectively Engaging Faculty in Academic Advising and Academic Advising Summer Institutes 2007

### Check one:

- Faculty Seminar ONLY (Burlington)
- Faculty Seminar + Summer Institute (Burlington)
- Summer Institute ONLY (Burlington or Salt Lake City)

Name: \_\_\_\_\_  
Last First M.I.

Job Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mail with payment to:  
 NACADA  
 2323 Anderson Avenue, Suite 225  
 Manhattan, KS 66502-2912

Fax with Credit Card # or copy of  
 Purchase Order to:  
 785-532-7732

For more information on NACADA,  
 please e-mail [nacada@ksu.edu](mailto:nacada@ksu.edu) or call  
 (785) 532-5717.

**REQUIRED:** All NACADA communication is done electronically; therefore, it is essential we have your email address so you may receive the NACADA newsletter and other communications.

★★ MEMBERSHIP INFORMATION: Complete the information below **ONLY** if you select "Renewing or New Member" registration option ★★

<p><b>ROLE: (Choose 1)</b></p> <p><input type="checkbox"/> Faculty Advisor (FA)</p> <p><input type="checkbox"/> Academic Advisor/ Counselor (PA)</p> <p><input type="checkbox"/> Advising Administrator (AA)</p> <p><input type="checkbox"/> Counselor (CN)</p> <p><input type="checkbox"/> Non-Institutional (NI)</p> <p><input type="checkbox"/> Other (OT)</p>	<p><b>DEMOGRAPHIC INFORMATION: (Optional)</b></p> <p><b>Ethnic Background:</b></p> <p><input type="checkbox"/> African Amer./Black</p> <p><input type="checkbox"/> Native American</p> <p><input type="checkbox"/> Hispanic/Latino</p> <p><input type="checkbox"/> Asian American</p> <p><input type="checkbox"/> European Amer./White</p> <p><input type="checkbox"/> Other</p> <p><b>Gender:</b></p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><b>Birth Year:</b> _____</p>
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**USE OF INFORMATION: (to be excluded check box)**

Periodically NACADA distributes mailing lists to other educational entities.

**YOU MAY CHOOSE A TOTAL OF FOUR (4) OF THE FOLLOWING:**

<p><b>COMMISSIONS:*</b></p> <p><input type="checkbox"/> C01 Advising Adult Learners</p> <p><input type="checkbox"/> C03 Multicultural Concerns</p> <p><input type="checkbox"/> C05 Advising Administration</p> <p><input type="checkbox"/> C06 Advsg. Grad. &amp; Prof. Students</p> <p><input type="checkbox"/> C07 Two-Year Colleges</p> <p><input type="checkbox"/> C08 Small Colleges and Universities</p> <p><input type="checkbox"/> C11 Advising Business Majors</p> <p><input type="checkbox"/> C12 Advising Student Athletes</p> <p><input type="checkbox"/> C13 Undecided/Exploratory Students</p> <p><input type="checkbox"/> C14 Technology in Advising</p> <p><input type="checkbox"/> C15 Faculty Advising</p> <p><input type="checkbox"/> C16 Advsg. Students with Disabilities</p> <p><input type="checkbox"/> C17 Advisor Training &amp; Development</p> <p><input type="checkbox"/> C18 LGBTA Concerns</p> <p><input type="checkbox"/> C19 Advising Transfer Students</p> <p><input type="checkbox"/> C21 Engg. &amp; Science Advising</p> <p><input type="checkbox"/> C22 Advising Education Majors</p> <p><input type="checkbox"/> C26 ESL/International Student Advising</p> <p><input type="checkbox"/> C27 Theory &amp; Philosophy of Advising</p> <p><input type="checkbox"/> C30 Liberal Arts Advisors</p> <p><input type="checkbox"/> C32 Assessment of Advising</p>	<p><b>INTEREST GROUPS:*</b></p> <p><input type="checkbox"/> C20 Health Professions Advising</p> <p><input type="checkbox"/> C23 Distance Education Advising</p> <p><input type="checkbox"/> C24 High School to College Advising</p> <p><input type="checkbox"/> C25 Probation/Dismissal/ Reinstatement Issues</p> <p><input type="checkbox"/> C28 Adv. High Achieving Students</p> <p><input type="checkbox"/> C31 First Generat. Coll. Student Advsg.</p> <p><input type="checkbox"/> C33 Advising Fine Arts Students</p> <p><input type="checkbox"/> C34 Pre-Law Advising</p> <p><input type="checkbox"/> C35 Canada</p> <p><input type="checkbox"/> C36 Native American &amp; Tribal College</p> <p><input type="checkbox"/> C37 Peer Advising &amp; Mentoring</p> <p><input type="checkbox"/> C38 Study Abroad Advising</p> <p><input type="checkbox"/> C39 Adv. Public/Urban Affairs Maj. (potential)</p> <p><input type="checkbox"/> C40 New Advising Professionals</p> <p><input type="checkbox"/> C41 Appreciative Advising (potential)</p> <p><input type="checkbox"/> C42 Large Universities (potential)</p> <p><i>*Refer to the web for details on Commissions and Interest Groups at <a href="http://www.nacada.ksu.edu">www.nacada.ksu.edu</a></i></p>
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**YEARS ADVISING:**

< 3 years     3-5 years     6-10 years     11-15 years     >15 years

**INSTITUTION TYPE: (Check One)**

- 2-Year     4-Year Public     4-Year Private

**ACCESSIBILITY/DIETARY NEEDS:**

I am allergic to these foods \_\_\_\_\_

I have physical accessibility needs \_\_\_\_\_

Please indicate these needs by email to Diane at [nacada@ksu.edu](mailto:nacada@ksu.edu) at least 3 weeks before the conference.

**REGISTRATION:**

<b>Faculty Seminar ONLY</b>	By June 1	After June 1
NACADA Individual Member	<input type="checkbox"/> \$295	<input type="checkbox"/> \$330
Renewing or New Member*	<input type="checkbox"/> \$350	<input type="checkbox"/> \$385
Non-member	<input type="checkbox"/> \$395	<input type="checkbox"/> \$430

**Faculty Seminar & Summer Institute - Burlington**

NACADA Individual Member	<input type="checkbox"/> \$990	<input type="checkbox"/> \$1,025
Renewing or New Member*	<input type="checkbox"/> \$1,045	<input type="checkbox"/> \$1,080
Non-member	<input type="checkbox"/> \$1,190	<input type="checkbox"/> \$1,225

<b>Summer Institute ONLY-Burl. or SLC</b>	By 6/1 or 7/5	After 6/1 or 7/5
NACADA Individual Member	<input type="checkbox"/> \$695	<input type="checkbox"/> \$730
Renewing or New Member*	<input type="checkbox"/> \$750	<input type="checkbox"/> \$785
Non-member	<input type="checkbox"/> \$795	<input type="checkbox"/> \$835

**Total Due** \$ \_\_\_\_\_  
*\* Includes membership for 1 year. Be sure to complete information in the box to the the left.*

**PAYMENT INFORMATION:**

Check # \_\_\_\_\_

P.O. # (attach copy) \_\_\_\_\_

Credit Card  Visa     MasterCard     American Express

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

**Nacada FEIN #: 48-1114759**

For more information visit [www.nacada.ksu.edu](http://www.nacada.ksu.edu)

NACADA and Kansas State University are committed to nondiscrimination. Contact the Director of Affirmative Action, Kansas State University, 214 Anderson Hall, Manhattan, KS 66506

**FOR OFFICE USE ONLY**

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

CK#/Amt.: \_\_\_\_\_

Deposit #: \_\_\_\_\_