



NOMINATION FOR MEMBERSHIP

Pi Chi Omega

Please review qualifications for Membership below prior to completing application.

Section I. Nominee Information (Required for all nominees)

Date: _____

Name: _____
Last First Middle Initial

Affiliation: _____ Total Years Employed in Industry: _____

Position(s): _____

Mailing Address (Business Home): _____

Phone Number: _____ Email Address: _____

College Attended: _____ Location: _____

Major: _____ Year Graduated: _____ Degree: _____

Advanced Degrees: _____

Advanced Training: _____

Designations (i.e. AIB, BCE etc.): _____

Section II. Nomination (Required for all nominees)

We members hereby nominate the above candidate for membership in the category of: **(Please check appropriate membership category)**

- ACTIVE MEMBER:** According to the by laws, an Active Member shall be a person whose qualifications fit into one of the following categories:
 - a. A second semester junior or senior presently enrolled in pest control curriculum in a four-year accredited college or university. The student must earn a Bachelor's degree in a normal period of time acceptable to the institution to continue active membership.
 - b. An entomology graduate with a Bachelor's degree actively engaged in the business of pest control or in a supervisory, executive, educational, research, professional capacity relating thereto.
 - c. A graduate student actively engaged in pest control studies who completes the work in a period of time acceptable to the institution.
 - d. A person with an earned advance degree beyond baccalaureate in biology, chemistry, or entomology, who is actively engaged in the business of pest control or in a supervisory, executive, research, or professional a capacity relating thereto.
- ASSOCIATE MEMBER CATEGORY A:** According to the by laws, an Associate Member shall be a person meeting one of the following requirements: A graduate of an accredited college or university with a Bachelor's degree, not meeting requirements of active membership, who is actively engaged in the business of pest control or is in a supervisory, executive, educational, research, or professional capacity relating thereto and who has demonstrated continuing outstanding and sincere interest and actively promotes the improvement and furtherance of professional pest control.
- ASSOCIATE MEMBER CATEGORY B:** According to the by laws, an Associate Member (category B) shall meet the following requirements: A person not otherwise fulfilling the above criteria who has, during at least the last 10 years, demonstrated continued, outstanding, and sincere interest in and actively promotes the improvement and furtherance of professional urban and industrial pest management, as attested through research, teaching, training, or administration. **(SECTION IV OF THE APPLICATION FORM MUST BE FILLED OUT FOR PERSONS NOMINATED IN THIS CATEGORY)**
- STUDENT MEMBER** (See ACTIVE MEMBER ABOVE)
- LIFE MEMBER:** A life Member shall be an Active or Associate Member of long standing who has provided outstanding and unusual service to the Fraternity. A Life Member will be able to participate in all Fraternity activities and hold office but will be exempt from payment of all dues.
- HONORARY MEMBER:** An Honorary Member shall be a person of acknowledge eminence in the pest control field or the sciences relating thereto. They will not be allowed to hold office in the Fraternity, and they will be exempt from the payment of all dues.

Active and Associate Members shall have all the rights and privileges of the Fraternity except as limited by the Constitution and Bylaws. Membership is to be acquired only by invitation of this Fraternity. All prospective members' names must be submitted to the Executive Director for processing and recommendations at least six weeks prior to any membership meeting.

Name of Proposer: _____ Name of Seconder: _____

Signature of Proposer: _____ Signature of Seconder: _____

Section III. Documentation (Required for Associate Category A & B Nominees Only)

For all Associate member applications, *two* letters of reference shall accompany this application. The letters shall describe the nominee's demonstrated outstanding and sincere interest in professional pest management. Letters in support of nominees who are not graduates of an accredited college or university shall detail accomplishments and leadership of the nominee (Note: ten years of industry experience is required). Letters may be submitted by Proposer and/or Seconder.

Letters Submitted by 1. _____ 2. _____

Section IV. Details of Professional Experience (Required for Associate Category B. Nominees Only)

<p>Name of Applicant, Mailing Address & Contact Info.</p>	
<p>Education</p> <p>List the High School that you attended and year graduated.</p> <p>List any special classes, courses or specialized training and or education that you have received</p>	
<p>Professional Experience</p> <p>List all work experience related to the field of Structural Pest Management including Research, Teaching, Training or Administration.</p> <p>List the dates of employment, employer and positions held</p>	

Public Speaking

List presentations that you have given that are industry related.
Include organization that you spoke to, topic presented and purpose of the presentation

Publications

List any industry related publications that you have authored or co-authored.
Include organization that you spoke to, topic presented and purpose of the presentation

Associations

List all associations that you have been a member of.
Provide the name of the association, the dates of active membership and positions held.

<p>Committee Work</p> <p>List all committees that you have served on.</p> <p>Provide the positions held, the purpose of the committee, your role in the committee and the end result of the committee effort.</p>	
<p>Other Contributions</p> <p>List any other contributions that you have made to the industry during your career that have not been included in the sections above.</p>	

Section V: For Use by Membership Committee Only

- This candidate has been approved for nomination as _____ member and is referred to the membership for approval.
- This candidate is not eligible for membership. Explanation _____

 Chair, Membership Committee Date

Return all nomination forms to:

Pi Chi Omega Attn: Vern Toblan, P.O. Box 8149, Wilmington, DE 19803-9997