



DAVIDSON COLLEGE
PATTERSON COURT OFFICE
OFFICER FORM

(Academic Year)

In order to remain in good standing with the Patterson Court Council and the Patterson Court Office, all fraternities and eating-houses must adhere to the following responsibilities:

- Complete and return to the Patterson Court Office an Officer Form by the first Friday of the fall semester, AND within two weeks of any election, or if officer information changes;
All Officers must maintain a grade point average of no less than 2.25 on a 4.0 scale;
Maintain a current copy of the organization's constitution on file in the Patterson Court Office. (A copy of the current constitution of the inter/national organization MUST also be on file, if applicable;)
Abide by the organization's constitution and stated purpose; and
Abide by College, local, state, and federal law.

I hereby give permission for the information on this form to be made public upon request. I also confirm that I will ensure that the named organization will adhere to the above listed Patterson Court organization responsibilities.

Signature of president

Date

RETURN COMPLETED FORM TO PATTERSON COURT OFFICE, BELK HALL, BOX 7187

Organization:

(Type full name as it appears in the constitution on file in the Patterson Court Office)

Date of Next Election: (month/year)

College Advisor: Campus Box:

(An Advisor Authorization Form must also be on file)

Campus Phone: Email Address:

OFFICERS:

PRESIDENT Name: SS#:

Address:

Phone: Email Address:

Remember to complete page two!

**NEW MEMBER EDUCATOR** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**TREASURER** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**RECRUITMENT** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**SOCIAL/RISK MANAGEMENT** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**HOUSE MANAGER** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**KITCHEN MANAGER** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PCC REPS** Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

<b><i>Office Use Only:</i></b> Received (date): _____	Letter (date): _____
Database (date): _____	Website (date): _____
Email (date): _____	Banner (date): _____