



Pi Sigma Epsilon

Beta Xi Chapter
Department of Marketing
3127 CEBA Building
Baton Rouge, LA 70803

Membership Data Form

By completing the following information, you will be providing valuable insight into the demographics of our Fraternity membership as well as ensuring accurate documentation as a Pi Sigma Epsilon member into our database. Please print clearly.

Membership Classification

Collegian Professional Educator Associate Life Member

If Collegian: Freshman Sophomore Junior Senior Grad Student

Chapter: **Beta Xi Chapter, Louisiana State University, Baton Rouge**

First Name: _____ Middle Initial: _____ Last Name: _____

Email: _____ Major: _____

Gender: Male Female Marital Status: Single Married

Ethnicity (not required): _____

Expected Graduation: _____ Birth date: _____ T-Shirt Size: _____

1st Career Choice (Or list Undecided): _____ 2nd Career Choice: _____

Skills I want to gain in PSE (Check All): Marketing Marketing Research Sales
 Forecasting

Finance / Audit Sports Marketing Public Relations
 Oral / Written Communication Graphic Design Website /E-Commerce Design
 Public Speaking Lobbying Fundraising
 Grant Writing Leadership Skills Resume Writing / Interviewing
 Career Coaching Networking Event Coordination
 Financial Controlling/Budget Strategic Planning Working with Non-Profit Orgs.
 Other _____

I learned about PSE through: Flyer Classroom Presentation Info. Table Chalkboard
 Newspaper Info. Table Friend in PSE _____
 Faculty Member _____ Other _____

I currently am in /have (check all): Internship Part-time position
 Full-time position
 TOPS On Scholarship
 Honor Society _____

Other orgs. at LSU _____

Officer in other orgs. at LSU (list org. and office held) _____

Awards or honors held / won _____



Pi Sigma Epsilon

*Beta Xi Chapter
Department of Marketing
3127 CEBA Building
Baton Rouge, LA 70803*

Contact Information

School Information:

Address _____

City BATON ROUGE _____ State Louisiana Zip _____

Phone _____

Home Information:

Address _____

City _____ State _____ Zip _____

Phone _____

Work Information:

Address _____

City _____ State _____ Zip _____

Phone _____