

## AMERICAN SOCIETY FOR RADIATION ONCOLOGY MEMBER-IN-TRAINING APPLICATION

**MEMBERSHIP CATEGORY FOR WHICH YOU ARE APPLYING.**

- Member-in-Training
  International Member-in-Training

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
FIRST MI LAST SUFFIX (JR., etc.) MM/DD/YYYY

PROFESSIONAL SUFFIX	OPTIONAL INFORMATION
<input type="checkbox"/> M.D. <input type="checkbox"/> D.O. <input type="checkbox"/> Ph.D. <input type="checkbox"/> Other  _____	NICKNAME: _____  GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female

**PLEASE SUBMIT THE APPLICATION TO THE FOLLOWING ADDRESS:**

**American Society for Radiation Oncology**  
**Attention: Membership Department**  
**8280 Willow Oaks Corporate Drive**  
**Suite 500**  
**Fairfax, VA 22031**  
**or By Fax To:**  
**703-839-7361**

**CONTACT INFORMATION**

**Institution/Business Address**  USE AS MY MAILING ADDRESS (Default)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY STATE/COUNTRY ZIP

**Home Address**  USE AS MY MAILING ADDRESS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY STATE/COUNTRY ZIP

**For Phone and Fax Numbers, PLEASE INCLUDE Area Code/Country Code/Number**

DAYTIME PHONE NUMBER \_\_\_\_\_ HOME PHONE NUMBER \_\_\_\_\_

FAX NUMBER \_\_\_\_\_ E-MAIL ADDRESS (REQUIRED) \_\_\_\_\_

Do you wish to have your ASTROgrams e-mailed to you in:  HTML or  Text format?

**RADIATION ONCOLOGY RESIDENCY**

NAME OF PROGRAM \_\_\_\_\_ Dates: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PROGRAM DIRECTOR \_\_\_\_\_

I understand that Member-in-Training is available only to residents in training in radiation oncology and in an accredited or recognized program and only after they have entered their second post-graduate year in training. I further understand that it is my obligation to give proper notification as to any changes in status, programs or address. I hereby certify that the information given above is correct to the best of my knowledge.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

### QUALIFICATIONS FOR MEMBERSHIP

**MEMBER-IN-TRAINING**  
 ASTRO Member-in-Training status is automatically offered to radiation oncology residents in the U.S. Only residents in training in therapeutic radiology exclusively in an accredited program shall be eligible for Member-in-Training status, and only after they have entered their second post-graduate (PGY2) year in training. A Member-in-Training may continue membership following completion of residency for no more than thirty (30) days. Within thirty (30) days of completion of residency the Member-in-Training must apply for Active or Allied Membership in the Society, whichever is applicable. Member-in-Training status shall automatically terminate if such application is not submitted within the thirty (30) day period.

**INTERNATIONAL MEMBER-IN-TRAINING**  
 ASTRO International Member-in-Training status is available to residents and fellows in training in therapeutic radiology or radiation oncology outside the U.S. Only residents training in therapeutic radiology or radiation oncology in a recognized program are eligible for International Member-in-Training status, and only after they have entered their second post-graduate (PGY2) year in training. All applications for International Member-in-Training must be received on this form. Within thirty (30) days of completion of residency the International Member-in-Training must apply for Active, Allied, International or Corresponding membership in the Society, whichever is applicable. International Member-in-Training status shall automatically terminate if such application is not submitted within the thirty (30) day period.