

# BΦM INTERNATIONAL LIBRARY & INFORMATION STUDIES HONOR SOCIETY

## Chapter Initiation Report

(Please list names alphabetically and send to Beta Phi Mu Headquarters following the initiation ceremony.)

Chapter/Institution \_\_\_\_\_ Date of Initiation \_\_\_\_\_

### Names of Initiates

- |           |           |
|-----------|-----------|
| _____     | 16. _____ |
| 2 _____   | 17. _____ |
| 3. _____  | 18 _____  |
| 4. _____  | 19. _____ |
| 5. _____  | 20 _____  |
| 6. _____  | 21 _____  |
| 7. _____  | 22 _____  |
| 8 _____   | 23. _____ |
| 9. _____  | 24. _____ |
| 0 _____   | 25. _____ |
| 1 _____   | 26. _____ |
| 2 _____   | 27. _____ |
| 13. _____ | 28 _____  |
| 14. _____ | 29. _____ |
| 15. _____ | 30. _____ |

I hereby certify that the above persons were initiated into \_\_\_\_\_ Chapter of Beta Phi Mu on the date indicated.

### ***Mail with Membership Forms & Check to:***

Beta Phi Mu Headquarters  
PO Box 42139  
Philadelphia, PA 19101



\_\_\_\_\_  
Chapter Representative