

## APPLICATION FORM FOR THE JSME MEMBERSHIP

Application Date (Month, Day, Year):

Full Name:	Affiliation: University/Establishment	
Birthday:	Position:	
Office Address:	TEL:	FAX:
Home Address:	TEL:	FAX: :
E-mail Address:		
Recommendation from Two members of the JSME: 1. Full Name/Title: Affiliation/Position: <span style="float: right;">[Autograph/Seal]</span>		
2. Full Name/Title: Affiliation/Position: <span style="float: right;">[Autograph/Seal]</span>		
Academic Career:		
Professional Career:		
Areas of Academic Research:		
Books and Articles Published		
Eligibility Categories (Encircle either one of the categories applicable)*:  a ) Full-time, or part-time, university teaching staff b ) Gradate students enrolled in the latter stages of doctoral courses, or those who have been registered in such courses in the past c ) Practitioners in financial businesses, or those who were in such businesses in the past		

\* NB: Applicants in the category b) need to submit, together with an application form, a letter of recommendation from their supervisor. Applicants in the category c) must submit, together with an application form, a letter of recommendation from either one of the two recommending members.

[Revised in March 2005]