University Student Chapter Application

Please fill out the information below and submit to IBE via mail, fax or email.

1024 Capital Center Drive, Suite 205
Frankfort, KY 40601
Phone: 859-977-7450
Fax: 859-271-0607
Email: bdoty@ibe.org

Student Chapter Membership Information

Date: __________________________________________

Institution Name: __________________________________________

Faculty Advisor: __________________________________________

Permanent Mailing Address: __________________________________________

City: __________________________ State: __________ Zip: __________

Telephone: ______________ Email: __________________________

University Student Chapter Officers

President: __________________________________________

Vice-President: __________________________________________

Treasurer: __________________________________________

Secretary: __________________________________________

Current IBE Members (minimum of 5)

Member 1

Name: __________________________________________

Mailing Address: __________________________________________

City: __________________________ State: __________ Zip: __________

Telephone: ______________ Email: __________________________
Member 2
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 

Member 3
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 

Member 4
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 

Member 5
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 

Member 6
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 

Member 7
Name: 
Mailing Address: 
City: State: Zip: 
Telephone: Email: 
**Member 8**
Name: 

Mailing Address: 

City:  
State:  
Zip:  

Telephone:  
Email:  

**Member 9**
Name:  

Mailing Address: 

City:  
State:  
Zip:  

Telephone:  
Email:  

**Member 10**
Name:  

Mailing Address:  

City:  
State:  
Zip:  

Telephone:  
Email:  

**Please attach additional member names and contact information on a separate sheet**

Remember to develop and submit **BYLAWS** that are specific to the chapter’s needs and wishes. They will be reviewed and are subject to approval by the Chapters/Branches Committee.