



Samford University
National Pan-Hellenic Council

NPHC Grade Verification Form

National Pan-Hellenic Council

(Please Print)

Full Name: _____

SUID #: _____

Email Address: _____

Phone Number: _____

By signing this Acceptance Agreement agree, I understand and agree to the following conditions:

I accept the invitation of (select organization) to join its chapter at Samford University

ΑΦΑ

AKA

ΔΣΘ

Authority to Verify Academic Eligibility

I authorize Samford University's Office of Greek Life and NPHC to verify my academic eligibility by checking my GPA. If I should accept membership for an NPHC organization, I also give Samford University, Office of Greek Life permission to check my grades to be released to my chapter, advisor, and National Headquarters for scholarship purposes.

Aspirant: _____ **Date:** _____

President/Membership Chair Signature: _____