

PHI ALPHA THETA MEMBERSHIP APPLICATION

*For Chapter Use Only***

Name: _____
(Please PRINT or TYPE your name as it should appear on your certificate: First – MI - Last)

Social Security Number: _____ Graduate Undergraduate (check one)

Graduation date: _____ Initiation date: _____

Email: _____

Permanent address: (Required for mailing *The Historian*):

City State Zip

Local address:

City State Zip

Hours completed in History = _____ History GPA = _____ Overall GPA = _____

(Basic requirements: at least 12 hrs History 3.1 or higher GPA in History and 3.0 or higher overall GPA)

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:			

****FACULTY ADVISORS: FOR INSTRUCTIONS ON SUBMITTING NEW MEMBERS TO THE NATIONAL OFFICE, PLEASE GO TO <http://www.phialphatheta.org/initiates.htm>.**