



PHI ALPHA THETA
MEMBERSHIP APPLICATION
****For Chapter Records Only****



Name: _____
(Please **PRINT** your name as you want it to appear on the certificate: First – MI – Last)

Graduate Undergraduate (check one)

Graduation Date: ____/____/____ Initiation Date: ____/____/____

Email: _____

Permanent address: (Required for receiving The Historian):

Initiation fee: \$50
(payable upon initiation)

ZIP: _____

Local Address: _____

ZIP: _____

Hours completed in History: _____ (minimum of 12 hours required)
History GPA: _____ (3.1 or higher)
Overall GPA: _____ (3.0 or higher)

Undergraduate record:

Schools Attended	Dates	Major(s)	Degree Earned
Activities and honors:			

Graduate record:

Schools Attended	Dates	Major(s)	Degree Earned
Activities and honors:			
Publications:			