



## Individual Membership Form

### Personal information

Title: **Dr.**

Gender: (M/F) **M**

Name: **CALVELLO Michele**

Suffix:

Date of birth: **1973/10/20**

Nationality: **Italian**

Mailing address (Street or Postal Box):

**Università di Salerno - Facoltà di Ingegneria - Dip. Ing. Civile (DICIV), Via Ponte Don Melillo**

City: **Fisciano (SA)**

Province/State:

Postal code: **84084**

Country: **ITALY**

Email address: **mcalvello@unisa.it**

Website:

Phone number: **+39 349 6830767**

Fax number: **+39 089 964231**

Current affiliation: **Università di Salerno**

Job title: **Assistant Professor**

### Education Background

Highest degree received: **PhD**

Received from: **Northwestern University, Evanston IL (USA)**

Major: **Geotechnical Engineering**

### Professional background

Professional background relevant to GEOSNet:

**Qualitative and quantitative landslide risk assessment; inverse analysis, "observational modeling" of geotechnical boundary value problems.**

Main reasons for your interest in GEOSNet and potential contributions to the network:

**GEOSNet is the ideal forum/network to share experiences with other researchers and practitioners dealing with similar research topics**