

National Society of Black Engineers

2004-2005 ALUMNI EXTENSION MEMBERSHIP FORM
FOR TECHNICAL PROFESSIONALS

Chapter Code

 2 1 0 1

Last Name _____ First Name _____

Social Security Number _____ - _____ - _____ Date of Birth ____ / ____ / ____ Gender Male Female

Member Type: Technical Professional Member Professional Affiliate Recent Graduate (*within 1 year*)

Membership Status: New Renewed

Present Address _____

City _____ State _____ Zip _____

Employer Name _____

City _____ State _____ Zip _____

Home Phone Number _____ Work Phone Number _____

Degree Type/Year: Bachelor _____ Masters _____ Doctorate _____ Other _____

Job Title _____

Ethnic Origin Black/African American American Indian or Alaskan Native
 Hispanic White Asian or Pacific Islander Other

Were you ever involved in NSBE
activities as a college student?
 Yes No

E-Mail Address _____

Chapter Dues Must Be Forwarded Directly to the Chapter –**No Exceptions.**

Due Type: NEAE (New England Alumni Extension) Local Chapter Dues \$40.00

Payment Type: CASH Check

Member Signature _____

NSBE Mission: To increase the number of culturally responsible Black engineers who excel academically, succeed professionally, and positively impact the community.

Mail Form and Payment to:
NSBE-NEAE
Att Membership Chair
P.O. Box **926**
Andover, MA 01810
www.nsbeneae.org
member@nsbe.org

Or Fax Form with Credit
Card Payment to:
(703) 549-2388
(No Cover Sheet Needed)

➤ Thank you and welcome to the National Society of Black Engineers New England Alumni Extension