



Individual Membership Form

Title: **Dr**

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

Name: **STERNIK Krzysztof**

Suffix:

Date of Birth: **1969/07/25**

Nationality: **Polish**

Mailing Address (Street or Postal Box): **Al. Korfantego 14/16**

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Affiliation: **Politechnika Śląska (Silesian University of Technology)**

Job Title: **researcher/teacher**

Education Background

Highest Degree Received: **PhD**

Received from: **Politechnika Śląska (Silesian University of Technology)**

Major: **Civil Engineering**

Profession Background

Expertise: **industry experience in geotechnical survey, slope stability analysis and foundation engineering, numerical analyses of geotechnical problems, constitutive modeling of soils**

Professional License(s): Certificate of Polish Committee of Geotechnics associated in ISSMGE