

# University of Central Florida

## Rho Lambda

### Spring 2015 Membership Application

*Rho Lambda*, the National Sorority Leadership Recognition Society: The purpose of *Rho Lambda* is to honor those women within the sorority community who have exhibited the highest qualities of leadership and service to their Greek community and their sorority. They are women who have furthered the ideals and principles of the Greek community throughout their years of sorority affiliation.

\*\*\*Due Friday, **February 27, 2015** at 5 pm to the office of F&SL\*\*\*

Recognizing women for their leadership, scholarship and service to the Greek community. For more information please contact Samantha Peitzer at [ucfrholambdapresident@gmail.com](mailto:ucfrholambdapresident@gmail.com) or [samanthapeitzer@knights.ucf.edu](mailto:samanthapeitzer@knights.ucf.edu).

Fee: \$70.00 one-time fee (covers dues, pin, certificate & honor cord) due on or before initiation.

NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ HOME CELL WORK (circle one)

PID: \_\_\_\_\_

CLASS STANDING: (check) JR \_\_\_\_\_ SR \_\_\_\_\_ MAJOR: \_\_\_\_\_

COMPLETED HOURS (min. of 60 hours by end of last semester) \_\_\_\_\_

OVERALL GPA \_\_\_\_\_ (2.75 minimum)

FRATERNITY/SORORITY AFFILIATION: \_\_\_\_\_

DATE OF INITIATION: FALL SPRING \_\_\_\_\_

**On a separate piece of paper, please provide (TYPE or PRINT CLEARLY) the following information.**

1. Sorority Involvement
  2. Campus and Community Involvement
  3. Honors and Awards
  4. One Character Reference Letter (Someone other than a family member)
  5. Letter of Good Standing from Chapter President
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#### GRADE RELEASE APPROVAL

I, \_\_\_\_\_ (print full name) PID \_\_\_\_\_, give permission for Fraternity and Sorority Life (F&SL) to check my academic status and scholastic average/grades at the University of Central Florida. I further give my permission for F&SL to release this information to Rho Lambda. I do agree to allow the release of my grades by F&SL to Rho Lambda for as long as I am enrolled at UCF and a member of the organization.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_