



CSUF PSI CHI MEMBERSHIP APPLICATION

Turn in all items listed below to the Psychology Department Office in Humanities 830M

Name _____ Student ID # _____ - _____ - _____

Phone _____ - _____ - _____ E-mail _____

Address _____ City _____ Zip _____

GPA: Undergraduate Overall _____ Psychology _____ Graduate Overall _____

Requirements for Active Membership

- 9 completed units in psychology or 6 completed units with at least 3 in progress
- Registration as a Psychology major or a Psychology minor
- Undergrad GPA: Overall ≥ 3.2 , Psychology ≥ 3.5 . Graduate GPA: Overall ≥ 3.0
- High standards of personal behavior

Your application MUST include ALL of the following items:

- 1) Completed membership application
- 2) **Check** for \$75.00 made out to "Psi Chi"
(Fees include National as well as local chapter fees)
- 3) Print out of unofficial transcripts for undergraduates. A copy of the last grade report for graduates.
- 4) **Please apply and register on the Psi Chi official website (<http://www.psichi.org>)**

Undergraduates: List all psychology courses completed.

Graduates: List previous degrees and graduate courses completed.

Course	School	Grade

APPLICANT Signature: _____ Date: _____



PSI CHI® THE INTERNATIONAL HONOR SOCIETY IN PSYCHOLOGY

REGULAR MAIL | P.O. BOX 709 | Chattanooga, TN 37401-0709 | STREET ADDRESS | 825 Vine Street | Chattanooga, TN 37403
CONTACT | PH: +1-423-756-2044 | FX: +1-423-265-1529 | psichi@psichi.org | www.psichi.org

Registcd [3/11]

Registration Card

Member Profile (Please print legibly. Print your name as you want it to appear on your membership certificate and card.)

Please complete both sections and return as specified by your chapter.

CENTRAL OFFICE FILE CARD

[3/11]

Name of chapter [school]		State Country
Name: First	Middle name/initial	Last
Email	Student ID number	Estimate date of graduation (mo/day/yr)
Current mailing address: Street or PO Box	City State Zip Country	
Permanent address (if different above)	City State Zip Country	
Phone number(s)	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate student <input type="checkbox"/> Faculty
The following information is used only for internal Psi Chi statistical purposes.	Psi Beta Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Race/Ethnicity: <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Mixed Racial Background <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Other [specify]		
Are you classified as an international student by your university? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list your country of citizenship.	I accept Psi Chi's Constitution: Signature Date	

CHAPTER FILE CARD (this section should be kept with your chapter records)

[3/11]

Name of chapter [school]		State Country
Name: First	Middle name/initial	Last
Email	Student ID number	Estimate date of graduation (mo/day/yr)
Current mailing address: Street or PO Box	City State Zip Country	
Permanent address (if different above)	City State Zip Country	
Phone number(s)	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate student <input type="checkbox"/> Faculty
The following information is used only for internal Psi Chi statistical purposes.	Psi Beta Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Race/Ethnicity: <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Mixed Racial Background <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Other [specify]		
Are you classified as an international student by your university? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list your country of citizenship.	I accept Psi Chi's Constitution: Signature Date	