

Alpha lota Sigma Application for Membership

☐ Dues for one year are \$20
\square Dues for five years are \$100
☐ Lifetime membership is \$300
Please enclose your check made out to Alpha lota
Sigma. Please check with your local chapter for an
additional chapter dues.

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Application for Me	mbership	Please enclose your check made out to Alpha lota Sigma. Please check with your local chapter for any additional chapter dues.		
☐ Mr. ☐ Mrs. ☐ Miss.			Date:	
First Name:	Middl	e Initial: Las	st Name:	
Address:				
City:	State:		Zip:	
Phone:	Cell Phone:			
Email:				
Are you a current student at the co	ollege/university when	re a chapter is lo	cated? □ Yes □ No	
Name of College/University:				
City/ST of College/University:				
Type of Degree Sought (e.g., B.S.,	M.S., of Ph.D.):			
Major of Study:		Minor	· (if any):	
Current Cumulative GPA:	Number of Hours Co	omplete:	Expected Graduation:	
Career Objective:				
Please list the names and contact	information for those	recommending	your induction.	
1. Name:	Email	:	Phone:	
2. Name:	Email	:	Phone:	
3. Name:	Email	:	Phone:	

INSTRUCTIONS FOR INITIATES: Please return this form along with a check for the initiation fee to the Alpha lota Sigma Chapter designee at your local College/University.

INSTRUCTIONS FOR CHAPTER DESIGNEE: Please return a copy of this form along with a check to the Alpha lota Sigma National Honor Society Office.

The Honor Society of Alpha Iota Sigma is an equal opportunity organization. The society does not discriminate on the basis of race, color, sex, religion, national origin, age, financial status or sexual orientation.