Founded in 1942
Affiliated with the Academy of Criminal Justice Sciences
Member of the Association of College Honor Societies

Faculty Membership Application

APPLICATION MUST BE TYPED (Editable Form) ALL FIELDS MUST BE COMPLETED, UNLESS LISTED AS OPTIONAL

First Name:			
Middle Name:			
Last Name:			
Address:			
City:	State:	Zip Cod	le:
Email Address:		Phone Number:	
Beginning Date as a Faculty	at the present Univer	rsity:	
Your Name as it Should App	•	nip Certificate: e/cv with your application	1
Chapter Advisor's Name:		or or the second	
Chapter Greek Name:			
University Name:			
Chapter Address:			
Email Address:		Phone Number:	
Chapter Advisor's Signature:		Date:	
Faculty and administration involvement is administrators in a criminal justice related minimum of one year full-time teaching/a vote during a regular meeting. Membershi accepted by National Headquarters.	I field unless the college publication distrative duties at the	rimarily uses Adjunct faculty. The college where they are inducted	ney must have completed a and be elected by majority
Mail Form and Payment to:			
Regular Mail: Alpha Phi Sigma Criminal Justice Honor Society P.O. Box 292405 Davie, FL 33329-2405		Express Mail: Alpha Phi Sigma Nova Southeastern University 3301 College Avenue Ft. Lauderdale, FL 33314	
Application must be accompanied by Check. Payable to: ALPHA PHI SIGN			
Headquarters Use Only:			
Date Received	Payment Type & #	Date Entered	Date Sent
Executive Director's Signature:		Date:	