SCSU

South Carolina State University
National Alumni Association, Inc.

At-Large Membership Application (See Note A)

P. O. Box 7113
Orangeburg, South Carolina 29117

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP CODE

TELEPHONE _____

EMAIL _____SPOUSE'S NAME _____

DATE OF BIRTH _____ PLACE OF BIRTH _____ MAIDEN NAME _____

DATE OF GRADUATION _____CLASS_____ MAJOR _____

PRESENT EMPLOYMENT _____ POSITION _____

EDUCATIONAL HISTORY

COLLEGE_____ DEGREE_____ DATE_____

GRADUATE WORK_____ DEGREE_____ DATE_____

HONORS AND AWARDS _____

ORGANIZATIONS _____

NAME TO APPEAR ON MEMBERSHIP CARD _____

AT LARGE MEMBERSHIP FEE ($50.00 yearly) Membership: New_____ Renew _____

Check or money order must accompany this membership form

SIGNATURE: _____

Referred by:_____ DATE: _____

NOTE A: At large membership is intended for alumni not near an active local chapter.

RETURN TO:
Verna Wade, Financial Secretary, 1620 Mountain Ashe Ct., Matthews, NC 28105