



The Professional Association for
Compensation, Benefits and Total Rewards



www.worldatwork.org



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MEMBERSHIP APPLICATION AND CHANGE FORM

Use this form to (A) apply for membership in WorldatWork or (B) change your current member information.
For (A), complete all sections. For (B), complete only sections 1, 4 and 5.

1. CONTACT INFORMATION New Member Past Member Customer Code: WINQ

Name _____ Customer ID (optional) _____
Dr./Mr./Mrs./Ms. First Middle Last Jr./Sr./Ph.D./Etc. CCP/CBP/GRP

Organization _____ Title _____

Street Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____ Country _____

Telephone (plus extension) _____ Fax _____

E-mail _____ Referred by _____

Notice: The sale or other commercial use of e-mail addresses, mailing addresses and telephone numbers of WorldatWork members on WorldatWork's Web site or in its directories is strictly prohibited.

TO KEEP OUR RECORDS CURRENT PLEASE PROVIDE HOME ADDRESS INFORMATION

Street Address _____

City _____ State/Prov. _____ ZIP/Postal Code _____ Country _____

Home Telephone _____ Home Fax _____ Home E-mail _____

2. MEMBERSHIP DUES Check here if you would like to serve on a committee

WorldatWork has several membership categories, choose the one that best fits you:
If you are paying for your annual membership, use the following amounts to determine your payment.

- U.S. practitioner/consultant\$195 USD
- Canadian practitioner/consultant.....\$260 CAD + GST/HST
- Practitioner/consultant based outside the U.S. and Canada\$235 USD
- Academic/university professor\$100 USD*
- Student.....\$ 50 USD*

*Must provide proof of status with university ID card and full time (9 or more hours) status confirmation.

3. PAYMENT METHOD

Payment must accompany application to activate membership.

Check or money order enclosed. Amount enclosed \$ _____

Charge my: VISA MasterCard American Express I authorize WorldatWork to charge my credit card \$ _____

Corporate card Personal card Credit Card #: _____

Expiration Date: _____ Cardholder Signature: _____

Bill Me \$ _____. I understand my membership will not start until WorldatWork receives and processes my payment.

Call WorldatWork to charge membership dues or mail/fax with payment (U.S. and Canadian funds only) to WorldatWork. Annually, prior to the month you joined, you will be billed for the following 12 months of membership. Membership is on an individual basis, rather than an organizational basis.

4. AUTHORIZATION

I hereby apply for/continue membership in WorldatWork and agree to pay the current applicable dues. U.S. members: Your \$195 annual membership includes subscriptions to *workspan* magazine and *WorldatWork Journal*, which are valued at a total annual subscription price of \$220. Although not deductible as a charitable contribution, your annual dues may be deductible as a trade or business expense. Please consult your tax adviser to determine how various tax laws apply to you. As a member of WorldatWork, I understand that I am prohibited from selling or otherwise using for commercial purposes information on any WorldatWork Internet Web site or any WorldatWork member listings or directory.

Signature _____ Date _____

Our member list is available to HR-related organizations. By checking this box, we will remove your name from this list.

MEMBERSHIP PROFILE

To best serve your needs, it is important to know about your background and current assignment. Please take a few minutes to complete the following member profile.

1. Please choose one category that best describes the industry in which your organization operates:

- | | |
|--|---|
| <input type="radio"/> Agriculture, Forestry, Fishing & Hunting | <input type="radio"/> Management of Companies & Enterprises |
| <input type="radio"/> Mining | <input type="radio"/> Administrative & Support, Waste Management & Remediation Services |
| <input type="radio"/> Utilities, Oil & Gas | <input type="radio"/> Educational Services |
| <input type="radio"/> Construction | <input type="radio"/> Health Care & Social Assistance |
| <input type="radio"/> Manufacturing | <input type="radio"/> Arts, Entertainment & Recreation |
| <input type="radio"/> Wholesale Trade | <input type="radio"/> Accommodations & Food Services |
| <input type="radio"/> Retail Trade | <input type="radio"/> Other Services (except Public Administration) |
| <input type="radio"/> Transportation & Warehousing | <input type="radio"/> Public Administration |
| <input type="radio"/> Information (includes Publishing - Electronic and Print, IT, etc.) | <input type="radio"/> Other (Please specify) _____ |
| <input type="radio"/> Finance & Insurance | |
| <input type="radio"/> Real Estate & Rental & Leasing | |
| <input type="radio"/> Consulting, Professional, Scientific & Technical Services | |

2. Please choose the term that best describes your current level of responsibility:

- Executive/Officer/Top Level:** Along with other senior management, establishes organizational philosophy, vision and overall strategic business objectives (Example: Executive/Senior Vice-President)
- Senior Level:** Maintains overall responsibility for plan design, development and negotiation; expected to execute strategies determined by the executive/top level (Examples: Senior Director/Director, Assistant Director, Senior Manager)
- Mid Level:** Analyzes, implements, administers and audits tactical programs in alignment with established strategic plans (Examples: Manager, Senior Analyst, Specialist, Internal Consultant)
- Emerging Level:** Assists in analyzing, coordinating, administering and maintaining tactical programs (Examples: Analyst, Representative, Coordinator, Administrator)
- Consultant:** Works for an external consulting firm or as an independent consultant
- Educator/Academician:** A university professor or researcher employed by a research organization or university

3. Please choose the total number of employees your organization employs worldwide:

- | | | | |
|-------------------------------------|-----------------------------------|-----------------------------------|--------------------------------------|
| <input type="radio"/> Less than 100 | <input type="radio"/> 500-999 | <input type="radio"/> 2,500-4,999 | <input type="radio"/> 10,000-19,999 |
| <input type="radio"/> 100-499 | <input type="radio"/> 1,000-2,499 | <input type="radio"/> 5,000-9,999 | <input type="radio"/> 20,000 or more |

4. Which of the following best represents your area of responsibility? (Check only ONE.)

- | | |
|--|--|
| <input type="radio"/> All Human Resources Functions | <input type="radio"/> Total Rewards (Compensation, Benefits and The Work Experience) |
| <input type="radio"/> Compensation Only | <input type="radio"/> Non-HR functions (Please specify) _____ |
| <input type="radio"/> Executive Compensation Only | |
| <input type="radio"/> Benefits Only | <input type="radio"/> HR Specialty (other than Compensation & Benefits) (Please specify) _____ |
| <input type="radio"/> Compensation & Benefits | |
| <input type="radio"/> The Work Experience (Any combination of Recognition, Work/Life, Culture, Organizational Development, Work Environment) | |

4a. If you chose "All Human Resources Functions" above, please select your current HR responsibilities below. (Check all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Benefits | <input type="checkbox"/> Labor/Industrial Relations |
| <input type="checkbox"/> Compensation | <input type="checkbox"/> Organizational Development |
| <input type="checkbox"/> Diversity | <input type="checkbox"/> Safety/Security |
| <input type="checkbox"/> EEO/Affirmative Action | <input type="checkbox"/> Training/Development |
| <input type="checkbox"/> Employee Relations | <input type="checkbox"/> Other (Please specify) _____ |
| <input type="checkbox"/> Employment/Recruitment | |
| <input type="checkbox"/> HRIS | |

5. Please estimate the percent of time spent weekly on the following (round to nearest percent, must total 100%):

- _____ Compensation
- _____ Benefits
- _____ The Work Experience (Any combination of Recognition, Work/Life, Culture, Organizational Development, Work Environment)
- _____ HR functions other than Compensation, Benefits & The Work Experience
- _____ Non-HR Functions
- 100%**

6. Please choose the term that best describes your organizational unit:

- | | |
|---|---------------------------------------|
| <input type="radio"/> Headquarters | <input type="radio"/> Consulting Firm |
| <input type="radio"/> Subsidiary/Group/Division | <input type="radio"/> Public Sector |
| <input type="radio"/> Regional Headquarters | <input type="radio"/> Educational |
| <input type="radio"/> Plant/Branch | <input type="radio"/> Other |
| <input type="radio"/> Independent Consultant | |

7. Please indicate your years of experience in each of the following:

- | Compensation | Benefits | Human Resources |
|---|---|---|
| <input type="radio"/> Less than 1 year | <input type="radio"/> Less than 1 year | <input type="radio"/> Less than 1 year |
| <input type="radio"/> 1 year but less than 3 | <input type="radio"/> 1 year but less than 3 | <input type="radio"/> 1 year but less than 3 |
| <input type="radio"/> 3 years but less than 5 | <input type="radio"/> 3 years but less than 5 | <input type="radio"/> 3 years but less than 5 |
| <input type="radio"/> 5 years but less than 10 | <input type="radio"/> 5 years but less than 10 | <input type="radio"/> 5 years but less than 10 |
| <input type="radio"/> 10 years but less than 15 | <input type="radio"/> 10 years but less than 15 | <input type="radio"/> 10 years but less than 15 |
| <input type="radio"/> 15 years but less than 20 | <input type="radio"/> 15 years but less than 20 | <input type="radio"/> 15 years but less than 20 |
| <input type="radio"/> 20 years or more | <input type="radio"/> 20 years or more | <input type="radio"/> 20 years or more |

8. Gender: Male Female

9. What year were you born? 1945 or before 1946 to 1955
 1956 to 1964 1965 to 1977 1978 or after

10. Your highest level of education attained:

- | | |
|---|---------------------------------------|
| <input type="radio"/> High school | <input type="radio"/> Master's degree |
| <input type="radio"/> Some college | <input type="radio"/> MBA |
| <input type="radio"/> Bachelor's degree | <input type="radio"/> Doctorate |
| <input type="radio"/> Some college beyond bachelor's degree | |

11. Please indicate any other compensation, benefits or HR organizations to which you belong. (Check all that apply.)

- None
- ASTD
- AWLP
- CUPA
- IFEBP and/or ISCEBS
- IPMA-HR
- NASPP
- SHRM
- The Conference Board
- WEB
- Local Compensation, Benefits and/or HR Association(s) (Please specify) _____
- Other (Please specify) _____

IS THERE ANYTHING SPECIFIC WORLDDATWORK CAN DO FOR YOU?
