

**MEMBERSHIP APPLICATION INTENT FORM- Undergraduate Student/All Programs**

**Sigma Theta Tau International- Honor Society of Nursing**

**Iota Alpha Chapter- William Paterson University**

The Purposes of Sigma Theta Tau International are to:

1. Recognize superior achievement.

2. Recognize the development of leadership qualities.

3. Foster high professional standards.

4. Encourage creative work.

5. Strengthen commitment to the ideals and purposes of the profession.

CRITERIA: Each undergraduate candidate for membership is required to meet the criteria for the undergraduate category of membership. Undergraduate students are required to have completed 1/2 of the nursing curriculum, have at least a 3.0 overall GPA on a four-point scale AND rank in the upper 35% of the graduating class, meet the expectation of academic integrity and demonstrate the ability to be a contributing member of the organization and the profession.

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

(Last) (First) (Middle initial)

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ all further correspondence will be by e-mail – It is your responsibility to provide a working e-mail address and the check your e-mail for further information.

Mailing Address (complete): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Level in Nursing Program: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Traditional Accelerated RN to BSN

Undergraduate Nursing Courses completed: # of course\_\_\_\_\_\_\_\_\_\_\_\_\_\_; # of credits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Under the provision of the "Family Educational Rights and Privacy Act of 1974," I grant access to my academic record to the Iota Alpha Chapter Eligibility Committee Chairperson for consideration of my membership application to the Honor society”.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Students Signature) (Date)

Please attach to this form:

• A one page statement describing your activities that fulfill the purposes of Sigma Theta Tau International

• Please attach to this form with two letters of Endorsement with one letter from an active member of Sigma Theta Tau. The intent form, statement and the letters of endorsement MUST be submitted as a package.

**INCOMPLETE or LATE APPLICATIONS WILL NOT BE REVIEWED**

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**Membership Application Intent Form - Graduate Student (Masters or Doctorate)**

**Sigma Theta Tau International- Honor Society of Nursing**

**Iota Alpha Chapter - William Paterson University**

The Purposes of Sigma Theta Tau International are:

1. Recognize superior achievement.

2. Recognize the development of leadership qualities.

3. Foster high professional standards.

4. Encourage creative work.

5. Strengthen commitment to the ideals and purposes of the profession.

CRITERIA: Each Graduate (masters or doctoral) candidate for membership is required to meet the criteria for the graduate category membership. Master's and doctoral students are required to have completed 1/4 of the program of study. Students in master's programs are required to achieve a 3.5 GPA on a four-point scale or its equivalent. Students in doctoral programs are required to achieve a 3.75 GPA on a four-point scale or its equivalent.

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

(Last) (First) (Middle initial)

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (all further correspondence will be by e-mail – It is your responsibility to provide a working e-mail address and to check your e-mail for further information.)

Complete Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Graduate Nursing Courses completed:

Number of courses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number if credits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Under the provision of the "Family Educational Rights and Privacy Act of 1974," I grant access to my academic record to the Iota Alpha Chapter Eligibility Committee Chairperson for consideration of my membership application to the honor society”.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Students Signature) (Date)

Please attach to this form:

* A one page statement describing your activities that fulfill the purposes of Sigma Theta Tau International
* Please attach to this form with two letters of Endorsement with one letter from active members of Sigma Theta Tau. The intent form, statement and the letters of endorsement MUST be submitted as a package.

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**Membership Application Intent Form- Nurse Leader**

**Sigma Theta Tau International- Honor Society of Nursing**

**Iota Alpha Chapter- William Paterson University**

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1. Recognize superior achievement.

2. Recognize the development of leadership qualities.

3. Foster high professional standards.

4. Encourage creative work.

5. Strengthen commitment to the ideals and purposes of the profession.

CRITERIA: Nurses with a minimum of a baccalaureate degree who have demonstrated marked achievement in education, practice, research, administration or publication.

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

(Last) (First) (Middle initial)

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (all further correspondence will be by e-mail – It is your responsibility to provide a working e-mail address and to check your e-mail for further information.)

Complete Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Formal Education: (List highest degree first and attach a copy of documentation of highest degree received).

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Please check areas of achievement in Nursing:

\_\_\_\_\_\_ Education \_\_\_\_\_\_ Administration

\_\_\_\_\_\_ Practice \_\_\_\_\_\_ Publication

\_\_\_\_\_\_ Research \_\_\_\_\_\_ Other (please indicate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list your most recent (last five years) contributions to nursing in areas checked above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Candidate’s Signature Date

Please attach to this form, curriculum vitae with **two letters of Endorsement with one from active member of Sigma Theta Tau.** The intent form and the letters of endorsement MUST be submitted as a package.

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**ENDORSEMENT FOR MEMBERSHIP FORM**

**Sigma Theta Tau International- Honor Society of Nursing**

**Iota Alpha Chapter - William Paterson University**

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Definition: An endorsement is a letter supporting an individual for membership in the chapter. **Two endorsements per individual** are necessary in order for an application to be considered by the Chapter Eligibility Committee. The endorsements are required to be from active members of Sigma Theta Tau International.

This endorsement enables the candidate to be considered for membership. The Eligibility Committee of the chapter invites your letter of endorsement supporting the following individual for membership:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is applying for membership in the Iota Alpha Chapter.

On the basis of this individual's achievement and my knowledge of the purposes of Sigma Theta Tau International, I heartily endorse this individual for membership in the chapter.

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

Current Chapter Membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Position /Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Additional Endorsement for Nurse Leader only:\*

A nurse leader is eligible for membership if the leader has a minimum of a bachelor's degree and has demonstrated marked achievement in nursing in at least one of the following areas: Education, research, practice, administration, or publication.

Endorsement letter includes a statement describing the applicant’s outstanding achievement in nursing in the areas of practice, education, research, administration or publication: