

INTEREST IN AOT

Seeking Membership in Alpha Omega Theta

Alpha Omega Theta Interest Group Inquiry

Please fill out this form in its entirety. Submissions with missing or incorrect information will not be considered.

It is important to note that this inquiry is our initial introduction to you and "**A First impression is a lasting impression.**"

The diligence and care that you put into providing this information will go a long way toward showing us the type of member and brother in Christ you would be.

Incorrect information, poor spelling, and bad grammar are all indicative of a lack of care and professionalism. Though we do not seek to condemn any man these are preferable traits for members of Alpha Omega Theta and they will immediately disqualify your inquiry from further consideration.

Interest Group Contact:

Name _____

College/University/City _____

E-mail _____

Telephone _____

Address _____

Apt. _____

City _____

State _____

ZIP _____

Classification (freshman, sophomore, Junior, Senior, Graduate)

Major (if applicable) _____

Present or Past campus/city and church activities you have participated in:

Present or past leadership positions you have held:

Why should Alpha Omega Theta charter a chapter on your campus or in your city?

Who are the other members of your potential interest group?

Name of Campus contact that oversees Fraternities at your school (if Applicable):

Their Title:

Their Email Address:

Their Business Phone Number:

Anything else you would like us to consider while reviewing your inquiry?