



Application for Pi Alpha Alpha Membership

Name:

Date:

Email:

Phone:

Permanent Mailing Address

Street:

Apt. No.:

City:

State:

Zip Code:

Local Address

Street:

Apt. No.:

City:

State:

Zip code:

Current GPA:
(3.7 minimum)

Semester Hours Completed:
(18 minimum)

S #:

Expected Graduation Date:

Email completed application to Shannon Richardson at sricha17@aum.edu