



Alpha Chi Sigma Professional Candidate Form

For qualifications and other information regarding initiating professional candidates, see the Alpha Chi Sigma Constitution (Art. I, Sec. B, 2) and Bylaws (Art. 1, Sec. A, 3). Keep a copy of this form for your records.

Candidate

Title – First name – Middle name – Last name – Suffix –

Home address – City, state, ZIP Code –
Business address – City, state, ZIP Code –
Date of birth –
Home phone – Business phone –
E-mail address –

Education

Institution – Degree –
Dates – Major(s) – Minor(s) –

Institution – Degree –
Dates – Major(s) – Minor(s) –

Institution – Degree –
Dates – Major(s) – Minor(s) –

Present Professional Affiliation

Organization – Title or position –
Address – City, state, ZIP Code –
Daytime phone – E-mail address –

Principal Past Affiliations (List the most recent first.)

Organization – Title or position – Dates –
Organization – Title or position – Dates –
Organization – Title or position – Dates –

Memberships in Professional and Technical Organizations

Organization –
Organization –

Membership Pledge

I understand that if I become a member of Alpha Chi Sigma, the Fraternity shall bestow on me all the rights and privileges of membership. I will assume the obligations of membership as expressed by the Three Objects of the Fraternity for life. I certify that all the information supplied by me is correct. I understand that membership in Alpha Chi Sigma precludes membership in any other national professional chemistry fraternity and requires the payment of pledge and lifetime membership fees, at the current rate, prior to initiation.

Candidate's signature

Date

Proposer's Section

I certify that the candidate named above is known to me personally and is, in my opinion, qualified for membership in Alpha Chi Sigma Fraternity.

Proposer's signature

Date

Seconders's signature

Date

Seconders's signature

Date

NOTE: Both the Proposer and the Seconders must be active Collegiate or Professional members of the Fraternity. Additional justification for the nomination may be attached if desired.

Chapter Section

The members of _____ Chapter, at a meeting held on [Click here to enter a date.](#), by secret ballot approved the nomination of the candidate named above by the required majority of four-fifths of the members present.

Master Alchemist's signature

Proposed initiation date

Office Use Only

Supreme Council action for 3b candidates only:

The Supreme Council, by Proposition Number _____, ☐ unanimously approved
☐ did not approve _____ the nomination of the
candidate named above for membership in Alpha Chi Sigma Fraternity.

Attest: _____

Grand Recorder or Assistant Grand Recorder's signature

Date

The proposed initiating chapter should send this completed form to reports@alphachisigma.org.

After the nomination has been approved by the chapter and/or the Supreme Council, the National Office will send the candidate a Pledge Manual and an invoice for pledge and lifetime member fees. The chapter must tell the candidate when and where the initiation will take place and what is expected or required of him or her.