



## Alpha Upsilon Alpha Honor Society of the International Literacy Association

# PROCEDURES FOR ORGANIZATION OF A CHAPTER

The procedures for organizing a chapter of the Alpha Upsilon Alpha Honor Society are outlined below. Announce to faculty and students the intent of the institution to organize a chapter of the Alpha Upsilon Alpha Honor Society. Then distribute information regarding membership requirements and seek nominations.

All required materials must be submitted to ILA Headquarters for review and approval. A brief description of the required materials for charter of an Honor Society is provided and all necessary forms are included in this packet of materials.

**Application for Charter**—The Application for Charter must be submitted by a full-time faculty member whose major academic responsibility resides in the area of reading/language arts or a closely related area, and must be approved by the appropriate administrative office of the institution. The application must also be signed by two other faculty members, as well as by the chair of the department, the head of the school of education, or its equivalent. Complete the enclosed Application for Charter.

**Accreditation Documentation**—Submit the application with documented evidence that the institution is accredited by the appropriate national or regional accrediting agency or its equivalent, and that it has an approved teacher education program.

**Appointment of Chapter Advisor**—The chairperson of the reading department, or the appropriate administrator within the education area, shall provide the name of the person appointed as the Chapter Advisor, who shall be a full-time faculty member. Complete the enclosed Appointment of Chapter Advisor form.

**Membership Summary of Charter Members**—For the establishment of a chapter, twenty (20) members are recommended. All chapter members must be new or current members of the International Literacy Association and must keep their membership current. Complete the enclosed Membership Roster.

**Membership Application Forms**—You will need to seek candidates for membership in the Honor Society. Please note that these may be undergraduate and/or graduate students as well as faculty and/or alumni of the institution. Membership application forms can be found on the ILA website at the following location: [AUA Membership Application](#)

Upon receipt of the nominations, the Chapter Advisor should determine and attest to the eligibility of each candidate.

The Chapter Advisor and the two faculty members who signed the Application for Charter or two other full-time faculty members designated by the dean, chairperson, or other appropriate administrator in the field of education shall serve as the Membership Committee and shall review the applications of all those nominated

(Continued)

## **AUA PROCEDURES FOR ORGANIZATION OF A CHAPTER (CONTINUED)**

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for membership. The Membership Committee shall certify the eligibility of all those approved and accepted for membership in the pending chapter, both students and faculty, and their membership in the International Literacy Association.

ILA membership may be submitted by the Chapter Advisor at the time the organizational material is forwarded for final review. Payment for the Alpha Upsilon Alpha initiation fee in the amount of US\$12.00 for each individual and for ILA membership dues (see form for current membership dues) may be submitted on the same check. Checks should be made payable to the International Literacy Association.

### **Charter Procedures Carried Out at ILA Headquarters**

Upon receipt of the required materials at ILA Headquarters, all documents will be reviewed by the Chapter & Region Services Team to certify that all requirements established by the Honor Society have been met and to give official approval of the chapter.

Once a chapter has been approved by the Chapter & Region Services Team at ILA Headquarters, we will send the official charter for the newly formed chapter to the Chapter Advisor and a copy of the procedures for the initiation ceremony, which the Chapter Advisor will be responsible for organizing and carrying out. The Chapter Advisor will also receive AUA membership certificates and pins, sent by the Chapter Services Coordinator directly to the Chapter Advisor.

After the chapter is established, names of nominees for membership in the chapter may be submitted any time during the year. Please be sure that the proper AUA membership form is completed and that checks for the initiation fee and ILA membership dues made payable to the International Literacy Association are attached. Credit Card payments are accepted by telephone. Please contact the Chapter Coordinator, Nancy Gamble, at 302.731.3469 for processing. If additional AUA membership forms are needed please visit the following link: [AUA Membership Form](#)

As you move ahead, you may feel that some organizational steps are not in the proper order. For example, you will be seeking nominees, electing officers, and approving bylaws before that chapter has been officially approved. This will occur because you will be a newly chartered chapter. Once you have been officially approved, the steps in future years will fall into sequence.

Thank you for your leadership in assuming responsibility for this most important role. We feel confident the chapter will provide professional commitment in acknowledging outstanding academic achievement and contributions to the field of reading/language arts.

Should you have any questions regarding the procedures presented, please call the International Literacy Association at 302.731.1600.

#### **Send all required materials to:**

International Literacy Association  
Chapter & Region Services Team  
PO Box 7168  
Newark, DE 19714-7168 USA  
[chapters@reading.org](mailto:chapters@reading.org)



# Alpha Upsilon Alpha Honor Society of the International Literacy Association

## APPLICATION FOR CHARTER

We, the undersigned faculty members, request that the Alpha Upsilon Alpha Honor Society grant a charter to:

NAME OF INSTITUTION

CHAPTER NAME REQUESTED

### Faculty Member #1

SIGNATURE:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

MAILING ADDRESS:

ADDRESS LINE 2:

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_ ZIP CODE/POSTAL CODE: \_\_\_\_\_

MAJOR AREA OF ACADEMIC RESPONSIBILITY:

### Faculty Member #2

SIGNATURE:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

MAILING ADDRESS:

ADDRESS LINE 2:

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_ ZIP CODE/POSTAL CODE: \_\_\_\_\_

MAJOR AREA OF ACADEMIC RESPONSIBILITY:

### Faculty Member #3

SIGNATURE:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

MAILING ADDRESS:

ADDRESS LINE 2:

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_ ZIP CODE/POSTAL CODE: \_\_\_\_\_

MAJOR AREA OF ACADEMIC RESPONSIBILITY:

APPROVAL IS HEREBY GRANTED FOR A REQUEST TO BE SUBMITTED FOR THE ESTABLISHMENT OF A CHAPTER OF THE ALPHA UPSILON ALPHA HONOR SOCIETY.

Chairperson, Department of Reading, or Dean of the School of Education or Its Equivalent

SIGNATURE:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

Administrative Office of the Institution Under Which the Chapter Will Reside

SIGNATURE:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_



# Alpha Upsilon Alpha Honor Society of the International Literacy Association

## APPOINTMENT OF A CHAPTER ADVISOR

In accordance with the guidelines of the Alpha Upsilon Alpha Honor Society, an application for the establishment of a chapter must specify the individual who will serve as the Chapter Advisor. This person shall be a full-time faculty member appointed by the chairperson of the reading department or by the appropriate administrator within the education area. In accordance with this requirement, the following individual has been named as Chapter Advisor for the proposed chapter, and has accepted this responsibility:

| Chapter Advisor  |                     |             |                           |
|------------------|---------------------|-------------|---------------------------|
| NAME:            |                     | TITLE:      |                           |
| MAILING ADDRESS: |                     |             |                           |
| ADDRESS LINE 2:  |                     |             |                           |
| CITY:            | STATE/<br>PROVINCE: | COUNTRY:    | ZIP CODE/<br>POSTAL CODE: |
| BUSINESS PHONE:  |                     | HOME PHONE: |                           |
| EMAIL:           |                     |             |                           |

The responsibilities of the Chapter Advisor are to

1. Act as a liaison between the chapter, the institution, and the International Literacy Association.
2. Provide assistance with programs and other activities in accordance with the International Literacy Associations mission.
3. Submit the chapter's yearly activity report to Association Headquarters on or before specified date.
4. Assist the chapter secretary in furnishing the Society with required data, and help the treasurer with submitting membership fees and other dues to the Association.

| Appointed by |              |
|--------------|--------------|
| SIGNATURE:   | TITLE:       |
| NAME:        | INSTITUTION: |



# Alpha Upsilon Alpha Honor Society of the International Literacy Association

## CHAPTER OFFICERS

NAME OF INSTITUTION

### President

|                  |                     |                        |                           |
|------------------|---------------------|------------------------|---------------------------|
| NAME:            |                     | TITLE:                 |                           |
| MAILING ADDRESS: |                     |                        |                           |
| ADDRESS LINE 2:  |                     |                        |                           |
| CITY:            | STATE/<br>PROVINCE: | COUNTRY:               | ZIP CODE/<br>POSTAL CODE: |
| BUSINESS PHONE:  |                     | HOME PHONE:            |                           |
| EMAIL:           |                     | ILA MEMBERSHIP NUMBER: |                           |

### Vice President

|                  |                     |                        |                           |
|------------------|---------------------|------------------------|---------------------------|
| NAME:            |                     | TITLE:                 |                           |
| MAILING ADDRESS: |                     |                        |                           |
| ADDRESS LINE 2:  |                     |                        |                           |
| CITY:            | STATE/<br>PROVINCE: | COUNTRY:               | ZIP CODE/<br>POSTAL CODE: |
| BUSINESS PHONE:  |                     | HOME PHONE:            |                           |
| EMAIL:           |                     | ILA MEMBERSHIP NUMBER: |                           |

### Treasurer

|                  |                     |                        |                           |
|------------------|---------------------|------------------------|---------------------------|
| NAME:            |                     | TITLE:                 |                           |
| MAILING ADDRESS: |                     |                        |                           |
| ADDRESS LINE 2:  |                     |                        |                           |
| CITY:            | STATE/<br>PROVINCE: | COUNTRY:               | ZIP CODE/<br>POSTAL CODE: |
| BUSINESS PHONE:  |                     | HOME PHONE:            |                           |
| EMAIL:           |                     | ILA MEMBERSHIP NUMBER: |                           |

### Secretary

|                  |                     |                        |                           |
|------------------|---------------------|------------------------|---------------------------|
| NAME:            |                     | TITLE:                 |                           |
| MAILING ADDRESS: |                     |                        |                           |
| ADDRESS LINE 2:  |                     |                        |                           |
| CITY:            | STATE/<br>PROVINCE: | COUNTRY:               | ZIP CODE/<br>POSTAL CODE: |
| BUSINESS PHONE:  |                     | HOME PHONE:            |                           |
| EMAIL:           |                     | ILA MEMBERSHIP NUMBER: |                           |

