



## INTERNATIONAL AFFILIATE APPLICATION

We, the undersigned, hereby request approval of the Society of Women Engineers for recognition as an affiliate to be known as the

**Affiliate of the Society of Women Engineers at**

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(College or University Name Here)

### **AFFILIATE REQUIREMENTS** (Checking off this box is required.)

- ☐ We agree, if the application is approved, to abide by the current version of the Agreement of Appropriate Use and to conduct business in accordance with the core values, goals, objectives and strategic priorities of the Society of Women Engineers.

All official SWE activities must be aligned and compatible with the Society's fiscal year, July 1 to June 30. All Affiliates must renew each June, regardless of launch date.

### **PERMANENT ADDRESS**

Our permanent International Affiliate Address (which will not change from year to year) & Point of Contact is:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Fax \_\_\_\_\_  
\_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

### **DEAN OF ENGINEERING (OR EQUIVALENT)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_



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### COLLEGIATE MEMBERS OF THE PROPOSED AFFILIATE

This form must be signed in blue or black ink by at least four (4) students. This form must have at least one (1) SWE Collegiate Member or University Friend of SWE listed. A minimum of 50% of the affiliate membership must be female. Additional members or Friends of SWE may be listed on a separate page and attached to this form.

Printed Name (first line) Signature (second line)	Degree/ Certificate/Major	Expected Graduation Date	SWE ID Number (or) email address
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### SWE SPONSOR

**The Sponsor is a requirement for the affiliate application.** The Advocate/Sponsor can be an association, nonprofit entity, government institution, corporate partner or professional Affiliate that is willing to mentor, guide, and administer support to the International Affiliate group. The Advocate/Sponsor should be located in the city, country or region of the International Affiliate. Or if the collegiate group is an official, recognized club on the campus of a university with established administrative protocols, the university may act as the Advocate/Sponsor. In the case of a collegiate group, the Advocate/Sponsor may be a SWE professional member. The Sponsor should be in contact with the affiliate on a regular basis, and when necessary, may be tasked with handling the financials for the group. **The Sponsor must write a letter of support and attach to this application**

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Printed Name & Affiliation

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SWE ID (if Applicable)

Permanent Address

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E-mail Address

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### SCHOOL FACULTY ADVISOR

**A Faculty Advisor is a requirement for the affiliate application.** Many schools require a Faculty Advisor for each recognized campus organization. The Faculty Advisor is responsible for the compliance of the affiliate with the rules and regulations of the school. The Faculty Advisor should be familiar with the students and the campus, as well as sympathetic to the special needs of the proposed affiliate. The Faculty Advisor should be someone who is readily available to the students and who can be a valuable resource for them. **The Faculty Advisor is required to provide a letter of support on the school's letterhead endorsing the affiliate.** The Faculty Advisor is not required to be a SWE Member.

I hereby certify that the Degree, Certificate or Major shown for each student signing this petition is in accordance with school records and that the date of expected graduation is reasonable. I have also included a letter of recommendation on the school letterhead in support of the affiliate.

_____ Advisor Signature	_____ Date
_____ Printed Name	_____ SWE Grade/Membership Number (if applicable)
Address _____ _____ _____ _____	Work Phone _____ Home Phone _____ Fax _____ E-mail _____

*Send application (including all supporting documents) to SWE Headquarters for processing.*

<b>SWE Headquarter Use Only</b>
HQ Approval by _____
Date _____
Affiliate ID Number _____
Processed By _____