



Virginia Tech's Fraternity and Sorority Life

Notice of Membership Intake

Step Two (2)

Name of Organization/ Chapter Designation: _____

Date: _____

Academic Semester and Year: _____

Is your chapter planning to conduct Intake this semester?

- Yes. Complete the sections below and on pages two (2) and three (3).
- No. Complete page three (3).

If yes:

- When is the chapter's formal rush/informational (anticipated date): _____
- When are prospective members' materials due to the chapter (anticipated date): _____
- If applicable, when are prospective members being interviewed (anticipated date, time, location): _____
- The chapter will be voting on the prospective members on (anticipated date, time): _____
- Intake will begin on (anticipated date, time): _____
- Aspirants/New Members will be initiated on (anticipated date, time): _____
- New Member Presentation will be on ((anticipated date, time, location with a rain location): _____

- An FSL staff member will / will not **(circle one)** be needed at an event. If needed, please indicate what the event is and when: _____



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Please provide a brief outline of your intake process schedule below with dates, times, and locations.



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Chapter's Intake Coordinator:

Chapter Advisor/ Grad Chapter Overseeing Intake Representative:

Name

Name

Position in Organization

Email

Phone Number

Phone Number

Signature

Signature

President's Name Printed

Signature

Date

This form must be turned in by the end of the second week of the semester.

OFFICE USE

Date Received: _____ **Received by:** _____

Reviewed by: _____

Notes: _____