Form 1E

OMEGA PSI PHI FRATERNITY, INC

LIST OF APPROVED NAME FROM CHAPTER TO DISTRICT RREPRESENTATIVE

TO: _____ District Representative

FROM: _____ Chapter

Please be advised that the following list of names have been approved by _____
Chapter as prospective candidates for the Membership Selection Process.

_____
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After your approval, these prospective candidates will be forwarded an invitation to the Information session.

Approval _____

Denial _____

_____
District Representative

_____
Date

Ωφελημα Ψυχι Φιλια
Friendship is Essential to the Soul