

**To: Association of Structural Engineers of the Philippines, Inc.**

**Through: ASEP Secretariat**

Dear Sir/Madam,

Have you been delisted by the Association Yes No

If Yes, what is the reason? \_\_\_\_\_

If you are accepted, what can you contribute to the Association? \_\_\_\_\_

Being as ASEP member will be beneficial to you? In what way? \_\_\_\_\_

The undersigned wishes to apply for membership  as an ASSOCIATE MEMBER  as a REGULAR MEMBER  
 UPGRADE to REGULAR MEMBER.

*The undersigned, when accepted, confirms to abide by the By Laws of the ASEP. Any information found to be false is a ground for the disapproval of this application or revocation of membership if found after approval.*

\_\_\_\_\_  
Applicant's Name and Signature

Date : \_\_\_\_\_ Received by : \_\_\_\_\_

PRC Reg. No. : \_\_\_\_\_ Validity : \_\_\_\_\_

**Checklist for Membership Application: (Please tick checklist when included / submitted)**

- 1 Evaluation Rating Form (ASEP Copy)
- 2 Completely filled-in MSB Membership Application Form (rev.05)
- 3 Two (2) pcs. of 2” x 2” ID pictures, colored (taken within the last six months)
- 4 Photocopy of PRC ID (front and back)
- 5 At least minimum three (3) consecutive years of structural design experience for ASSOCIATE Members or minimum five (5) consecutive years of structural design experience for REGULAR Members / Upgrade to REGULAR Members
- 6 Endorsement from three (3) ASEP Regular Members in good standing and/or ASEP Fellows as References
- 7 Comprehensive curriculum vitae, certified and updated resume as supporting attachment to the MSB Application Form
- 8 Photocopy of Employment Certificate, certified true copy
- 9 Photocopy of Diploma / Transcript of Records (Undergraduate and post-graduate courses)
- 10 Photocopy of Certificates for seminars / workshop / conferences attended with program included
  - \*ASSOCIATE – accumulated twenty (20) CPD units for the last four (4) years prior to application OR at least twelve (12) units of Master’s Degree in Civil Engineering Major in Structural Engineering (Attached Transcript of Records)*
  - \*REGULAR – accumulated sixty (60) CPD units for the last five (5) years prior to application*
  - \* UPGRADE TO REGULAR – accumulated eighty (80) CPD units, twenty (20) of which is credited as an ASSOCIATE Membership requirement (CPD Units from ASEP accredited conferences/seminars/ conventions or \*\*other structural related conferences)*
  - \*\* 1. Only structural topics of the entire seminar shall be considered/credited*
  - \*\* 2. Software workshop will only be credited a maximum of 16 hours)*
- 11 Electronic file copies of all submitted documents in PDF format saved in USB.
- 12 Letter: Why do you like to join our Organization?

**Important Notes:**

All documents to be submitted by the applicant for membership **shall be arranged in the order as indicated above and shall be compiled in the standard folder prescribed by the MSB.**

Applicant should submit the above documents in support of the application and a non-refundable processing fee of PHP 1,000.00

Upon acceptance of the application, Entrance fee of PHP 2,000.00 and Two-year Annual Membership of PHP 3,000.00 for ASSOCIATE Member and REGULAR Member.

Kindly make your draft/cheque payable to the **Association of Structural Engineers of the Philippines, Inc. (ASEP).**

Bank Name: **BANCO DE ORO (BDO)**

Branch: SCT. ALBANO – QUEZON AVE.

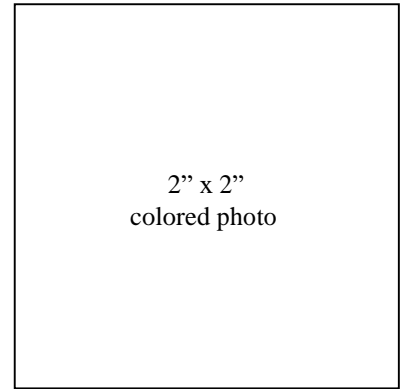
Peso Account No.: 003930017037

US Dollar Account No: 103930155146



# ASSOCIATION OF STRUCTURAL ENGINEERS OF THE PHILIPPINES, INC.

Unit 9JK, Future Point Plaza III Condominium,  
111 Panay Avenue, Quezon City Philippines  
Tel. No.: 8563-0990 / Mobile No.: 0917-823-7739  
Email: [aseponline@gmail.com](mailto:aseponline@gmail.com)  
Website: [www.aseponline.org](http://www.aseponline.org)



2" x 2"  
colored photo

## MEMBERSHIP APPLICATION FORM

Control/ID Number : \_\_\_\_\_  
Date Form Submitted : \_\_\_\_\_  
Current Occupation : \_\_\_\_\_  
Name of Company/Firm/Organization : \_\_\_\_\_

### I. PERSONAL DETAILS: (Please use BLOCK LETTERS)

NAME \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SEX \_\_\_\_\_  
NATIONALITY \_\_\_\_\_  
PASSPORT NO. \_\_\_\_\_  
HOME ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
CONTACT PHONE \_\_\_\_\_  
FACSIMILE \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
MOBILE \_\_\_\_\_  
WORK ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
CONTACT PHONE \_\_\_\_\_  
FACSIMILE \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
PROFESSION \_\_\_\_\_

### II. ENGINEERING DISCIPLINE:

DEGREE COMPLETED	YEAR COMPLETED	INSTITUTION WHERE DEGREE OBTAINED	SPECIALIZATION / FIELD OF EXPERTISE

**III. ENGINEERING PRACTICE:**

LICENSURE EXAM	DATE TAKEN:
REGISTRATION NO.	DATE ISSUED
LICENSURE EXAM	DATE TAKEN:
REGISTRATION NO.	DATE ISSUED

**IV. PROFESSIONAL EXPERIENCE:**

YEAR	POSITION	RESPONSIBILITY	PROGRAM/PROJECT

Detailed Description of Responsibilities *(make additional copy of this tabulation as extra sheet needed following the same format)*

Applicant's Role

\_\_\_\_\_

Applicant's Engineering Work

\_\_\_\_\_  
 \_\_\_\_\_

**V. SIGNIFICANT ENGINEERING WORK:**

YEAR	RESPONSIBILITY	PROGRAM/ PROJECT	BENEFICIARY CLIENTELE

Detailed Description of Responsibilities *(make additional copy of this tabulation as extra sheet needed following the same format)*

Applicant's Role

\_\_\_\_\_

Applicant's Engineering Work

\_\_\_\_\_  
 \_\_\_\_\_

**VI. PROJECT/S: (Past and present Engineering Projects)**

Name/Location	RESPONSIBILITY	Duration and Cost	CLIENTELE

**VII. CONTINUING PROFESSIONAL DEVELOPMENT (CPD)** *(make additional copy of this tabulation as extra sheet needed following the same format)*

Program Description related to Responsible Charge	Name of Provider / Organizer	Credit Units / Hours	Inclusive Dates of CPD Program and Venue

**VIII. REFERENCES** *(As a requirement of the Revised Implementing Rules and Regulations of the Bylaws, applicant should submit names of three (3) Regular Members, in good standing, and/or Fellows of the Association. The section below should be filled in by your named References.)*

Name of Reference with signature above name	Reference Contact Details (Phone/Mobile/ E-mail)	Reference ASEP ID No.	Remarks / Comments from the Reference
Signed:  Ref. Name:			
Signed:  Ref. Name:			
Signed:  Ref. Name:			

Note: Members' endorsements are voluntary endorsements. Paid endorsements shall not be allowed.









