

Mid-Eastern Association of Educational Opportunity Program Personnel

Delaware ■ District of Columbia ■ Maryland ■ Pennsylvania ■ Virginia ■ West Virginia

Institutional Program Membership Application

Please forward a copy of this form via fax to 814-865-2766

Membership Year: October 1, 2023 to September 30, 2024

Date _____ If paying by PayPal, please write receipt number here _____

1-4 Full-time Permanent Employees-**\$200** 5-9 Full-time Permanent Employees-**\$300** 10 or more Full-time Permanent Employees-**\$400**

Agency/Institution Name: _____

Project:	EOC	SSS	Classic UB	VUB	You MUST be a Member of Your state/District Affiliation.
	Talent Search	McNair	UBMS	Other:	

Mailing Address: _____

Phone: _____ Extension: _____ Fax Number: _____

Project Web Page Address: http:// _____

Please list all FT project staff members. Use reverse side for additional names.

	Name	Title	Email	Years in TRIO	TRIO Alum (Y/N)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

PLEASE NOTE:

Institutional Program Memberships must be paid for EACH TRIO Program at your institution, *not* collective programs!

MEAEOPP Federal Tax ID # is: 31-0939782
Please print the application and mail it with your payment, payable to MEAEOPP to:

MEAEOPP
Attn: Robyn Murphy
209 Grange Building
University Park, PA 16802
(814)865-2320
rlm39@psu.edu

For official use only

Check # _____
Date Rec. _____
Date of Check _____
Amt. Rec. _____
Mailed Check _____