



New York Staffing Association

Application for Membership

Your company is eligible for membership in the New York Staffing Association if it is a firm operating a temporary personnel service or permanent direct hire staffing company that places positions in the State of New York. Only Active Members have voting privileges or may hold office on the Board of Directors in NYSA.

_____(Company Name) wishes to apply for membership in the New York Staffing Association (NYSA), a corporation organized and existing under the Not-for-Profit law of the State of New York. By executing this application, your company affirms it:

- Has no affiliation with other member firms of this Association, except as otherwise noted
- Has made no misrepresentations in this application for membership
- Shall adhere to the principles of the Association as reflected in its Charter, By-Laws, and Code of Ethics

As an NYSA Member Company, your company agrees to follow the NYSA Code of Ethics when engaging in temporary employment services. Please review these documents prior to filing an application for membership. We recognize the following responsibilities to our employees on temporary assignments:

1. Not to charge candidates any fees or percentages for sending them on assignments
2. To pay them promptly at set and stated intervals
3. To pay, contribute, or withhold all taxes and insurance required by city, state or federal governments
4. To adhere to any other laws and regulations governing employers

Company Name:	
Primary Contact:	
Address:	
City, State, Zip:	
Phone:	
Fax:	
Email:	
Website:	
Number of Branch Offices:	
Number of Franchises:	
Number of Licensees:	
Number of Associated Companies:	

Does your business or you own any part of a staffing service operating under another name?

Yes No

If yes, give the name(s):

Company is a:

Corporation Partnership Sole Proprietorship

Officers of the Company Making Application:

Name:	Title:	
Name:	Title:	

Do the above officers own 100% of the ownership of the organization? Yes No
If no, please furnish the names and addresses of all principals:

Name:	Address:	
Name:	Address:	

How long (months, years) have you been providing temporary and/or staffing services?	Business is a: <input type="checkbox"/> Local company <input type="checkbox"/> National company If national, are you a branch of a firm with its principal offices outside of NY State? <input type="checkbox"/> Yes <input type="checkbox"/> No
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What industries of staffing do you currently place positions for? (Please check all that apply)

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Education | <input type="checkbox"/> Law | <input type="checkbox"/> Executive Coaching |
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Energy/Utilities | <input type="checkbox"/> Enforcement/Security | <input type="checkbox"/> Pharmaceutical/Biotechnology |
| <input type="checkbox"/> Advertising/PR | <input type="checkbox"/> Engineering | <input type="checkbox"/> Legal | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Aerospace/Defense | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Life Sciences | <input type="checkbox"/> Real Estate/Property Management |
| <input type="checkbox"/> Architecture/Design | <input type="checkbox"/> Environmental | <input type="checkbox"/> Light Industrial | <input type="checkbox"/> Restaurant/Food Services |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Fashion/Apparel | <input type="checkbox"/> Management Consulting | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Finance | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Retained Search |
| <input type="checkbox"/> Call Center/Customer Service | <input type="checkbox"/> Financial Services | <input type="checkbox"/> Marketing/Direct Marketing | <input type="checkbox"/> Sales |
| <input type="checkbox"/> Commercial/Industrial | <input type="checkbox"/> Government/Civil Service | <input type="checkbox"/> Medical | <input type="checkbox"/> Scientific |
| <input type="checkbox"/> Communication/Media | <input type="checkbox"/> Health Care | <input type="checkbox"/> Medical Equipment | <input type="checkbox"/> Temp/Contract Staffing |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Hospitality/Hotel | <input type="checkbox"/> Merchandising/Buying | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Consumer Packaged Goods | <input type="checkbox"/> Human Resources | <input type="checkbox"/> Non-profit | <input type="checkbox"/> Warehousing/Distribution |
| <input type="checkbox"/> Ecommerce/Web Design | <input type="checkbox"/> Insurance | <input type="checkbox"/> Nursing | |
| | <input type="checkbox"/> IT/Computer Technology | <input type="checkbox"/> Outplacement & | |

If you have been providing temporary and/or staffing services for less than one year, please give the name and telephone number of two business references that NYSA may contact:

Name:		Phone:	
Name:		Phone:	

Does your business derive its principal revenue (more than 50%) from providing temporary services?
 Yes No

Are you also engaged in the permanent (direct hire) employment agency business?
 Yes No

Do you place freelancers or independent contractors on a temporary basis?
 Yes No

Are you a member of the American Staffing Association?
 Yes No

How did you hear about NYSA? _____

What was the determining factor in your decision to join NYSA?

Please select the committees you are willing to serve on:

- Membership Committee** (assists with membership recruitment and services)
- Legislative Committee** (advises the membership of any pending legislation that would affect the industry)
- Programming Committee** (arranges program topics, speakers and events for members)
- Ethics Committee** (investigates complaints and ensures all members comply with the Code of Ethics)
- Nominating Committee** (responsible for nominating candidates to serve on the Board Officers positions)
- Direct Hire Committee** (makes recommendations on matters uniquely affecting permanent staffing firms)
- Public Relations/Marketing Committee** (assists in press releases, marketing brochures, legislative updates and newsletters on behalf of NYSA)

Would you be interested in serving on the Board of Directors? Yes No

NYSA MEMBERSHIP DUES

As a condition of active membership in The New York Staffing Association, the undersigned agrees to pay to NYSA the following annual dues. All NYSA members are members of both their designated chapter(s) and the overall state chapter. Please include **ALL** chapters where your company has branch offices

- Metro—Level I (New York City) \$1500 (*\$10M+ Revenue*)
- Metro— Level II (New York City) \$900 (*\$9.9M- Revenue*)
- Albany \$400
- Buffalo \$400
- Long Island \$400
- Westchester \$400
- Member at Large \$400

TOTAL \$ _____

Please contact Jennifer Kelley at 646-723-3215 to confirm you are entering the correct total amount if you have multiple branches.

Check Please make checks payable to: **New York Staffing Association**

Credit Card Type:	MC	VISA	AMEX
Credit Card Number:		Expiration Date:	
Security Code:		Billing Zip Code:	

 Name of Staffing Service

 Signature of Authorized Signer

 Date

Return your application, with payment to:

NYSA Membership Department
110 East 42nd Street, Suite 802
New York, NY 10017
Fax: 646-723-3216

Dues must accompany your application or it will not be processed.