

MEMBERSHIP REFERENCE FORM

ATTACH PHOTO (OPTIONAL)

(To be used by members of Kappa Kappa Gamma only)

#### What to Send

Complete the Membership Reference Form. If available, attach a current photograph of the potential new member.

### Who Can Send

Any alumna member may submit references. An active member may write a reference for a potential new member, except to her own chapter.

### Where to Send

Return the completed form to the Membership Chairman of the appropriate chapter. Addresses are available on the Kappa website (www.kappa.org) in the "Write a Reference" section.

### **Academic Requirements**

A potential new member who 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 may be considered for membership. In extraordinary cases, the chapter may petition the Director of Membership for an exception.

# 1. Potential Member Information:

## Remember Kappa Kappa Gamma and NPC Guidelines

- Once Recruitment has started, alumna and active members from other campuses must NOT contact chapter members to inquire about a PNM's progress.
- Alumnae should neither expect to receive any information about the status of a specific potential new member nor expect to receive bid list information.
- Alumnae are prohibited from sending food or gifts in any form to the chapter on behalf of a potential new member.
- Violation of Panhellenic rules by alumnae may cause the chapter to be sanctioned.

#### Legacies

- A legacy is a sister, daughter, granddaughter or greatgranddaughter of an initiated member.
- If a legacy is invited to the final (preference) round, her name must be included on the bid list above the quota break.
- To protect a legacy's privacy, chapters do not notify her relative if she is not invited to a round or extended an invitation to membership.

Name of Potential Member:	Attending:							
(Last)	(First)	(Nickname)						
Home Address:								
(Street Address)		(City)	(State)	(Zip Code)				
Home Phone Number: ( )		Home Email Address:						
Name of Parent(s) or Guardian(s):								
High School:								
(Name)		(City)	(State)	(Zip Code)				
Class Size: Rank: G	PA:	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.								
2. Potential Member Connections:								
Kappa Kappa Gamma Legacy: Sister	Mother	Grandmother Gr	eat-grandmother					
Name:								
(Last) (First)		(Nickname)	(College/University Attended)					
Address:								
(Street Address)		(City)	(State)	(Zip Code)				
Phone Number: ()		Email Address:						
Other NPC Affiliations:								
3. Qualifications:								

# Kappa Kappa Gamma at its core is about an arc of qualities: leadership, scholarship and friendship.

Please check and add comments and examples in order to provide more information about the qualifications of the potential member. (May attach sheet if space provided is not adequate.)

Leadership Extracurricular activities Volunteer activities Leadership abilities Commitment Ability to set standard	Comments:
Scholarship Honor student National Honor Society Awards (list) Committed to lifelong learning Likely to finish college	
Friendship Congenial Poised Compatible in a group Reserved/quiet Enthusiastic Loyal Integrity Supportive	

### 4. Other Information:

Suggested topics of conversation during Recruitment:

With what type of person should the potential new member be matched during Recruitment (i.e., leader, academic, socially-oriented, etc.):

### 5. Endorsement:

Please check one of the follo ☐ Close KKΓconnection (i. ☐ Personally know the pote ☐ Personally know the pote ☐ Do not personally know p	e., aunt, cousin, stepm ential member for ential member's family	years for		years			
I hereby endorse this potential member for membership in Kappa Kappa Gamma.							
(Signature)		(Print First	Middle	Last)	(Date)		
(Street Address)		(City)		(State)	(Zip Code)		
Phone Number: ()	Chapter:	Chapter:		Initiation Date:			
Email:							
<ul> <li>Please send an acknowledgement that my reference has been received in the self-addressed, stamped envelope I have included with my reference form.</li> <li>Please send an acknowledgement by email that my reference has been received.</li> </ul>							