



ALPHA LAMBDA DELTA HONOR SOCIETY MEMBERSHIP ACCEPTANCE FORM

Name: _____ Student ID Number: _____

Please note – the name above, as spelled, will be what appears on your official membership certificate. Please PRINT neatly if not typing. Any preferred changes to a certificate, once printed, will be at the cost of the member.

Student Admit Type: Traditional first-year student [] Transfer student []

Year Inducted: Spring 2024 Expected Year of Graduation: _____

SSU Email Address: _____

We will use your Salem State University email for all communications.

Cell Phone Number: _____

Current Address: _____ Permanent Address: (If different from current)

Street Address/Apartment/Box

Street Address/Apartment/Box

City, State, Zip Code

City, State, Zip Code

What other types of organizations and activities are you involved with on campus?

Three horizontal lines for text input.

In considering your transition from high school to college, what advice would you offer to a current first-year or new transfer student striving to achieve academic success?

Three horizontal lines for text input.

THIS ACCEPTANCE FORM AND MEMBERSHIP FEE MUST BE RECEIVED BY FRIDAY FEBRUARY 9, 2024

Submit materials to:

Office of Student Success and the First Year Experience, 101A Dining Commons, 352 Lafayette Street, Salem, MA 01970

Include a check/money order for \$60 payable to: Alpha Lambda Delta at Salem State University

Please include the name of the student being inducted in the "note" section of the check if it is not already on the check.

Lifetime membership dues are a onetime payment of \$60

(\$30 goes to the national office, \$25 to the local chapter, and \$5 to the chapter's scholarship fund)

If you received a letter indicating you are eligible for membership, submission of this form by the deadline, along with the \$60 membership fee, confirms your membership. There are no further approvals needed.

Formal inductions will be held at an in-person early evening event Friday, March 1: details emailed in mid-February

Students and family members requesting individual accommodations should contact Disability Services at 978.542.6217 or disability-services@salemstate.edu