

# Alpha Omicron Pi Membership Information Form

Please mail this form to the AOII address for the college/university the Potential New Member is attending. The addresses are listed on the private side of the AOII web site, or you may contact International Headquarters at (615) 370-0920. If you have gathered this information in response to a chapter's request, please send your materials directly to the address indicated by the chapter.  
*Collegiate chapter recruitment depends on supplying available and accurate information.*

Optional:

Attach Photo

(used only for  
identification)

For the AOII Chapter at \_\_\_\_\_

## Potential New Member Information (PNM)

Name of PNM \_\_\_\_\_  
first preferred name last age

Home Address \_\_\_\_\_  
street city state/province zip/postal code

College Classification (check one) \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior

Parents'/Guardians' Information \_\_\_\_\_  
full names

\_\_\_\_\_ address city state/province zip/postal code

\_\_\_\_\_ home phone number (including area code) cell phone number (including area code)

## AOII Recommendation for Membership (please attach PNM's resume if possible)

\_\_\_ 1. I recommend this individual for AOII membership.

\_\_\_ I know this individual personally.

\_\_\_ I do not know this individual personally, but I am basing my recommendation on information from these sources: (check as many as may apply)

\_\_\_ Another AOII \_\_\_ Panhellenic Files \_\_\_ High School Faculty \_\_\_ Clergy

\_\_\_ Peers of the Individual \_\_\_ A Mutual Friend \_\_\_ Other (please specify) \_\_\_\_\_

\_\_\_ 2. I do not recommend this individual for AOII membership based on information received. If further clarification is desired, the Chapter Adviser may contact me at (\_\_\_\_\_)\_\_\_\_\_.

\_\_\_ 3. I am unable to commit my opinion on this individual for AOII membership:

\_\_\_ Due to limited information received.

\_\_\_ After contacting all available sources and receiving no information.

Additional comments (if any):

\_\_\_\_\_  
\_\_\_\_\_

Recommendation Given By: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Signature

Printed Name \_\_\_\_\_  
First Initiated/Maiden Last

Address City, State/Province Zip/Postal code

Collegiate Chapter \_\_\_\_\_ Initiation Year \_\_\_\_\_ College/University \_\_\_\_\_

Alumnae Chapter \_\_\_\_\_ Life Loyal Member Number \_\_\_\_\_

Are you an Alumnae Advisory Committee member? If yes, list position and chapter.

## Family Information

Does the PNM have an AOII relative? (check) Step- \_\_\_\_\_ Sister \_\_\_\_\_ Mother \_\_\_\_\_ Grandmother \_\_\_\_\_ Other \_\_\_\_\_  
(Please see Legacy Introduction Form)

Name of AOII relative (including maiden) \_\_\_\_\_

Address of AOII relative \_\_\_\_\_

Phone (day): (\_\_\_\_) \_\_\_\_\_ (evening): (\_\_\_\_) \_\_\_\_\_ (cell): (\_\_\_\_) \_\_\_\_\_

Does the PNM have affiliations with any other Greek letter organizations? If yes, list affiliation, relationship, and college/university (i.e. Zeta Tau Alpha, Mother, University of South Carolina).

Does the PNM have a special interest in AOII? If yes, please explain.

Have you talked with this PNM about AOII and its obligations, including financial obligations? \_\_\_ Yes \_\_\_ No

## Academics

High School Attended \_\_\_\_\_  
name city state

High School GPA \_\_\_\_\_ Scale \_\_\_\_\_ Class Rank/Class Size \_\_\_\_\_ of \_\_\_\_\_ SAT/ACT Score \_\_\_\_\_

List Any School(s) Attended After High School \_\_\_\_\_  
name city state

Major \_\_\_\_\_ Cumulative GPA \_\_\_\_\_ Scale \_\_\_\_\_ Number of Credits Completed \_\_\_\_\_

Scholastic Honors:

## Activities

Please list names of high school and collegiate organizations (explain type - school, church, community, etc.) and the PNM's participation, leadership, and level of involvement in each one. Attach additional information on a separate sheet if necessary. (i.e. Beta Club – School: 4 years, Pres. 1 year, Sec. 2 years.)

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List any other special recognitions and/or honors received.

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## Personality/Leadership Qualities

Include information about the PNM's character traits, leadership qualities, and personality characteristics using specific examples whenever possible. Indicate the individual's special interests, talents, and any other information to aid the chapter in getting to know her better and to indicate the contributions she could add to AOII.

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## FOR CHAPTER USE ONLY

Group Pledged \_\_\_\_\_ Date Pledged \_\_\_\_\_

Date Acknowledgement Sent to Alumna Supplying MIF \_\_\_\_\_  
*(This step is very important to maintaining alumnae support.)*

What To Do With MIFs and Recommendations After Recruitment:

Once recommendations have been acknowledged, you are to:

1. Destroy recommendations on all Potential New Members who pledged a NPC sorority.
2. Maintain files on those recommendations for Potential New Members who did not pledge a group.
  - Recommendations should be kept on file for one college generation (4 years).

# Legacy Introduction Form

This form is designed to introduce AOII legacies to our collegiate chapters. It does not replace the Membership Information Form which also must be sent to the chapter. You can ensure proper introduction of your legacy by completing the form and sending it to the AOII chapter on the campus your legacy plans to attend. A list of addresses appears in the Directory section on the AOII web site.

Date \_\_\_\_\_

To \_\_\_\_\_  
AOII Chapter Name

This is to advise you that my (check all that apply) \_\_\_ Step- \_\_\_ Sister \_\_\_ Daughter \_\_\_ Granddaughter

\_\_\_\_\_  
Full Name

will be attending \_\_\_\_\_  
College/University

as a (check one) \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior beginning date \_\_\_\_\_

## Initiated AOII Relative Information:

Member's full name, including initiated name	Collegiate Chapter	Year of initiation
Address	City/state/province	Zip/postal code
Phone number	Email address	

I am a member of \_\_\_\_\_ Alumnae Chapter.

Alumnae Advisory Committee (Position/chapter) \_\_\_\_\_

Life Loyal Member Number \_\_\_\_\_

**\* Please remember to send the Membership Information Form along with this Legacy Introduction Form to the AOII address at the school your legacy will be attending. Please note: properly completing and submitting this membership information material does not guarantee a bid from any AOII chapter. The privilege of selecting future members rests solely with the collegiate chapters of Alpha Omicron Pi.**

## Legacy Policy Explained...

A legacy is defined as a sister, daughter, or granddaughter; a step-sister, step-daughter, or step-granddaughter; or an adopted sister, daughter, or granddaughter of an initiated member of Alpha Omicron Pi (alive or deceased).

Alpha Omicron Pi strongly encourages the pledging of qualified legacies whenever possible. Collegiate chapters are obligated to give serious consideration to each verified legacy out of courtesy to the AOII member to whom she is related. A collegiate chapter may decline membership to a legacy if she does not meet the membership selection criteria set by the chapter. In no case should a legacy be denied an invitation to at least one invitational event after the first round of events.

Only collegiate chapter members have the responsibility and privilege of membership selection. The role of alumnae is to provide information to collegiate chapters for all potential new members to ensure they are given serious consideration for membership.

If a chapter releases a legacy at any point during the recruitment process, a member of the Alumnae Advisory Committee must contact the AOII relative of the legacy by telephone, if possible and with consideration to time, prior to distribution of invitations for the next round of recruitment events\*. If an adviser is unable to reach the AOII relative by telephone, written notification of the legacy's release must be sent within seven days to the chapter's Collegiate or Colony Development Network Specialist and to International Headquarters.

\* In order to receive a courtesy call, correct contact information must be provided on these forms, on the campus recruitment registration, and/or on record with Alpha Omicron Pi International Headquarters. \*