



## TAU KAPPA EPSILON FRATERNITY

### COLLEGIATE ADVISORY COMMITTEE MEMBERSHIP APPLICATION

*(Resume, Cover letter & Letter of Recommendation encouraged, but not required)*

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Home Chapter: \_\_\_\_\_ University/College: \_\_\_\_\_

Undergraduate Population: \_\_\_\_\_ Major: \_\_\_\_\_

GPA: \_\_\_\_\_ Year in School: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Chapter Leadership Positions Held:

\_\_\_\_\_  
\_\_\_\_\_

Campus and Community Leadership Recognitions:

\_\_\_\_\_  
\_\_\_\_\_

Honors and Awards:

\_\_\_\_\_  
\_\_\_\_\_

Please describe why you are a good candidate for the Collegiate Advisory Committee?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide two Alumni or University administrator recommendations.

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

#### PLEASE RETURN COMPLETED APPLICATION TO:

Brent Patrick, Chief of Staff

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Indianapolis, IN 46278

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F: 317-875-8353

**BY NO LATER THAN FRIDAY, SEPTEMBER 16, 2011**