**CHAPTER MEMBER VERIFICATION ROSTER**

***Please type this form. Use this roster for all active and inactive members of the chapter. Use multiple sheets as necessary.***

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| Organization Name | Chapter Name | Semester |

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|  |  |  |  | For Office Use Only |
| **Name** | **Email** | **Semester Initiated** | **Active?** | **Service Hours (15)** | **Semester GPA** | **C-GPA** | **Approval/ Disapproval** |
| 1. |       |       |       | [ ]  |  |  |  |  |
| 2. |       |       |       | [ ]  |  |  |  |  |
| 3. |       |       |       | [ ]  |  |  |  |  |
| 4. |       |       |       | [ ]  |  |  |  |  |
| 5. |       |       |       | [ ]  |  |  |  |  |
| 6. |       |       |       | [ ]  |  |  |  |  |
| 7. |       |       |       | [ ]  |  |  |  |  |
| 8. |       |       |       | [ ]  |  |  |  |  |
| 9. |       |       |       | [ ]  |  |  |  |  |
| 10. |       |       |       | [ ]  |  |  |  |  |
| 11. |       |       |       | [ ]  |  |  |  |  |
| 12. |       |       |       | [ ]  |  |  |  |  |
| 13. |       |       |       | [ ]  |  |  |  |  |
| 14. |       |       |       | [ ]  |  |  |  |  |
| 15. |       |       |       | [ ]  |  |  |  |  |
| 16. |       |       |       | [ ]  |  |  |  |  |
| 17. |       |       |       | [ ]  |  |  |  |  |
| 18. |       |       |       | [ ]  |  |  |  |  |
| 19. |       |       |       | [ ]  |  |  |  |  |
| 20. |       |       |       | [ ]  |  |  |  |  |

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| **SIGNATURES** | **Print Name** | **Signature** | **Date** |
| **Chapter President** |       |  |       |
| **Campus Advisor** |       |  |       |
| **Intake Chair** |       |  |       |