

# ARKANSAS STATE UNIVERSITY GREEK LIFE

## Application for Open Bid

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Phone	E-mail Address		Classification
Semester Bid Issued	Student ID No.	Fraternity Name:	
GPA			

### POTENTIAL NEW MEMBER DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. **I certify that I have read all guidelines pertaining to this program and understand them fully.** I authorize officials of Arkansas State University, including those in the Office of Greek Life, Interfraternity Council, and the Leadership Center to review my education records under the Family Educational Rights and Privacy Act, for the purpose of verifying my academic eligibility. If I join a Greek organization, I hereby release my education record for the rest of my undergraduate career to the appropriate Arkansas State University officials and my Greek affiliation so that they may monitor my eligibility.

Student Signature  
Receiving Bid

Date

### RECRUITMENT CHAIR SIGNATURE

I certify that the applicant is a recipient of our fraternity's Open Bid.

Recruitment Chair  
Signature

Date

### OFFICE OF GREEK LIFE VERIFICATION

I certify that the applicant is a full-time undergraduate student, with at least 2.7 cumulative GPA, and in good University Conduct & Academic Standing.

Fraternity/Sorority  
Advisor Signature

Date