



Sigma Tau Delta Chapter Reactivation Form

The completed reactivation form can be submitted via mail or email; the reactivation fee is payable by check to "Sigma Tau Delta" or by emailing sigmatd@niu.edu for an invoice.

1. _____
NAME OF COLLEGE/UNIVERSITY (*Bylaw IX, Sec. I.A)
2. TITLE OF LEAD FACULTY ADVISOR: Dr. Miss Mr. Mrs. Ms. Mx. Prof.
3. _____
NAME OF FACULTY LEAD ADVISOR (*Bylaw X, Sec. VI.B)
4. _____
TELEPHONE EMAIL
5. COLLEGE/UNIVERSITY MAILING AND SHIPPING ADDRESSES

COLLEGE/UNIVERSITY MAILING ADDRESS (For Correspondence)	
Address Line 1	
Address Line 2	
School City	
School State	
School Zip	
Country	
UPS SHIPPING ADDRESS FOR PACKAGES (UPS Approved Street Address—PO BOXes are not acceptable)	
<input type="checkbox"/> Our Shipping address is the same as our mailing address (if checking this box, do not complete the rest of this question).	
Address Line 1	
Address Line 2	
School City	
School State	
School Zip	
Country	

6. TITLE OF FACULTY CO-ADVISOR (if applicable): Dr. Miss Mr. Mrs. Ms. Mx. Prof.
7. _____
NAME OF FACULTY CO-ADVISOR (*Bylaw X, Sec. VI.B)
8. _____
TELEPHONE EMAIL

9. TITLE OF ADDITIONAL FACULTY CO-ADVISOR (if applicable): Dr. Miss Mr. Mrs. Ms. Mx. Prof.

10. _____
NAME OF FACULTY CO-ADVISOR (*Bylaw X, Sec. VI.B)

11. _____
TELEPHONE

EMAIL

Please submit:

- The Reactivation Form (both pages); and
- The reapplication fee of \$25 is payable by check to “Sigma Tau Delta” or by emailing sigmatd@niu.edu for an invoice.

By Mail:

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

By Email:

sigmatd@niu.edu