



Phi Alpha Theta

ΦΑΘ

Application for Membership

See Reverse for Membership Requirements

Name:		Student ID:	
Home Address:			
City:		State:	Zip:
Home Phone:		Work Phone:	
E-mail Address:			

Undergraduate

Graduate

Academic Record

School Attended:		Dates	Degree
School Attended:		Dates	Degree
Number of Units in History	G.P.A. in History	G.P.A. in All Work	

Applicant's Signature

Date

Office Use Only

Verified By:	Action Taken:
Date of Initiation:	

Return Completed Application and Checks to the History Department – KHC4066