New Member application (Copy)

For New members to apply

* This form will record your name, please fill your name.
1
First and last name
2
Linked in URL
3
email

4	
phone number	
5	
Are you an Information Systems student	
○ yes	
O no	
6	
graduation date	
	:::
Format: M/d/yyyy	
7	
upload resume	
O pdf	
O link from doc	

8
upload member picture
Option 1
Option 2
9
why do you want to Join the AITP?
why do you want to Join the AITP?
why do you want to Join the AITP?
why do you want to Join the AITP?
why do you want to Join the AITP?
why do you want to Join the AITP?

Format: M/d/yyyy



Please pay membership fee to confirm membership

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