

# CSUSM Fraternity & Sorority Recruitment/Intake Registration Form 2011-2012

Fall Informal Dates: September 19-26

Spring Formal Dates: February 13-20

Return this form to Student Life & Leadership (Craven Hall 3400)

**1 week prior to the 1<sup>st</sup> date of the recruitment period in which you are participating**

- Eligible Students must have completed **12 units** (includes AP and transfer units)
- **2.50 gpa** is highly encouraged; each chapter maintains their own minimum g.p.a. requirements
- Please attach a copy of your unofficial transcript if you have any concerns about grades or units

**\$20.00 Fee for Women's Spring Recruitment Priority Deadline by 2/1/12**

**\$25.00 Fee for Women's Spring Recruitment Final Registration Deadline by 2/8/12**

- We are only able to accept Cash or Check payable to "CSUSM Greek Council"

Name \_\_\_\_\_ ID# \_\_\_\_\_

Campus Email Address \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Please Circle One: FR SOPH JR SR Did you transfer to CSUSM? \_\_\_\_\_ GPA (if known) \_\_\_\_\_

Please list any organizations or leadership positions you have held in the last four years: \_\_\_\_\_

How did you become interested in Greek life? \_\_\_\_\_

Do you have a relative in a fraternity or sorority? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please indicate the following for each relative:

Relationship (Mother/Father, Sister/Brother, etc.) \_\_\_\_\_ In which chapter? \_\_\_\_\_

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## California State University San Marcos

### Voluntary Authorization for Educational Record Disclosure

University policy prohibits the release of personally identifiable information from educational records of students without their previous written authorization. Exceptions to this policy include those who have responsibilities in connection with the campus' academic, administrative, or service functions and who have reason for using the student records connected with their campus or related academic responsibilities. Disclosure may also be made to other persons or organizations under certain conditions.

I hereby consent the release of my student information. The student information to be disclosed will include: unit count, grade point average (cumulative and previous semester) and the status of any university probation. The purpose of disclosure will be to verify the achievement of minimum academic and membership standards.

This authorization shall remain in effect unless a written revocation of this authorization is submitted to the Coordinator of Fraternity & Sorority Life.

My signature below certifies that I hereby consent to release of my student information to Student Affairs Administrators supporting Greek Life, Chapter Presidents, Chapter Advisors, Recruitment Officers, Academic Officers, and National Headquarters Staff of the chapters at CSUSM.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

*office use only: revised 1/3/2012*

Recruitment Team: Date Paid \_\_\_\_\_ Circle One: Cash or Check # \_\_\_\_\_ Cashier Initials \_\_\_\_\_

\_\_\_\_\_  
Cumulative/Total Units

\_\_\_\_\_  
Units in Progress

\_\_\_\_\_  
Cumulative g.p.a.

\_\_\_\_\_  
SLL Initials

\_\_\_\_\_  
Review Date