



Eta Sigma Delta
MEMBERSHIP APPLICATION

THIS MUST BE COMPLETED TO PROCESS CERTIFICATES



Name of University/College/School _____

First Name _____

Middle Name _____

Last Name _____

(please print clearly)

Telephone _____ FAX _____

School Email _____ Personal Email _____

Class Status: (circle one) Sophomore Junior Senior Grad Student

_____ Check here if you would like your information shared with ICHRIE Industry Partners

Eta Sigma Delta (ESD) Eligibility Requirements:

- I have officially declared as a hospitality and tourism management major (or related field); and
- I have a cumulative academic status equivalent to any of the following: and
 - Grade B or better, as in the US, China, Canada, Botswana, Malaysia, etc.: or
 - First or second class honors, as in the European Credit Transfer and Accumulation System- or
 - The equivalent of any of the above in another grading system
- I am in the top 20% of the class, and
- I agree to uphold the Eta Sigma Delta Points of Honor

Exceptions:

I am an Alumnus of the institution who would have met current student membership qualifications for ESD membership had there been an active ESD Chapter at the time of their/his/her enrollment in the institution.

Signature of applicant _____ Date _____

I hereby certify that the applicant named above meets the eligibility requirements for members in Eta Sigma Delta.

Chapter Advisor's Signature _____ Date _____

Chapter Advisor's Name (please print) _____

Chapter Advisor's Telephone # _____

Mail completed application and a check for \$35.00 for each application made payable to International CHRIE (along with any supporting documentation required) to address listed below. Please allow three weeks for processing.

DATE OF ESD INDUCTION CEREMONY: _____