



# BioCommunications Association, Inc.

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Email: office@bca.org

online: www.bca.org

## ***Proposal for Emeritus Membership***

*Completed proposal should be submitted to the current Emeritus Committee Chair.*

Emeritus Membership in the BioCommunications Association, Inc. is an honor. It recognizes distinguished craftsmanship, professional achievements and meritorious contribution in the visual communications media in the life sciences and medicine. Nominee must be an active BCA member for not less than twenty years, attained the age of 55, retired from the field of biocommunications and be sponsored by at least one member (active/retired/emergitus) and one other person. Sponsors must include a supporting letter with this completed proposal.

This proposal should address fully the following areas:

- *Publications and presentations on visual communications in the life sciences, medicine or related scientific research.*
- *At least 20 years membership in the BCA.*
- *Meritorious contributions through sustained BCA association work (Chapter/International)*
- *Proof of retirement from the field of biocommunications.*
- *Professional contributions for clients toward the publication of scientific books or media productions.*

### ***Candidate Contact Information***

Date \_\_\_\_\_

Name \_\_\_\_\_ Chapter \_\_\_\_\_

Former position title \_\_\_\_\_ Retirement date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Year first joined BCA \_\_\_\_\_ Total years of membership (does not have to be continuous) \_\_\_\_\_

### ***Primary Sponsor Contact Information (BCA Member)***

Name \_\_\_\_\_ Chapter \_\_\_\_\_

Position title \_\_\_\_\_ Company/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

### ***Secondary Sponsor Contact Information***

Name \_\_\_\_\_ Chapter \_\_\_\_\_

Position title \_\_\_\_\_ Company/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**Statement of Emeritus Qualifications**

*Please submit all information that would assist the committee to make an informed decision.  
A resume and curriculum vitae (CV) may be submitted in addition to this form.*

**Education:**

**Related association memberships** \_\_\_\_\_

**Designations and honors** (state year awarded):

RBP \_\_\_\_\_ Creer Award \_\_\_\_\_ Schmidt Laureate \_\_\_\_\_ FBPA \_\_\_\_\_ FBCA \_\_\_\_\_  
Other(s) non-BCA \_\_\_\_\_  
Professional certification(s) \_\_\_\_\_

**Related experience:**

Positions held

Work accomplished in visual communications and allied fields

Work accomplished for BCA (Chapter/International)

**Books and/or papers published:**

*We the undersigned, sponsor the above candidate and believe that the information contained herein is correct to the best of our knowledge.*

Signature of primary sponsor \_\_\_\_\_ Date \_\_\_\_\_  
Signature of secondary sponsor \_\_\_\_\_ Date \_\_\_\_\_

*For BCA official use only*

Date received by Emeritus Committee \_\_\_\_\_ Chair \_\_\_\_\_  
Action taken by Emeritus Committee \_\_\_\_\_ Date \_\_\_\_\_  
Date received by Board of Governors \_\_\_\_\_ President \_\_\_\_\_  
Action taken by Board of Governors \_\_\_\_\_ Date \_\_\_\_\_  
Date approved \_\_\_\_\_ Honor conferred \_\_\_\_\_