



Permanent Record of Election Form (PRE)

- Prof. Mr. Dr.
 Ms. Miss Mrs.

Please print legibly.

First _____ Middle _____ Last _____ Suffix (Jr.,etc.) _____

Print name exactly as it should appear on certificate _____

An address MUST be provided.

Permanent Address _____

City _____ State/Prov. _____ Zip _____ Country _____

Home Phone _____ Cell Phone _____

Primary E-mail _____ Last four digits of SSN _____

University/College Where Elected to Membership _____

Phi Kappa Phi Initiation Date _____

Check election status: Junior Senior Graduate Student Faculty/Professional Staff Alumni

Major _____ Degree Sought (B.A., M.A., Ph.D.) _____ (Proposed) Grad. Date _____

Year of birth: _____

- I **will** attend the ceremony. Number of guests attending the ceremony _____
 I **will not** attend the ceremony.

If you choose not to attend the ceremony, you may be contacted by the Chapter.

As a member of Phi Kappa Phi, you will receive a certificate and pin.

If you have any questions please contact your local chapter or Society Headquarters at 800-804-9880, ext. 13.

INSTRUCTIONS FOR INITIATES: Please return this form, along with check for initiation fee, to the Phi Kappa Phi Chapter designee at the address listed in your invitation-to-membership letter. Make certain this form and payment are returned by the chapter's deadline, which is also stated in your invitation-to-membership letter.

- Periodically, our partnering vendors send special mailings to our members with new offers. If you DO NOT wish to receive any of these offers, please check here.