

Association of Sorority Women - Corpus Christi

College Planning to Attend: _____

Name _____ Birth Date _____

Home Address _____ City _____ Zip _____

Email address _____ Cell phone _____

Father's Name _____ Occupation _____

Father's Employer _____ Position Held _____

Father's College _____ Father's Fraternity _____

Mother's Name _____ Occupation _____

Mother's Employer _____ Position Held _____

Mother's College _____ Mother's Sorority _____

Mother's email _____ home phone: _____ cell phone _____

Does your Mother, Sister, or Grandmother belong to a sorority? Yes _____ No _____

If yes, complete the following (for more space list the full names, relationships, sororities, etc on a separate page)

Relationship _____ Sorority _____ College Attended _____

Relationship _____ Sorority _____ College Attended _____

Sisters in family (names and ages) _____

Special Interests and Hobbies _____

Scholastic Information

High School _____ Address _____

SAT: Math _____ Reading _____ Writing _____ Total SAT: _____ Total ACT _____

GPA: weighted _____ unweighted _____ Class Rank _____ Class Size _____

Classification next fall: Freshman _____ Sophomore _____ Junior _____

Schools attended after high school, if any _____

Semesters Completed _____ Collegiate GPA _____

Print this page, fill out the information, scan back to your computer and email to ASW Reps