



MEMBERSHIP APPLICATION

The Bahamas Society of Engineers

P.O. Box N-7380, Nassau, Bahamas // (242) 462-7798 // admin@bahamasengineers.org

1. MEMBERSHIP CLASS & ANNUAL DUES SCHEDULE (TICK ONE)

Please note fiscal year: JAN 1 – DEC 31. Please refer to website for more detailed definition of membership classes and for current dues schedule. Annual fee is non-refundable and **MUST** be submitted at the time of application.

<input type="checkbox"/> Member	Engineers who have been practicing in the field for four years or more.	\$100
<input type="checkbox"/> Fellow	Engineers who possess ten years of continuous membership in the BSE.	\$100
<input type="checkbox"/> Associate	Engineers who have been practicing in the field for less than four years but have completed the proper engineering education.	\$ 75
<input type="checkbox"/> Affiliate	Individuals who work closely with persons in the allied areas such as Architects, Building Surveyors and Quantity Surveyors for example.	\$ 50
<input type="checkbox"/> Student	Individuals who attend college/university and are enrolled in a program that will lead them to a degree in engineering.	\$ 10
<input type="checkbox"/> Honourary Member	Highest form of membership, given to those who are retired from the field of engineering but during their time of active service distinguished themselves in the field.	\$ 0

2. PERSONAL INFORMATION

Please send a copy of **valid identification** with **photograph** of applicant attached to application form (e.g. passport, resident card, work permit documentation, etc.).

Dr. Miss Mr. Mrs. Ms. Other _____

Full Name: _____
Last
First
M.I.

I am a: Bahamian Citizen

Date of Birth: _____ Bahamian Permanent Resident
Day / Month / Year

Other: _____
 (FOREIGN NATIONAL/WORK PERMIT HOLDER/ETC.)

3. CONTACT DETAILS

Please indicate address for correspondence: Home Business / School

Home Address: _____

Business Address OR
 School Address

Country: _____

Country: _____

Postcode / ZIP: _____

Postcode / ZIP: _____

Email: _____

Email: _____

Telephone: () _____

Telephone: () _____

Mobile: () _____

Mobile: () _____



4. ENGINEERING DISCIPLINE

If your discipline is not on the list, please choose the one that most closely matches your experience, or tick the "other" checkbox and specify your engineering discipline in the space provided.

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Agricultural | <input type="checkbox"/> Computer | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Aeronautical | <input type="checkbox"/> Electrical | <input type="checkbox"/> Marine |
| <input type="checkbox"/> Building Services | <input type="checkbox"/> Engineering Physics | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Chemical | <input type="checkbox"/> Environmental | <input type="checkbox"/> Structural |
| <input type="checkbox"/> Civil | <input type="checkbox"/> Geotechnical | <input type="checkbox"/> Other: _____ |

5. ENGINEERING/ALLIED ENGINEERING FIELD EDUCATION

Please list ALL post secondary education. Also, please submit a copy of your **certificates** with your submission of this application.

Name of College/ University/ Institute	Country	State/Province	Title of Diploma/ Degree (exact abbrev.)	Specialization or Discipline	Graduation Class (year)

6. PROFESSIONAL EXPERIENCE

Please list the last 6 (six) positions held starting with your current position.

From		To		Name of Organization	Particulars of Training
Month	Year	Month	Year		



7. MEMBERSHIP HELD

Please list current membership held in other technical societies and institutions. In the "Status" column, tick the checkbox if **active only**.

Name of Organization/ Association	Membership Class	Date of Membership Granted	Professional Papers Presented (if applicable)	Status:	
				<input checked="" type="checkbox"/> Active	<input type="checkbox"/> Inactive
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	

8. REFERENCES

Two (2) references are **required**, one (1) of which **must** be a financial member of BSE (Bahamas Society of Engineers).

Name	Professional Qualifications (e.g. P.Eng)	Place of Work	Email Address	Telephone Number

9. PAYMENT DETAILS

- Cheque (Please make check payable to "Bahamas Society of Engineers")
- Wire Transfer Details

Bank: Commonwealth Bank
 Branch: Oakesfield (#21103)
 Account#: 3001770

Note: If payment is made via wire transfer, please send confirmation to treasurer@bahamasengineer.org

10. DECLARATION

As the undersigned makes application for membership in the Bahamas Society of Engineers (BSE), I hereby confirm that all statements and answers contained herein are true and correct. I understand that any falsification, made willfully, of any information contained in this application, including the attached documents, will be grounds for disqualification of membership.

I understand that BSE will hold and use my personal data for administration purposes in order to keep me informed of its activities and to send me information directly. I hereby give permission for BSE to process the data for such purposes.

Applicant's Signature: _____ Date: _____



APPLICATION CHECKLIST

1. I have chosen and shown which membership class I am applying for.	<input type="checkbox"/>
2. I have given my personal information (name, birth date, etc.) and have attached a copy of my identification with a photograph (i.e. valid passport, resident card, work permit, etc.) and supporting documentation to this application.	<input type="checkbox"/>
3. I have provided my home, business or school address and have indicated which address is preferred for correspondence.	<input type="checkbox"/>
4. I have specified which engineering discipline I am trained in/have the most experience with.	<input type="checkbox"/>
5. I have given information on all forms of post-secondary education and have attached a copy of all certificates to this application.	<input type="checkbox"/>
6. I have provided information on the last six (6) positions that I have been employed.	<input type="checkbox"/>
7. I have provided information on any other technical societies/institutes that I am a part of.	<input type="checkbox"/>
8. I have listed two (2) persons whom I trust to be references on my behalf.	<input type="checkbox"/>
9. I have submitted payment in the correct amount of dues for the membership class I have chosen.	<input type="checkbox"/>
10. I have signed the declaration.	<input type="checkbox"/>

For BSE Use Only

Recommendations: _____

Meeting Chairman Signature: _____ Date: _____

Member No.: _____ Class: _____ Anniv. Date: _____

Form of Payment: _____