

Membership Application

Name:	
Address:	
Telephone (cell):	
Email Address:	
Graduates of the IISHJ Rabbinic Prog signature and date at the bottom of thi	gram need only apply with information above and your is application.
<u>Mei</u>	mbership Category
There are three memberships categories See explanation of membership categor	s: full member, affiliate member, and student member. ries in <u>bylaws</u> .
Which category of membership are you	applying for?
	Employment
Present Employer:	
Title:	Years in position:
If you are currently affiliated with anoth	her Rabbinical Association, please indicate which one(s)

Education and Degrees

Please forward documentation of all graduate degrees received. A scan, photo, or photocopy will suffice.

Undergraduate Degree(s):
College or University:
Graduate Degree(s):
College or University:
Rabbinical Training
Please forward documentation of ordination and an informal transcript or list of courses taken to support or enhance your rabbinical training.
Date and Institution of Ordination:
References
Please submit two letters of reference. One should be from a current AHR Member, a graduate of an IISHJ professional program (Leader of Officiant), or a lay leader with at least five years of membership in the Secular Humanistic Jewish movement, except under special circumstances. The second should be from someone who knows you professionally.
<u>Essay</u>
Please forward at least 500 words
Why have you chosen Humanistic Judaism? Describe your ideological journey, and why you identify as a Secular Humanistic Rabbi.
I hereby apply for membership in the Association of Humanistic Rabbis, and if accepted I agree to abide by its bylaws and code of ethics .
Signature Date

Please submit completed application online and send to AHR Membership Chair along with supporting documentation to:

Rabbi Miriam Jerris Membership Chair, AHR rabbi@shj.org