



CPRS

Advancing Public Relations &
Communications Management

SCRIP

Pour une gestion optimisée des
relations publiques et des communications

COLLEGE OF FELLOWS APPLICATION FOR MEMBERSHIP

Name _____

Title _____

Organization _____

Street address _____

City, Province, Postal Code _____

Telephone _____

E-mail _____

Member Society _____

Year PR career began _____

Date of accreditation _____

Post secondary education _____

Name, address, and telephone number of individuals who will be providing supporting letters of recommendation. *Letters are to be sent directly by the sponsors to the Executive Director, CPRS National at executivedirector@cprs.ca.*

1. _____
2. _____
3. _____
4. _____
5. _____

Submitting this application for membership in the CPRS College of Fellows I declare the information and supporting materials are true and accurate.

If I am elected to membership I agree to serve the College, if requested, by performing tasks intended to advance the state of the profession and by maintaining my active CPRS membership.

Signature _____

Date _____

Please submit your application, duly filled and accompanied by the prescribed supporting documentation to executivedirector@cprs.ca no later than 11:59 p.m. ET on Friday, September 26, 2025. The application fee of \$250 + HST must be paid by the deadline. [Click here to pay the fee.](#)