

**Spring 2020 Membership Application**

Please include a **small picture** of yourself, an updated **resume,** and an **unofficial transcript** (CalCentral screenshot acceptable). Late applications will **NOT** be accepted.   
Please submit a hard copy of your completed application, as well as an electronic copy to [phichi.social@gmail.com](mailto:phichi.social@gmail.com) both by 8pm on Thursday, February 6th, 2020.

**Section 1: Personal Information**

First Name: Last Name:

SID: Birth Date: Gender:

Current Address:

City: State: Zip Code:

Email: Phone:

**Section 2: School & Extracurricular Information**

Major: Expected Graduation Term:

Current Class Year: Overall GPA: (Note: 3.0 Required)

Current Semester/Year: Spring 2020 Units This Semester:

Extracurricular activities (clubs, work, etc.) and Involvement/Position/Estimated time per week:

**Section 3: Personal Statement (Max: 350 words each)**

1. What are your goals and how do you think Phi Chi will help you achieve them?
2. What is a public health issue you are interested in and why?

1. Why do you want to join Phi Chi, and not another pre-medical fraternity? If you are are re-rushee, include why you have decided to come back.

I certify that the above information is correct to the best of my knowledge.

Name: Date:

Signature: Date:

**Also, please fill out your schedule below.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 8-9A |  |  |  |  |  |  |  |
| 9-10A |  |  |  |  |  |  |  |
| 10-11A |  |  |  |  |  |  |  |
| 11-12P |  |  |  |  |  |  |  |
| 12-1P |  |  |  |  |  |  |  |
| 1-2P |  |  |  |  |  |  |  |
| 2-3P |  |  |  |  |  |  |  |
| 3-4P |  |  |  |  |  |  |  |
| 4-5P |  |  |  |  |  |  |  |
| 5-6P |  |  |  |  |  |  |  |
| 6-7P |  |  |  |  |  |  |  |
| 7-8P |  |  |  |  |  |  |  |
| 8-9P |  |  |  |  |  |  |  |
| 9-10P |  |  |  |  |  |  |  |