

**Recommendation Form**

This form is for use by members of Delta Gamma only. Please contact the collegiate recruitment specialist

at Executive Offices at 614-481-8169 or at Recommendations@deltagamma.org with any questions.

[ ]  Voluntary Recommendation Form [ ]  Requested Recommendation Form [ ]  Information Only Form

For       Chapter of Delta Gamma at

 (chapter) (college/university)

**CANDIDATE INFORMATION**

Name of potential member:

Home address:

Email:       Phone:

Entering recruitment as: [ ]  Freshman [ ]  Sophomore [ ]  Junior [ ]  Senior Age:

High School:       High School City/State:

GPA:       on a scale of       SAT score:       ACT score:       Class rank:       out of

**FAMILY INFORMATION**

Parent/Guardian name:       Fraternity/Sorority:       College/University:

Address (if different from above):

Parent/Guardian name:       Fraternity/Sorority:       College/University:

Address (if different from above):

**LEGACY INFORMATION** (Delta Gamma mother/stepmother, grandmother, sister/stepsister)

Delta Gamma Mother:       Chapter of Initiation:       Contact Information:

Delta Gamma Grandmother:       Chapter of Initiation:       Contact Information:

Delta Gamma Sister:       Chapter of Initiation:       Contact Information:

Other Delta Gamma relatives:

Other sorority influences:

**ADDITIONAL CANDIDATE INFORMATION**

Please provide your evaluation of the potential member, relating her qualifications to Article II of the Delta Gamma Constitution. Check all boxes that apply. You may add comments or attach a separate sheet with more details.

**Article II of the Delta Gamma Constitution:**

The objects of this Fraternity shall be to foster high ideals of **friendship** among women, to promote their **educational and cultural interests**, to create in them a true sense of **social responsibility**, and to develop in them the best qualities of **character**.

**Friendship**

[ ]  Supportive [ ]  Loyal [ ]  Dependable/Trustworthy [ ]  Other:

**Education**

[ ]  Honor Student, Advanced Placement courses [ ]  National Honor Society, scholarships [ ]  Internships, job shadowing, tutor

[ ]  Other:

**Cultural Interests**

[ ]  Student organizations [ ]  Musical or artistic involvement [ ]  Athletic teams [ ]  Leadership positions [ ]  Other:

**Social Responsibility**

[ ]  Community volunteer [ ]  Service experiences/mission trips [ ]  Jobs/summer work [ ]  Other:

**Qualities of Character**

[ ]  Personable/congenial [ ]  Motivated to succeed [ ]  Displays integrity [ ]  Other:

Comments and additional information:

The potential member might enjoy talking about these topics during recruitment:

**This form has been completed by:**

Submitter name:

Chapter of Initiation:       I am an: [ ]  Alumna [ ]  Collegian

Email:       Phone number:

Home address:

[ ]  I have known the potential member for       years and/or the potential member’s family for       years.

or

[ ]  I do not personally know the potential member; I acquired information from      .

[ ]  I endorse this potential member with the understanding that she may become a new member of Delta Gamma.

or

[ ]  I do not wish to endorse this potential member. I understand that I may be contacted by a chapter adviser.

[ ]  Please check box if additional information is attached.

[ ]  I am in good standing and current with my per capita alumnae dues.