## Stony Brook University Fraternity & Sorority Life

Candidate Selection / Intake Petition Form				
Organization:				
Chapter Member Responsible for Intake / New Member Process				
Nam	e: Phone:	Email:		
Graduate / Alumni Advisor Overseeing Intake / New Member Process (if applicable)				
Name: Phone:		Email:	Email:	
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Chapter President (Print & Sign)		Chapter Advisor (Pri	Chapter Advisor (Print & Sign)	
Candidate / Intake Participant List				
		SOLAR ID	Eligibility (Office Use Only)	
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Office Use Only  Grade Releases: N.M.P/Intake Plan: Eligibility Check:  Approved: Unapproved: Signed:  Comments:				