



**IOTA LAMBDA SIGMA
HONORARY PROFESSIONAL SOCIETY IN WORKFORCE DEVELOPMENT
APPLICATION FOR MEMBERSHIP**

Type of Membership: _____
(Indicate Regular or Honorary)

Please complete the following application and return to _____ Chapter for processing.

(To be completed by the candidate.)

Name: _____
Last First Middle

Address: _____

Home Phone: _____ **Business Phone:** _____

Job Title: _____
(teacher, administrator, student, retired, businessperson, etc)

e-mail address: _____

Candidate's Signature: _____ **Date:** _____

(Initiation fee must accompany this form.)

(The following must be completed by Chapter Officer and sponsor of the candidate.)

Chapter: _____ **Initiation Date:** _____

Sponsor of Candidate: _____ **National No:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

This candidate meets the qualifications for membership as stipulated in the Constitution and Bylaws of Iota Lambda Sigma.

Date Signature Office

FOR GRAND CHAPTER USE ONLY: Chapter No: _____ **National No:** _____