



Counseling Academic &
Professional Honor Society International
Member, Association of College Honor Societies

Chi Sigma Upsilon Chapter of Chi Sigma Iota

Please check the appropriate box: New Application Renewal

APPLICANT INFORMATION (Please type or print clearly)

Application Date: _____
Name: _____
Street Address: _____
City, State, Zip: _____
Primary Phone: _____
Email Address: _____

Counselor Education Degree Credit Hours Completed (*minimum 10 hours*): _____
Grade Point Average (*minimum 3.5 on 4.0 scale required*): _____
Expected Graduation Date: _____

Program of Study (*Please check one*): School Counseling Clinical Mental Health Counseling

How do you see your membership in Chi Sigma Iota enhancing your experience in the Counseling Program?

(Please check any that apply or add your own.)

- | | | |
|-------------------------------------|---|---|
| <input type="checkbox"/> Mentorship | <input type="checkbox"/> Sense of community | <input type="checkbox"/> Service opportunities |
| <input type="checkbox"/> Networking | <input type="checkbox"/> Professional development | <input type="checkbox"/> Leadership development |

Include your own: _____

DUES (Please make check payable to CSU Chi Sigma Iota):

Local Chapter Membership (*one-time dues*): \$10.00

**Membership dues and contributions are tax deductible*

Please return the completed application and a check for the exact amount to the
CASAL Office (JH 275) Chi Sigma Iota Mailbox. Thank you!

IMPORTANT NOTE: Once you submit this application, please go to www.csi-net.org and complete the application for membership. You cannot be an official member of our chapter without belonging to the national organization.

National dues are paid yearly and are currently \$50.00.

ELIGIBILITY VERIFICATION

University: Cleveland State University

Chapter Name: Chi Sigma Upsilon

CSI Chapter Faculty Advisor Signature: _____
Signature denotes verification of complete information and eligibility according to CSI By-Laws.