

Recruitment Information Form (RIF)

- This form may be copied
- Include a picture of potential new member if possible
- Send this form directly to the Vice President of Membership or process through your Alumnae Club Recruitment Information Chairman, if potential new member is from the same area. For address of the Vice President of Membership consult the Summer issue of *The ARROW*, or the Members-only side of the Web site. Do not send this form to Headquarters.

Voluntary Requested by Chapter

Name of potential new member: _____

College/University Attending: _____

Home Address: _____
Street City State Zip

Year in College: Freshman Sophomore Junior Senior

If transfer student, College attended: _____ College GPA _____

High School attended _____
Name City State Zip

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

Parent/Guardian: _____

Pi Phi Relatives: _____
(sister, mother, grandmother)

Other Greek Affiliated Relatives: _____

Please check ONE of the following:

- Known personally by an alumna (If so, how long?) _____
- Only factual information included. Source of information _____
- Other _____
- No information found _____

Please check ONE of the following: Wish to highly recommend Cannot recommend, lack of information
 Wish to recommend Do not wish to recommend

LIST SCHOOL AND COMMUNITY ACTIVITIES AND HONORS: (Attach another sheet if needed.)

Comment on special interests, talents, leadership qualities, personality.

INDIVIDUAL ALUMNA SIGNATURE

First Maiden Last

Address _____
Street

City State Zip

Telephone: _____
Area code/number

Date _____

FOR CLUB USE ONLY

Alumnae Club _____

Signed _____
ACRIC

Address _____
Street

City State Zip

Telephone (_____) _____

Date _____