

Official use only:

Date Received: \_\_\_\_\_\_\_\_

Date Admitted: \_\_\_\_\_\_\_\_\_

Amano Society of Pure and Applied Physics

Membership Application Form

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| Visit: <http://www.aspap.org/> to learn more about ASPAP.  |

1. **PERSONAL DETAILS**

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| --- | --- | --- | --- |
| Last Name      | First Name      | Middle Name      | Date of birth      |
| Residential Address       | Cell      |
| City       | NRC No.      | Passport No.      | Telephone      |
| Email Address:       | Postal Address      |

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| 1. **MEMBERSHIP TYPE**

The Amano society of pure and applied physics has two membership categories; Student membership and Professional membership. *Tick the box below next to the membership type you are applying for.* Proffessional Membership [ ]  Student Membership[ ] *The membership fees are k100 for professional membership and k50 for student membership renewable anually.* |

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| 1. **EDUCATION**

Degree/Certificate Received: [ ]  Bachelor’s Degree [ ]  Master’s Degree [ ]  PhDIn the process of receiving your fist degree? [ ]  StudentField of Study:      Name of Institution:        |
| 1. **RESEARCH INTERESTS**

Tick applicable. [ ]  Nuclear Science and Engineering[ ] Clean and Renewable Energy[ ] Electronics[ ] Quantum Physics[ ] Cosmology[ ] Nanotechnology [ ] Atmospheric Science[ ] Information Technology and Telecommunications[ ] Theoretical and Computational Physics[ ] Solid State and Condensed Matter[ ] Medical Physics[ ] Astronomy[ ] Atomic, Molecular and Optical Physics[ ] Robotics[ ] Artificial Intelligence |

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| 1. **EMPLOYMENT** – Are you working? [ ] No [ ] Yes
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| If yes, in what position?       | Name of company      | Location (city)      |
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**How did you hear about ASPAP?**

[ ]  From a friend [ ]  ASPAP Website [ ]  Other:

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| 1. **ACOMPANYING DOCUMENT: Tick the box applicable for the document you are using to support your application**
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| [ ] Academic certificate[ ] Research paper (showing original work you did)[ ] Student Identification Card |
| You may choose to be considered for any of the ASPAP editorial positions below. **optional.**[ ] Publisher[ ] Editor[ ] Peer Reviewer  |

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| 1. **ACKNOWLEDGMENT**

The information that I have provided is accurate to the best of my knowledge and subject to validation by ASPAP. I understand and agree that any misrepresentation, false statement or omission of a fact in my application may be justification for being turned down, if considered, may subject me to discipline, up to and including termination of membership.If admitted for ASPAP membership, I will comply with all rules, regulations, and policies of the society. By signing this application, you agree to abide by these regulations.  |

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| Signature | Full Names | Date |

**NOTE: Attach to this form a copy of the document selected in section 6 and upload it to the application portal on this link**

<http://www.aspap.org/application_forms>