

New Hall West, Suite 117 (0428) 190 West Campus Drive Blacksburg, Virginia 24061 p: 540-231-6609 f: 540-231-7186 gogreek@vt.edu www.fsl.vt.edu

Virginia Tech's Fraternity and Sorority Life

Notice of Membership Intake

Step Two (2)

Name of Organization/ Chapter Designation:

Da	te: 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 y	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):			
	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):			
	If applicable, New Member Presentation will be on (anticipated date):			
	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 (e.g. Week One -01/01).

New Member Education Team

If applicable: Please list the New Member Education Team i.e. Chapter Intake Coordinator / New Member Educator, Assistant New Member Educator(s), etc.



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Chapter's Intake Coordinator:		Chapter Advisor:
Name		Name
Position in Organization	<u> </u>	Position in Organization
Phone Number		Phone Number
Signature		Signature
President's Name Printed This form must be turned in b	Signature by the end of the seco	Date ond week of the semester.
	OFFICE USE	
Date Received:	Receive	d by: ————
Reviewed by:		
Notes:		