I, Name (PRINTED): ___________________________________________________________, the undersigned member of (organization) ____________________________________________, do hereby authorize the Center for Student Involvement, Fraternity & Sorority Life of American University (“AU”) and Office for the Student Experience, Fraternity & Sorority Life of The George Washington University (“GW”) to release my enrollment status, academic standing, and grade point averages (semester, cumulative, and previous semester) to the chapter president, scholarship chair (or designated officer), chapter alumni/ae advisor, Council, and/or Inter/National organization.

I understand, should I not be enrolled as a student at either AU or GW, I shall be required to provide proof of enrollment at an accredited college or university (as defined by my organizations Charter) by way of a verified transcript to both institutions’ Fraternity & Sorority Life staff/office. I understand the purpose of the disclosure is to verify eligibility for membership, determine my academic status with the University and the organization, and to verify my registration as a matriculated student. I understand the minimum grade point average required as an active member is a 2.5 cumulative GPA (AU) and a 2.5 cumulative GPA (GW), unless a higher GPA is required by my Inter/National organization or Council.

I understand this authorization will remain in effect as long as I continue as a member of the organization and enrolled at a neighboring institution in the District of Columbia. If I no longer wish for this information to be released, I understand I must make such request to the appropriate Fraternity & Sorority Life staff in writing.

Signature: ____________________________________________________ Grad Year: ___________

Have you attended a New Member Days Education Session? Yes / No (circle one)

If YES, what NMD session? SESSION # ______ SESSION DATE: ____________________

New Member Class: ________ ________
FALL/SPRING YEAR

Student Identification Number (GWID/ UNIVERSITY ID#): ________________________________

University Email (edu): ________________________________

PLEASE PRINT CLEARLY