

**PHI ALPHA THETA
MEMBERSHIP APPLICATION**

For Chapter Records Only

EMAIL FORM

Please save this file to your device and then click button above.

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 mailing The Historian):

ZIP: _____

Local address:

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: