*CANDIDATE APPLICATION*

The Delta Theta Phi Law Fraternity, International

\*All information should be typed or printed legibly: your name as written in full below is as it will appear on your certificate unless you otherwise specify.

\* Each candidate for membership must fully complete this Application.

**Permanent Street Address:**

City, State, Zip:

**E-mail Address1 (non-school address):**

**E-mail Address 2 (school address): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current Phone Number1:** \_( ) \_ Is this cell? or home?\_ \_

**Current Phone Number2:** \_( ) \_ Is this cell? or home?\_ \_

Graduation Date

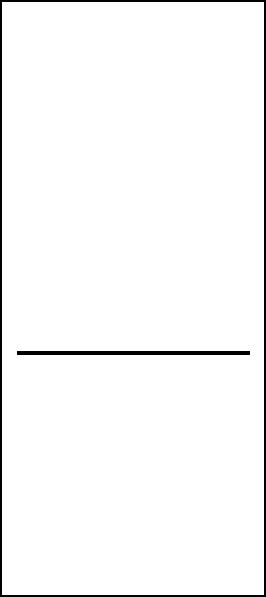
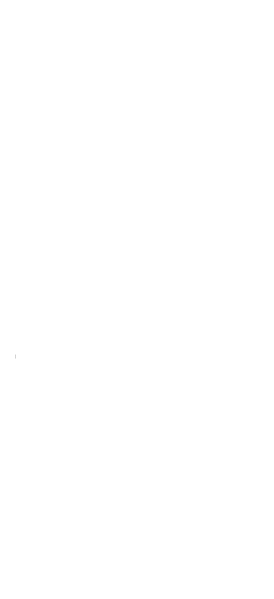
/ \_/ Date of Birth (MM/YY)

**Senate Name**

**Law School Name**

**Name in Full**:

*FIRST MIDDLE LAST*



**SENATE USE:**

*/ /*

***Date of Initiation***

**OFFICE USE**

Member Number

Senate Number

Fee Rec’d

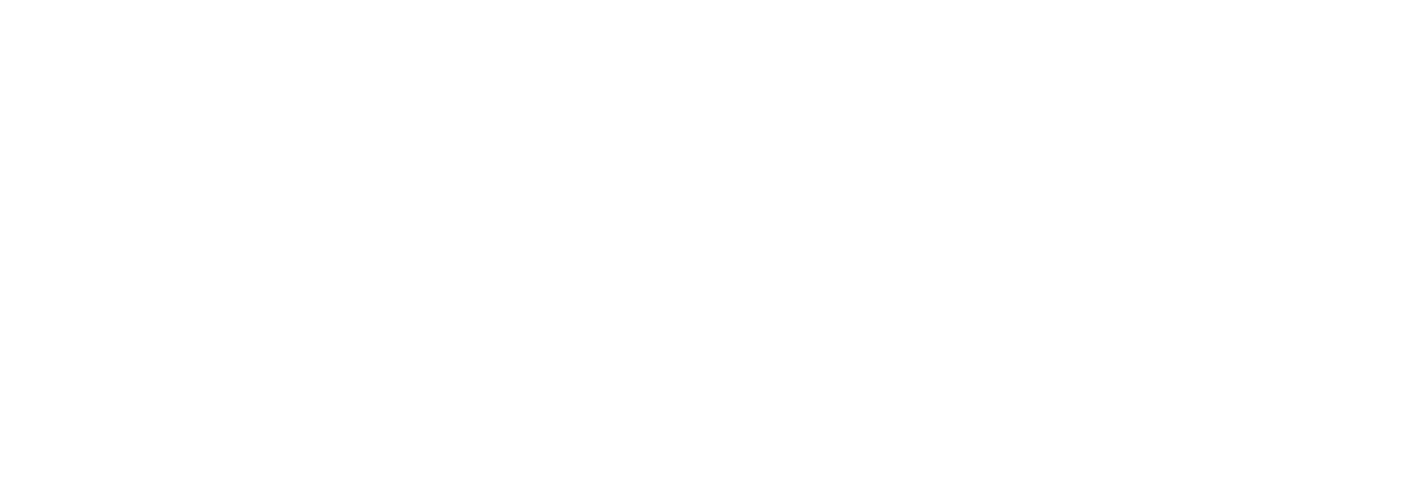
Name/Relationship/Phone of One Character Reference:

Name of Any Other Law School Attended, if any:

Name of Undergraduate School attended:

International Fee of $100.00 is payable with this Application. The applicant acknowledges by signing this Application that the International Fee submitted to the International Office is **NONREFUNDABLE**. No person may be initiated until the International Fee has been paid in full.

If mailing Application and International Fees use the following address: Delta Theta Phi Law Fraternity, International, Attention: Executive Director, 1967 E. Maple Street #319, North Canton, OH 44720. **Returned checks will be charged a $20 service fee.**



**I SOLEMNLY AFFIRM** that I am not a member of any other law fraternity, and that the above information is true. I further promise that if accepted as a member, I will be initiated and pay all fees. I subscribe to the objects and purposes of The Delta Theta Phi Law Fraternity, International and I will support the Constitution of the Fraternity and the decisions and edicts of the International and edicts of the International and Supreme Senate.

Date:

**Signature**

*CERTIFICATION OF THE DEAN OR TRIBUNE*

**I CERTIFY** that the candidate has signed this application, is qualified for membership, has received the required approval of the Fraternity, and is to be initiated or has been initiated.

Date:

**Dean or Tribune’s Signature**

Last Updated: 08/09/2021