



# APPLICATION FOR UPGRADE TO SENIOR MEMBERSHIP

## SOCIETY OF BROADCAST ENGINEERS

9102 North Meridian Street, Suite 150  
Indianapolis, IN 46260

Phone: 317-846-9000 | Fax: 317-846-9120

(Please type or print)

Applicant must be a current SBE member who has at least five (5) years of consecutive membership with the Society at the time of application.	SBE Member # _____ Member Since (found on your membership card): _____
---	---

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Last Name First MI Home Phone

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Mailing Address Business Phone

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
City State Zip/Postal Code Fax Number

The above mailing address is: Home Business

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
Place of Employment Date Employed Date of Birth (MM/DD/YY) *optional*

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
Current Job Title Type of Facility E-mail Address

\_\_\_\_\_  
Description of Duties

Applicant must have at least 15 years active participation in broadcast engineering or its allied fields. Total years of responsible Engineering experience: \_\_\_\_\_ Radio TV Other (*check all that apply*)

Applicant must have demonstrated professional responsibility in one or more of the following areas: supervision, equipment design, physical plant design, marketing and/or equipment-systems integration. Give a description of your experience in any of these areas. You may also attach a current resume.

\_\_\_\_\_ \_\_\_\_\_  
Date Signature

*Return form to the SBE office by mail, fax or email to [kjones@sbe.org](mailto:kjones@sbe.org)*

### MEMBERSHIP COMMITTEE ACTION

Approve  Disapprove  
 Comment: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Records: \_\_\_\_\_  
 Appl Notified: \_\_\_\_\_