

## Alpha Epsilon Lambda

The honor society of graduate and professional school students

(Mr. /Ms.) Last Name	First Name	Middle Initial
J-Number:		
Present Address:		
City	State	Zip Code
Telephone:	E-mail	
Cumulative G.P.A.	Hours Earned:	
Major:	Anticipated Graduation:	
Your nar	me as you want it to appear on your o	certificate:
LEA	ADERSHIP QUALIFICATION	ONS
Provide a brief list of your lea This may include on-campus of	dership experience as a graduate or por off-campus activities.	professional school student.
Signature:	Γ	Pate:

Return completed application and membership dues (\$50.00) by March 11, 2019 to:

Jackson State University-Graduate Studies

P.O. Box 17095 Jackson, MS 39217