GREEK LEADER OF THE YEAR

This application must be completed and submitted to the Office of Student Engagementby Monday, May 15, 2017, at 6:00pm.

Name:	
Sorority/Fraternity Affiliation:	Council Affiliation:
Major:	Class Level:
Anticipated Graduation Date:	Cumulative GPA:
nitiation Quarter and Year:	
Instructions & Guidelines:	
 and integrity in their participation in C Applicant should be an active chapter m Applications should be completed in the 	, service, and commitment to academic excellence, character SUSB Greek life. nember in good standing. e provided text box. from a chapter or faculty/staff advisor, unless the advisor
1. Please describe your service to your f	fraternal organization (offices held, etc).
2. Please describe any service or contribution which your organization belongs (IF	outions that you have made to the governing council to CC, NPHC, PhC, USFC).

GREEK LEADER OF THE YEAR - CONTINUED

3.	Please describe your service and/or involvement in student organizations or activities outside of the Greek Community here at CSUSB.		
4.	Please describe any community service and/or volunteer work you have performed.		
5.	Please list any honors or awards that you have received during your collegiate career.		

6. Please describe your commitment to academic excellence. What are your plans after graduation? 7. Please explain why you feel you are the best candidate for the Greek Leader of the Year, what separates you from your peers, including what your impact has been on the Greek Community and your chapter. TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND ACCURATE. APPLICANT'S SIGNATURE DATE *** The 4 winners of this award from each council will automatically be nominated for CSUSB Greek Leader of the Year, awarded at the Club Leadership Awards Banquet on June 1, 2017.***

GREEK MAN/WOMAN OF THE YEAR - CONTINUED