NEW CHAPTER APPLICATION

The mission of the Society is

- the recognition of outstanding accomplishment in the study or teaching of a foreign language,
- an appreciation for diverse points of view, derived from the knowledge and use of a foreign language,
- the encouragement of a lifelong commitment to the study and promotion of foreign languages and cultures,
- and the pursuit of research in foreign languages and cultures.

Colleges and universities which grant baccalaureate or advanced degrees that support this mission may establish chapters with the Society.

INSTITUTION: ___________________________ Web site ___________________________
ADDRESS: ___________________________________________________________
_______________________________________________________________

DATE ESTABLISHED: ____________ ACCREDITED BY: _______________________
CLASSIFICATION (denominational, private, state-supported, etc.) __________________________

HONOR SOCIETIES ALREADY ON CAMPUS (list first those for languages, if any)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

ACADEMIC SYSTEM: SEMESTER _______ QUARTER ____________

CREDIT HOURS REQUIRED FOR THE BACHELOR’S DEGREE:
Languages English Natural Science Philosophy
Mathematics Psychology Social Science Other

LANGUAGE REQUIREMENTS FOR A NON-MAJOR IN LANGUAGES: ___________

PERCENTAGE OF LANGUAGE CLASSES AT THE THIRD-YEAR LEVEL OR HIGHER TAUGHT IN
THE TARGET LANGUAGE:
Language ___________ Percent _________ Language ___________ Percent _________
Language ___________ Percent _________ Language ___________ Percent _________
Language ___________ Percent _________ Language ___________ Percent _________

NUMBER OF MAJORS IN EACH LANGUAGE TAUGHT OVER THE LAST THREE YEARS:

<table>
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<tr>
<th>Language</th>
<th>2013-14</th>
<th>2014-15</th>
<th>2015-16</th>
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AVERAGE LANGUAGE GRADUATES EACH YEAR AT ALL LEVELS: ___________

Continued on page 2.
FOREIGN LANGUAGE FACULTY (name, degree, years of service in the department, rank, and language):
_____________________________________________________________________________________________
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DOES THE INSTITUTION HAVE A LANGUAGE REQUIREMENT? ___ NO. ___ YES. PLEASE INCLUDE SPECIFICS: ________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
Advisor’s name ____________________________ E-mail address ______________________
Position ___________________________________ Date _______________________________
Signatures of:
______________________  ________________________ ________________________
Faculty member submitting    Language Department Chair  Dean of the College
this request

Please print. (All correspondence will be sent to this address.)
Advisor’s Name:                                                                                     
Mailing address:                                                                                     
Telephone number:                                                                                     
Fax number:                                                                                         

Please mail
• this application,
• a letter stating how the institution will demonstrate compliance with the four points of the mission statement,
• a copy of the catalog listing for qualifying academic departments, and study abroad/international programs,
• sample syllabi for a course at the third-year level or above in each language area in which the institution offers a major or minor, and
• $25.00 application fee
to:
Roz Macken, Administrative Director
Phi Sigma Iota
Allegheny College
520 North Main St., Box 30
Meadville, PA 16335-3903