#### PHI BETA DELTA



Honor Society for International Scholars

# POLICIES AND RULES OF PROCEDURE FOR CHARTERING CHAPTERS

(last updated 06/24/11)

### **Minimum Qualifications:**

- A. The institution initiating a petition to be a chartered chapter must be one that:
  - 1. offers at least a baccalaureate degree
  - 2. holds regional accreditation
  - 3. has faculty members who are formally engaged in juried or refereed scholarly creative activity of international scope (as evidenced in resumes or other documentation) and
  - 4. demonstrates a regard for and commitment to the provision of:
    - programs and services for international (visa) students, and scholars on campus
    - study abroad programs, and
    - international faculty exchanges
- B. A petition for the chartering of a chapter must be submitted to the Executive Office of Phi Beta Delta and must include:
  - 1. an official application form
  - 2. a letter of interest and intent indicating institutional adherence to the above four criteria for minimum qualifications
  - 3. full payment of non-refundable petitioning fee (\$100.00)
  - 4. supporting documentation on the services for international students and study abroad programs offered by the institution; and
  - 5. a letter of support from the President/Chancellor (or designee) of the institution indicating support of the petition and the establishment of a chapter
- C. If the Board of Directors approves the petition, the institution will be notified, and the payment of Chartering (\$200.00) and Authorization Fees (\$50.00) will become due. The Chartering and Authorization Fees (\$250.00) must be paid in order for chapter designation to be granted. The Board of Directors may ask an institution to submit additional information after reviewing and before a final decision is made. Upon denial an institution may submit a new petition no sooner than twelve months after denial of the first petition. The decision of the Board of Directors is final.



## PHI BETA DELTA

Honor Society for International Scholars

## PETITION FORM FOR THE CHARTERING OF CHAPTERS

Please Type						Date://	
Institution:							
Person Completing Form:							
Title:							
Phone:	(	)					
E-mail:							
Degrees Offered: [	] B.S.	]	] B.A.	]	] M.S.		
]	] M.A.	[	] Ph.D.	[	] Other		
T 44 4							
Institution is Accredited E	•y:						

## **Director of International Programs:**

Name:	Honorific First	Last	
Title:	Tionorine That	Last	
Phone:	_( )		
E-mail:			
	Director/Coordinator	of International Student Office:	
Name:	Honorific First	Last	
Title:	Tionome Tinst	Lust	
Phone:	( )		
E-mail:			
	Director/Coordinat	or for Study Abroad Office:	
Name:			
Name: Title:	Director/Coordinat  Honorific First	or for Study Abroad Office:  Last	
Title:			
Title: Phone:			
Title: Phone: E-mail:	Honorific First		
Title: Phone: E-mail: Number of stud			
Title: Phone: E-mail: Number of stud	Honorific First  ( )  lents studying abroad:	Last	
Title: Phone: E-mail:  Number of stud  Number of inter  Number of inter	Honorific First  ( )  lents studying abroad: rnational (visa) students: rnational scholars:	Last	
Title: Phone: E-mail:  Number of stud  Number of inter  Number of inter	Honorific First  ( )  lents studying abroad: rnational (visa) students: rnational scholars: rnational faculty on campus:	Last	

List names of at least two (2) faculty members at your institution who have demonstrated achievement in international areas (research, study, teaching, writing, and/or leadership) and who support this petition:

Nar	ne:	Title:		Department:
1				
_				
		President/Chancel	lor of Institu	ition:
Name:				
Address	:			
Pleas		_		g your institution's services for
	foreign students, s	study abroad progra	ms, or other	international endeavors.
[	] Enclosed is our	Letter of Interest		
[	] Enclosed is sup	porting documentation	n of our invo	lvement in international education
[	] Enclosed is a le	tter of support from o	ur President (	(or designee)
[	] Enclosed is our	petition fee of \$100.0	0	

### If our petition is approved, our proposed chapter coordinator will be:

Name:					
	Honorific	First		Last	
Title:					
Address:					
Phone:					
Fax:					
L mun.					
Signed:			Da		

Please, **make check payable to Phi Beta Delta**, and submit this Petition Form, all supporting documentation and fee to:

Dr. Rueyling Chuang
Executive Director & CEO
Phi Beta Delta
Administration Building Rooms 148 & 150
5500 University Parkway
California State University, San Bernardino
San Bernardino, CA 92407
Phone: (909) 537-3250
Fax: (909) 537-7458

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