

# American Auditory Society

## Graduate Student Complimentary Subscription Program for

### *Ear and Hearing and the Bulletin of the American Auditory Society*

#### **Qualifications:**

The AAS, through a sponsorship program funded by companies supportive of research in the discipline of hearing, provides a mechanism for full-time, non-working resident graduate students in audiology in the United States, to receive, free of charge, the above-mentioned journals of the AAS.

To qualify, students must **fill out the Subscription form below in its entirety**, have the attached form signed by the Department Chair or appropriate Head of Audiology, and send or FAX the completed form to AAS. Incomplete or questionable forms will not be processed. Journals are sent to the student's permanent mailing address only. Print or type clearly. AAS will not be responsible for unreadable information. This form must be submitted each year of the student's graduate program, with subscriptions starting in January of each year. This program is not designed for part-time graduate students, for those who are employed, or for distance learning students.

To apply, the student is asked to:

1. Fill out the on-line Graduate Student in Audiology Complimentary Journal Subscription Application form below in its entirety. The form can be printed also for sending.
2. Email, FAX or send the completed form to the AAS.
3. Provide the filled out Department Confirmation form to the responsible faculty member to sign (fill out as much as possible, and then give it to the responsible faculty member to sign).
4. Send the completed Department Confirmation form to AAS.

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**American Auditory Society**  
**Graduate Student Complimentary Journal Subscription Application**

Student Name: \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
(City)

(State)

(Zip)

Home Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

University in Attendance: \_\_\_\_\_

University Address: \_\_\_\_\_

\_\_\_\_\_  
(City)

(State)

(Zip)

Degree Being Sought: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

I certify that I am a full-time resident audiology graduate student in the program identified above, and that all the information provided is accurate and consistent with student qualifications.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Department Confirmation Form

### **Graduate Student Complimentary Subscription Program for *Ear and Hearing and the Bulletin of the American Auditory Society***

*(The student is asked to print and fill everything out on this except the signature)*

*This form is to be signed by the University Department Chair or Head of Audiology,*

This student is a full-time graduate audiology student in residence in our program and meets the qualifications identified below to receive complimentary subscriptions of the journals of the AAS.

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Faculty Name: \_\_\_\_\_ Position: \_\_\_\_\_  
(Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

University: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

(City)

(State)

(Zip)

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_

Send or FAX (435-574-0063) to:  
American Auditory Society  
352 Sundial Ridge Circle  
Dammeron Valley, UT 84783