



# Alpha Phi Sigma

The Criminal Justice Honor Society



Certified Member of the Association of College Honor Societies  
Affiliated with the Academy of Criminal Justice Sciences



[www.AlphaPhiSigma.org](http://www.AlphaPhiSigma.org)

## FACULTY MEMBERSHIP APPLICATION

APPLICATION MUST BE TYPED

First Name:

Middle Name:

Last Name:

Address:

City:

State:

Zip Code:

Email Address:

Phone #:

Month and Year you became a Faculty at the present University:

Your Name as it Should Appear on the Membership Certificate:

**Please include a brief resume/cv with your application**

Chapter Advisor's Name:

Chapter Greek Name:

University Name:

Chapter Address:

Email Address:

Phone #:

Chapter Advisor's Signature:

Date:

Faculty and administration involvement is recognized and encouraged. Candidates for membership must be full-time faculty or administrators in a criminal justice related field unless the college primarily uses Adjunct faculty. They must have completed a minimum of one year teaching/administrative duties at the college where they are inducted and be elected by majority vote during a regular meeting. Membership applications shall be approved and signed by the chapter advisor, submitted to and accepted by Headquarters.

Application must be accompanied by a \$85 payment in the form of a Cashier's Check, Money Order, University Check or Alpha Phi Sigma Chapter Check payable to **ALPHA PHI SIGMA**. Do not send cash or personal check.

**To submit a credit card payment, please e-mail form to [headquarters@alphaphisigma.org](mailto:headquarters@alphaphisigma.org) and request an invoice.**

Mail application and payment to:

**Regular Mail:**

Alpha Phi Sigma

P.O. Box 292405

Davie, FL 33329-2405

**Express or Certified Mail:**

Alpha Phi Sigma

Nova Southeastern University

3300 S. University Dr., Ft. Lauderdale, FL 33328-2004

Email application to [Headquarters@alphaphisigma.org](mailto:Headquarters@alphaphisigma.org)

### FOR HEADQUARTERS USE ONLY

Date Received:

Payment Type:

**Paid**

Date Scanned:

Date Entered:

Date Shipped:

Executive Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_