

**Standards of Excellence
Standard 5 – Advisors**

- *Chapter Advisor will attend at least 50% of chapter meetings and 50% of chapter recruitment events*

Due November, 8 2009

Chapter: _____

Person Completing Form: _____

** Chapter Advisor should be completing this form**

Chapter Advisor verification of involvement in chapter meetings and chapter recruitment events

Chapter Advisor Name: _____

Chapter Advisor Email address: _____

Chapter Advisor Phone Number: _____

As the chapter advisor of _____, I verify that I attended at least
Chapter Name

50% of all of the chapter's meetings and 50% of the chapter's recruitment events during

the academic term of August of _____ through May of _____.
Year Year

Signature

Date

For Office use only

Advisor: _____ *Date Standard Completed:* _____

Notes: _____