

PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION AS YOU WOULD LIKE IT TO APPEAR ON YOUR ALPHA PHI SIGMA CERTIFICATE

Name: \_\_\_\_\_

University Presently Attending: University of Houston-Downtown

Local Chapter Name (Greek): **ΑΦΣ**

**EACH APPLICATION MUST BE ACCOMPANIED BY A \$ 70.00 CASHIER'S CHECK, MONEY ORDER, OR PERSONAL CHECK PAYABLE TO: ALPHA PHI SIGMA**

***PLEASE ATTACH A COPY OF YOUR GRADE HISTORY***

**FOR CHAPTER ADVISOR ONLY**

Chapter Advisor: Dr. Barbara Belbot

Title: Professor of Criminal Justice

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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ALPHA PHI SIGMA CHAPTER

COMMERCE BUILDING

C-340

HOUSTON, TEXAS 77002

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