

Rho Gamma Chapter of Eta Sigma Alpha

Application for Membership

(please print)

Current academic year: _____

SCHEA member number: _____

Applicant's name: _____

(as to appear on certificate)

Current grade: _____

(10th-12th)

Applicant's address _____

Applicant's email _____

New application. Fee is \$25

Renewal application. Fee is \$15.

Rho Gamma member number: _____

Summary of qualifications: (attach supporting documentation)

OFFICE USE:

Date received: _____

_____ SCHEA Member _____ Fee received

_____ Documentation complete

Accepted: yes / no Date: _____

Comments:

_____ Cumulative GPA: _____

_____ Test Score: _____ Test date: _____ Test: _____ (ACT, SAT, PSAT, etc)

_____ Service hours completed: _____ (minimum 20 hours)

I hereby verify the above is true and correct as are the attached documentation.

Student signature

date

parent signature

date

Name of parent/guardian