



EPSILON PI PHI

Honor Society

ARKANSAS TECH UNIVERSITY



Lifetime Membership Application Form

1. Contact Information

Name: _____

T#: _____

Address: _____

City: _____

ST: _____ ZIP: _____

Email: _____

Phone: _____

2. Academic Information

Major: _____

Minor: _____

Program Hours Completed: _____

Program GPA: _____

Total Earned Hours: _____

Overall GPA: _____

Minimum 3.5 GPA or higher required

Expected Graduation Term: Spring Summer Fall Year: _____

3. What is your class standing? *Students must have 15 hours of coursework in program or Related Field.*

Junior Senior Graduate Student

Student Signature

Date

Academic Advisor Signature *(if non-EAM Major)*

Date

Chapter Faculty Advisor

Date

Note: One-time Application fee is \$50 (Includes National fee of \$40 and Chapter fee of \$10.)

Return the completed form to Bethany Swindell, Faculty Advisor at bswindell@atu.edu.

Alumni: Complete form as best able, contact Bethany Swindell for questions.

For Official Use Only:

In database

Dues received

Dues sent to national

Certificate

Cord

Pin