



Institute of Transportation Engineers

<http://www.ite.uc.edu/>

OHIO SECTION APPLICATION

NAME _____
 DATE OF BIRTH _____
 E-MAIL _____
HOME INFORMATION
 STREET _____
 CITY, STATE _____
 ZIP _____
 PHONE _____

WORK INFORMATION
 EMPLOYER _____
 JOB TITLE _____
 STREET _____
 CITY, STATE _____
 ZIP _____
 PHONE _____
 FAX _____

ITE PREFERRED MAILING ADDRESS: HOME _____ WORK _____
 CURRENTLY A MEMBER OF INTERNATIONAL ITE? Y__ N__ PENDING__
 IF YES/PENDING, AT WHAT LEVEL?
 FELLOW__ MEMBER__ ASSOCIATE__ AFFILIATE__ HONORARY__ STUDENT__
 If yes/pending, proceed to signature block. Those eligible for full or associate membership in International ITE must apply for International membership prior to application for membership in the Ohio Section. For Ohio Section officer contact information visit <http://www.ite.uc.edu/general.htm>

WORK EXPERIENCE

EMPLOYER	SUMMARY OF DUTIES	YEARS
_____	_____	_____
_____	_____	_____
_____	_____	_____

EDUCATION

COLLEGE	FIELD OF STUDY	YRS ATTENDED	DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES (TWO REQUIRED)

I recommend this application for membership in the Ohio Section ITE:

NAME/PHONE	SIGNATURE
_____	_____
_____	_____

SIGNATURE BLOCK

I attest this application has been prepared with complete and accurate information to the best of my knowledge.

APPLICANTS SIGNATURE _____ DATE _____

SEND COMPLETED APPLICATION TO: Dbender@emht.com or mail to:
 Douglas A. Bender, EMH&T, 170 Mill Street, Gahanna, OH 43230, (614) 471-5150

MEMBERSHIP COMMITTEE RECOMMENDATION: Y__ N__
 SIGNATURE _____ DATE _____
 BOARD APPROVAL: Y__ N__
 SIGNATURE _____ DATE _____