



# NISPAcee

THE NETWORK OF INSTITUTES AND SCHOOLS OF PUBLIC  
ADMINISTRATION IN CENTRAL AND EASTERN EUROPE

## APPLICATION for INDIVIDUAL MEMBERSHIP

Surname: .....

First name: .....

Academic title: .....

Name of Institution: .....

Name of Academic Unit/Department: .....

Position within Institution: .....

Institutional Postal Address: .....

tel: ..... fax: ..... e-mail: .....

Please write about your current professional/academic responsibilities (research, educational, etc.) and special interests in public administration on a separate sheet of paper and send together with your professional CV to the NISPAcee Headquarters ([nispa@nispa.org](mailto:nispa@nispa.org)).

I hereby confirm that I have read the information concerning NISPAcee membership in the [NISPAcee Bylaws](#) published on the NISPAcee website and I apply for the membership under its regulations.

Date: .....

Signature: .....

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