



ALPHA BETA GAMMA

The Business Honor Society

Alpha Phi Chapter

Coastline Membership Application 2014

Submit the application with [a copy of your unofficial transcripts](#) to email: abg@coastline.edu

Application Information			
Name (First, Middle, Last):		Student ID:	
DOB (MM/DD/YYYY):		Gender (F/M):	
Membership applied (Permanent/Provisional):		Team (MM/SO/SA):	
Board Position(s) applied <i>(if applicable)</i> :			
Email:		Phone:	
Mailing Address:			
Academic Information			
Major:		Grad/ Transfer Year:	
Coastline Community College		Other institutions	
Units Completed:		Units Completed:	
Units Enrolled in:		Units Enrolled in:	
GPA:		GPA:	
Working/ Volunteer Experiences			
Time (mm/yy – mm/yy)	Organization(s)	Main position(s)	Skills/Experiences Achieved
Introductory Essay <i>(Optional, Applied for \$15 permanent membership fee discount)</i>			
Alpha Beta Gamma (ABG) is the Business Honor Society for motivated students to improve their abilities, build network, and create professional outcomes. Briefly tell us about your academic/ career goal(s) in the next 2 years and your expectations of ABG. <i>(maximum 200 words)</i>			

Membership qualifications (check if applicable)

Provisional membership

<input type="checkbox"/>	Have currently enrolled in associate degree course work at a two year college, adhere to school conduct code, and possess recognized qualities of citizenship.
<input type="checkbox"/>	Have majored in Business/ Economics or any of its related fields

Permanent membership

<input type="checkbox"/>	Have qualified for provisional membership
<input type="checkbox"/>	Have completed 15 credit hours with at least 12 hours of eligible course work at Coastline College
<input type="checkbox"/>	Have earned a cumulative GPA of 3.0 or higher on a scale of 4.0 in all college coursework completed

Statement of Integrity

- I certify that my application and all information submitted are my own work, factually true and correct, and honestly presented.
- I understand that withholding information or giving false information may be cause for denial of approval, withdrawal of an appointment offer, expulsion, or revocation of the Honor Certificate.
- I further understand that I must maintain the permanent membership qualifications at the date of graduation in order to receive the Honor Certificate.
- I hereby authorize the Alpha Phi Chapter of Alpha Beta Gamma to verify my provided information as to make decision about my membership status.

Signature: _____ **Date (MM/DD/YYYY):** _____

(Notice of membership acceptance will be sent to your email address, usually within 4 weeks of application receipt.)

Office use only	
Application received: _____ By: _____	Informing email sent _____ By: _____
CCC ABG Approved <input type="checkbox"/> Denied <input type="checkbox"/> By: _____	Cert. Received _____ By: _____
Date of CCC Decision: _____	Pack. Received _____ By: _____
Nation ABG Approved <input type="checkbox"/> Denied <input type="checkbox"/> By: _____	Cert. Delivered _____ By: _____
Date of National Decision: _____	Pack. Delivered _____ By: _____
Accounting use only	
Membership fee received _____ Amount: _____ By: _____	Receipt #: _____
Payment method: Cash <input type="checkbox"/> Check <input type="checkbox"/>	
Deposit to ASG CCC at _____ Amount: _____ By: _____	Received by: _____ Receipt #: _____
Deposit to National ABG at _____ Amount: _____ By: _____	Check #: _____