

Fraternity/Sorority Relations CHAPTER INFORMATION Fraternity/Sorority:____ Chapter Name: Charter Date: Current President: Phone: Email: FSC Representative: Phone: Email: Advisor(s): Name: Email: Phone: On Campus/Off Campus? Name: Email: Phone: On Campus/Off Campus? COMMUNITY SERVICE/PROGRAMMING Most Recent Community Service/ Educational Activities: Upcoming Community Service/Educational Activities: Chapter Notable Accomplishments: ACADEMIC MEMBERSHIP REQUIREMENTS

Current Students: Min. Credits Earned:	Min. Hours Earned:	Min. GPA Required:
Transfer Students: Min. Credits Earned:	Min. Hours Earned:	Min. GPA Required:
Min. CSU Credits Earned:	Min. CSU Hours Earned:	