



KAPPA ALPHA THETA

## Potential New Member Introduction Form

Your First Name

Your Last Name

Your Chapter of Initiation (if applicable)

Your Email Address

Please describe your involvement with the Fraternity as an alumna (if applicable).

How many years have you known the potential new member?

In what capacity do you know the potential new member? Check all that apply.

Mother    Sister    Grandmother    Teacher    Coach    Friend    Community Leader

Extended Family Member    Supervisor    Coworker    Mentor    Religious Leader

Potential New Member's First Name

Potential New Member's Last Name

Potential New Member's Preferred First Name/Nickname

Potential New Member's Home City & State

College/University the potential new member is attending

Entering as a: Freshman    Sophomore    Junior    Senior    (Choose one.)

To my knowledge, this potential new member is not now, nor ever has been, an initiated member of a sorority.\*

\*A person cannot be a member of two National Panhellenic Conference (NPC) sororities. It is likely that if this potential new member has never attended a college or university that they are not a member. If they are transferring institutions, verify with the potential new member that they have not been initiated into a sorority prior to submitting this form.

Does this potential new member have any relatives who are members of Kappa Alpha Theta?

Yes    No    (Choose one.)

Please describe how you know the potential new member, and describe the potential new member's character.

A commitment to life-long learning, friendship, and service are important for all members to have. Please speak to how this potential new member embodies those ideals.

Please share a few recommended topics of conversation for the potential new member.