

ETA PHI BETA
SORORITY, INC.



Not For Ourselves, But For Others®

REGION OR CHAPTER NAME

Applicant's Name	Documents	Included (Y or N)
THIS IS COMPLETED BY THE CHAPTER		
	Official transcript documenting an unweighted GPA of 2.0 or higher	
	School personnel recommendation	
	Community, church, or employer recommendation	
	Verification of volunteer services	
	Verification of community services	
	Verification of organizational involvement	
	Verification of extra-curricular activities	
	100-150 words typed paragraph	
	Acceptance letter or current class schedule	
	Special recognition	
	3x5 inch photo	
	Signed parental consent form verifying the presence of an intellectual or learning disability, if applicable	
	Media Release Form	

Signature of Chapter President

Chapter

Date