OFFICIAL NOMINATING FORM DELTA THETA TAU SORORITY, INC.

INSTRUCTION: Return this form and a 2"x3" picture by March 1, 2023, to the Chairman, Nominating Committee: Sue Knobeloch 3109 N. 29th St. Tacoma, WA 98407-6534 skk1246@msn.com Chapter Name _____City & State_____as a candidate for the office of _____. She has been a member of Delta Theta Tau Sorority for ____ years and remained active for ______ years. Candidate's address is _____ **EXPERIENCE & QUALIFICATIONS** (computer skills are required) Chapter Offices Held & Year: National Offices Held & Year: Other Organizations or Club Activities: Offices Held & Year: **Business Experience:** General Information (Limit to 50 words): Signature Chapter President Signature Chapter Recording Secretary I have read and understand the responsibilities involved in becoming a national officer, as stated in this cover letter. Signature of Candidate **Email Address**