

Virginia Wesleyan College
Student Activities & Greek Life Office
1584 Wesleyan Drive
Norfolk, VA 23502

**Academic Release Form
For Fraternity / Sorority Members**

As a member/new member of _____ (name of organization), I, _____ (print member, new member name), give permission for the Director of Student Activities, Student Activities and Greek Life Coordinator, Chapter President, Scholarship Director, Chapter Advisors, and Inter/national representatives of this chapter to be used for academic performance evaluation and academic improvement programming purposes.

I realize that this is necessary in order to determine “Good Standing” with my organization and/or eligibility for initiation, officer positions, etc. I release this information to the specific entities names above as long as I am enrolled at Virginia Wesleyan College and am a member of a Greek letter organization.

Signature

Date

Printed Name (Print Legibly)

Date