

Academic Key Society Application

Chapter/Colony:	Host Institution:
Full Name:	
Home Mailing Address:	Phone:
City:	State: Zip:
Parent Name(s):	Email:
Student ID #:	Expected Year of Graduation:
Undergraduate Major:	Undergraduate Minor:
(To be eligible, the applicant must have completed a must have maintained at least a 3.5 cumulative GPA	at least 105 semester credit hours or 157.5 quarter credit hours and A.)

SCHOOL OFFICIAL'S CERTIFICATION This is to certify that the applicant named above is a cumulative grade point average of on a gradent property of the company of the	a full-time student in good standing at this institution and has a deepoint system of
Signature	Date:
Name (typed or printed):	Title:

CHAPTER OFFICERS' APPROVAL	****
This application is approved by the undersigned offi	icers:
Signature of Chapter President	Signature of Chapter Adviser

APPLICANT'S CERTIFICATION	
	otal semester credit hours with 60 upper division credit hours or 157.5 ion credit hours and have maintained a cumulative GPA of 3.5 or
Signature of Applicant	Date

INSTRUCTIONS TO THE APPLICANT

In the spaces provided, type all of the requested information and check the line in the Applicant's Certification section to show that you understand the eligibility requirements. Mail the completed form and required documents to the address listed below.

Enclose with this application the following required items.

_____ An official transcript of credits for all completed courses, bearing the seal of the registrar, from each of the institutions of higher education attended since high school.

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AWARDS

Those undergraduate students who have already completed 105 semester credit hours with 60 upper division credit hours or 157.5 quarter credit hours with 90 upper division credit hours with at least a 3.5 cumulative GPA will receive a certificate and an Academic Key pin.

MAIL TO:

Phi Sigma Kappa International Headquarters Attn: Kathy Cannady 2925 East 96th Street Indianapolis, IN 46240