

# Application for Recertification

## Personal Information

I am not a member of ALA

I am a member of ALA and my Member ID is:

**First Name**

**Middle**

**Last Name**

**Organization/Firm**

**Organization's General Phone Number**

**Your Title**

**Working:**

Full-time

Part-time

**Address 1**

**Address 2**

**City**

**State/Province**

**Zip/Postal**

**Country**

**Business Phone**

**Home or Cell Phone**

**Fax**

**Email**

**Preferred Mailing Address**

Same address as above

Choice 2

Required fields\*