



STATEMENT OF INTENT TO ESTABLISH

Name of Institution

City and State (Country)

Present Student Organization

Name of current student organization: _____

Date founded: _____

Current number of members: _____

Curriculum Information

Name of curriculum: _____

This curriculum leads to the following degree: _____

The degree program is accredited by: (check one)

☐ Engineering Accreditation Commission
(EAC) of the [Accreditation Board for Engineering and Technology \(ABET\)](#)

☐ A signatory to the [Washington Accord](#) named: _____

☐ non-ABET-accredited



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List months when school is not in session: _____

Current number of students enrolled in this curriculum: _____

Seniors: _____ Sophomores: _____ Master's: _____

Juniors: _____ Freshmen: _____ Ph.D.: _____

Total graduates with a bachelor's degree from this curriculum during past 12 months: _____

Are bachelor's degree seniors required to sit for the
EIT/FE exam (or equivalent) to graduate?

☐ Yes

☐ No

Total graduates with a master's degree and/or Ph.D.
from this curriculum during past 12 months: _____

Department Head Endorsement

I have reviewed the Statement of Intent to Establish. The department fully supports the establishment of an ASCE Student Chapter at our institution.

Signature: _____

Name (please print): _____

Title: _____

Date: _____

Identification of Student Chapter Faculty Advisor

Faculty Advisor Name: _____

ASCE ID Number: _____

Mailing Address: _____

Phone Number: _____

E-mail Address: _____



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Identification of Practitioner Advisors

Practitioner Advisor #1:

Name: _____ ASCE ID: _____

Mailing Address: _____

Phone Number: _____

E-mail Address: _____

Practitioner Advisor #2:

Name: _____ ASCE ID: _____

Mailing Address: _____

Phone Number: _____

E-mail Address: _____



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Section/Branch Endorsement

Our Section/Branch endorses the establishment of this ASCE Student Chapter. I confirm the Section/Branch is prepared to sponsor, promote and direct the Student Chapter as its parent Section/Branch during the upcoming year as outlined above, and also following establishment.

President's

Signature:

Name (please print):

Date:

Mailing Address:

Phone Number:

Email Address:



STATEMENT OF INTENT TO ESTABLISH

Submission instructions:

A completed submission will consist of a **single email** with the following files attached:

A **single .pdf file** containing:

1. Completed **Statement of Intent to Establish**
2. A copy of the section of the current school catalog containing a description of the qualifying curriculum.

This email should be sent to student@asce.org

This Statement of Intent to Establish was prepared and submitted by:

Name

Signature

Title

Date

Telephone Number

E-mail Address