



Society of Hispanic Professional Engineers

University of Texas at Arlington ♦ UTA Box 19019 ♦ Arlington, TX 76019

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Website: www.uta.edu/student_orgs/shpe

MEMBERSHIP APPLICATION

Dues may be paid to a current officer or at the SHPE Office NH 209

Membership Type: New ☐ Renewal ☐ Have been a member since:
Change of Address ☐ Chapter transfer ☐

Full Name:		School Chapter:	
Current:	(.....)(.....)		
Address Street or PO Box	Phone	Mobile	
City	State	Zip Code	Email Address
Date of Birth (mm/dd/yyyy)		Student ID:	
Current SHPE UTA Officer? <input type="checkbox"/> Yes <input type="checkbox"/> No		T-shirt size? <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
Do you have a resume? <input type="checkbox"/> Yes <input type="checkbox"/> No		Emergency Phone	
		Contact Relationship	

Student Membership: Local Chapter Dues: \$10 / semester National Dues: \$10 / year

Degree Being Pursued: <input type="checkbox"/> B.S. <input type="checkbox"/> M.S. <input type="checkbox"/> PhD <input type="checkbox"/> Other (specify)			
Expected Date of Graduation: (MM/YYYY)			
Major:		Classification (Fr/So/Jr/Se)	
Part-time Student? <input type="checkbox"/> or Full-time Student? <input type="checkbox"/>		Grad:	
Are you interested in: Summer Internship <input type="checkbox"/> Co-Op Program <input type="checkbox"/> Full time job <input type="checkbox"/>			
Grade Point Average/Ratio (GPA/GPR): <input type="checkbox"/> 4.0 <input type="checkbox"/> 3.99-3.5 <input type="checkbox"/> 3.49-3.0 <input type="checkbox"/> 2.99-2.5 <input type="checkbox"/> 2.49-2.0 <input type="checkbox"/> <2.0			
Graduate Information:			
If you are a Grad Student, what degree(s) do you hold			
Which of the following programs are you pursuing: <input type="checkbox"/> M.S. <input type="checkbox"/> M.B.A <input type="checkbox"/> PhD			
Advisor's Name:		Dissertation:	
Source of Funding:			

Ethnic Origin:	<input type="checkbox"/> Mexican-American, Mexican, Chicano	<input type="checkbox"/> Cuban
	<input type="checkbox"/> Central American	<input type="checkbox"/> Puerto Rican
	<input type="checkbox"/> South American	<input type="checkbox"/> Other

Can SHPE release your name to other organizations? ☐ Yes ☐ No

By signing this membership application, you agree to have read, understood and abide by the SHPE UTA Constitution and Bylaws.

Signature.....

Date.....

*Signature is required in order to process application.

For office use only

Amount Paid Local dues: National Dues:

PAID IN FULL ☐

Officer Signature.....

Date.....