

Greek Officer Roster

Name of Chapter (national and local): _____ Date submitted: _____

Can this information be published in the Greek Leaders' Resource Guide? YES NO

Your term of office runs: January - December September - August

Position Title	Name	Email Address	Local Address	Phone number
President				
Vice President				
Secretary				
Treasurer				
Intake/Recruitment Chair				
Risk Management				
New Member Chair				
Council Delegate				
Academics/Scholarship Chair				
Community Service/ Philanthropy Chair				
Public Relations/Marketing Chair				
Social Chair				
Sports Chair				
Advisor (local)				