



AIATSIS

AUSTRALIAN INSTITUTE OF ABORIGINAL
AND TORRES STRAIT ISLANDER STUDIES

Membership Application Form

Title

First Name

Surname

Preferred Name

Date of Birth

CONTACT DETAILS:

Company

Address Line 1

Address Line 2

Suburb

State

Postcode

Postal Address

*(leave blank if same as
above)*

Postal Address Line

2

Suburb

State

Postcode

Mobile

Email

**Preferred Contact
Method**

Are you of Aboriginal or Torres Strait Islander heritage?

*If yes, which Aboriginal/or
Torres Strait Islander nation
do you identify with:*

AIATSIS Membership Obligations

1. Members must maintain active involvement with the Institute;
2. Members promote and/or contribute either directly to the work of AIATSIS, or in an area or field that accord with the AIATSIS Vision and Mission;
3. Members uphold AIATSIS' values and ethical guidelines; and
4. Members demonstrate cultural awareness and/or competency

Do you agree to comply with the AIATSIS Membership Obligations?

Yes **No**

Referee Details:

**AIATSIS Member
Name:**

Contact Email:

**Relationship to
Applicant:**

Additional Information:

Please indicated whether you approve for your name to be listed on the AIATSIS website, if you application is successful:

Yes **No**

NOTE: All other details remain confidential and are protected by the Privacy Act 1988

Criteria to become an AIATSIS Member:

Applicants must be able to fulfil one or more of the criteria listed below.

Please tick the criteria (one or more) you wish to be assessed against:

Significant (5 or more years) involvement in one or more of the following:

- Participation or employment in Aboriginal and Torres Strait Islander community or cultural organisations;
- Research, teaching or study related to Aboriginal and Torres Strait Islander peoples' culture and heritage; or
- Participation, including employment, in activities related to the collection, management, preservation and custodianship of Aboriginal and Torres Strait Islander peoples' culture and heritage.

**Current
Position/Company**

Qualifications

Please provide us with 300 words on how you meet the Membership criteria selected above:

Applicants must also submit their resume or curriculum vitae (max. 4 pages) with their application form.

**Signature of
Applicant:**

Date:

To submit your application email to: members@aiatsis.gov.au

If you require further information about the progress of your application please contact the **Membership Officer** on 02 6129 3930

Read about privacy at AIATSIS here aiatsis.gov.au/privacy