

You may attach additional information, photos and letters of recommendation to this form. Please complete the form with as much information about the potential member as possible; you are not required to complete all fields.

Alpha Xi Delta	Legacy Recommendation	n Pote	ential Member Reco	mmendation
Name of potential member:				
	First	Middle	Last	Preferred
College:				
High school attended:			Graduation Date:	
GPA/Scale:/	ACT or SAT Score:	Rank in	class:	Class Size:
College attended after high	school, if any:			
College GPA:	Hours completed:			
Academic honors & accomp	lishments (honors or A	P classes, National H	lonors Society, etc.):
School and community (vol	unteer, religious, etc.) a	ctivities, including le	eadership positions	5:
Talents, hobbies, interests (r	nusic, dance, sports, th	eatre, etc.):		
What are four words you wo	ould use to describe he			
What topics would the poter	ntial member like to tal	k about during recru	uitment?	
What kind of person (ex. lead with during recruitment?	er, academic, outgoing	g/bubbly, etc.) would	the potential men	nber most get along
Please comment on the fol	lowing characteristic	cs as related to the	potential membe	<u>er</u> .
Character and Personality (i.e	e. loyalty, dependability	ı, outgoing/shy, etc.):		

Personal Development (i.e. poised, polished, team player, hard worker, etc.):				
Why did the potential member decide to pursue sorority				
recruitment? I would rate this potential member in the following				
 way: Light Blue: Qualified and would be an asset to the chapter. Dark Blue: Well qualified, will actively participate in the chapter and will be a good recruiter. Gold: Outstanding potential member who will be sought by other sororities. 				
Alpha Xi Delta relatives (check all that apply):				
Mother/Stepmother Grandmother/Stepgrandmother Sister/Stepsister	Aunt			
Names of relatives:				
Initiating Chaper(s):				
Does the PNM have other Greek influences from other women who they are related to that have affiliation with other national sorority organizations?				
Alpha Xi Delta Member Statement				
I recommend this woman: 🗌 Yes 🗌 No				
Please select one.				
 I have known the potential member personally foryears. I know the potential member's family. I don't know the potential member, but the recommendation came from a reliable source. 				
Check which one applies to you: 🗌 I am an alumna. 👘 I am a collegian.				
Your first name:Your last name:Your maiden name (if applicable):				
Current or past alumna involvement (if any) <u>:</u>	-			
Current collegiate officer role (if any):	-			
Your initiating chapter:Your college/university:				
Your address:	_			
Your city:Your state:Your zip code:	_			
Your phone number:Your email address:				
Today's Date:	_			
Once you have completed this form, please save it to your computer and email it to				

Once you have completed this form, please save it to your computer and email it to <u>memberservices@alphaxidelta.org</u>. You can email additional information, photos and letters of recommendation along with this form.

Page 2 of