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Lambda Nu

National Honor Society for the Radiologic and Imaging Sciences
Pennsylvania Sigma Chapter
Reading Hospital School of Health Sciences Medical Imaging Program
P.O. Box 16052
Reading, PA 19612-6052
pennsylvaniasigma@gmail.com

Student Application

1. Complete the following, with the name of student as it should appear on certificate. Please print legibly.

_____
First Middle (if desired) Last

_____
Mailing Address

_____
City, State, Zip

_____
Phone Number Email Address

2. Criteria for student membership. **Check all that apply.**
***Please submit documentation.**

- ☐ **Required:** Cumulative GPA 3.0 or higher on 4.0 scale after completing the fourth semester of an imaging sciences program at Reading Hospital School of Health Sciences.* (unofficial transcript forwarded to Lambda Nu Honor Society Pennsylvania Sigma Chapter at RHSHS)
- ☐ **Required:** Enrollment in an imaging sciences program for at least four semesters at Reading Hospital School if Health Sciences.
- ☐ **Required:** Evidence of professional commitment during enrollment beyond minimum requirements of the program which will include at least two of the following or equivalent:
    - ☐ Cumulative GPA 3.5 or higher.
    - ☐ Actively pursuing an independent research project.*
    - ☐ Clinical or support staff-based employment in an imaging sciences field.*
    - ☐ Minimum 4-hour attendance at medical imaging-based conferences/webinars during enrollment (verified by completed attendance certificate)
    - ☐ Actively holding an officer position in a school wide committee. (SGA, etc.)
    - ☐ Selected and served or are serving as a PSRT student intern or as participant in ASRT Student Leadership Development Program.*
    - ☐ Participation in 25 hours or greater of community service at time of application (verified as submitted through Reading Hospital School of Health Sciences.) *
    - ☐ Other: Please specify _____

Please note: Students on clinical probation or final written warning at the time of application are not eligible to apply.

A one-time student induction fee of $65 must be enclosed. Please enclose **2 checks -** make **check 1** in the amount of **$30 payable to Lambda Nu** for the National Charter fee. Make **check 2** in the amount of **$35 payable to Pennsylvania Sigma Chapter of Lambda Nu** for the Pennsylvania Sigma Chapter Fund**.**

Please submit completed application with required documentation and checks by one of the following methods:

- **In person**: Please place completed application with required documentation and checks in a sealed envelope labeled “Pennsylvania Sigma Chapter of Lambda Nu” and drop off at Reading Hospital School of Health Sciences M-F 8:00am-4:30pm.

- **Via mail to:**
  Reading Hospital School of Health Sciences Medical Imaging Program
  Attn: Pennsylvania Sigma Chapter of Lambda Nu
  P.O. Box 16052
  Reading, PA 19612-6052

“By my signature I hereby attest that I am enrolled in and in good standing at the institution of the above chapter. I further attest that I have met the criteria for membership as indicated above. “

_____ _____

Signature of Applicant Date

Created on: 7.2017
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9.2023
1.2026