Sponsoring Section

City and Country

### Establishing Group Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location: | |  | | |
| Date founded: |  | | Number of interested younger members: |  |

### President

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: | |  | | ASCE ID Number: |  |
| Mailing Address: |  | | | | |
|  |  | | | | |
|  |  | | | | |
| Phone Number: |  | |  | | |
| E-mail Address: |  | | | | |

### Vice President

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: | |  | | ASCE ID Number: |  |
| Mailing Address: |  | | | | |
|  |  | | | | |
|  |  | | | | |
| Phone Number: |  | |  | | |
| E-mail Address: |  | | | | |

### Secretary:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | | | ASCE ID: |  |
| Mailing Address: | |  | | | |
|  | |  | | | |
|  | |  | | | |
| Phone Number: | |  |
| E-mail Address: | |  | | | |

### Treasurer:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | | | ASCE ID: |  |
| Mailing Address: | |  | | | |
|  | |  | | | |
|  | |  | | | |
| Phone Number: | |  |
| E-mail Address: | |  | | | |

### Summary of Planned Meetings & Activities

Complete the following for planned meetings and activities for the next 12 months. Attach additional pages as necessary.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Event:** |  | | | |
| **Date(s) of Event**: | |  | **Expected Number of Participants:** |  |
| **Summary of Event:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Event:** |  | | | |
| **Date(s) of Event**: | |  | **Expected Number of Participants:** |  |
| **Summary of Event:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Event:** |  | | | |
| **Date(s) of Event**: | |  | **Expected Number of Participants:** |  |
| **Summary of Event:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Event:** |  | | | |
| **Date(s) of Event**: | |  | **Expected Number of Participants:** |  |
| **Summary of Event:** | | | | |

### Section/Branch Support Plan

This section is to be completed by the President of ASCE Section or Branch that is sponsoring the Younger Member Group

|  |  |  |
| --- | --- | --- |
| Name of sponsoring Section/Branch: | |  |
| Date sponsorship began: |  | |

Explain in detail how the Section/Branch will assist and support this group of younger members during the next 12 months in their efforts to establish an ASCE Younger Member Group. **Please be specific about direct planned interactions and activities.** Attach additional pages if necessary.

### Section/Branch Endorsement

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

|  |  |  |  |
| --- | --- | --- | --- |
| President’s Signature: |  | Date: |  |
| Name (please print): |  | | |
| Mailing Address: |  | | |
|  |  | | |
|  |  | | |
| Phone Number: |  | | |
| Email Address: |  | | |
|  |  | | |