

Beta Alpha Psi (BAP) Candidate Application

Full Name: _____
Student ID#: _____
Major and Minor: _____
Email Address: _____
Mailing Address: _____
Preferred Phone #: _____

I, (Name _____), apply for membership in the Iota Gamma chapter of Beta Alpha Psi. I certify my understanding that to be inducted, I must have a 3.0 cumulative GPA in upper division major courses and a 3.0 overall GPA, AND one of the following: be in the top 35% of my class OR have attained a 3.25 GPA in the last 30 semester credit hours. I must also have completed at least 1.5 years of coursework, have completed at least one upper level course in my major with at least a 3.0, and be an Accounting, Finance, or Information Systems major. I also understand that I must pay candidate dues of \$35.00 to be admitted into BAP.

By applying for membership, I agree to fulfill all the following requirements of being a member of the Iota Gamma chapter of BAP: (Please initial each statement below)

INITIALS

- Complete *at least* 8 hours of professional activities (e.g., weekly BAP meetings)
- Complete *at least* 12 hours of service activities, some of which must be fulfilled in the Accounting Lab (unless alternate service is approved)
- Pay membership dues of \$35 starting the semester after I am initiated
- Dress appropriately (business casual) for all professional activities
- Attend the initiation and officer installation ceremonies each semester (business professional attire required)
- I understand that I must complete each of these requirements every semester (or the equivalent, as approved by the Iota Gamma chapter officer team) to remain a member in good standing.

By signing below, you certify that you qualify to join BAP and that you will complete all the requirements listed above to remain a member in good standing and authorize the faculty advisor to verify your academic standing.

Signature:

Date:

Official Use Only

Date of Application: _____ Date of Payment: _____
Met Professional Hours Requirement: _____ Met Service Hours Requirement: _____
Met Academic Requirement: _____ Approved for Membership: _____
Date Payment Sent to Nationals Office: _____ Check #: _____