

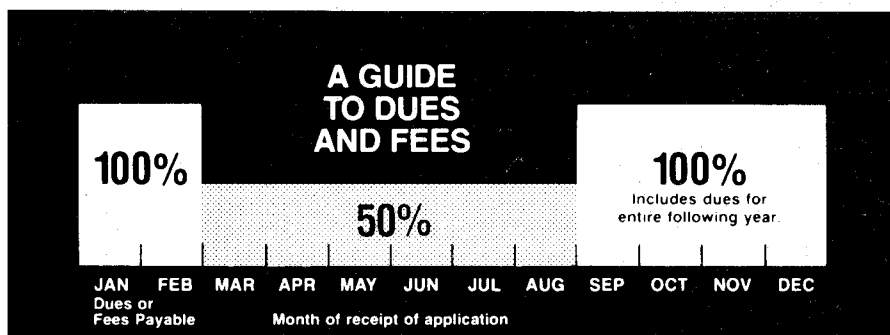
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Street address

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Month

Day

Year

☐ Male

☐ Female

Were you ever a member of IEEE?

☐ Yes

If Yes, please furnish (if known):

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Grade

Membership No.

EDUCATION (Highest level completed)

Name of educational institution

Course

Degree received

Date

ENDORSEMENT (Signature of one IEEE member, who knows you professionally.)

EVENT CODE		EVENT DATE		BROCHURE CODE		BROCH DATE	
P	1	7	0	7	8	5	
56	57	58	59	60	61	62	63
64	65	66	67	68	69	70	71
72	73	74	75	76	77	78	