



POLITICAL SCIENCE ASSOCIATION
P.O Box 624, Zomba, Malawi

Membership Application and Renewal Form (January 2022- December 2022)

Personal Information			
Full Name			
Title (Prof/Dr/Mr/Mrs/Ms...)			
Date of Birth			
Nationality			
Postal Address			
Phone			
Email			
Academic And Professional Information			
Highest Qualification			
Qualification currently pursuing			
Name of employer			
Current position			
Membership of other Professional or Political Bodies			
Are you a member of other professional bodies? (specify)			
Are you a member of a political party in Malawi? (Mention the party)			
Do you hold a leadership position in a political party in Malawi? (Specify)			
PSA Membership Details			
New application		Membership Renewal	
Category		Premium member	
		Associate member	
		Student member	

Declaration

I declare that:

- I will respect and uphold the values and principles upon which the Political Science Association is founded.
- All information given in this form is, to the best of my knowledge, true and accurate

Signature.....

Date.....