



LAMBDA CHI ALPHA

A LIFETIME OF TRUE BROTHERHOOD

Nomination for *Grand High Zeta*

Name _____ Age _____

Preferred Address _____

Preferred Phone _____ Year Initiated _____ Zeta Number _____

Preferred E-mail address: _____

Initiated at (College or University) _____

***Attach additional sheets as needed for the following sections,
identifying the sections to which you are adding.***

A. Colleges/Universities Attended and Degrees:

Institution	Years Attended	Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. Employment Information:

Present Occupation and Title: _____

Name of Firm: _____ Above position held since: _____

Business Address: _____

Business Phone: _____

Description of Firm's activities and candidate's involvement (e.g., financial management, long range planning, direction of others, etc.):

C. Past Professional Employment Experience: (Names, positions, activities, leadership):

D. Civic, Community, Professional, Collegiate, Volunteer Associations: (Name, location of Association, offices held, dates, leadership/business involvement):

E. Fraternity Service: Undergraduate/Alumni (Offices held; committees; General Fraternity events attended (dates/locations); Interfraternity/Alumni involvement):

F. Other Information: (Background, activities, interests, not included above, that you think are important for consideration of this candidate):

G. Family Information: (Single, married, divorced, widowed; Ages of children):

H. Reason for Nomination: I (we) believe that this individual would be an excellent choice for the office recommended because:

- - o o O o o - -

Recommendation submitted by _____ Date _____

Address _____

Phone _____ E-mail: _____

Please return this signed form to: **Chairman, Nominating Committee, Lambda Chi Alpha Fraternity, 11711 Pennsylvania Street, Suite 250, Carmel, IN 46032**

NOTE: The attached **Consent to Nomination** must be signed by the prospective nominee.