

WTAMU INTERFRATERNITY COUNCIL (IFC) RECRUITMENT REGISTRATION/ GRADE RELEASE FORM

*This form must be returned to the CORE Office
before a bid to join a WTAMU Fraternity can be extended.*

Full Name: _____

Buff ID Number: _____

WT Address: _____

Contact Telephone: (____) _____ H.S. Graduation Date: _____

High School Attended, Including City/State: _____

Family Fraternity Affiliation, if any: _____

SAT/ACT Composite Score: _____ High School GPA: _____

College GPA (if you have completed 12 or more hours): _____

College Classification: FR SO JR SR GRAD Number of college hours completed: _____

GRADE RELEASE AUTHORIZATION

In seeking an invitation to join a WTAMU fraternity, I authorize the Interfraternity Council and the CORE Office to examine my grades to determine my eligibility for initial and continued membership. Furthermore, I agree to become familiar with WTAMU's policies concerning hazing, alcohol and illicit drugs, and agree to abide by these and other policies set forth in the current edition of the Code of Student Life.

Signature

Date

Return to: CORE Center, Jack B. Kelley Student Center, Suite 103

FOR OFFICE USE ONLY

GPA: _____

FRATERNITY PLEDGED: _____

HOURS: _____

RUSH ORIENTATION: COMPLETE INCOMPLETE

ELIGIBLE?: YES NO

SEMESTER: _____