

## Commercial Real Estate Women - San Antonio Chapter

NAME:	AREA OF STUDY:
COLLEGE/UNIVERSITY:	ANTICIPATED GRADUATION DATE:
STATUS APPLYING FOR:	
or educational institution, pursuing a profession	a member who is currently enrolled full-time as an undergraduate student at an accredited college, university, onal degree that will enable them to secure a position in one of the qualified fields of commercial real estate, alification will be reviewed annually. Student Members may participate on committees, but will not be able to d of Directors.
PLEASE PROVIDE A BRIEF DESCRIP	PTION OF YOUR IDEAL JOB WITHIN THE COMMERCIAL REAL ESTATE INDUSTRY:
HOW DID YOU HEAR ABOUT CREW N	NETWORK?
PLEASE PROVIDE A BRIEF EXPLANA	ATION OF YOUR REASON FOR SEEKING A STUDENT MEMBERSHIP WITH CREW
NETWORK:	
<b>REFERENCES:</b> Please attach to this ap commercial real estate industry.	plication your resume and a personal statement describing your professional aspirations in the
LIST NAMES OF TWO CREW-SAN AN	TONIO CHAPTER MEMBERS YOU HAVE MET:
1. NAME: Laura Gilliland COMPANY:	UTSA EMAIL: Laura.Gilliland@utsa.edu
2. NAME: Ray Teske COMPANY: UTS	A EMAIL: Ray.Teske@utsa.edu



- Have you, either as a complainant or as a respondent, been involved in any questions of ethics in any real estate board within the past ten (10) years? 
  No 
  Yes (If yes, give date and state the disposition of the matter on a separate sheet.)
- Have you ever appeared before any real estate licensing authority in defense of an alleged violation of license law? 
   No Yes (If yes, give date and state the disposition of the matter on a separate sheet.)

I hereby request and authorize any person, former employer, or any business referred to in this application to give any information, and answer any questions asked by CREW concerning my work history, ability, current status or character in connection with this application.

I also agree to answer any questions by the membership committee or CREW's Board members relating to this application. I understand that by signing below, I acknowledge that eligibility for Student membership in CREW San Antonio is reviewed on an annual basis and that to remain a Student Member I must continue to meet the eligibility requirements for Student Membership. Further, I agree to notify the membership chair if at any time I no longer meet the qualifications of a Student Membership.

To the best of my knowledge, the preceding facts and statements are true.								
SIGNATURE	DATE							

- Please email a completed application to Amy Biggs, Chapter Administrator at AmyBiggs@Crew-SanAntonio.org. If you have questions, she may be reached at 210-288-1924.
- Upon application approval, CREW National will send an invoice to pay your dues. Once dues are received, you will become an official CREW member!

#### DUES ARE BASED ON THE BELOW:

Undergraduate Student: Application submitted in the period of Jan – Dec \$130.00 = Total Amount Due upon invoice Graduate Student: Application submitted in the period of Jan – Dec\$240.00 = Total Amount Due upon invoice

MEMBERSHIP DUES ARE BASED ON CALENDAR YEAR TERMS - ALL MEMBERSHIPS EXPIRE ON DECEMBER 31<sup>ST</sup>.

MEMBERSHIPS ARE NON-TRANSFERRABLE / NON-REFUNDABLE.

DUES PAID TO CREW-SAN ANTONIO ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES, BUT MAY BE DEDUCTIBLE AS BUSINESS EXPENSES.



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### Agreements

I,, the undersigned, do hereby submit this information in connection with my application for membership	in
CREW-SAN ANTONIO ("CREW"). I agree and represent that:	
A. All the information provided by me is complete and correct to the best of my knowledge and belief, and if additional needed, I will supply it, and authorize you to conduct additional investigation as CREW deems necessary or appropria	
B. On behalf of myself, my heirs, executors, legal representatives and assigns, I waive and release all claims, demar actions that I or they now or may in the future have against CREW, its officers, directors, members, agents, employees chapters and affiliated organizations including but not limited to any act or omission in granting or denying membership CREW or in suspending, or terminating my membership in CREW.	s,
C. I acknowledge and accept that CREW, as an organization of professionals, has the duty, responsibility and author consider nominees for membership based upon information received by it regardless of the source, and that I shall have right to review or challenge such information regardless of its source, and that I hereby release, hold harmless and indecreed from and against any and all claims arising out of or in connection with (i) my application for membership in CR and/or (ii) CREW's failure to invite me to membership for any reason whatsoever. Furthermore, I shall not assert any of whatsoever against CREW or any source that provides information to CREW, whether it is oral or written, in connection my application for membership in CREW.	emnify REW,
D. I have not been denied a professional license and my professional license has never been suspended or revoked complaints against me have ever been filed with any licensing authority.	. No
E. I acknowledge and represent that I do not discriminate against any individual in my business dealings on the basi presently protected classification under federal, state, or local law.	is of any
I have had the opportunity to review the bylaws, and policies and procedures of CREW at www.crew-sanantonio.org, and if invit membership, I shall conduct my activities in accordance with same or as they may be amended from time to time in the future.	ted to
The submission of this form should not be construed as ensuring an invitation to become a member of CREW-San Antonio. CF San Antonio may, at its discretion, without reason or cause disclosed to me, decline to invite me to membership in CREW-San Antonio	
Signed Date	_

# CREW Network Member Data Sheet Graduation Date:

Prefix:			Name:						
Tag: (MAI, JD, CPA, etc.)			Chapter: San Antonio Membership Category: Graduate or Undergraduate (Circle one)						
Company Name:			Title:						
Business Address:									
City:			State/Province:			Postal Code:			
Email:			License # (optional):						
Work Phone:	Fax:				Cell Phone:				
Demographic Information									
What year did you begin working	ng in the c	ommercia	l real esta	ate industry?					
From the list of specialties below, indicate <b>your personal area(s) of expertise</b> within the commercial real estate industry. Up to 10 areas may be indexed, in order of preference. Please indicate priority by numbering 1-10.									
Accounting	Acquisitions / Dispositions			Administration			Appraisal		
Architecture	Asse	t Managem	ent	Brokerage			Business Development		
Commercial Insurance	Commercial Lending			Construction, General			Construction, Mgmt.		
Consulting, CRE	Corp	orate Real B	Estate	Economic Developmen			Education		
Engineering	Environmental Plannin			Facility Management			Finance		
Interior Design	Inves	stment Mgn	nt.	Investor Relations			Land Use		
Program/Project Mgmt	Prop	erty Manag	gement	Public Sector			Trans. & Port Authority		
Real Estate Development —	Relo	cation Servi	ces	Risk Management			Title / Escrow		
·	Affiliate: Construction Subcontracting			Affiliate: Property Maintenance					
Ontional Information									
(identify one from list of specialties above):				level are you in your current position (select one):  C-Suite SVP/VP/Partner Senior Level Self-Employed Mid-Level/Assoc Entry-Level					
Other Industry Affiliations: AI BOMA CCIM CORENET ICSC IREM NAIOP SIOR ULI Other:									
Gender:	Ethnic	city:			Date	e of Birtl	h:		
Home Address: (incl. city, st, zip)						Home	Phone:		