

Date Joined: \_\_\_\_\_

Name of potential member \_\_\_\_\_

Home Address: Last first middle nickname  
Street city state zip

**Delta Gamma SPONSOR FORM**  
(to be used by members of Delta Gamma only)  
Please attach a picture with name, city and university printed on the back.  
Please check one:  
 Voluntary Sponsor Form  
 Requested Sponsor Form  
 Information Only

For \_\_\_\_\_ Chapter of Delta Gamma at \_\_\_\_\_ university

Entering as:  FR  SO  JR  SR Age \_\_\_\_\_

High School Name city state

GPA Rank in class Class Size

Previous College: Name location GPA previous potential member? Y N

Father's Name and Address  
Greek Affiliation University

Mother's Name and Address  
Greek Affiliation University

Guardian's Name and Address (if applicable)

WILL THE POTENTIAL NEW MEMBER BE ABLE TO ASSUME FINANCIAL OBLIGATIONS? YES NO

DELTA GAMMA LEGACY INFORMATION: Mother Grandmother Sister

Name Chapter

Address street city state zip phone #

Other Sorority Influences: \_\_\_\_\_

The potential member would enjoy talking about these topics during recruitment: \_\_\_\_\_

Please check applicable statements:

\_\_\_\_\_ I have known potential member for \_\_\_\_\_ years. \_\_\_\_\_ I do not know potential member; information  
\_\_\_\_\_ I have known potential member's family for \_\_\_\_\_ years. came from \_\_\_\_\_  
\_\_\_\_\_ I would like to be notified after recruitment concerning this potential member.

Alumna \_\_\_\_\_ Collegian \_\_\_\_\_ Chapter of Initiation \_\_\_\_\_

\_\_\_\_\_ I hereby endorse this potential member with the understanding that she may become a new member.

\_\_\_\_\_ I do not wish to endorse this potential member for membership; I understand that I may be called by the chapter adviser.

Personal Signature e-mail

Completed By: first name maiden name last name husband's  
street city state zip phone#

Please write your personal evaluation of the potential member you sponsor. Provide information and relate her qualifications to Delta Gamma's 5 Point consideration for Membership Selection.

**PLEASE CHECK AND ADD COMMENTS AND EXAMPLES AT RIGHT**

**CHARACTER**

- \_\_\_\_\_ MORALLY ACCEPTABLE
- \_\_\_\_\_ LOYAL
- \_\_\_\_\_ DEPENDABLE
- \_\_\_\_\_ INDUSTRIOUS
- \_\_\_\_\_ RESPECTED

**INTERESTS AND TALENTS**

- \_\_\_\_\_ MUSICAL
- \_\_\_\_\_ ARTISTIC
- \_\_\_\_\_ ATHLETIC
- \_\_\_\_\_ OTHERS (list hobbies and talents)

**EDUCATION AND SCHOLARSHIP**

- \_\_\_\_\_ HONOR STUDENT
- \_\_\_\_\_ ENRICHMENT PROGRAMS
- \_\_\_\_\_ NATIONAL HONOR SOCIETY
- \_\_\_\_\_ LIKELY TO FINISH COLLEGE

**PERSONAL DEVELOPMENT**

- \_\_\_\_\_ COMPATIBLE IN A GROUP
- \_\_\_\_\_ CONGENIAL
- \_\_\_\_\_ RESERVED / SHY / QUIET
- \_\_\_\_\_ POISED
- \_\_\_\_\_ WELL-GROOMED

**ACTIVITIES AND HONORS**

- \_\_\_\_\_ VOLUNTEER ACTIVITIES
- \_\_\_\_\_ RELIGIOUS ACTIVITIES
- \_\_\_\_\_ LEADERSHIP ABILITIES
- \_\_\_\_\_ HONORS (please list or attach)

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**FOR COLLEGIATE USE ONLY**

Date Sponsor Form received \_\_\_\_\_ Acknowledged \_\_\_\_\_

vp membership signature \_\_\_\_\_ Membership Adviser \_\_\_\_\_

EVC Endorsed \_\_\_\_\_ Sponsor Name & Chapter of Initiation \_\_\_\_\_

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**Please clip and send to alumnae immediately after recruitment!**

\_\_\_\_\_ Chapter wishes to thank you for sponsoring \_\_\_\_\_

- \_\_\_\_\_ She joined Delta Gamma
- \_\_\_\_\_ She did not join Delta Gamma
- \_\_\_\_\_ She joined \_\_\_\_\_