



MEMBERSHIP WORKSHEET FOR PHI ALPHA THETA

Full Name :
(Print your name as you would like it to appear on your membership certificate)

Telephone # : Student ID# :

Permanent Address :

City : Zip Code :

CSUB Email : Personal Email :

Current Grade Level : Fr. So. Jr. Sr. Grad

*If you qualify for membership, and desire to join, the lifetime member fee is \$50.00 (Check payable to Phi Alpha Theta).



FOR DEPARTMENT USE ONLY

Transcript Reviewed :

CSUB History GPA :

Overall GPA/Overall CSUB GPA :

Accepted (Check One) : Yes No

Date Letter Sent :

Date of Payment :

Date of Initiation :