

**OUTSTANDING CHAPTER PROGRAM/EVENT**  
**Award Application Form**  
**Due Date: Friday, April 1, 2016**

Fraternity/Sorority Name: \_\_\_\_\_

Name of Person Completing Application: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

This award focuses on a recurring or one-time program/event that has positively affected both your chapter and the Greek community.

On a separate page, please provide the 2015/2016 Greek Awards Committee with the answers to the following questions.

1. Name of Program/Event
2. Date of Program/Event
3. Location of Program/Event
4. List Program/Event Co-Sponsors
5. Approximate Attendance Figure
6. Approximate Budget (attach budget to this application)
7. Program/Event Goals: List the goals of the program and how each goal was accomplished
8. Program Description (no more than 500 words)
9. Program/Event Evaluation (no more than 500 words)

**To be eligible for consideration, be sure the following items are submitted to the Office of Fraternity and Sorority Affairs no later than Friday, April 1, 2016 by 4pm.**

\_\_\_\_\_ **This award application**  
\_\_\_\_\_ **Your typed answers**  
\_\_\_\_\_ **Supporting documentation**