



**AISES**

**APPLICATION/PETITION FOR THE  
ESTABLISHMENT OF A PROFESSIONAL CHAPTER**

Name of Chapter: \_\_\_\_\_

Chapter President: \_\_\_\_\_

Business Address  
Of Chapter: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Number of Members in Chapter: \_\_\_\_\_

*(A professional chapter must have at least five Professional Members of good standing, of which three shall be General Members. Please complete the attached members list and ensure all individuals are active AISES members. Contact AISES Membership at 505-765-1052, if you have membership questions.)*

We, the professional chapter members and our Chapter President, have read, understood, and accepted the duties and responsibilities set forth in the Code of Conduct, Professional Bylaws and Affiliate Agreement for the Professional Chapters of AISES.

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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 to:**  
Engagement and Advocacy Department  
6321 Riverside Plaza Lane NW, Unit A  
Albuquerque, NM 87120

Or email to: [engagement@aises.org](mailto:engagement@aises.org)

**AISES Professional Chapter Members List**

At least 5 members, of which three shall be General Members, in good standing, must be listed for consideration.

*A General member is classified as an American Indian, Alaska Native, Native Hawaiian, Pacific Islander, First Nations, and other Indigenous Peoples of North America who has a bachelor's or advanced degree in engineering or science; having an associate degree in engineering or science with engineering or scientific work experience; having a bachelor's degree in engineering technology with engineering work experience.*

- 1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\*Tribal Affiliation(s): \_\_\_\_\_  
\*Degree Information: \_\_\_\_\_
  
- 2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\*Tribal Affiliation(s): \_\_\_\_\_  
\*Degree Information: \_\_\_\_\_
  
- 3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\*Tribal Affiliation(s): \_\_\_\_\_  
\*Degree Information: \_\_\_\_\_
  
- 4. Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\*Tribal Affiliation(s): \_\_\_\_\_  
\*Degree Information: \_\_\_\_\_
  
- 5. Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\*Tribal Affiliation(s): \_\_\_\_\_  
\*Degree Information: \_\_\_\_\_

*\* Required for AISES General Member Status*

Contact the Membership Department at (505) 765-1052 if there are any questions.