

UNIVERSITY OF MASSACHUSETTS AT AMHERST STUDENT CHAPTER
of the
INSTITUTE FOR OPERATIONS RESEARCH AND THE MANAGEMENT
SCIENCES

Membership Application

Last name: _____ First name: _____

Address: _____

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Undergraduate Master student Doctoral student _____

University: _____

Department: _____

I would like to join the UNIVERSITY OF MASSACHUSETTS AT AMHERST STUDENT CHAPTER of the INSTITUTE FOR OPERATIONS RESEARCH AND THE MANAGEMENT SCIENCES. Membership is free.

Date: _____ Signature: _____