

FELLOW MEMBER APPLICATION Pathway I

Fellows of the American Vein & Lymphatic Society (FACPh) are recognized for their substantial commitment and contribution to the specialty of phlebology. Fellows of the American Vein & Lymphatic Society are members who are unanimously elected by the AVLS Board of Directors.

Member Information

American Vein and Lymphatic Society

Please type of print clearly.

First, Mid and Last Name: ____

Eligibility Requirements

1. Must be an AVLS member for a minimum of three consecutive years.

2. Must hold "Active Membership Status" for at least one year.

- 3. Must be a current ABVLM Diplomate (Certification in Phlebology)
- 4. Must have a combination of the following education/participations activities : (Check a minimum of 3) Provide information on checked items that will help AVLS verify: Ex. Year, Program name, Committee name (Attach CV)
 - Publication in a peer-reviewed journal, one or more articles (excluding abstracts and letters) related to phlebology
 - Publication in a textbook or a clinical chapter in a textbook of phlebology
 - Presentation of one or more papers or invited lectures at an Annual Congress or Symposium of the AVLS or of the UIP
 - Participation on the Board of Directors of the Society or of the UIP
 - Participation on a committee of the AVLS Board of the Society for a minimum of two years
 - Receipt of one of the following awards: BSN-JOBST Research Award; Platinum, Silver or Bronze Abstract Award

By checking this box, I agree to the requirements necessary to maintain Fellow Status. I will be a member in good standing of the American Vein & Lymphatic Society and follow the guidelines and standards set forth by AVLS to advance vein care and promote phlebology education. I understand that payment of Fellow Annual Dues will be in the amount of \$550. I understand that I must attend one Annual Congress of the AVLS every two years for the first six years of being a Fellow. After the sixth year, there is no further attendance requirement in order to retain Fellow status.

For Office Use Only	Received:	#1 -#5 Verified by:	#6 3 letters received	#7 CV Rec'd & Verified by:
For Office Use Only Entered in DB/ID #	Pull member folder:	Approved by Mbr Comm.:	Approved by Board	Send Letter & Cert

ID #: ____

Join Date:

Active Date:

Certification Year: