

Order of Omega Application

Fall 2008

Due: Friday, October 17th, 2008
Greek Life Advisor's Office
By 4:00 pm

Eligibility Requirements * At least Junior standing
* Cumulative GPA: 2.80 or higher

Do not attach personal resumes. This application must be typed.

APPLICANT'S FULL NAME _____

TELEPHONE _____ (home) _____ (school)

EMAIL ADDRESS: _____

CURRENT MAILING ADDRESS _____

AGE _____ YEAR IN SCHOOL _____

SOCIAL SECURITY NUMBER _____

MAJOR _____ CUMULATIVE GPA _____

GREEK LETTER ORGANIZATION _____

NUMBER OF YEARS IN GROUP _____

I. Statement of Applicant

Please attach a typed essay pertaining to the following topic:

The Order of Omega is in the process of rebuilding our organization. What qualities do you think you can bring to us to help us further the process? Please give at least one example.

I hereby attest that all the information submitted is true and correct.

Date: _____ **Signature:** _____

II. Fraternal Contribution

List all offices, committee chairs, committee assignments, etc. you have held within your fraternity or sorority. Also designate if the position is considered part of your executive committee.

Position	Begun	Ended	Description of Responsibility
a) _____ _____	_____	_____	_____ _____ _____
b) _____ _____	_____	_____	_____ _____ _____
c) _____ _____	_____	_____	_____ _____ _____
d) _____ _____	_____	_____	_____ _____ _____

Additional Comments:

III. Greek Community Contribution

List all offices, committee chairs, committee assignments, etc. you have held within your campus Greek community. Also include any participation in IFSC events and programs.

Position	Begun	Ended	Description of Responsibility
a) _____ _____	_____	_____	_____ _____ _____
b) _____ _____	_____	_____	_____ _____ _____
c) _____ _____	_____	_____	_____ _____ _____
d) _____ _____	_____	_____	_____ _____ _____

Additional Comments:

IV. Campus Involvement/ Work Experience

List other campus organizations (other than fraternal) to which you belong, and offices held, if any. Also, list any work experience.

Organization/ Affiliation/ Work Experience	From	To	Offices Held	From	To
a) _____ _____ _____	_____	_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
b) _____ _____ _____	_____	_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
c) _____ _____ _____	_____	_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
d) _____ _____ _____	_____	_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

Additional Comments:

V. Community Service

List all community service involvement. Include any activities that you participated in as an individual or as a member of a group.

Type of Service	From	To	Beneficiary
a) _____ _____	_____	_____	_____ _____ _____
b) _____ _____	_____	_____	_____ _____ _____
c) _____ _____	_____	_____	_____ _____ _____
d) _____ _____	_____	_____	_____ _____ _____

Additional Comments:

VI. Honors and Awards

List honors/awards/special achievements and designate what type of award (i.e., academic, work-related, etc.)

Honor/ Award	Description and Basis for Selection	Presented by	Year
a) _____ _____	_____ _____ _____ _____	_____ _____ _____	_____
b) _____ _____	_____ _____ _____ _____	_____ _____ _____	_____
c) _____ _____	_____ _____ _____ _____	_____ _____ _____	_____
d) _____ _____	_____ _____ _____ _____	_____ _____ _____	_____

Additional Comments:
