## **Multicultural Greek Council**



## **Membership Application**

	Transcromp Typhicution		
	Please answer <b>all</b> questions on the application.		
	Please answers the following questions.		
1.	Organization Name:		
2.	Has your organization ever been here at Eastern Michigan University (as a chapter, colony, or interest group)? Yes $\square$ or No $\square$		
	If yes when:		
3.	Will another chapter help with chartering your organization? Yes □ or No □  If so which one:		
	Where are they located?		
4.	Does your organization have a National Office? Yes  or No   If so please provide the following information:  National Board President Name:		
	Address:		
	Email:		

5.	Does your organization have a minimum GPA for membership?	Yes $\square$ or No $\square$	
	If so what is it?		
=		-	
6.	Advisor		
_	Name:		
-	Email:		
7.	Primary Contact		
_	Name:		
-	Phone number:		
-	Email:		
8.	Secondary Contact		
	Name:		
-	Phone number:		
_	Email:		
	Please type the answers to these questions in paragraph style on	a seperate piece of paper	<b>'</b> .
9.	What is your organization's mission and/or purpose?		
10.	What unique services and opportunities can your organization pr successful operations?	ovide to the interest group	to ensure
11.	What assistance would you like to receive from the MGC and Gr	reek Life?	

12. What can your organization bring to MGC?

- 13. Please define your organization's commitment and reasoning for joining the EMU Greek Life community?
- 14. Does your organization have an anti-hazing policy? If so please provide documentation.
- 15. Please provide a copy of your organizations National Constitution and By-Laws.