



**COASTS, OCEANS,  
PORTS AND RIVERS  
INSTITUTE**

**Graduate Student Chapter Application**

Email to: [copri@asce.org](mailto:copri@asce.org)

OR

Mail to: COPRI of ASCE

1801 Alexander Bell Drive

Reston, VA 20191-4400

Digital Signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Suffix \_\_\_\_\_

University/School \_\_\_\_\_ Expected Graduation \_\_\_\_\_

Major/Degree Program \_\_\_\_\_ Minor/Specialty \_\_\_\_\_

Preferred Mailing Address (street) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Mission Statement:

Please indicate what your chapter needs from COPRI in order to complete the application process at your school (for example, if you require a letter from the Institute).

Please let us know what activities or events you are interested in, and how COPRI can help you promote student involvement in the Chapter.

If you have founding Officers, please provide their names and if they have an ASCE or COPRI Member number.

Student Member Name

Member ID Number

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