

DELTA EPSILON TAU HONOR SOCIETY

OFFICIAL APPLICATION FOR CHARTER

Name of Institution	
Address	
Telephone ()	_ Fax ()
Graduation Dates/Months	
Type of assistance by Federal or State	e Government, if any
	Title/Email
Primary Contact Person	Title/Email
	ncluding students, faculty, alumni and Honorary exactly as they are to p (indicate student, faculty, etc). Duplicate form as necessary.
most recent calendar year. We enclose <u>one-time</u> Charter fee of S	Under \$249,999 \$200 \$250,000 to \$999,999 \$300 Over \$1,000,000 \$400 There are no dues. If you would like your Charter framed,
	The cost of framing and shipping is \$50. We enclose () or will send IS Charter Member. This covers the Gold Key, Membership Certificate,
Signature	Date of Application

Please scan/email your charter application to det@deths.org, fax to 302.541.0450, or mail to: **Delta Epsilon Tau, 31257 Bird Haven Street, Ocean View, DE 19970**