

**APPLICATION  
PHI THETA KAPPA SCHOLARSHIP  
WITTENBERG UNIVERSITY**

Name \_\_\_\_\_  
Print

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Term of admission to Wittenberg \_\_\_\_\_

Circle Wittenberg student classification:    traditional            adult/non-traditional

**Confirmation of PTK membership**

*If chapter or international authorizing official is available:*

Name of school (chapter) \_\_\_\_\_

Term when membership initiated \_\_\_\_\_

Term of exit from membership school \_\_\_\_\_

I confirm that the membership information indicated for the student named above is correct and that, upon exit from the membership school, the student remained a Phi Theta Kappa member in good standing.

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Signature of authorizing official and date

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Printed name and title of authorizing official

*In the event that Wittenberg verification is required:*

I authorize the release of academic and financial aid information to Wittenberg University for the purpose of verifying my membership in good standing in Phi Theta Kappa.

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Student signature and date

**Please return to the Financial Aid Office (traditional students) or the School of Community Education Office (adult/non-traditional students).**