



WICHITA STATE STUDENT CHAPTER

**Wichita State University Human Factors and Ergonomics Society
Membership Application**

Name: _____
Last First Middle Initial

Mailing Address: _____

City State Zip

Phone Number: (____) _____

E-mail: _____

Education: Degree Program: BA/BS MA/MS PhD

Major/Program Area / Expected Grad. Date

Areas of Interest: _____

Are you currently a Human Factors and Ergonomics Society Member? Y N

Please mail to: WSU HFES Secretary
Department of Psychology
Wichita State University
1845 Fairmount
Wichita, KS 67260-0034