Faculty Application

Sigma Nu Tau

Entrepreneurship Honor Society



Please print or type					
Check One:Mr	Ms.	Mrs.	Dr.	Prof.	Other [Please state:]
Name:					
					ike it to appear on your certificate.
Your School Address	SS:				
Email:					
Phone:					
List Academic Degr	ee(s) Earned a	and Grantii	ng Institut	ion(s):	
	ourses raugh				
Enclosed is: \$Initiation/Lifeti	me Membersh	in fee of \$5	0 00 (regui	red)	
\$Honor Cord @		1p 100 01 40	oloo (requi	104)	
\$Entrepreneur Subscription (Free to US addresses; \$20 supplement to Canada; \$30 to other countries) \$Total Enclosed					
Form of Payment: _	Cash				
Check/Money Order					
	(Made pay	able to Sign	na Nu Tau	Entreprene	urship Honor Society)
-					
Membership Plea	0				
As a condition of mer with honor and integr	- · ·	_		-	ntrepreneurship and to conduct myself al endeavors.
	Signature (of Applicant			Date

Please submit form to Chapter Faculty Advisor or Faculty Secretary who will remit to:

Sigma Nu Tau Entrepreneurship Honor Society
Dr. Nancy J. Church, Executive Director
SUNY Plattsburgh, 101 Broad Street, Plattsburgh, NY 12901
(518)-564-4169 (phone) Nancy.Church@Plattsburgh.edu (518)-564-3183 (fax)