



Sisters Striving for Excellence, Inc.

www.sistersstrivingforexcellence.org!

The Sisters Striving for Excellence application packet for ***Non-Collegiate Membership*** should include the following items noted below. Applicants must adhere to the directions on the application. The application is to be neat and filled to completion. Everything must be submitted in a portfolio. **Interested members must hold a Bachelor's Degree.*

Please initial by each application component to ensure your application is complete.

	Perspective Member	Membership Director
<input checked="" type="checkbox"/> Membership Application	_____	_____
<input checked="" type="checkbox"/> Letter of Confidentiality	_____	_____
<input checked="" type="checkbox"/> Personal Photo	_____	_____
<input checked="" type="checkbox"/> Resume	_____	_____
<input checked="" type="checkbox"/> Letter of interest	_____	_____
<input checked="" type="checkbox"/> Recommendation Letter	_____	_____
<input checked="" type="checkbox"/> Community Service Validation Form (100 hours)	_____	_____

Completed applications may be submitted to the following:

MAIL:

ATTN: Chrissy Terry
National Executive VP/Membership Director
Sisters Striving for Excellence, Inc.
5561 Northcut Drive
College Park, Georgia 30349

Or

EMAIL:

chrissy.terry@sistersstrivingforexcellence.org



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Membership Application

Please type or neatly print the information requested and return to the advisor of Sisters Striving for Excellence, Inc. Applications with incomplete items, or are otherwise illegible, may result in delayed review and/or approval. Applications received after the deadline will not be accepted.

CONTACT INFORMATION:

DATE: _____

NAME _____
Last First M.I.

ADDRESS _____
Street, Building, Apartment/Room #

MAILING ADDRESS _____

City State Zip

E-MAIL _____ **PHONE NUMBER** _____

COLLEGE ATTENDED _____

DEGREE TYPE _____ **MAJOR** _____

GRADUATION _____ **GPA** _____ **T-SHIRT SIZE:** _____

DO NOT WRITE IN THIS BOX

Received by _____

Approved _____ **Y** _____ **N**

Interview Date _____

☐ 10year pin; ☐ T-shirt; ☐ Certificate

EMERGENCY CONTACT INFORMATION:

NAME(S) _____
Last First

ADDRESS _____
Street, Building, Apartment/Room #

City State Zip

RELATION _____ PHONE NUMBER 1 _____

**LIST YOUR EXTRACURRICULAR ACTIVITIES
(I.E. CAMPUS ORGANIZATIONS, CHURCH ACTIVITIES, COMMUNITY SERVICE, ETC.)**

WHAT ARE YOUR TOP THREE GOALS FOR THIS YEAR?

- 1.
- 2.
- 3.

WHAT ARE THE TOP THREE TIPS YOU FEEL ARE NECESSARY FOR SOMEONE TO BECOME SUCCESSFUL?

- 1.
- 2.
- 3.

WHY DO YOU WANT TO BECOME A MEMBER OF SISTERS STRIVING FOR EXCELLENCE, INC.?

[illegible]



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Letter of Confidentiality

All matters discussed at meetings—formal or informal—will not be discussed with anyone other than members of Sisters Striving for Excellence, and/or members of one's Intake Group. In-house concerns, complaints, and problems should remain internal and be brought to the attention of the National Executive Membership Director or Co-Director, or National Executive Director or Co-Director. Discussions between members of Sisters Striving for Excellence or members of an Intake Group, concerning each other—are strictly confidential.

All prospective members of Sisters Striving for Excellence must sign this agreement. Once you become a member of SSE, you will follow all rules and regulations. All information is to be kept between you and your sisters.

Failure to adhere to the above statements will result in immediate dismissal from the Sisters Striving for Excellence Membership Intake Process, or if already a member, dismissal from the organization.

Member Name

Signature

Date

Executive Membership Director

Signature

Date

National Executive Director

Signature

Date