



SAU Greek Life Educational Programming Form

Information on educational programming will be collected annually and compiled near the end of each year in an effort to show the significant impact that SAU fraternities and sororities have on the development of their members. By collecting this data, Greek Life is able to track the number of and types of programs that individual chapters and the fraternal community as a whole are providing.

Success Through Accountability and Recognition
SAU Greek Life Standards Program

Chapter Information

Fraternity/Sorority Name: _____ Contact Person: _____

Program Information

Check all that apply

Audience: Members Only SAU Students Community

Type of Program: Leadership Development Multicultural/Diversity
 Scholarship/Academics Sexual Assault/Safety
 Health & Wellness Financial Management
 Risk Management/Hazing/Alcohol Education
 Professional/Career Development
 Other

Is this program required by your national office? Yes No

Number Attending: _____ Program Date: _____

Program Name: _____

Program Description: _____

Presenter: _____ Program Location: _____

VERIFICATION

Please have the program presenter sign this form and include contact information for verification.

Chapter President Signature: _____ Date: _____

Program Presenter/Facilitator: _____

Presenter Email/Phone: _____

Then return this completed form within **TEN business days** after the completion of the program to:

Office of Student Activities- Greek Life

Reynolds Center 201

MSC 9146

Magnolia, AR 71753

Phone: 870-235-4925

Fax: 870-235- 5265

For Office Use Only

Date Received: _____

Received By: _____