



Zeta Phi Beta Sorority, Incorporated
“Mighty” Southern Region
Candidate Nomination and Profile Form



Please type or print in black ink only. Complete all sections that apply to you. If a section does not apply to you, please indicate “not applicable”.

Name _____

Office sought _____

Current chapter affiliation and location (include city, state & school as applicable)

Local Undergraduate Zeta Experience

Induction date (if applicable) _____

Chapter affiliation(s) (include region, city, state, school & dates as applicable)

Office(s) held (include dates and duration of term)

Accomplishments and awards (include dates where applicable)

Local Graduate Zeta Experience

Induction date (if applicable) _____

Chapter affiliation(s) (include region, city, state & dates as applicable)

Office(s) held (include chapter, dates & duration of term as applicable)

Accomplishments and awards (include dates where applicable)

Regional and State Zeta Experience

Conferences and board meetings attended (include dates and locations)

Elected office(s) held (include dates & duration of term as applicable)

Appointed office(s) held (include dates & duration of term as applicable)

Accomplishments and awards (include dates where applicable)

National Zeta Experience

Conferences and board meetings attended (include dates and locations)

Elected office(s) held (include dates & duration of term as applicable)

Appointed office(s) held (include dates & duration of term as applicable)

Accomplishments and awards (include dates where applicable)

Professional Experience

Enclose a copy of your current resume or curriculum vitae (nomination will not be considered without this documentation).

List (in detail) professional and/or scholastic accomplishments not already contained in the above document(s) that are relevant to the office being sought.

Additional Experience

Provide relevant information regarding memberships and offices held in other organizations, volunteer experiences, awards, honors and other pertinent non-paid experiences.

Basileus' Approval and Recommendation

I certify that Soror _____ is a member of
Name of applicant

_____ Chapter of Zeta Phi Beta Sorority, Inc., and I am
Name of chapter

basileus of that same chapter. I further attest that she is financial on the local, regional and national levels of the Sorority. I hereby recommend her for nomination for the office of _____ in the Southern Region.
office sought

Basileus' Signature

Day and evening phone numbers

E-mail address

The chapter basileus may use the area below to provide additional comments or recommendations.

Applicant Certification

I, Soror _____ acknowledge that I am financial
Name of applicant
on the local, regional and national levels of Zeta Phi Beta Sorority, Inc. I further attest
that all information contained herein is true and correct. I hereby submit my name as a
candidate for the office of _____ in the Southern
office sought
Region.

Name of Applicant _____

Signature _____

Date _____

Applicant Address _____

City, State & Zip _____

Phone (day) _____ (evening) _____

E-mail _____