

Name of Potential New Member \_\_\_\_\_  
(last) (first) (nickname)  
College/University Attending \_\_\_\_\_

**DELTA DELTA DELTA**  
Potential New Member Introduction

★ GEOGRAPHICAL/CLASS BALANCE

Home Address \_\_\_\_\_  
(street) (city) (state) (zip)  
Age \_\_\_\_\_ College Class: ( ) Fresh. ( ) Soph. ( ) Jr. ( ) Sr. Major \_\_\_\_\_  
High School \_\_\_\_\_ City, State \_\_\_\_\_

★ SCHOLARSHIP

High School GPA \_\_\_\_\_ GPA Grade Scale \_\_\_\_\_  
Honors (high school or college) \_\_\_\_\_  
College previously attended \_\_\_\_\_ City, State \_\_\_\_\_  
Terms/hours completed \_\_\_\_\_ College GPA \_\_\_\_\_

★ CHARACTER/PERSONALITY TRAITS

★ LEADERSHIP/ACTIVITIES/AWARDS

★ COMMUNITY SERVICE/FAMILY INFORMATION

Work/Volunteer experience \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Names of parents/guardians \_\_\_\_\_  
Delta Delta Delta relatives (name and relationship) \_\_\_\_\_  
Relatives in other Fraternal groups (sororities/fraternities) \_\_\_\_\_

**MEMBER'S STATEMENT**

( ) Know potential new member personally ( ) Know her family ( ) Unknown but referred by reliable source

**Additional comments:**

**PLEASE CHECK ONE AND SIGN THE REFERENCE.**

( ) Sponsor - indicating a recommendation for membership.

( ) Information only or no information (if checked, the chapter reference committee may proceed as below).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (city) (state) (zip)

Phone: ( ) \_\_\_\_\_ (optional) E-mail \_\_\_\_\_ (optional)

Chapter \_\_\_\_\_ School \_\_\_\_\_ Year initiated \_\_\_\_\_

**INSTRUCTIONS:** *You may send the completed reference to the alumnae chapter reference chairman in the potential new member's hometown. If there is no alumnae chapter near the potential new member's home town, or if you prefer, you may send the reference directly to the collegiate chapter. For addresses, visit Tri Delta's Web site, [www.tridelta.org](http://www.tridelta.org) or contact Executive Office by phone at 817/633-8001 or by e-mail at [reference@trideltaeo.org](mailto:reference@trideltaeo.org).*

**FOR ALUMNAE CHAPTER REFERENCE COMMITTEE USE ONLY**

This reference has been processed by the alumnae chapter reference committee.

Name of alumnae chapter \_\_\_\_\_

Signed \_\_\_\_\_ Address \_\_\_\_\_  
*alumnae chapter reference chairman*

**FOR COLLEGIATE CHAPTER REFERENCE COMMITTEE USE ONLY**

The chapter reference committee has secured complete, accurate information about this potential new member and has completed this form. After full consideration and vote of approval, this candidate is sponsored for lifetime membership in Delta Delta Delta.

Signed \_\_\_\_\_ Witnessed \_\_\_\_\_  
*collegiate chapter reference chairman* *lifetime membership/reference advisor*