



ATTACH PHOTO (OPTIONAL)

MEMBERSHIP REFERENCE FORM
(To be used by members of Kappa Kappa Gamma only)

Name of Potential Member _____ Attending _____
(Last) (First) (Nickname) (College/University)

Home Address _____
(Street Address) (City) (State) (Zip Code)

Home Phone Number () _____ Home E-mail Address _____

Name of Parent(s) or Guardian(s) _____

High School _____
(Name) (City) (State) (Zip Code)

Class Size _____ Rank _____ GPA _____ SAT/ACT (if known) _____ Year Graduated _____

School(s) attended after high school, if any _____
(Name) (City) (State) (Zip Code)

GPA _____ Number of Terms Completed _____ Class: Fr. So. Jr. Sr.

Fraternity Bylaws academic requirements are as follows: A woman student matriculated in any college or university having a chapter of Kappa Kappa Gamma may be elected to membership in this Fraternity provided that she has demonstrated academic interest and has attained at least a "B" average or its equivalent under any other grading system from high school or at least a "C+" average or its equivalent under any other grading system for the previous completed term as a full-time student at a college or university. In extraordinary cases, the chapter may petition the Director of Membership for an exception.

Kappa Kappa Gamma Legacy: Sister Mother Grandmother Great-grandmother
Name _____
(Last) (First) (Nickname) (College/University Attended)
Address _____
(Street Address) (City) (State) (Zip Code)
Phone Number () _____ E-mail Address _____
Other NPC Affiliations _____

- Please check one of the following:**
- Close KKIΓ connection (i.e., aunt, cousin, stepmother, stepsister, other) _____ years
 - Personally known the potential member for _____ years
 - Personally known the potential member's family for _____ years
 - Do not personally know potential member; information from _____

I hereby endorse this potential member for membership in Kappa Kappa Gamma.

(Signature) (Print First Maiden Last Name) (Date)

(Street Address) (City) (State) (Zip Code)

Phone Number _____ Chapter _____ Initiation Date _____

E-mail: _____
Attach school, athletic, community and leadership activities and honors. Comment on special interests, talents and work experiences.

PLEASE SEND AN ACKNOWLEDGEMENT THAT MY REFERENCE HAS BEEN RECEIVED IN THE SELF-ADDRESSED, STAMPED ENVELOPE I HAVE INCLUDED WITH MY REFERENCE FORM.