



Potential Member of the UMBC Greek Community

This form needs to be submitted to the Office of Student Life two business days prior to extending a bid or invitation to membership.

Name: _____ UMBC Email: _____

Address: _____ Phone Number: _____

City, zip: _____

Expected Graduation date: _____ Date of Birth: _____

Grades should be released to the following chapter(s) and/or council(s) _____

If transfer-previous school(s) & GPA: _____

Is anyone else in your family a member of a Greek organization? If so, which organization and their relation to you: _____

List of others commitments: _____

Please read carefully and sign where appropriate:

I, the undersigned acknowledge by signing this form that I give permission for the Office of Student Life to access my educational records for the purpose of determining my enrollment and academic eligibility. Each chapter, which I indicate, will be given my grade point average. Furthermore, if I receive and accept a bid from any Greek organization, I give permission for the Office of Student Life to access my education records every semester for the purpose of determining my continual eligibility, and to share my grades with the president and executive office of the organization I join.

Signature

Date

Greek Life office use only:

Cumulative GPA: _____

Eligible

Not Eligible

of Credits: _____