



AISES

APPLICATION FOR THE ESTABLISHMENT OF A COLLEGE/UNIVERSITY CHAPTER

1. Name of School: _____

2. Chapter Advisor:

Name: _____

Title: _____

Mailing Address: _____ City: _____

State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____

E-mail: _____

3. Number of Students in Chapter:

A chapter must have at least 3 members. Please attach a separate members list and ensure all are individual, active AISES members. Contact AISES Membership at 505-765-1052, if you have membership questions. Student memberships are FREE.

We, the college/university chapter members and our chapter advisor, have read, understood, and accepted the duties and responsibilities set forth in the CODE OF CONDUCT and CODE FOR THE GOVERNING OF STUDENT CHAPTERS AISES.

Signature of Chapter Advisor Date

Signature of Chapter President Date

You will be notified upon completion of review and approval by the AISES Engagement and Advocacy Department.

Return Completed Form by Mail To:
6321 Riverside Plaza Lane NW, Unit A
Albuquerque, NM 87120

Or by Email To:
engagement@aises.org