



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

If yes:

Formal recruitment (i.e. rush, informational sessions, etc.) will start and end (anticipated date, time, location) with the following event(s): _____

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, location): _____

Intake will begin on (anticipated date, time): _____

Aspirants/New Members will be initiated on (anticipated date, time, location): _____

If applicable, New Member Presentation will be on (anticipated date, time, and location). Please provide a rain locaton if outside. _____

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.



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Chapter's Intake Coordinator:

**Chapter Advisor
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 end of the second week of the semester.

OFFICE USE

Date Received: _____

Received by: _____

Reviewed by: _____

Notes: _____