PHAA Evaluator Renewal Form

Alternatively, <u>click here</u> for the Online Evaluator Renewal Form

I would like to renew my membership with PHAA as a member evaluator. Enclosed is a check or money order for \$15 payable to PHAA. In return for the \$15 dues, I understand that I will get:

- An email notice including the link whenever our online student newsletter, *The Excelsior*, is published.
- A listing as a member evaluator in our newsletter and on our website.
- Ability to award PHAA credits to your evaluees.
- Voting privileges at our membership meetings and on our written ballots.
- Access to the private PHAA Evaluators' Website (at <u>www.phaa.org</u>) where I can put together and edit student transcripts, participate in the evaluator's forum, get access to info for evaluators, post my biography for the public evaluator listing and even upload my photo for that listing.

The password-protected Evaluators' Website is especially useful. While you are a member, you can use it to:

• Create or update transcripts for your evaluees.

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- Advertise your services by posting or updating your bio in the website's *Evaluators Listing*.
- Post (or answer) questions that will go by email to all PHAA evaluators.

Address		Mail to: PHAA c/o Rachel Hill, Executive Assistant 316 Farrar LN Saltsburg PA 15681
Phone Number:		
E-mail address (optional):		
 Check Just One: Include my phone number in my Excelsior listing. Include my e-mail address in my Excelsior listing. Don't include either one in my Excelsior listing. Which of the following do you want in your listing, che List me as a qualified Secondary evaluator (i.e. with List me as a qualified Elementary evaluator (i.e. with List me as an evaluator who can pre-approve for I certificate or I am a licensed clinical or certified sch List me as an evaluator who offers Individual PIAT List me as being willing to travel for evaluations. Only list me as being able to accept high school cre 	nout prior permission o hout prior permission o Handicapped (i.e. I hav ool psychologist.). or Woodcock-Johnson	of superintendent). ve a PA special education teaching testing
This membership is for the	school year.	
My Signature:	Date Signed:	

Sign carefully in black ink without overlapping typing. We will scan your signature for transcripts and diplomas.

Mail in this form with \$15 payable to PHAA