



## 2010 Certificate of Registration for Sigma Tau Delta 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 full-time student in the fall 2010 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 No. \_\_\_\_\_ Date \_\_\_\_\_