



Panhellenic Potential Member Form

Name: _____

SJU ID Number: _____

Class (Circle One): FR SO JR SR

Campus Address: _____

Cell Phone: _____ Email Address: _____

Cummulative GPA: _____

Chapter(s) Rushing (Circle all that apply): ΑΦ ΑΓΔ ΣΣΣ ΦΣΣ ΑΟΠ

Other Campus Organizations you Participate In:

Legacy Information: If you are a legacy to an organization, please list who you are related to, how you are related, and what organization that person is a part of. Feel free to list as many as necessary. A legacy is typically defined as a grandmother, mother or sister. Some organizations will also consider aunts and great grandmothers. _____

By signing below I certify that all statements made are true to the best of my knowledge, and if it is found that I purposefully falsified or withheld information either the University or respective chapter may withhold or retract any bid I may have received, for all infractions including but not limited to falsification of GPA, disciplinary record, or falsification of records.

Name (Print): _____

*THIS APPLICATION IS NOT
COMPLETE UNLESS IT IS
SIGNED AND DATED*

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Reported GPA: _____

Actual GPA: _____

Rushed: ΑΦ ΑΓΔ ΣΣΣ ΦΣΣ ΑΟΠ

Received Bids: ΑΦ ΑΓΔ ΣΣΣ ΦΣΣ ΑΟΠ

Approved

Not Approved

Further Information Needed

Signatures: _____

(Panhellenic Council Advisor Signature/VP of Recruitment)