

Sigma Phi Psi, Inc.

Sorority For United States Armed Forces Women

MEMBERSHIP APPLICATION

APPLICATION CHECKLIST: Your application is not complete unless it includes the following documents:

- Completed Application
- Copy of your Driver's License
- Copy of your Birth Certificate
- Proof of your Military Service
- Narrative Summary of why you would like to be a member of Sigma Phi Psi
- Non-hazing Policy
- Privacy Policy
- Required Fee (Non-refundable initiation fee of \$50 due upon application approval)

For Official Use Only:

Date membership application was received: ____/____/____

Initiating Chapter: _____

Initiate Location: _____

All Necessary Documents have been Received
Applicant Information

Full Name: _____

Date of Birth: _____

Primary Email Address: _____

Primary Phone Number: _____

Street Address: _____

City, State & Zip Code: _____

Military Background

Military Branch: _____

Current Military Status: _____

If a Veteran, please provide discharge type: _____

Time in Service: Yrs/Mths: _____

Do you currently have any military disciplinary actions pending against you? _____

If yes, please explain:

Employment Information

Current Employer: _____

Current Position/Title: _____

Employment Length-Yrs/Mths: _____

Additional Information

Are you currently, or were you ever a member of a Military Greek Letter Organization? _____

Were you referred by any current or former member of Sigma Phi Psi? If yes, please provide Member

Name and current chapter if applicable: _____

Character Reference

Your Character Reference should have knowledge about your overall character and dependability. Your reference must have known you for at least two years. We will only inquire about traits that are relevant to sorority membership.

Reference Name: _____

Phone Number: E-mail _____

Is this Reference a military service member? _____

NON-HAZING and PRIVACY POLICY

Hazing includes but is not limited to the following activities: - Requiring calisthenics such as sit-ups, push-ups, runs or any form of physically abusive exercise - Forcing or requiring consumption of alcoholic beverages or any drug - Requiring the ingestion of any undesirable or unwanted substance (i.e. spoiled food, insects, raw eggs, etc.) - Paddle swats - Pushing, shoving, or intimidating candidates - Assigning "pranks" such as stealing, painting objects, panty raids and harassing another organization - Calling associates by degrading names. - Activities which allow candidates less than six continuous hours of sleep - Required road trips or kidnapping of candidates - Yelling, screaming or use of obscenities at candidates - Burning, branding or tattooing any part of the body, whether voluntarily or involuntarily - Activities which call for confinement, jumping from heights and other potentially dangerous activities - Activities which encourage failure to comply with the laws of local, state or federal government

Candidates completing the Pledge Process agree to NOT participate & report any and all acts of hazing to the Leadership immediately. Any candidate or member who participates or facilitates any act of hazing will be suspended from Sigma Phi Psi Sorority.

By signing this form, you understand & agree to: -Immediately report all acts of hazing to your local authorities & sorority Leadership. -Not participate or facilitate any form of hazing while joining or to maintain membership in Sigma Phi Psi Sorority, Inc. - Read and act in accordance with our rules and regulations.

You also agree to adhere to our Privacy (Nondisclosure) Policy, and agree not to disclose, during the term of your candidacy, affiliation or membership and any time thereafter, any confidential information belonging to Sigma Phi Psi Sorority, Inc. This includes but is not limited to any and all confidential information regarding members, candidates, affiliates, applicants, Pledge Process tasks, official initiations ceremonies & all confidential business affairs of Sigma Phi Psi Sorority, Inc. You further agree that all correspondence, be it membership applications, account information, files or other materials concerning this sorority shall belong to and remain the exclusive property of Sigma Phi Psi Sorority. No part of Sigma Phi Psi Sorority, Inc. Pledge Process or sorority publications may be reproduced in any form without the expressed permission of Sigma Phi Psi Sorority, Inc. Redistribution of Sorority publication is prohibited without expressed written permission. If breached you understand that Sigma Phi Psi Sorority may seek legal retribution.

By signing & submitting your application for membership you are attesting to the following information:

-All the information provided on this membership application is accurate & true. -You authorize the verification of the information provided on this form. If at any time it is discovered that falsified information was provided your membership may be revoked. -You agree with the mission &

objectives of Sigma Phi Psi Sorority, Inc, and have read the sororities non-hazing and privacy policy and agree to comply with its guidelines and reporting procedures. -You understand that the submission of your application and fee does not guarantee membership and agree to abide by our policies and bylaws.

Applicant Name: _____

Signature and Date: _____

For Official Use Only:

Decision: Accepted Rejected/Reasoning _____

Decision Notification Date: ___/___/_____

Initiation Fee has been Received

Return your application via email to:
joinSigma@gmail.com