

Alpha Sigma Alpha

Request for Advisor Placement

SEND ORIGINAL FORM TO: asa@alphasigmaalpha.org
(to be forwarded to the volunteer recruitment and placement team and copied to the district facilitator)

Please type or print the information

Keep a copy for your files.

The volunteer recruitment and placement team will notify the chapter and national headquarters of the decision.

Chapter: _____ University Name: _____

Chapter President's Name: _____

Phone Number: _____ Email: _____

Address: _____ City, State, ZIP Code: _____

Potential Advisor's Name: _____

Address: _____ City, State, ZIP Code: _____

Home Phone Number: _____ Work Phone Number: _____ Email: _____

Indicate the advisory board position to be filled (circle):

Chapter Advisor

Standards Advisor

Other: _____

Financial Advisor

Recruitment Advisor

Membership Advisor

Scholarship Advisor

Other: _____

Is this a new advisory board position for your chapter? yes no

If no, indicate the name of the advisor previously holding this position: _____

Indicate the reason this person is leaving the position: _____

Before submitting this form, be sure to have the potential advisor complete the next page of this form.

Chapter President's Signature: _____

****If you are requesting approval for an individual who has been out of school for less than 3 years, you must telephone the Volunteer Recruitment and Placement Team before submitting this request.***

(DO NOT WRITE BELOW THIS LINE)

Date Received: _____

Advisor request approved: _____

Advisor request denied: _____ (Letter enclosed.)

TO BE COMPLETED BY THE POTENTIAL ADVISOR:

Name: _____

Potential Advisory Board Position: _____

Occupation: _____

Are you a member of AΣA? yes no

If yes, give collegiate chapter affiliation: _____

 and give alumnae chapter affiliation: _____

If no, are you a member of an NPC sorority? yes no

If yes, give NPC sorority affiliation: _____

What year did you graduate from college? _____

What distance are you from campus for purpose of attending meetings? _____

Have you seen a copy of the minimum expectations for this advisory board position? yes no

Will you be able to participate in the activities as set forth in these expectations? yes no

Do you have any questions or concerns about the advisory board position you are being asked to serve?
