



Contact Information

Name (First, Last, MI): _____

Professional Title (e.g. Dr., if any): _____

Professional Designations (if any): _____

Organization/Affiliation: _____

Position Title: _____

Mailing Address: Business Home

City: _____ State/Province: _____

ZIP/Postal Code: _____ Country: _____

Phone Number: _____ Business Home

Email Address: _____

How did you hear about INCE-USA?

- Current Member INCE-USA Website Social Media I-INCE Other

Demographics Information (optional)

Date of Birth (DD/MM/YYYY): _____

Gender:

- Female Non-Binary/Other
 Male Prefer Not to Say

Education Level (Highest Degree Earned):

- Some High School Bachelor's
 HS Diploma Master's
 Some College Doctoral
 Associate's

Primary Job Profession (Select Most Relevant):

- Academia Government
 Industry Other _____
 Consultant

Would you like to be listed as a Consultant in the INCE-USA Member Directory? Yes No

Areas of Interest (please choose up to three):

- | | |
|---|---|
| <input type="checkbox"/> Active Control | <input type="checkbox"/> Passive Control |
| <input type="checkbox"/> Aeroacoustic Noise | <input type="checkbox"/> Perception & Effects of Noise |
| <input type="checkbox"/> Building Acoustics | <input type="checkbox"/> Prediction & Modeling Techniques |
| <input type="checkbox"/> Community Noise | <input type="checkbox"/> Sources & Propagation |
| <input type="checkbox"/> Experimental Techniques & Instrumentation | <input type="checkbox"/> Standards |
| <input type="checkbox"/> Industrial Noise | <input type="checkbox"/> Structural Acoustics |
| <input type="checkbox"/> Information Technology Equipment | <input type="checkbox"/> Transportation Noise |
| <input type="checkbox"/> Measurement & Control of Product Noise Emissions | <input type="checkbox"/> Wind Turbine Noise |
| <input type="checkbox"/> Motor Vehicle Noise | <input type="checkbox"/> Other: _____ |

Payment Information

- I will pay by check (include copy of completed application).
 I will pay by credit card (you will be billed via our online membership portal).

Application Submission

Email to: ibo@inceusa.org

or

Mail completed form to:

INCE-USA

401 Edgewater Place, Suite 600

Wakefield, MA 01880

Applicant Signature:

Date: _____

Principal Requirements for becoming an INCE-USA Member

1. Be enrolled as an INCE-USA Associate (a Member applicant is automatically enrolled as an Associate while their application is reviewed);
2. Have earned a baccalaureate (or equivalent four-year academic degree) or higher degree from a qualified program in engineering, physical science, or architecture offered by an accredited university or college **OR** have had at least one sole-author paper or two first-author papers published in or accepted for publication in the Noise Control Engineering Journal (NCEJ).
3. Have instructed, or have enrolled in and achieved a grade of “B” or better in, at least one full-semester (i.e., three-credit or more) course of instruction offered by an accredited university or college devoted to the physical principles of acoustics **OR** have demonstrated at least five years of experience in noise control engineering involving research, teaching, professional practice, or any combination thereof.
4. Have the application form endorsed by an INCE-USA Member in good standing.

A satisfactory grade on the INCE Fundamentals Examination will be considered sufficient for election to membership in lieu of requirements 2 and 3 above.

Education Beyond Preparatory School

College/University	Location	Degree	Major	Year Received

Acoustics Course(s)

List not more than two courses in the fundamentals of acoustics taught or taken for credit:

College/University	Course Title & Number	Year	Credit Hours	Grade Received	Name of Instructor

Experience

Describe your interests and/or professional experience in the field of noise and its control, indicating each year you have worked in this field. Include any special interests, number of publications, patents, etc. If insufficient space, please attach supporting documentation to the end of this application.

Noise Control Engineering Journal (NCEJ) Publications

Please give complete citation, including authors. If insufficient space, please attach supporting documentation at the end of this application.

Volume	Number	Authors	Title

Endorsement

The endorser of this application, an INCE-USA Member in good standing, whose signature appears below, verifies that the information supplied by the applicant is accurate to the best of the endorser's knowledge.

Endorser's Name (Print): _____

Endorser's Signature: _____ Date: _____

Applicant's Statement

I hereby make application for INCE-USA Membership. I certify that the statements made in this application are true, complete, and correct. If elected to Membership, I will be governed by the articles of incorporation, bylaws, and policies of INCE-USA.

Applicant Signature: _____ Date: _____