



**COBEC**

*Consortium for Belize Educational Cooperation*

## **Membership Application for Belizean Members**

**Date:**

**Name of Institution:**

**Contact Person:**

**Mailing Address:**

**Email Address:**

**Name of Nominating Belizean Institution:**

**Name of Nominating non-Belizean Institution:**

**Name of Institutional Representative(s):**

**Address(es) of Institutional Representative(s):**

**Email Address(es) of Institutional Representative(s):**

**Please send this form and the following items to the COBEC U.S. Co-Chair:**

- 1. Letter of Institutional Endorsement from applying institution;**
- 2. Letter of Endorsement from a Belizean full COBEC member institution in good standing;**
- 3. Letter of Endorsement from a non-Belizean full COBEC member institution in good standing; and**
- 4. A list and description of activities, programs and initiatives that the applying institution has conducted in Belize and anticipates doing in the future.**

**Prospective Member Institutions should attend at least one COBEC conference prior to submitting an application for membership. At present the annual membership fee for non-Belizean members is US\$ 200.**