

# Faculty Membership Application

## Sigma Nu Tau

### Entrepreneurship Honor Society



*Please print or type*

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

Please print your name *exactly as you would like it to appear* on your certificate.

**Name of School:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**List Academic Degree(s) Earned and Granting Institution(s):**

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

**Current Professional Rank/Title:** \_\_\_\_\_

**Entrepreneurship Courses Taught:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ **Yes**, I wish to become a member of the \_\_\_\_\_ Chapter  
of Sigma Nu Tau Entrepreneurship Honor Society. *School Name*

Enclosed is my Initiation/Membership fee of \$50.00:

\_\_\_\_\_ Check or Money Order (Made payable to Sigma Nu Tau Entrepreneurship Honor Society)

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### Membership Pledge

As a condition of membership, I pledge to be a model of principled entrepreneurship and to conduct myself with honor and integrity in all my academic, personal, and professional 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

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