



# National Association of Physician Recruiters Active Membership Application

Active membership in the National Association of Physician Recruiters is open to those organizations that recruit physicians. This includes physician recruiting firms, group practices, hospitals, and managed care facilities.

NAPR Membership is a Company Membership.

APPLICANT ORGANIZATION NAME: \_\_\_\_\_

## CRITERIA FOR MEMBERSHIP

To qualify for **ACTIVE** membership, organization must recruit physicians either for profit or for their facility.

- For Profit Search Firms must recruit physicians for the healthcare industry and collect no placement fee from physician candidates.
- Hospitals, Groups, and Managed Care Recruiters have primary responsibilities of the department or individual to be in physician recruitment activities.

**Criteria for ACTIVE membership require that members of this association shall be those organizations which are:**

- Determined and elected by the NAPR Board of Directors, in its sole discretion, to have met the requirements for Membership in the association, and
- In conformance with the standards of ethical professional practice as established by the NAPR Board of Directors.

## ACTIVE MEMBERS

**The Active Membership Fee is  
\$450 per year.**

*(Dues Schedule Effective Date: July 1, 2007 – Dues payments are deductible by members as an ordinary and necessary business expense, however contributions or gifts to NAPR are not deductible as charitable contributions for federal income tax purposes.)*

### APPLICATION PROCESSING FEE & DUES

A **ONE-TIME, NON-REFUNDABLE, NON-CREDITABLE** processing fee of **\$50.00** must accompany your completed membership application. All fees and dues are payable in U.S. dollars. The amount of dues is subject to change by the NAPR Board of Directors. Dues are paid on a calendar year basis from January 1 to December 31 each year and are non-refundable.

## DEFINITIONS

**What is a recruiter?** A recruiter is a member of any organization whose job it is to actively seek to secure the services of or hire an individual qualified for the position that is to be filled either within that organization or for another organization from which a recruiting contract has been received.

**What constitutes Active Membership?** Active Membership within NAPR is an organization approved by NAPR Board of Directors that recruits physicians either for profit or for their facility for the healthcare industry such as For-Profit Firms; or Hospitals, Groups or Managed Care Recruiters of an organization that have the primary responsibilities of the department or an individual to be in physician recruitment activities.

## NAPR MISSION STATEMENT

It is the purpose of the National Association of Physician Recruiters (NAPR) to maintain industry leadership by promoting excellence, ethical standards, innovation, and a spirit of cooperation in the delivery of services to the healthcare industry.

### Note:

It is understood that if a hospital or organization is owned by or is a part of a larger system that all recruiters within the whole system are to abide by the same standards of ethical professional practice as defined in the Code of Ethics of the National Association of Physician Recruiters (NAPR).

## NAPR VISION STATEMENT

The National Association of Physician Recruiters (NAPR) is committed to providing continuous and dynamic educational forums to insure the ability of our membership to respond to the changes in the healthcare industry.

We are dedicated to promoting a positive industry image through a practical, but strict, Code of Ethics based upon excellence, honesty, fairness, peer review, and reasonable industry standards.

We are dedicated to the enhancement of all physician recruiting activities through a spirit of openness and cooperation in the exchange of ideas and the pooling of resources, as we maintain our position as leaders in our industry.

# Active Membership Application

I hereby make application for ACTIVE membership in the National Association of Physician Recruiters and agree to be governed by its Bylaws and Standards of Ethical Practices and to promote the objectives of the Association, as long as I am a member.

**(PLEASE PRINT ALL INFORMATION BELOW • IF FURTHER EXPLANATION IS NEEDED, ATTACH ADDITIONAL SHEET)**

Name of Organization/Hospital/Group: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website/URL: \_\_\_\_\_

Authorized Voting Member: \_\_\_\_\_ Title: \_\_\_\_\_

Has this organization been a member of NAPR previously?  YES  NO

If YES, please provide organization name and years of previous membership: \_\_\_\_\_

Tell us about your organization:

- Current number of physician recruiters/individuals doing recruiting? \_\_\_\_\_
- Month/Year legally formed as a physician recruiting organization? \_\_\_\_\_ / \_\_\_\_\_
- Number of physicians your organization placed/recruited last year? \_\_\_\_\_
- Does your organization recruit only physicians?  YES  NO
- If NO, please list other specialties recruited? (ex: RN, PA, etc) \_\_\_\_\_

Tell us about the structure of your recruitment organization: (Please check all that apply)

- Contingency  Retained  Locum Tenens  In-House  Facility Based  For-profit Hospital  Not-for-profit Hospital  
 Hospital System  Contract Management

To what other professional associations does your company belong? \_\_\_\_\_

Does your organization use independent consultant/contractors as recruiters?  YES  NO

If YES do they recruit for themselves, your organization and other organizations? \_\_\_\_\_

AND, if so, please explain and identify the contractors and your relationship: \_\_\_\_\_

Is your organization affiliated with; owned by, or does it own another entity which provides recruitment or non-recruitment services that it markets to physicians or physician recruiters?  YES  NO

IF YES, please provide further information to include the entity's name(s), purpose, and contact information: \_\_\_\_\_

Tell us how you heard about NAPR?  Colleagues  Convention/Education  Mailer  Publication  Website  Other \_\_\_\_\_

Why do you want to join NAPR?  Education  Ethics  Networking  Sourcing Services  World Job Bank  Other \_\_\_\_\_

## STATEMENT OF UNDERSTANDING/AGREEMENT TO COMPLY WITH NAPR CODE OF ETHICS

(NAPR CODE OF ETHICS CAN BE VIEWED ON THE NAPR WEBSITE BY GOING TO: <http://www.napr.org/codeofethics.asp>)

I have read and agree to abide by the Code of Ethics of the National Association of Physician Recruiters (NAPR) and acknowledge by my signature the violation of any section will subject my organization to appropriate sanctions as defined in the Code of Ethics up to and including expulsion by the NAPR Board of Directors as provided by the Bylaws.

I authorize NAPR Board of Directors to contact any sources of information pertaining to the membership eligibility of my organization. I understand that my signature below signifies that I am authorized to apply for NAPR membership on behalf of my organization and the information in this application is true and accurate. I understand that this is an application for membership only and the NAPR Candidate Generation Programs require separate application after Active Membership approval.

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

Print or type full name here: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Referring NAPR Member (IF APPLICABLE): \_\_\_\_\_

**PAYMENT:** Total Amount Paid: \$ \_\_\_\_\_ includes  \$50 Application Fee  \$450 Annual dues  \$175 Enhanced Website Link

**PAYMENT METHOD:**  Check payable to NAPR enclosed for total of \$ \_\_\_\_\_ Check# \_\_\_\_\_

American Express  MasterCard  Visa

Account # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ 3- or 4- digit Security Code: \_\_\_\_\_

**Print Cardholder's Name:** \_\_\_\_\_ **Cardholder's Signature:** \_\_\_\_\_

After membership application is approved, please  Charge my credit card account above  Send an invoice for dues amount

Please mail with check payable to NAPR or fax (with credit card payment only) to:

NAPR Headquarters: 222 S. Westmonte Dr, Suite 101, Altamonte Springs, FL 32714 • 407-774-7880 • fax: 407-774-6440 • [www.napr.org](http://www.napr.org)

FOR OFFICE USE ONLY: DATE: \_\_\_\_\_ CHECK/REF# \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_