



2023-2024 Membership Application Institutional Membership

Dues Information

Dues are calculated based on enrollment and current fund expenditure levels as reported by your institution to the 2021 U.S. Department of Education in the Integrated Postsecondary Education Data System Enrollment and Finance Survey. Please refer the [Dues Matrix](#) to determine the amount owed for your institutional membership. This dues structure is also used to determine the number of additional attorney representatives allotted your institution. For any representatives beyond this allotted number, an additional \$240 is assessed.

Please Note

- ☐ Institutions joining between March 1 and June 30 will be charged half-year dues based on the regular full year amount.
- ☐ Outside counsel who are applying to serve as an institutional primary representative of an eligible non-member institution **must include a letter of endorsement** from that institution's President or a supervising administrator from that institution.
- ☐ Please return the completed form to membership@nacua.org.

Institution Information

Institution _____

City _____ State _____

Degree Offered: ☐ 2 Year ☐ 4 Year Institution Type: ☐ Public ☐ Private

Note: Proprietary (for-profit) institutions are not eligible for membership.

Institution Accrediting Body _____

Names and number of campuses (if applicable) _____

Primary Representative Information

Prefix _____ First _____ MI _____ Last _____

Position Title _____

Firm (if applicable) _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ E-mail _____

Optional Demographics for Primary Representative

Gender ☐ Female ☐ Genderqueer ☐ Male ☐ Nonbinary Date of Birth _____

Ethnicity ☐ American Indian/Native American ☐ Asian/Pacific Islander ☐ Black/African American
☐ Hispanic/Latino ☐ Multiracial ☐ White

National Association of College and University Attorneys

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Primary Representative Information (Continued)

State(s) and year admitted to practice _____

Are you a licensed attorney in good standing? ☐ Yes ☐ No

Do you have any previous experience in the practice of higher education law? ☐ Yes ☐ No

If yes, please indicate the date that you began your higher education law practice. _____

(Please enter in MM/DD/YYYY format. If you do not know, please indicate the year only.)

Do you currently represent any other institutions of higher education as counsel, whether in-house or outside?

☐ Yes ☐ No

If yes, please list all higher education entities for which you serve as counsel and to what extent you handle their legal work (attach sheet if needed)

How did you learn about NACUA? ☐ Internet Search ☐ Email ☐ NACUA Website ☐ NACUANOTE

☐ NACUA Meeting ☐ Mailing/Letter ☐ NACUANEWS ☐ Journal of College and University Law (JCUL)

☐ Colleague (please specify) _____

☐ Other _____

Affirmation Statement (required)

I affirm, on behalf of the organization I represent, that it meets the eligibility requirements as stated in the Bylaws and Membership Policy Statement of NACUA. As the primary representative for this institution, I acknowledge that the addition or deletion of additional attorney representatives to this membership is my responsibility. I also affirm the following statements:

1. I am regularly engaged to handle the legal affairs of the institution listed above on this application.
2. I do not represent claimants against any Member Institution or represent parties concerning interests adverse to any Member Institutions (unless such claimants are other Member Institutions)
3. I understand that I have a continuing duty to disclose to NACUA any deviation from the membership criteria set out in the Bylaws and/or Membership Policy Statements of the Association that now exist or may arise during my membership.
4. I understand that any misrepresentation of the above statements may result in my disqualification and/or the termination of my membership.

Primary Representative Name (Print/Type) _____

Primary Representative Signature _____ Date _____