



SIGMA TAU DELTA

INTERNATIONAL ENGLISH HONOR SOCIETY

Transforming Worlds With Words

english.org

2019 Certificate of Registration for Sigma Tau Delta Continuing Education Scholarship

This certifies that _____
(print full name)

(local mailing address)

_____ (phone number) _____ (email address)

and a recipient of a Sigma Tau Delta scholarship, is enrolled as a regular student at

(name of college or university)

(school address)

(name of degree program)

and is registered as a part-time or continuing education student in the fall 2019 semester or quarter.

Course Number	Course Name	Credit Hours

Signed _____
Registrar

Date _____

Seal

Failure to include the school seal will result in the return of this form and a delay in the processing of your scholarship check.

Mail the completed form to:

Sigma Tau Delta
Department of English
Northern Illinois University
DeKalb, IL 60115-2863

For Sigma Tau Delta Central Office Use Only:

Name of Scholarship _____

Scholarship Amount _____ Check Number _____ Date _____