# Membership Policy

|  |  |  |  |
| --- | --- | --- | --- |
| Policy number | 18 | Version | 2 |
| Drafted by |  | Approved by Board on |  |
| Responsible person |  | Scheduled review date |  |

## Introduction

The Board of FMPLLEN is committed to ensuring that its membership is reflective of the organisation and its stakeholders

## Purpose

The purpose of this policy is to establish the framework and guidelines for the creation of productive partnerships betweenFMPLLEN and the membership of the organisation.

## Policy

The fundamental principles that shape FMPLLEN’s relationships with members are:

1. Membership of FMPLLEN is to be approved at the FMPLLEN board meeting after application is received.
2. FMPLLEN will ensure members are provided with up to date information and have access to resources and tools as requested.
3. FMPLLEN will provide members with the opportunity to become a member of a network (sub committees) as appropriate.
4. All members will be entitled to attend the AGM, other designated LLEN activities.

## Authorisation

[Signature of Board Secretary]  
[Date of approval by the Board]  
[Name of Organisation]

# MEmbership Procedures

|  |  |  |  |
| --- | --- | --- | --- |
| Procedures | 18 | Version | 2 |
| Drafted by |  | Approved by EO on |  |
| Responsible person |  | Scheduled review date |  |

## Responsibilities

The Board is responsible for the development and review of this policy.

All Board members, casual, permanent and contract staff and volunteers are responsible for adhering to this policy.

## Procedures

All membership applications are to be approved at the next board meeting on receipt of on application.

All members must adhere to the code of conduct for members of FMPLLEN.

Members will be added to the database for information sharing.

## Related Documents

Articles of Association FMPLLEN

## Authorisation

Carol Smith

Executive Officer

Date

## APPENDIX A

1. Membership to FMPLLEN is free.



Appendix B Membership Application

**MEMBERSHIP APPLICATION FORM**

*(Please print details below - strike out where not applicable)*

**Member Name:** ……………………………………………………………………… **Title:** ……………………..

**Home/Employer Postal Address:** ……………………......…………………………………………………………………………………………………………

**Employer Name:** …………………………………………………………………………………………………….

**Position held:** ………………………………………………………………………………………………………..

**Phone Number:** ………………………………… **Mobile:** ………………………………………………………...

**Work Email Address:** ……………………………………………………

**Private Email Address:** ……………………………………………….

# I,

*(Full name of Applicant)*

# of

*(Suburb)*

# desire to become a member of the Frankston/Mornington Peninsula Local Learning and Employment Network Incorporated.

**Class of Member** Please *tick the appropriate box for the class of Member to which you belong:*

# Community Member

# Organisational Member

# Membership Category for Organisational Members

If an Organisational Member, please tick the appropriate Membership Category box:

D Schools

D TAFE Institutes or Universities with TAFE sectors

D Adult Community Education Organisations

D Other Education and Training Organisations, including Private Registered Training Organisations, Universities and Group Training Companies

D Trade Unions, Peak Trade Unions organisations and Regional Trade Unions

D Employers, Peak Employer Organisations, Regional Employer Organisations and Employment Agencies

D Local Governments

D Other Community Agency and Organisations, Commonwealth and State Government Departments, Adult, Community and Further Education Regional Councils, Regional Youth Councils, Area Consultative Committees etc.

D Koorie Organisations, Peak Koorie Agencies or Regional Koorie Organisations

If admitted as a Member, I agree to be bound by the Rules of the Association for the time being in force.

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*Signature of or on behalf of Applicant*

Date:\_

*(An application on behalf of an Organisation MUST be signed by a person who has the requisite authority, such as a Director, Executive Officer, Secretary or other authorised officer, of that organisation).*

***Please complete and return to: Frankston/Mornington Peninsula LLEN, PO Box 253, Hastings 3915***

***Or alternatively you could fax: 03 5977 2036***