

ΛΝ

Lambda Nu

National Honor Society for Medical Imaging and Radiation Sciences
Arkansas State University Box 910 State University, AR 72467 870-972-2952
dcaldwell@astate.edu, kyoungman@astate.edu, lambda_nu@lambda_nu.org
http://www.lambda_nu.org

Student Application

1. Name of Student as it should appear on the certificate (**please type**):

First

Middle (if desired)

Last

We strongly recommend applications be typed to avoid illegible handwriting resulting in certificate typos.
Chapter Directors, a typed list of prospective members may be accompanied by one application.

2. Name of officially recognized Chapter (Example: Nevada Alpha):

3. Address of officially recognized Chapter:

4. Date of Induction:

5. Official Contact Person for the Chapter:

Name and Title

Applications are accepted through mail and email. Application must be accompanied with a one-time student induction fee of \$30 (per student). Payment can be processed by checks payable to Lambda Nu or electronically through PayPal (QR code below).

If using PayPal, confirm the recipient is Lambda Nu National Honor Society in the Radiologic and Imaging Sciences. For payment to be processed correctly, sender name and name on application (#1 on application) must match **AND** Lambda Nu Chapter name (#2 on application) must be included in the *What's this payment for?* in the PayPal app.



Please allow 2-3 weeks for certificate delivery after stated application acceptance deadline.

"By my signature I hereby attest that the above-named student is enrolled in and in good standing at the institution of the above chapter. I further attest that they have met the criteria for membership of the Chapter as listed in the Chapter Bylaws."

Signature of Official Chapter Contact

To be completed by Chapter Contact:

Do you require Expedited Shipping ☐ YES ☐ NO *Add an additional \$50 for expedited shipping.*

Deadline for Application Acceptance: _____

Date of Induction Ceremony: _____