



**GAMMA ALPHA OMEGA**  
CONFIDENCE. COURAGE. COMMITMENT. CHARACTER.

## Grade Verification Form

This form acts as the official grade verification for collegiate chapters to be completed by a professional staff member of the university's Fraternity & Sorority Life Office and sent to the chapter's Regional Director AND the Director of Scholarship at the end of each semester and may be submitted with the biannual report.

**PART A.** Identify who this grade verification is for.

- Active House Grade Verification
  - New Member Grade Verification
- circle one: Fall Spring Summer  
Year: \_\_\_\_\_

Chapter: \_\_\_\_\_

University: \_\_\_\_\_

**PART B.** Please confirm if the following members have received a 2.5 or higher for their semester and cumulative GPA. Also include if student is enrolled full-time or part-time in correspondence with the university policies.

|            | Name  | SEM GPA    | CUM GPA    | Enrollment Status             |
|------------|---|------------|------------|-------------------------------|
| <i>Ex.</i> | <i>Last Name, First Name Middle Initial</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Full-time OR Part-time</i> |
| 1.         |   |            |            |                               |
| 2.         |   |            |            |                               |
| 3.         |   |            |            |                               |
| 4.         |   |            |            |                               |
| 5.         |   |            |            |                               |
| 6.         |   |            |            |                               |
| 7.         |   |            |            |                               |
| 8.         |   |            |            |                               |
| 9.         |   |            |            |                               |
| 10.        |   |            |            |                               |
| 11.        |   |            |            |                               |
| 12.        |   |            |            |                               |
| 13.        |   |            |            |                               |
| 14.        |   |            |            |                               |
| 15.        |   |            |            |                               |

*(If you need more room, please use an additional form.)*

**Chapter GPA.** Please calculate the average chapter GPAs for the semester. If you are completing this form for New Member Grade Verification, please skip this section of the document.

Term/Semester GPA: \_\_\_\_\_ Cumulative Chapter GPA: \_\_\_\_\_

**Confirmation.** I, \_\_\_\_\_, Fraternity & Sorority Life professional staff, at the university stated above confirm that the information on this form is accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_