IATEFL QUESTIONNAIRE FOR ASSOCIATES

1. Name of Associate:

2. Country:

3. Please list names of all members of your Coordinating Committee (or Board), position (i.e. president etc) and start/end dates of service.

4. Are you a membership organization? (Please circle) YES/NO

5. How often does your Association hold elections?

6. How often does your Association have a general meeting of all membership?

7. Does your Association have an office? (Please circle) YES/NO

8. Does your Association have a newsletter? (Please circle) YES/NO

9. Have you read and understood the IATEFL vision/mission? (Please circle) YES/NO

“...IATEFL will be an even larger and more outward-looking, international community that ELT professionals will want to join, and one that forms bridges between the inexperienced and experienced, the practical and the theoretical, and the many different perspectives and contexts of the ELT world.”

10. Do you agree with it? (Please circle) YES/NO

11. What are the principle ways you feel IATEFL could help your Association?

12. Is there anything else you would like IATEFL to know about your Association?

Completed by:

On behalf of [name of Association]:

Date:

Please return this form to IATEFL at membership@iatefl.org