## PHI ALPHA THETA MEMBERSHIP APPLICATION

## For Chapter Records Only

Name: (Please <b>PRINT</b> your name)	me as you want it to	appear on t	he certificate: Firs	: – MI - Last)
Graduate 🗆		Undergradu	ate [ (check one)	y
Graduation date:		Initiation d	late:	
Email:		3	,	
Permanent address: (Required f		-		
	1 v ,		8 A B	·
Local address:	# # # # # # # # # # # # # # # # # # #		* * * * *	,
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	×		ZIP:	
Hours completed in History = _ (Basic requirements: at least 12 Undergraduate record:	2 hrs History 3.1 or 1			
Schools attended	Da	ites	Major(s)	Degree earned
			1 .	
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Activities and honors:			3	
Activities and honors:		*	3	
		ntes	Major(s)	
Activities and honors:  Graduate record:			3	
Activities and honors:  Graduate record:			3	

FACULTY ADVISORS MUST FOLLOW OUR GUIDELINES AT <a href="https://www.phialphatheta.org/initiates.htm">www.phialphatheta.org/initiates.htm</a>