

**Notice of Membership Intake
University of New Orleans
Office of Greek Life**

The officers and members of _____ announce the intake of new members
for the Fall Spring (circle one) semester of _____

Interest Meeting(s) will be held on _____

Selection will conclude on _____

Education of Aspirants/Intake Process will begin on _____

Aspirants will be initiated on _____

New Members will be presented on _____

Director of Intake's Information

Supervising Advisor's Information

Name

Name

Phone number

Phone number

Email address

Email address

The above information is accurate and correct to the best of my knowledge.

President's Name (print)

President's Signature

President's Phone

Graduate Advisor's Name (print)

Graduate Advisor's Signature

Graduate Advisor's Phone

Department Use Only: Date of Meeting: _____