



FULL MEMBERSHIP APPLICATION

REQUIREMENTS FOR FULL MEMBERSHIP

Society of Gynecologic Oncology (SGO) **FULL MEMBERSHIP** is for U.S. and international individuals who are fully licensed to practice medicine in their country of residence or non-physicians with doctoral (PhD or equivalent), and are of high moral, ethical and professional standing.

Please contact the SGO membership staff at **1-312-235-4060** (select option one) or **membership@sgo.org** for more information.

APPLICATION PROCESS

Applications are accepted throughout the year. If you apply for membership after June 30, journal subscription and online access will activate on Jan. 1 of the following year.

Completed applications are reviewed by the SGO Membership Committee and the Board of Directors.

Members shall be elected by a majority vote of the SGO Board of Directors.

Applicants will be notified of their election status within 4-6 weeks of the completion of their application.

Full Membership Application

PERSONAL INFORMATION		
First Name	Middle Name	Last Name
Gender <input type="radio"/> M <input type="radio"/> F	Date of Birth (MM/DD/YY)	
PROFESSIONAL ADDRESS & CONTACT INFORMATION		
Title		
Institution		
WORK ADDRESS (where I see my patients) <input type="radio"/> This is my preferred mailing address		
Address Line 1		
Address Line 2		
City	State/Province	
Country	Postal Code	
Phone Number (Country Code + City Code + Number) <input type="radio"/> This is my preferred phone number	Fax Number	
Email <input type="radio"/> This is my preferred email		

HOME ADDRESS

This is my preferred mailing address

Address Line 1

Address Line 2

City

State/Province

Country

Postal Code

Cell Phone Number (Country Code + City Code + Number) This is my preferred phone number

Email

This is my preferred email

PROFESSIONAL INFORMATION

University/College

Degree

Date

Medical School

Degree

Date

Residency

Degree

Date

Fellowship

Degree

Date

LICENSURE

Number

State or Province, Country

*Optional – Board Certification: Yes No (If you would like to include your board certification in our Seek a Specialist database please include a copy of the certificate or letter from the certifying board verifying board certification with your application.)

- | | |
|---|--|
| <input type="radio"/> ABOG – Gynecologic Oncology | <input type="radio"/> ABR – Radiation Oncology |
| <input type="radio"/> AOBG – Gynecologic Oncology | <input type="radio"/> Non-physician with doctoral degree |
| <input type="radio"/> ABOG – Ob/Gyn | <input type="radio"/> Other _____ |
| <input type="radio"/> ABIM – Medical Oncology | <input type="radio"/> None |
| <input type="radio"/> ABP – Pathology | |

PRACTICE LOCATION

- | | |
|---|--|
| <input type="radio"/> Academic Medical Center/University | <input type="radio"/> Pharmaceutical/Biotechnology Company |
| <input type="radio"/> Private Practice (Office or Hospital-based) | <input type="radio"/> Administration |
| <input type="radio"/> Government Agency | <input type="radio"/> Laboratory Research |

PROFESSIONAL DESIGNATION

- | | |
|----------------------------|-----------------------------------|
| <input type="radio"/> MD | <input type="radio"/> PhD |
| <input type="radio"/> DO | <input type="radio"/> DVM |
| <input type="radio"/> MBBS | <input type="radio"/> Other _____ |

PROFESSION

- Gynecologic Oncologist
 Medical Oncologist
 Pathologist
 Radiation Oncologist
 Other _____

In furtherance of my application for membership in the Society of Gynecologic Oncology (SGO), I hereby authorize the evaluation and validation of my credentials by SGO in accordance with and subject to the rules and procedures of the SGO.

I request and authorize any hospital, medical staff, medical organization or individual who may have information (including, but not by way of limitation, medical records, patient records, and reports of committees) which they deem relevant to my fitness for membership in SGO to provide such information to SGO.

I hereby release from liability and waive any claim for damages that I may have against SGO, its officers, directors, members, employees and agents for any acts that they may perform in good faith in connection with my application, and any hospital, medical staff, medical organization or individual supplying information with respect to my application.

I understand that the decision as to whether I am qualified to be elected to SGO membership rests solely and exclusively in the SGO Board of Directors; that its decision is final; and that SGO is not a credentialing or certifying body. Membership in the SGO does not confer the right to practice or affect hospital privileges.

I attest that the information presented in this application is truthful and accurate.

Signature	Date
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PAYMENT AMOUNT

- Tier 1: \$387.50 (first year 50% discount off \$625 Full dues plus one time \$75 application fee)
- Tier 2: \$210*
- Tier 3: \$175*
- Tier 4: \$50*

*Must be residing outside of the U.S. for tier dues rate to apply.

Complimentary print and online *Gynecologic Oncology* journal subscription is included for Tier 1. Complimentary online only subscription is included for Tiers 2, 3 and 4. Subscriptions operate on a calendar year (January – December) only. Members who join mid-year will be mailed all available back issues for that year. For applications received after June 30, subscriptions will be activated the following January.

SUBMISSION AND PAYMENT METHODS

- Email your application to **membership@sgo.org**:
- You will receive an email with instructions to make your online payment OR you can mail checks payable to the Society of Gynecologic Oncology to:

MEMBERSHIP DEPARTMENT
SOCIETY OF GYNECOLOGIC ONCOLOGY
230 W MONROE ST STE 710
CHICAGO IL 60606-4703 USA

Full Membership Dues based on World Bank Classification



Society of Gynecologic Oncology

Tier 4 \$50 (USD)	Tier 3 \$175 (USD)	Tier 2 \$210 (USD)	Tier 1 \$625 (USD) - \$387.50 (USD) first year	
Afghanistan	Angola	Albania	Andorra	Korea, Rep.
Benin	Bangladesh	Algeria	Antigua and Barbuda	Kuwait
Burkina Faso	Bhutan	American Samoa	Aruba	Latvia
Burundi	Bolivia	Argentina	Australia	Liechtenstein
Central African Republic	Cabo Verde	Armenia	Austria	Lithuania
Chad	Cambodia	Azerbaijan	Bahamas, The	Luxembourg
Congo, Dem. Rep.	Cameroon	Belarus	Bahrain	Macao SAR, China
Eritrea	Comoros	Belize	Barbados	Malta
Ethiopia	Congo, Rep.	Bosnia and Herzegovina	Belgium	Monaco
Gambia, The	Côte d'Ivoire	Botswana	Bermuda	Netherlands
Guinea	Djibouti	Brazil	British Virgin Islands	New Caledonia
Guinea-Bissau	Egypt, Arab Rep.	Bulgaria	Brunei Darussalam	New Zealand
Haiti	El Salvador	China	Canada	Northern Mariana Islands
Korea, Dem. People's Rep.	Eswatini	Colombia	Cayman Islands	Norway
Liberia	Ghana	Costa Rica	Channel Islands	Oman
Madagascar	Honduras	Cuba	Chile	Palau
Malawi	India	Dominica	Croatia	Panama
Mali	Indonesia	Dominican Republic	Curaçao	Poland
Mozambique	Kenya	Ecuador	Cyprus	Portugal
Nepal	Kiribati	Equatorial Guinea	Czech Republic	Puerto Rico
Niger	Kyrgyz Republic	Fiji	Denmark	Qatar
Rwanda	Lao PDR	Gabon	Estonia	San Marino
Sierra Leone	Lesotho	Georgia	Faroe Islands	Saudi Arabia
Somalia	Mauritania	Grenada	Finland	Seychelles
South Sudan	Micronesia, Fed. Sts.	Guatemala	France	Singapore
Syrian Arab Republic	Moldova	Guyana	French Polynesia	Sint Maarten (Dutch part)
Tajikistan	Mongolia	Iran, Islamic Rep.	Germany	Slovak Republic
Tanzania	Morocco	Iraq	Gibraltar	Slovenia
Togo	Myanmar	Jamaica	Greece	Spain
Uganda	Nicaragua	Jordan	Greenland	St. Kitts and Nevis
Yemen, Rep.	Nigeria	Kazakhstan	Guam	St. Martin (French part)
	Pakistan	Kosovo	Hong Kong SAR, China	Sweden
	Papua New Guinea	Lebanon	Hungary	Switzerland
	Philippines	Libya	Iceland	Taiwan, China
	São Tomé and Príncipe	Macedonia, FYR	Ireland	Taiwan, China
	Senegal	Malaysia	Isle of Man	Trinidad and Tobago
	Solomon Islands	Maldives	Israel	Turks and Caicos Islands
	Sudan	Marshall Islands	Italy	United Arab Emirates
	Timor-Leste	Mauritius	Japan	United Kingdom
	Tunisia	Mexico		United States
	Ukraine	Montenegro		Uruguay
	Uzbekistan	Namibia		Virgin Islands (U.S.)
	Vanuatu	Nauru		
	Vietnam	North Macedonia		
	West Bank and Gaza	Paraguay		
	Zambia	Peru		
	Zimbabwe	Romania		
		Russian Federation		
		Samoa		
		Serbia		
		South Africa		
		Sri Lanka		
		St. Lucia		
		St. Vincent and the Grenadines		
		Suriname		
		Thailand		
		Tonga		
		Turkey		
		Turkmenistan		
		Tuvalu		
		Venezuela, RB		