



**NATIONAL ASSOCIATION OF PRINCIPALS OF SCHOOLS FOR GIRLS**  
**APPLICATION FOR MEMBERSHIP**

DATE OF THIS APPLICATION \_\_\_\_\_

**SCHOOL** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

*(of person filling out this form)*

**HEAD** \_\_\_\_\_ COLLEGE/DEGREES \_\_\_\_\_

E-mail for Head of School \_\_\_\_\_

<b>ACCREDITATION</b> WHEN WAS SCHOOL FOUNDED / WHEN DID IT OPEN? _____
INCORPORATED NON-PROFIT? YES _____ NO _____ IF YES, WHEN? _____
DOES YOUR SCHOOL HAVE A NON-DISCRIMINATORY ADMISSIONS POLICY? _____
ACCREDITED BY? _____ MOST RECENTLY (Date)? _____

<b>STUDENTS</b> GRADES SERVED? _____ BOARDING -- DAY or BOTH? <i>(Circle one)</i>
SIZE OF STUDENT BODY: GIRLS _____ BOYS _____ TOTAL _____
NUMBER IN LAST YEAR'S GRADUATING CLASS _____
NUMBER ENTERING 4-YEAR COLLEGES OR CONTINUING SCHOOLS. _____
<i>Please attach a list of the schools or colleges each member entered (school profile)</i>

<b>FACULTY SIZE:</b> FULL TIME _____ PART TIME _____
ACTUAL CASH SALARIES FOR TEACHERS (Full time classroom only.)
Minimum _____ Median _____ Maximum _____
FACULTY EDUCATIONAL BACKGROUND <i>(Feel free to include information on separate pages)</i>
NUMBER WITH BA DEGREES _____ MA DEGREES _____ DOCTORATES _____
SPECIAL PROGRAMS OR FACULTY WORKSHOPS FOR WOMEN? _____
_____

**PHILOSOPHY OF THE SCHOOL** (Brief paragraph)

**CURRICULUM** (Brief paragraph)

**PROFESSIONAL ORGANIZATIONS TO WHICH THE SCHOOL BELONGS**

**SPONSORS:** It is important that you select two current NAPSG members who are willing to sponsor your school for membership. They should be very familiar with the school and its success in the community. Ask them to write to the Executive Director, giving any information which would be helpful to the NAPSG Council. The emphasis in these letters should be on the school, not its current Head.

Sponsors from whom letters will be coming. Remember: Ask them to write about the school!

1. Name \_\_\_\_\_ School \_\_\_\_\_

2. Name \_\_\_\_\_ School \_\_\_\_\_

**PLEASE RETURN THIS COMPLETED FORM WITH YOUR CATALOG OR BROCHURE AND FIRST YEAR DUES OF \$250 (check to NAPSG) TO:**

Bruce W. Galbraith, NAPSG  
23490 Caraway Lakes Drive  
Bonita Springs, FL 34135-8441

Questions? Call (239) 947-6196 or email: [napsg@mac.com](mailto:napsg@mac.com)  
(If not accepted, fees will be returned.)