

TAU BETA SIGMA

FOR GREATER BANDS

NATIONAL HONORARY BAND SORORITY

APPLICATION FOR COLONIZATION

APPLICATION PACKET SHOULD INCLUDE THE FOLLOWING:

- Completed Application Document
- Required Fees
- Required Signatures
- Evidence of Institution Accreditation
- Letter of Support from Dean of Students (or campus equivalent)
- Letter of Support from Director of Bands
- (Optional) Letter of Support from Associate/Assistant Director of Bands
- Listing of Colony Members
- Listing of Honorary Members
- Institutional Requirements for members of Student Organizations
- Institutional "Fact Book" or similar document



Kappa Kappa Psi & Tau Beta Sigma National Headquarters
PO Box 849 • Stillwater, OK • 74076-0849
Telephone: (405) 372-2333 • Fax: (405) 372-2363 • E-Mail: kkytbs@kkytbs.org
<http://www.tbsigma.org> • <http://www.kkytbs.org>

TAU BETA SIGMA

FOR GREATER BANDS

SORORITY ADDRESS AND CONTACT INFORMATION

SCHOOL INFORMATION

College or University: _____

City: _____ State: _____ Zip Code: _____

Approximate Size of Enrollment: _____

- Public Two Year Semester System Undergraduate Music Degree
 Private Four Year Quarter System Advanced Music Degree
 Conservatory

ADMINISTRATION

TBS requires coordinating your application with the college or university Student Affairs Office. Please provide an official letter of support from the Student Affairs Office or Representative (required). Please attach the letter to this application.

Name: _____ Title: _____

Department: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____ Email: _____

Is your institution an accredited college or university? _____

Accreditation Agency: _____

BAND INFORMATION

TBS requests an official letter of support from the Director of Bands (required). Please attach letter(s) to this application.

Director of Bands: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Fax #: _____ Email: _____

Ensembles and approximate number of members for each:

Concert Band _____ Jazz Band _____ Marching Band _____

Symphonic Band _____ Wind Ensemble _____ Basketball Band _____

Other Ensembles: _____

Major Musical Performances (CBDNA, State MEA, ABA, Bowl Games, Honda):

Musical and Professional organizations in the Music Department (e.g. ΦMA, TBΣ, NAFME):

SPONSOR INFORMATION

Sponsor's Name: _____
Position/Title: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Phone #: _____ Fax #: _____ Email: _____

COLONY INFORMATION

Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Phone #: _____ Fax #: _____ Email: _____

COLONY FEES FOR TAU BETA SIGMA

Colonization Fee (submitted with application) \$300.00

Number of TBΣ Colony Members _____ X \$20.00* = _____

* Full Initiate Fee is \$110.00. Colony members pay only \$20.00 to begin the process. The remaining \$90.00 must be submitted with the Colony's Installation Form in order to be installed as a chapter. All fees are subject to change without notice.

Number of TBΣ Honorary Members _____ X \$50.00 = _____

Total Member Fees _____
Total Amount Enclosed _____

REQUIRED SIGNATURES

Tau Beta Sigma Colony President Signature

Director of Bands Signature

Student Affairs Representative Signature

Colony Sponsor Signature

TAU BETA SIGMA COLONY MEMBERS

Please list the colony members. TBΣ promotes equality and diversity and encourages a variety of leaders in bands. This includes, but is not limited to, diverse instrumentation, gender, year in school, and major fields of study. Colony members should reflect the diversity of your band programs.

TAU BETA SIGMA COLONY HONORARY MEMBERS

Please list the colony’s Honorary Members. This can include your Director of Bands, Sponsor, and other band staff.

INSTITUTIONAL REQUIREMENTS FOR MEMBERS OF STUDENT ORGANIZATIONS

Please describe any restrictions on membership or university requirements, for example - Does the institution have a required GPA or number of credit hours? Are students required to attend any workshops or be cleared for intake by the institution?

INSTITUTIONAL “FACT BOOK” OR SIMILAR DOCUMENT

Please provide an electronic copy (pdf attachment) or hyperlink to the institutional statistics.
http:// _____

**LIST OF POTENTIAL COLONISTS
(MUST BE TYPED)**

NAME: _____
INSTRUMENT: _____
GENDER: _____
YEAR IN SCHOOL: _____
MAJOR: _____
E-MAIL ADDRESS: _____
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