

A state society of the National Society of Professional Engineers

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## NSPE MEMBERSHIP APPLICATION MEMBERSHIP INCLUDES NATIONAL, STATE, AND LOCAL CHAPTER Last Date of Birth: ■ Male ■ Female Have you been a member of NSPE in the past? ☐ Yes ☐ No Please send my NSPE Correspondence and Publications to: Business □ Home **BUSINESS INFORMATION** (please print) Business Name: Title: Business Address: City: State: Zip Code: **Business Phone: Business Fax: Business E-mail** PERSONAL INFORMATION Home Address: Home phone: Home Fax: City: State: Zip Code: Personal e-mail I am licensed in the following states: Professional Licensure: □ EIT ■ Not Licensed ■ Student NSPE INTEREST GROUP (NSPE MEMBERS AUTOMATICALLY QUALIFY TO JOIN ONE OF FIVE PRACTICE-SPECIFIC ENGINEERING INTEREST GROUPS Construction ■ Higher Education ■ Government ■ Private Practice **EDUCATION** Undergraduate Degree: Major: College/University: Graduation date: Graduation date: Graduate Degree: Major: College/University: **SPONSORSHIP** Who may we thank for referring you to NSPE Members Name **ID Number RATES VALID UNTIL DECEMBER 2014** ☐ Licensed Member \$220 ■ Member \$220 ■ Student FREE I hold a valid license as a Professional I am an EI/EIT, or a graduate of an A person who is enrolled full-time in an ABET-Engineer in the U.S. or Canada (or engineering program accredited by the accredited engineering program or an engineering or international equivalent) Accreditation Board of Engineering and pre-engineering program that has an articulated or Technology (ABET) (or international transfer agreement with ABET or an accredited

pledge to support the constitution, bylaws and board policies (as they are now and as they may be amended) of NSPE and my State Society. Applicant Signature: Date: PLEASE RETURN APPLICATION TO: SCSPE P.O. BOX 11937 Columbia SC 29211 OR FAX TO: (803) 771-4272

I hereby certify that the information herein is complete and accurate. I further certify that I will abide by the requirements of the NSPE code of ethics. I also

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