## PHI ALPHA THETA MEMBERSHIP APPLICATION

For Chapter Records Only

Name: (Please <b>PRINT</b> your name as y			
(1 lease 1 left) I your name as y	you want it to appear	on the certificate: Fir	st - MI - Last)
Graduate □	Undergraduate ☐ (check one)		
Graduation date:	Initiation date:		
Email:			
Permanent address: (Required for mail			
		ZIP:	
Local address:			
		ZIP:	
(Basic requirements: at least 12 hrs His	story 3.1 or higher G		
(Basic requirements: at least 12 hrs His Undergraduate record:	story 3.1 or higher G	PA in History and 3.0	or higher overall GPA)
(Basic requirements: at least 12 hrs His Undergraduate record:	story 3.1 or higher G	PA in History and 3.0	or higher overall GPA)
(Basic requirements: at least 12 hrs His Undergraduate record: Schools attended  Activities and honors:	story 3.1 or higher G	PA in History and 3.0	or higher overall GPA)
Schools attended	story 3.1 or higher G	PA in History and 3.0	or higher overall GPA)
(Basic requirements: at least 12 hrs His  Undergraduate record:  Schools attended  Activities and honors:  Graduate record:	Dates	PA in History and 3.0  Major(s)	Degree earned