

To apply for membership in the American Association of Colleges for Teacher Education (AACTE), please complete and return this application. Please type or print legibly all information requested in this application.

OFFICIAL NAME OF INSTITUTION

(AACTE will use this name in all official references to your institution)

INSTITUTION NAME

MAILING ADDRESS

CITY STATE ZIP

URL/WEB ADDRESS

PHONE FAX

PRESIDENT, PROVOST, OR CHANCELLOR

NAME

TITLE

MAILING ADDRESS

CITY STATE ZIP

E-MAIL

PHONE FAX

AACTE MEMBERSHIP CHIEF REPRESENTATIVE

(This is the official responsible for your institution's teacher education program—usually a dean or chairperson—and will be the administrator for your institution's membership. This person will receive the yearly dues notices and will assign all other institutional representatives for AACTE membership.)

NAME

TITLE

MAILING ADDRESS

CITY STATE ZIP

E-MAIL

PHONE FAX

ASSISTANT TO THE CHIEF REPRESENTATIVE

NAME

TITLE

MAILING ADDRESS

CITY STATE ZIP

E-MAIL

PHONE FAX

REGIONAL ACCREDITATION STATUS

- Institution is regionally accredited.
 Institution is seeking regional accreditation.

NAME OF REGIONAL ACCREDITING ORGANIZATION

TYPE OF INSTITUTION AND INSTRUCTIONAL UNIT

ACADEMIC YEAR

INSTITUTION TYPE AND AFFILIATIONS

If your institution is a member of any of the following organizations, please mark all that apply:

CAEP: Council for the Accreditation of Educator Preparation
 CADREI: Council of Academic Deans from Research Education
 HACU: Hispanic Association of Colleges and Universities
 NAFEO: National Association for Equal Opportunity in Higher
 NCATE: National Council for Accreditation of Teacher Education
 TEAC: Teacher Education Accreditation Council
 TECSCU: Teacher Education Council of State Colleges and Universities

Membership Criteria

- The institution is a two-year, four-year, or graduate-only degree-granting institutions of higher education.
- The institution's primary purposes are educational.
- The institution is regionally accredited.
- The institution is committed to equal educational opportunity, affirmative action, diversity, and multiculturalism.
- The institution can demonstrate that the preparation of professional educators is one of its most important institutional purposes.
- The institution is committed to the preparation of professional educators for PreK-12 schools.
- The institution has an identifiable unit devoted to the preparation and training of professional educators.
- Resources are available to the professional education unit in the areas of personnel, funding, physical facilities, library, equipment, materials, and supplies.
- The institution has written policies and procedures (including admissions and exit criteria, student assessment, and evaluation of graduates) upon which the operation of the unit rests.

Endorsement of this Application

Your endorsement of this application signifies that your institution proposes to take an active part in the work of AACTE and that your institution is committed to paying the membership fee.

I have read and approved this application.

SIGNATURE OF CHIEF REPRESENTATIVE

TYPED OR PRINTED NAME

TITLE

DATE

Membership Dues

AACTE assesses dues on a calendar-year basis and prorates its dues by quarter for institutions joining partway through a calendar year.

DETERMINING YOUR INSTITUTION'S DUES AMOUNT: To determine the dues amount for your institution, you must first determine your school or department of education's productivity as reported to the National Center for Education Statistics' IPEDS database. The dues amount is determined based on the most recent available IPEDS data.

DEFINITION OF PRODUCTIVITY: AACTE defines "productivity" for the purpose of dues calculations as the total number of students reported to IPEDS that received a first-major bachelor's, master's, or doctoral degree in education (not including students receiving teacher licensure only). This productivity total represents those individuals identified by IPEDS CIP code 13.

DETERMINING YOUR INSTITUTION'S PRODUCTIVITY TOTAL: To determine your institution's productivity total, contact your institution's central office data administrator OR contact AACTE's Membership department for assistance in pulling the data directly from IPEDS (recommended).

NOTE: Future-year dues amounts for your institution will be calculated automatically with data that AACTE will download directly from IPEDS for the appropriate completion year.

Once your institution's productivity total has been determined, compare to the dues and representative ranges below to determine your dues amount and representative allotment.

PRODUCTIVITY	2025 DUES	REPRESENTATIVE ALLOTMENT
Community College	\$1050	1
0-25	\$2,090	4
26-50	\$2,995	6
51-100	\$3,885	8
101-200	\$5,375	8
201-350	\$6,865	8
351-500	\$8,365	10
501-700	\$9,855	10
701-1000	\$11,350	12
1001+	\$12,845	14

IPEDS INSTITUTION ID

TOTAL SCHOOL/DEPARTMENT PRODUCTIVITY (FROM IPEDS)

YOUR INSTITUTION'S REPRESENTATIVE ALLOTMENT (FROM CHART ABOVE)

DUES AMOUNT (SEE DUES CHART)

CAN WE PRORATE OUR DUES? If you are applying for membership in any quarter other than the first quarter of the year, calculate your institution's prorated dues as follows:

PRORATED DUES SCHEDULE

Quarter in which application is submitted	Multiply your dues by this percentage
First: January – March	Pay total dues amount
Second: April – June	[dues amount] X 75%
Third: July – September	[dues amount] X 50%
Fourth: October – December	[dues amount] X 25%

ASSIGNMENT OF REPRESENTATIVES

Once your application has been approved and membership is activated, the Chief Representative (CR) identified in this application will be able to assign Institutional Representatives online through the AACTE website. Procedures for assigning representatives will be sent to the CR at the appropriate time.

Payment Information

If you would like to pay your AACTE dues via credit card, please provide us with the following information:

Check one: Visa MasterCard American Express

CREDIT CARD NUMBER EXPIRATION DATE CVV

AUTHORIZING SIGNATURE

PRINTED NAME

To pay by check, please make check payable to:
American Association of Colleges for Teacher Education.

Please remit payment to:

American Association of Colleges for Teacher Education (AACTE)
PO Box 825490
Philadelphia, PA 19182-5490

If prepayment by check or credit card authorization is not submitted with this application, a dues invoice will be mailed following acceptance of your application. Membership becomes active when the invoice has been paid.