

## Cumberland University Greek Officer Information

Fraternity/Sorority Name: \_\_\_\_\_

Officer term: \_\_\_\_\_

from:

to:

	Name	Cell	E-Mail
<b>President</b>			
<b>Vice-President</b>			
<b>Secretary</b>			
<b>Treasurer</b>			
<b>Recruitment Officer</b>			
<b>Social Officer</b>			
<b>Panhellenic Delegate</b>			
<b>New Member Educator</b>			
<b>Philanthropy Officer</b>			
<b>Community Service Officer</b>			
<b>Risk Management Officer</b>			
<b>Scholarship/Education Officer</b>			
<b>Other</b>			
<b>Other</b>			
<b>Other</b>			
<b>Other</b>			
<b>Other</b>			

*This form MUST be submitted by September 15 and February 15 of each year.*