

PHI ALPHA THETA

PERSONAL RECORD CARD

NO. _____

_____	-	_____	-	_____	DATE OF INITIATION	_____	_____	_____
CHAPTER NAME						MM	DD	YY

_____	MI	_____
FIRST NAME		LAST NAME

PERMANENT ADDRESS (REQUIRED FOR MAILING THE HISTORIAN)

_____	TELEPHONE #
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STREET ADDRESS

_____	STATE	_____	ZIP CODE
CITY			

MEMBER'S SCHOOL ADDRESS

_____	TELEPHONE #
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STREET ADDRESS

_____	STATE	_____	ZIP CODE
CITY			

IMPORTANT! Faculty Advisors: this card is for your chapter files only. Submit typewritten list of students' names, permanent addresses and initiation date. Please forward one check for the initiation fee of \$30 per student. Certificates will be mailed to the Faculty Advisor for distribution.

Undergraduate Record

School Attended	Dates	Major Subject	Degree
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Activities: _____

Graduate Record

School Attended	Dates	Major Subject	Degree
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Activities: _____

Professional Activities (books or articles printed): _____
