

APPLICATION FOR SENIOR MEMBERSHIP

Please type or print legibly

1. Name _____
First/Middle/Last/Degree

2. List *both* home and office addresses, and check your *preferred mailing* address.

Home

Office

3. Sponsors:
 Candidates *must* be sponsored by 2 Senior members of the SNIS.

4. Board Certification (Candidates need to be board certified or eligible by the ABMS, RCPS or equivalent.)

5. Fellowship Training

Institution/Department	Program Director	Dates
Institution/Department	Program Director	Dates

6. Medical or Graduate Education

Institution Degree Date

7. Residency Training

Institution/Department Program Director Dates

8. Licensure (States/Countries in which licensed to practice medicine)

9. Current Practice: _____% devoted to neurointervention; _____# neurointerventional cases in past 24 months.

10. I agree to abide by the Bylaws of the SNIS and any revisions thereof:

Applicant's Signature Date

Check enclosed (make payable to SNIS) in the amount of \$100.00 USD

Please charge my: Visa Master Card Amex Discover in the amount of \$100.00 USD

****If paying by credit card, please list your 3-digit security code (MasterCard/Visa/Discover) or 4-digit security code (American Express) from the signature strip: _____****

Card Holder Name: _____

Card #: _____ Exp. Date: _____

Signature: _____

Senior Membership Documentation Required

- *Completed Application;*
- *Current CV detailing training and professional experience;*
- *Copy of Board Certification **certificate** (if board certified);*
- *Letter from Program Director documenting candidates' training and verifying direct involvement in at least 100 neurointerventional procedures during the candidate's training;*
- *Two letters of reference from Senior Members of SNIS – one of the two letters must be from a Senior Member involved with the candidates' training;*
- *\$100 application fee.*

PLEASE RETURN AN ORIGINAL SET AND (3) COPIES OF ALL DOCUMENTS TO:

**SNIS Membership Chairman
3975 Fair Ridge Drive, Suite 460 South
Fairfax, VA 22033**