



CALIFORNIA COMMUNITY COLLEGE  
MENTAL HEALTH & WELLNESS ASSOCIATION

**California Community College Mental Health & Wellness Association**

**2022 - 2023 Membership Application**

**Membership Period: Academic Year, July 2022 – June 2023**

**New Member**

**Renewing**

**DUES By**

**11/1/2022\***

\*If dues are unpaid after 11/1/2022, please contact Dr. Alison Johnson (contact info below) to avoid losing membership benefits.

- |   |  |          |
|---|--|----------|
| <input type="checkbox"/> <b>Regular Membership (Voting)</b>                                 | Each regular member is a voting member                             | \$75.00  |
| <input type="checkbox"/> <b>Institutional Membership (includes up to 3 regular members)</b> | **Please list the 3 regular members & emails for this membership** | \$200.00 |
| <input type="checkbox"/> <b>Associate Membership (Voting)</b>                               | Health Professional Consultant (One member only, one vote)         | \$25.00  |
| <input type="checkbox"/> <b>Associate Membership (Non-Voting)</b>                           | Open to associate members as defined in CCCMHWA Bylaws, Article IV | \$25.00  |
| <input type="checkbox"/> <b>Trainees/Student Interns</b>                                    |  | No Dues  |
| <input type="checkbox"/> <b>Emeritus (Non-Voting)</b>                                       | Granted by the organization upon individual's retirement.          | No Dues  |
| <input type="checkbox"/> <b>Honorary (Non-Voting) (Appointed by Executive Committee)</b>    | For distinguished contributions to MHWA's aims.                    | No Dues  |

**Applicant Information**      **Note: MHWA communications will be sent to your academic/work email address, unless you indicate otherwise.**

Name, Degree, License

Academic/Work Address

City/State/Zip

Title, Dept/Area

Work Phone

Cell (optional)

Work/CCC Email

Website

Alternate Email

Alternate Address

**Use my alternate address:**

**Alternate Email**

**Alternate Postal Address**

**Make check payable to CCC-MHWA (no purchase orders)**

Mail the completed application with payment to:

**Pasadena City College  
Dr. Alison Johnson  
1570 E. Colorado Blvd., D-203  
Pasadena, CA 91106**

Questions regarding membership – contact Dr. Johnson  
at: [ajohnson77@pasadena.edu](mailto:ajohnson77@pasadena.edu)

**Excerpt from: CCC MHWA Bylaws, Article IV - Membership**

A. Regular Member (Institutional / Individual): Dues as set by Article V. Open to licensed mental health professionals employed by a California community college. (Mental Health, Alcoholism and Drug Abuse Counselors, Rehabilitation Counselors, Psychiatric nurses) and/or mental health professionals whose primary job duties are the provision of student mental health services in a CCC.

B. Associate Member (voting: only one member, one vote) Note: only one Health Professional Consultant. Dues set by Article V. A licensed health professional working in a California Community College campus student health center with primary responsibility for student health services. Must be a current member of Health Services Association of California Community College (HSACCC).

C. Associate Member (non-voting) – Dues as set by Article V. Once the institution is represented, any additional community college mental health advocate, mental health care professional working in the mental health services setting, as well as community advocates for college mental health services, may join the organization as an associate member.