



UNIVERSITY OF
TEXAS
ARLINGTON

**GREEK LIFE
& UNIVERSITY EVENTS**
DIVISION OF STUDENT AFFAIRS

CEASR Member Verification Form

Honor Society or Organization: _____

Chapter: _____

**Print Names of Chapter Members that are members
of the Honor Society or Organization below:**

Honor Society Advisor: _____

Position: _____

Phone Number: _____

Email Address: _____

Advisor Signature

Date