



Individual Membership Form

Personal information

Title: **Dr.**

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

Name: **CHAO, Hsiao-chou**

Suffix: <please insert text here>

Mailing address (Street or Postal Box): **11th FL., No.3, Tunhwa South Road, Sec 1, Taipei 105, Taiwan**

City: **Taipei**

Province/State: **Taiwan**

Postal code: **105**

Country: **Taiwan**

Email address: **hsch.chao@maaconsultants.com**

Website: **www.maaconsultants.com**

Phone number: **886-2-25785858**

Fax number: **886-2-25798663**

Current affiliation: **Moh and Associates, Inc.**

Job title: **Senior Project Engineer**

Education Background

Highest degree received: **Ph.D.**

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

Major: **Civil Engineering**

Professional background

Professional background relevant to GEOSNet:

Geotechnical Risk Consultant for Taipei MRT

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

1. **To stay up to date with the development of Geotechnical Safety.**
2. **To exchange professional experience and knowledge with the others in the network.**