

Kappa Delta Pi (ΚΔΠ)
APPLICATION FOR AFFLIATE STATUS
Pi Sigma Chapter, Liberty University

Name

Last First Middle Maiden

E-mail _____

Local Address: _____ University Box # _____

Street City Zip Code

Local Phone: (____) _____ Cumulative GPA _____

Elementary, Concentrations: _____

Secondary, Major: _____

Class Status _____ Anticipated Graduation _____

Advisor _____

Chapter Meeting Attended: _____
 Affiliate Fee Paid (\$5.00)

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