 Multicultural Greek Council

Prospective Member Interest Form

*Please complete this form if you are interested in receiving more information about joining a multicultural fraternity or sorority. This interest form will be distributed to the organizations in which you indicate interest.*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cumulative GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please circle the organization(s) you are interesting in joining. Chapter specific information can be found at http://union.okstate.edu/MGC/MGCChapters.htm.

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| --- | --- |
| **Fraternities** | **Sororities** |
| **Omega Delta Phi Fraternity Inc.** | **Alpha Pi Omega Sorority, Inc.** |
| **Phi Sigma Nu Fraternity, Inc.** | **Colony of Kappa Delta Chi Sorority, Inc.** |
| **Sigma Lambda Beta Fraternity, Inc.** | **Sigma Lambda Gamma Sorority, Inc.** |
|  | **Sigma Lambda Alpha Sorority, Inc.** |

I authorize the Multicultural Greek Council to verify my academic records for membership intake purposes.

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Signature Date

Please return this form to:

Office of Fraternity & Sorority Affairs

211J Student Union

Stillwater, OK 74078

gogreek@okstate.edu