

STUDENT MEMBER APPLICATION

Membership is FREE to all engineering students.

MR MRS MS



LAST NAME FIRST NAME MIDDLE INITIAL SUFFIX (JR., III)

PRIMARY INFORMATION

STREET ADDRESS APT.#

CITY STATE ZIP

COUNTRY

EMAIL

PHONE EXT.

SECONDARY INFORMATION

STREET ADDRESS APT.#

CITY STATE ZIP

COUNTRY

EMAIL

PHONE EXT.

SCHOOL NAME/CAMPUS

Your membership includes FREE enrollment in one ASCE Specialty Institute. Select one:

- | | |
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| <input type="checkbox"/> Architectural Engineering Institute (AEI) | <input type="checkbox"/> Geo-Institute (G-I) |
| <input type="checkbox"/> Coasts, Oceans, Ports and Rivers Institute (COPRI) | <input type="checkbox"/> Structural Engineering Institute (SEI) |
| <input type="checkbox"/> Construction Institute (CI) | <input type="checkbox"/> Transportation & Development Institute (T&DI) |
| <input type="checkbox"/> Engineering Mechanics Institute (EMI) | <input type="checkbox"/> Utility Engineering & Surveying Institute (UESI) |
| <input type="checkbox"/> Environmental & Water Resources Institute (EWRI) | |

DEGREE PURSUED (CHECK ONE) BS MS PHD DATE OF BS DEGREE _____

EXPECTED GRADUATION DATE _____ ENGINEERING MAJOR _____

I AM A MEMBER OF AN ASCE STUDENT CHAPTER YES NO

DATE OF BIRTH _____

By signing above: 1) I will adhere to the constitution, bylaws, rules of policy and procedure, and code of ethics of ASCE as stated in www.asce.org/comply. 2) I declare that the information provided herein is accurate and complete, to the best of my knowledge. 3) I agree to receive electronic communications from ASCE, including news and special offers. I may unsubscribe from ASCE's mailing list anytime.

STUDENT SIGNATURE

DATE RECEIVED

Mail this application or for faster activation, you may:

- A. Join online at go.asce.org/joinStu.
- B. Call (800) 548-ASCE (2723) or +1 (703) 295-6300 (international).
- C. Email a scan of your completed application to member@asce.org.

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