



Central Ohio Chapter

Membership Application

Name _____ Professional Certifications _____

Address _____ City _____ Zip _____

Email _____ Telephone Number _____

Employer _____ Job Title _____

May we include your information in a directory available to other Chapter members? Yes No

Membership Levels

____ **Certified Member \$25** A Certified Member is a CFE and a member in **good standing** with the **National ACFE**, and is eligible to hold any position on the Chapter’s Board of Directors **ACFE Member #** _____

____ **Associate Member \$30** An Associate is an **current** Associate member in good standing with the **National ACFE**, and is eligible to hold certain positions on the Chapter’s Board of Directors **ACFE Member #** _____

____ **Affiliate Member \$35** An affiliate member is not a member of ACFE National; Affiliation is limited to the Central Ohio Chapter

____ **Student Affiliate \$15** Must be a full time student at an accredited University to qualify for student membership

School _____ **Major** _____

*Affiliate members are welcome to attend Chapter meetings and serve on Chapter committees, and are eligible to participate in all Chapter training programs. **Affiliate members are encouraged to consider membership with ACFE National <http://www.acfe.com/>**

Please mail application and dues to:

PO Box 1901

Columbus, OH 43216

or complete online at **<https://centralohiocfe.com/>**

*Annual Membership expires at the end of each calendar year