

The Rho Chi Society

Chapter Membership Election Report

Year: _____

This report must accompany each list of newly elected Rho Chi members and should be submitted to the National Office approximately four (4) weeks prior to the planned initiation date. Please complete all sections applicable to your Chapter.

Chapter Name	College or University
Date of Election	Planned Initiation Date

A. College of Pharmacy Election Statistics

1.	Please describe what your election requirements are- % of Pre-APPE professional curriculum completion with associated % allocation (e.g. Top 15% inducted at 50% completion of the Pre-APPE curriculum and remaining Top 5% inducted at 75% completion of Pre-APPE curriculum)	
2.	Minimum number of semesters/% of Pre-APPE curriculum completion required (e.g. The minimum number of semesters to be considered is 3 consecutive semesters and 50% of the pre-APPE curriculum completed.	

B. Professional Students

Doctor of Pharmacy (as the Initial Degree)

1.	Total number of students in the current second professional year at the time those students first became eligible for membership	
2.	Number of students <u>previously</u> elected into Rho Chi from this class	
3.	Number of students elected into Rho Chi from this class <u>at this time</u>	
4.	Total number of students in the current third professional year at the time those students first became eligible for membership	
5.	Number of students <u>previously</u> elected into Rho Chi from this class	
6.	Number of students elected into Rho Chi from this class <u>at this time</u>	
7.	Total number of students in current fourth professional year at the time those students first became eligible for membership	
8.	Number of students <u>previously</u> elected into Rho Chi from this class	
9.	Number of students elected into Rho Chi from this class <u>at this time</u>	
10.	Total number of Pharm.D. (as the initial degree) students elected at this time, i.e., the sum of 3., 6. and 9.	
11.	Total # of students offered induction (if number differs from who is eligible please provide brief reason why):	
12.	Total # of students declining acceptance	
<p>* The total number of students elected may not exceed 20% of each respective class, i.e., the sum of lines 2. and 3., of lines 5. and 6., and of lines 8. and 9. may not exceed 20% of lines 1., 4., and 7., respectively.</p> <p>** Please indicate N/A if a section does not apply to your program</p>		

C. Professional Students

Post-Baccalaureate Doctor of Pharmacy

1.	Total Number of Students elected who are eligible for membership in accord with Bylaws Article III Section 3.(a)	
2.	Total # of students offered induction (if number differs from who is eligible please provide brief reason why):	
3.	Total # of students declining acceptance	

D. Graduate Students

1.	Total Number of Students elected who are eligible for membership in accord	
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	with Bylaws Article III Section 3.(c)	
2.	Total # of students offered induction (if number differs from who is eligible please provide brief reason why):	
3	Total # of students declining acceptance	

E. Faculty Members & Associate Members

1.	Total Number of Faculty Members elected who are eligible for membership in accord with Bylaws Article III Section 3.(d)	
2.	Total Number of Associate Members elected who are eligible for membership in accord with Bylaws Article III Section 4.	

Total number of new members elected at this time: _____

(The sum of lines B10, C1, D1, E1, E2)

Total amount enclosed with this report equal to \$65.00 for each new member: \$ _____

[Includes: Society Dues (\$30.00), Membership Certificates (\$5.00), and Official Jewelry (\$30.00)]

Note: A Membership Certificate and an item of Official Jewelry must be ordered for each newly elected member. (See Article III, Section 10 of the National Bylaws).

This report covers this Chapter's 1st, 2nd, or 3rd election of new members during the current academic year (September through June). **Note:** If the Chapter elects new members more than once each year, it is the responsibility of the Faculty Advisor and Dean (or Designee) to assure that the total number of professional students (initial degree) elected in each respective class does not exceed 20%.

Faculty Advisor Certification

We hereby certify that the persons elected as represented in this report have met all requirements set forth in Article III, Section 2, Section 3(a), (b), (c), (d) or Section 4, or Section 5 and Article III, Section 8 of the 2010 Revision of the National Bylaws of the Rho Chi Society.

Signature: _____ Date: _____
(Faculty Advisor)

Dean (or Designee) Certification

I hereby certify that the persons elected as represented in this report have met all requirements set forth in Article III, Section 2, Section 3(a), (b), (c), (d), or Section 4, or Section 5 and Article III, Section 8 of the 2010 Revision of the National Bylaws of the Rho Chi Society. I also certify that these candidates for membership have no known disciplinary action for academic reasons or for unprofessional conduct.

Signature: _____ Date: _____
(Dean or Designee)

Advisor's Name and U.S. Mail Address: _____ **If different, FedEx/UPS/etc. Address**

Advisor's Telephone Number: _____