

THE GREEK ALLIES OUT AND GREEK...AT LEHIGH

Application for Membership:

Contact information

Name:

Email:

Phone number:

Demographic information

Chapter affiliation:

Major:

Graduating class:

Gender (M/F):

Please respond to following questions:

1. Why do you want to be a Greek ally?
2. In what ways do you see yourself acting as an ally within Lehigh's Greek community and beyond?
3. What will bring to contribute to the Greek Allies (i.e., personal qualities, experiences, etc.)?
4. Realizing this is a young organization, what is your vision for Lehigh's Greek Allies program?
5. Please list any leadership positions on campus.

Please direct all questions to Ryan Leichtweisz (rml310@lehigh.edu).