|  |  |
| --- | --- |
| Candidate: Click to enter text | |
|  | |
| **Please provide your information below.** | |
|  | |
| Name: Click to enter text | |
|  | |
| Address: Click to enter text | |
|  | |
| Phone: Click to enter text | Email:Click to enter text |
|  |  |
| Chapter: Click to enter text | Relationship to candidate:Click to enter text |
|  | |
| How long have you known the candidate? Click to enter text | |
|  | |
| **Candidate Information**  Please briefly note examples in order to provide more information about the candidate’s qualifications. | |
| Professional interests:  Click to enter text | |
|  | |
| Leadership roles:  Click to enter text | |
|  | |
| Community service:  Click to enter text | |
|  | |
| Other involvement/activities:  Click to enter text | |
|  | |
| Additional notes:  Click to enter text | |
|  | |
| **Recommendation** | |
| Please briefly explain why you recommend the candidate for membership in Kappa Kappa Gamma.  Click to enter text | |