

Florida Health Sciences Library Association

<http://www.fhsla.org>

2012 Membership and Committee Volunteer Form

_____ New Member (How you heard about FHSLA: _____)

_____ Renewal

Name: _____

Position/Title: _____

Library Name: _____

Institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Library Type:

- _____ Academic
- _____ Corporate
- _____ Hospital/Clinic
- _____ Public
- _____ Special
- _____ Student
- _____ Vendor
- _____ Other _____

Member of Other Library Associations?

- _____ ALA
- _____ FLA
- _____ Miami HSLC
- _____ MLA
- _____ SC/MLA
- _____ SLA
- _____ TaBaMLN
- _____ Other _____

AHIP Member?

- Yes _____ No _____
- _____ Emeritus
 - _____ Distinguished
 - _____ Senior
 - _____ Member
 - _____ Provisional

Would you like to be a FHSLA officer?

(Terms begin following the Annual Meeting)

- _____ Vice President/President Elect
- _____ Secretary (2 year term)
- _____ Treasurer (2 year term)

Would you like to be on a FHSLA Committee?

(Terms begin following the Annual Meeting)

- _____ Continuing Education
- _____ Honors and Awards
- _____ Membership
- _____ Nominating Program
- _____ Strategic Planning

Dues are \$15.00 for the calendar year, January – December

FHSLA FEIN: 59-2829362

Send form & your check (made payable to FHSLA) to:

Denise Shereff, Treasurer
Pediatric Epidemiology Center
University of South Florida
3650 Spectrum Blvd., Suite 100
Tampa, FL 33612

Questions?

Contact Denise Shereff at
shereffd@epi.usf.edu or (813)
396-9557



**Florida Health Sciences Library Association
Mentorship Program Interest Form**

<http://www.fhsla.org>

FHSLA's Membership Committee is proposing an exciting new Mentorship Program! Rather than assigning mentees to a specific mentor we would like to have a Mentorship Ala Cart program. FHSLA members in need of mentorship in specific areas will be able to view of list of possible mentors within those specific areas. Before we fully launch this program, we need to

determine who is available to be a mentor in which areas, and which areas individuals feel that they could use a mentor in. Once we have a list of potential mentors and topic areas, we will post that list on the FHSLA website.

- I would be interested in being a mentor

The areas I would feel comfortable mentoring an individual in are:

- Career development
- Management
- Collection development
- Grant writing
- IRB
- Other _____

- I would be interested in having a mentor

The areas I would like to have a mentor in are:

- Career development
- Management
- Collection development
- Grant writing
- IRB
- Other _____

Name: _____

Position/Title: _____

Email: _____

Phone: _____

Please circle the preferred method of contact: Email Phone

If you have any questions or would like to learn more about this FHSLA members-only program, please contact Kathy Moeller, Membership Chair, at 904-244-3240 or kmoeller@ufl.edu.