

**Delta Gamma Fraternity
COLLEGIATE RECRUITMENT CONSULTANT
REPORT**

Chapter Served: _____

Date: _____

Name: _____

Address: _____

Phone: _____

General Reaction:

Evaluating Committee:

Recruitment Rules:

Date Approved by Chapter:

Voting Procedures:

Legacy Policy:

Membership Goals: (Please list)

Sponsorship Program:

Who is responsible?

Effectiveness of the program:

Panhellenic:

Strengths:

Weaknesses:

Recruitment Week Theme:

Recommendations:

Statistics: (if applicable)

Number of events:
Number set for Quota:
Delta Gamma pledged:
Is chapter at total?

COB Plans established?

Comments: