**The Canadian Network for Research on Terrorism, Security and Society (TSAS)**

**APPLICATION FOR AFFILIATION FOR NON-ACADEMICS**

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| [ ]  Dr. [ ]  Mr. [ ]  Ms. |
|       |        |       |
| Last Name First Name Professional Title (if applicable) |
|       |        |
| Department Organization  |
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| Address  |
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| City Province Postal Code |
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| Telephone Fax E-mail  |
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| Organization Website and/or Twitter Application Date |

**Select the Research Area most closely related to your area of interest (rank choices if more than one).**

 ([Read descriptions](http://tsas5.wpengine.com/research-areas/) of Research Areas)

\_\_ Terrorism and Violent Extremism \_\_ Radicalization \_\_ Security and Counterterrorism

\_\_ Countering Violent Extremism \_\_ Social Impacts & Consequences of Terrorism and Violent Extremism

**Relevant Publications:** (If applicable, please list up to five. These may be posted on the TSAS website.)

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| 1)       |
| 2)       |
| 3)       |
| 4)       |
| 5)       |

**Please check the following boxes to indicate your understanding and agreement:**

**[ ]  I agree to have my name and affiliation will be posted on the TSAS website**

**[ ]  My email address will be added to the TSAS eNews list**

**Please answer the following:**

**[ ]  Yes [ ]  No I would be willing to speak to media about my interests**

**Attach a statement of relevance (250 words max) explaining why you wish to affiliate with TSAS and how your work, training, and future plans relate directly to terrorism, security, and society.**

Please forward completed application and accompanying documentation to:

***The TSAS Executive Committee***

 ***c/o ec2ford@uwaterloo.ca***