



Fraternity Academic Record Release Form

First Name: _____ Last Name: _____

Student ID #: _____ Cell Phone #: _____

RIC Email Address:

RIC On-Campus Residence Hall & Room # or Off-Campus:

Current Status (circle what fits best):

Freshmen

Sophomore

Junior

Senior

Grade (GPA) Requirements:

- Kappa Delta Phi: 2.50 cumulative
- Phi Mu Delta: 2.70 cumulative

How to provide your grades to the Office of Student Activities (check the option that fits best):

_____ If you took classes at RIC last semester, the Office of Student Activities will be able to obtain your grades by signing the statement below.

_____ If this is your first semester taking college courses after your high school graduation, you must provide a copy of your high school transcript.

_____ If you are a transfer student, you must provide a copy of your transcript from your previous institution.

ACADEMIC RECORD RELEASE:

I give my consent to the Office of Student Activities to release my educational records (grades) to the Greek organization I choose for use in scholarship programs, advising, and chapter averaging at any time during my membership in the chapter. I authorize this release for the time that I am enrolled at Rhode Island College or until I notify the Office of Student Activities otherwise in writing.

Signature

Date