

Fraternity & Sorority Officer Update Report
Morehead State University



Ink Only, No Pencil

Name of Fraternity/Sorority (spell out, no abbreviations) _____

The above-named organization hereby elected or appointed the following individuals to the listed office.

President _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Advisor 1 _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Advisor 2 _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

VP (or other title) _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Treasurer _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Recorder _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Recruitment Chair _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Social Chair _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

List continued on the back

Council Rep 1 _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Council Rep 2 _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Scholarship Chair _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

New Member Ed _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Community Service _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Intramural Chair _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Risk Manager _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

Web Editor _____ Phone (____) _____ ID # _____

Text messages? Yes No E-mail you actually check _____

Local Address _____ City _____ Zip _____

I hereby affirm the above information is correct and true to the best of my knowledge.

Chapter President _____ Chapter Secretary _____

Date _____

Date _____