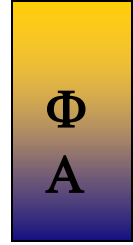


APPLICATION FOR MEMBERSHIP



PHI ALPHA HONOR SOCIETY FOR SOCIAL WORK STUDENTS IN KILLEEN

Student's name: _____
Student's Banner ID #: _____
Student's address: _____
Student's telephone: _____
Student's email address: _____

I hereby certify that I believe I meet the following eligibility criteria for the Phi Alpha Honor Society and am applying for consideration of membership:

- I am a declared social work major.
- I have **completed** 9 semester hours of required social work courses.
- I have achieved an overall Grade Point Average of 3.0.
- I have achieved a 3.25 Grade Point Average in my social work courses.

I understand that you will verify my GPA and notify me of my final acceptance. I am enclosing a check for \$35.00 (to cover the national dues of \$20 and the local life-time dues of \$15), made out to Phi Alpha. I understand that if I am not eligible for Phi Alpha, the check will be returned to me.

Student's signature: _____

Date: _____