

Kappa Theta Epsilon • The Cooperative Education Honor Society  
 National Headquarters  
 Virginia Tech, c/o Career Services  
 Career Services Building (0128)  
 Blacksburg, VA 24061-0128

**Petition to Establish a Kappa Theta Epsilon Chapter:**

(If additional space is needed, please attach extra sheets)

**A. General Information**

**Name of College/University:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Total College/University Enrollment:** \_\_\_\_\_

**Are you a regionally accredited college or university in the United States of America?**

**Yes - whom are you accredited by?** \_\_\_\_\_

**No - Attach a letter explaining why your college or university is not accredited.**

**Total Co-op Enrollment (in all curriculums):** \_\_\_\_\_

Curriculum:  
 e.g. Engineering

Number of Co-op Students:  
 300

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Number of Cooperative Education Certificates to be awarded to graduating students this year:** \_\_\_\_\_

**Contact Information for all Cooperative Education Department Staff:**

Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Title \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_

Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

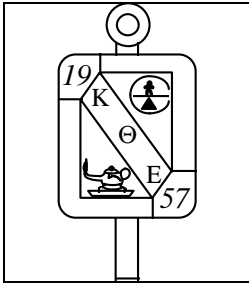
Title \_\_\_\_\_  
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 Phone \_\_\_\_\_  
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Name \_\_\_\_\_  
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Title \_\_\_\_\_  
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Name \_\_\_\_\_  
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 Fax \_\_\_\_\_



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**B. Statement of Interest**

By signing below, the Cooperative Education Students declare: "We are interested in forming a chapter of Kappa Theta Epsilon at our college/university and are willing to subscribe to and obey the Constitution and Bylaws of the Kappa Theta Epsilon Society."

**Cooperative Education Students:** (attach additional sheets if necessary)

(Name)	(Signature)	(Date)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Faculty Verification of Student Eligibility:**

"As a faculty member of the petitioning College/University, I certify that each of the Cooperative Education Students listed above are eligible for membership in the Kappa Theta Epsilon Society. I certify that they are either undergraduate or graduate students in the Cooperative Education Program of his or her College/University and are scholastically ranked in the top fifth of his or her class. In addition, the undergraduate students have completed at least twenty-five percent of the requirements towards his or her degree."

**Faculty Member:** (Name) \_\_\_\_\_  
 (Signature) \_\_\_\_\_  
 (Title) \_\_\_\_\_  
 (Date) \_\_\_\_\_

**C. Approval to Establish a Chapter of the Kappa Theta Epsilon Society**

"As a authority of the petitioning College/University, I approve that a Chapter of Kappa Theta Epsilon be established at \_\_\_\_\_(College/University)."

**Faculty Member:** (Name) \_\_\_\_\_  
 (Signature) \_\_\_\_\_  
 (Title) \_\_\_\_\_  
 (Date) \_\_\_\_\_

**Return these sheets by mail, fax, or email to:**

Kappa Theta Epsilon National Headquarters Fax: (540)231-8018  
 Virginia Tech c/o Career Services Email: [Vice-President@kappa-theta-epsilon.org](mailto:Vice-President@kappa-theta-epsilon.org)  
 Career Services Building (0128)  
 Blacksburg, VA 24061-0128