

# Scientific Member Application Form



## GENERAL INFORMATION

Check one:                      Individual                      Group

Name:	
Title/Credentials:	
Mailing Address:	
Phone:	
Fax:	
Email:	
Institutional Affiliations:	

## ATTACHMENTS (please append to your application):

submit a <b>statement of potential contribution to HNRN</b> (maximum 1 page)
submit a short <b>2-page CV</b> with your application outlining relevant research publications/presentations, training, and work experience